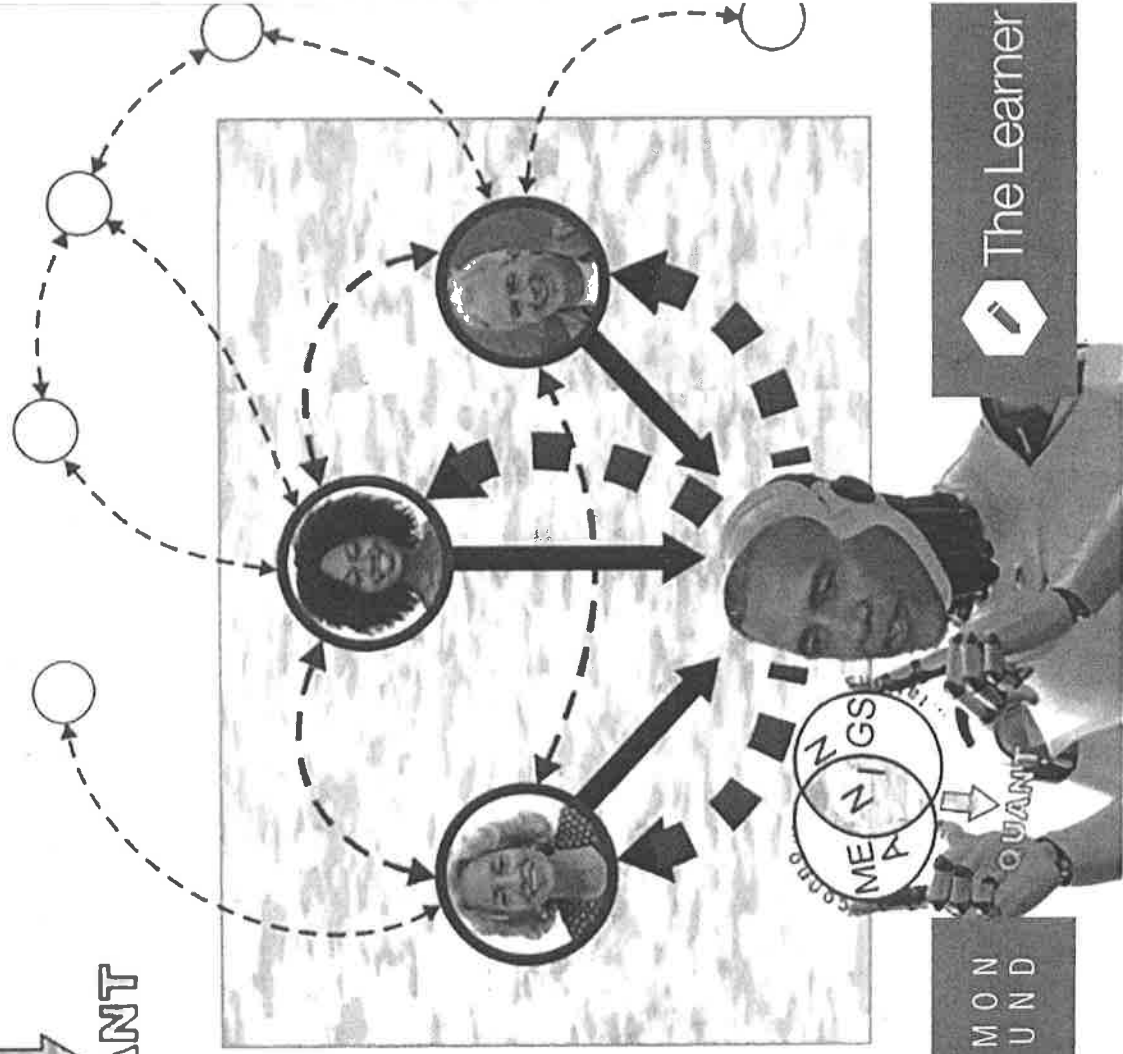
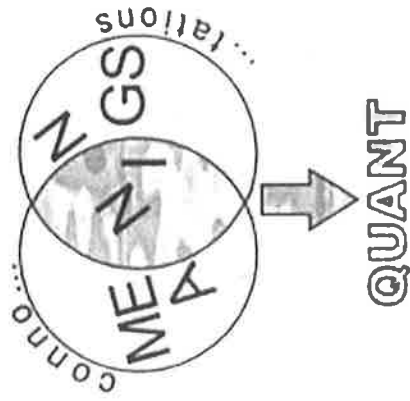


# Annotated Research in the Caribbean

For the Quantitative Researcher

LORRAINE D. COOK AND BÉATRICE BOUFOY-BASTICK



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# ANNOTATED RESEARCH IN THE CARIBBEAN

**For the Quantitative Researcher**

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*Edited by*  
*Lorraine D. Cook*  
*Béatrice Boufoy-Bastick*

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## CHAPTER 7

### **Self-esteem, Skin Colour and Rural/urban Residence in Jamaica: Specially Annotated Methods of a Quasi-Experimental Design Utilizing Child and Interviewer Ratings**

*Gail M. Ferguson<sup>1</sup> and Phebe Cramer*

#### **Abstract of Annotations**

***The current study employs an interesting quasi-experimental design and innovative quantitative methods to investigate the impact of skin color and rural/urban residence (IVs) on the self-esteem (DV) of Jamaican children in early and late childhood. A large sample of Kindergartners and 5<sup>th</sup>/6<sup>th</sup> graders from both urban and rural regions of Jamaica were administered pictorial measures of self-identification, ideal self and self-esteem, and interviewers rated skin tone using a scale created for this study. Black and White examiners conducted individual interviews to account for potential examiner race effects. Study findings supported hypotheses based on social/interpersonal and psychological/intrapersonal perspectives on self-esteem determination. That is, rural children, who were generally of darker complexion, had higher self-esteem as did older children whose self-identification and ideal self skin color were both White.***

***There are compelling reasons to annotate this study's methodology. Compared to studies of adolescent or adult processes, psychological research with young children requires more specialized methods for ethical and developmental reasons, and is consequently rare in the Caribbean. Further, researching the psychological implications of skin color, a culturally sensitive topic in the Caribbean, also requires careful forethought into the most appropriate methodological approaches. The chosen methodology, though logistically challenging and time/labour intensive, built effective and respectful partnerships with host institutions and participants and minimized socially desirable responding. Our choice of measures reflected a commitment to using age-appropriate and racially/culturally-appropriate materials. Priorities in selecting an academic journal for the publication of this research included the presence of a developmental perspective, a history of***

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<sup>1</sup> Annotations for this chapter were written by the first author with editorial input from the second author.

*publishing papers with similar content, a stated interest in research on new and diverse populations, and an international scope and readership.*

**Keywords:** *Individual interview, Skin tone assessment, Dolls tests/drawings, Social stigma, Race/cultural appropriateness, Age-appropriate, Parental consent, Self-protective theory*

## INTRODUCTION

Although there is a small, but growing, body of empirical psychological research in the Caribbean, most studies have been done with adolescents and adults. Psychological research with young children requires more specialized methods for ethical and developmental reasons, and is consequently rare in our region. Further, investigating culturally sensitive topics such as skin color can be daunting and methodologically challenging. These reasons present a compelling case for the annotation of the current study methods. It is our hope that others with similar research interests will glean insights from our experiences—both successes and pitfalls.

The current study employs a quasi-experimental design and innovative quantitative methods in a sample of Jamaican children to investigate the impact of skin color and rural/urban residence on self-esteem. A large sample of Kindergartners and 5<sup>th</sup>/6<sup>th</sup> graders from both urban and rural regions of Jamaica were administered pictorial measures of self-identification, ideal self and self-esteem by a Black or White interviewer, who also rated their skin tone. An individual interview method using paper doll drawings was chosen based on its success in skin color research among Black children around the world, including in the Caribbean. Using age-appropriate and racially/culturally-appropriate materials was of great importance to the validity of this research; therefore, pictorial self-esteem measures were selected over word-based measures and pictures were adapted to reflect Black skin, respectively. In addition, in the absence of existing measures and methods, creative approaches were taken. A skin tone assessment scale was created for use in this study and, for the majority of the participating children; individual conversations with parents were used to solicit written permission.

Additional strengths of the study methods were the establishment of positive collaborative partnerships with schools, securing a desirable sample in terms of size and urban/rural diversity and providing simple and portable materials for examiners. Other challenges addressed along the way included anticipated resistance from research partners and participants due to cultural sensitivity of the topic, an initially unsuccessful consent process, and a time and labour intensive data collection strategy. Overall, the strengths of our chosen methodology far outweighed the challenges producing a successful research study on an important social issue.

## ABSTRACT<sup>2</sup>

*This study investigates the extent to which two different models predict the relation of self-esteem to skin color and rural/urban residence among Jamaican children. To explain this relation, Crocker and Major's Self-protective hypothesis and Harter's Additive model were examined among 200 African-Caribbean children from rural (n = 85) and urban (n = 115) elementary schools in eastern Jamaica. Support was found for both of these models. Specifically, the Self-protective hypothesis predicted higher self-esteem among rural children and the Additive model predicted higher self-esteem among older children for whom self-identification and ideal self skin color were both White. Implications for Jamaican children are discussed followed by potential application to other children of African descent.*

*Keywords:* *Self-esteem; Skin color; Rural/urban; Jamaican; Black; Social stigma*

## SELF-ESTEEM AMONG JAMAICAN CHILDREN: EXPLORING THE IMPACT OF SKIN COLOR AND RURAL/URBAN RESIDENCE

Self-esteem, defined as an overall negative or positive attitude towards the self, is a topic of interest and importance across cultures (e.g., Cole et al., 2001; Richardson, 1999; Rosenberg, 1965; Sunar, 1999). Much scholarly attention has been focused on children's self-esteem because it has consistently been found to be related to behavioral, academic, and psychological outcomes (e.g., Harter, 1999). Research has documented that self-esteem can be influenced by membership in a stigmatized group, although sometimes in unexpected ways (see Crocker & Major, 1989 for a review). Stigmatized groups are those "about which others hold negative attitudes, stereotypes, and beliefs, or which, on average receive disproportionately poor interpersonal or economic outcomes relative to members of the society at large because of discrimination against members of the social category" (Crocker & Major, 1989, p. 609).

African-descended groups have been notably stigmatized in the United States and United Kingdom. Historically, they have experienced stereotyping, prejudice, discrimination, and oppression and have also been relatively disadvantaged in economic, occupational, and interpersonal opportunities and outcomes compared with Anglo-American and British people. The early work of Clark and Clark (1947)<sup>3</sup> in the United States and Milner (1973) in the United Kingdom demonstrated clearly how racial history shaped young racially stigmatized children's sense of self based on their skin color.

To a lesser extent, social stigma also occurs along the dimension of rural/urban dwelling. Much evidence from the U.S. and other countries shows that rural dwellers are relatively disadvantaged compared to their urban counterparts on important social

<sup>2</sup> See Appendix A for citation to original paper.

<sup>3</sup> Although not the basis of this paper, a critique of the implications of the work of Kenneth Clark, Isidor Chein and Stuart Cook on the desegregation of schools is summarized by Hartung (2004).

indicators, including access to essential services, educational and vocational opportunities, and income (e.g., Dillman & Hobbs, 1982; Heaton & Renata, 2003; Perry, 1984; Smith & Tennant, 2006). In addition, people often view the rural lifestyle as inferior to the urban lifestyle and believe rural dwellers to be somewhat simple-minded, unsophisticated, and pre-modern (e.g., West, 1996).

Given that an official aim of the Jamaican government is to foster children's "positive self-concept" (Evans, 2001, p. 5), the current study investigated self-esteem among Jamaican children in relation to two important social dimensions — skin color and rural/urban residence. In the remainder of this introduction, we first present a brief overview of the existing literature on skin color stigma and rural/urban disparities in Jamaica. Next, we outline two theoretical explanations that may explain the relationship between social stigma and self-esteem in the U.S. Finally, we make predictions for expected results in the current sample of Jamaican children that would follow from each of these theoretical explanations.

### Skin Color Stigma in Jamaica

The Jamaican experience of skin color is similar in some ways to the U.S. and in other ways it is different.<sup>4</sup> Although one might expect skin color to have a different sociopolitical meaning in the Caribbean due to the Black numerical majority, Caribbean research and history-taking suggest that similar experiences of oppression based on skin color have conferred a shared negative attitude toward dark skin and a culturally valued preference for White/fair skin (e.g., Cramer and Anderson, 2003, Gopaul-McNichol, 1988, Gopaul-McNichol, 1995 and Miller, 1971). Because over 90% of the population is of African descent, skin color is not thought of as a Black–White dichotomy, but as a continuum between light-skinned and dark-skinned, with socially recognized gradations. The skin tone continuum has been strongly associated with socio-economic status — the mixed offspring of White plantation owners inherited not only their forefathers' fair skin tone, but also their wealth (e.g., Alleyne, 2001; Smith, 1990). Thus, in Jamaica today, "White" is often synonymous with wealth and prestige, and "Black" with poverty and lower class status (Akbar, Chambers, & Thompson, 2001).

Research shows that Jamaican children are products of their culture in that they also demonstrate a bias against Black skin. Early research by (Miller, 1971) and (Miller, 1973) with urban Jamaican adolescents revealed that most teenagers spontaneously used the word "fair" to describe a physically attractive person. Also, teenagers' self-concept ratings increased with the fairness of their skin whereas those with more traditional African physical features, including darker skin tones, reported higher body dissatisfaction. More recent research in skin color preferences among younger Jamaican children and those in rural settings supported the idea that there is a pro-White preference. Using the Color Meaning Test (CMT) and Preschool Racial

<sup>4</sup> Although the current paper highlights similarities and differences between Jamaica and the U.S. in the areas of racial composition and sociopolitical history, there are many other similarities and differences in culture and customs that are beyond the scope of this paper.

Attitudes Measure (PRAM) among rural preschoolers, Bagley and Young (1988) found a widespread preference for white toys and animals and a tendency to attribute positive characteristics to photographed White children rather than photographed Black children. Further, this pro-White preference increased with age. Similarly, Cramer and Anderson (2003) found that Jamaican children as young as three years old displayed preferences for White skin color, which increased with age. These researchers attributed the age difference in pro-White preferences, in part, to the cumulative influence of the media and other racial socializing agents as children develop.

### Rural Stigma in Jamaica

The 2002 Survey of Living Conditions in Jamaica documented significant rural/urban disparities in poverty, health, education, and crime. Specifically, relative to the Kingston Metropolitan Area of Eastern Jamaica, rural areas in Jamaica were noted to have higher levels of poverty, higher mean household sizes, lower percentages of adults with academic diplomas or degrees, higher incidence of illness and injury, three times fewer health-insured individuals, and higher crime rates, particularly theft. Another important rural/urban discrepancy that contributes to rural stigma is that individuals from rural eastern Jamaica have darker skin on average than urban residents due to the history of slave migration from the plains (now urban St. Andrew, Jamaica) to the hills (now rural St. Andrew, Jamaica) (Agorsah, 1994).<sup>5</sup> These socially important rural/urban differences confer a subtle, but widespread, stigma against rural dwellers, which may negatively impact their interactions with urban dwellers when they venture into the city. Therefore, rural children from eastern Jamaica face a double stigma based on their rural residence and their darker complexion.

### Theoretical Explanations for the Relationship between Social Stigma and Self-Esteem

The effect of social stigma on self-esteem may occur both at the level of the *group* and at the level of the *person*. At the group level, in contrast to the predictions of earlier theoretical perspectives, there has been considerable empirical support in multiple cultural contexts for Crocker and Major's (1989) Self-protective hypothesis, which holds that stigma has a protective effect, rather than debilitating effect, on the self-esteem of stigmatized group members. Racially stigmatized groups in the U.S.

<sup>5</sup> There is archaeological evidence (e.g., Agorsah, 1994) that the rural Jamaican community sampled in the present study lies in a general area (the Blue Mountains) that has historically been a site of African maroonage since the time of the Spaniard occupation in the sixteenth century. This purposeful hiding away of African peoples in these relatively inaccessible rural St. Andrew communities has preserved much of the African phenotype as compared to populations on the plains of urban St. Andrew, which used to be the 16<sup>th</sup> century sugar plantations, occupied by Whites and eventually their mixed race, lighter-skinned kin. This accounts for the systematically darker skin color of the rural Jamaican participants in this study as compared to the urban St. Andrew participants. This rural/urban skin color gradient is fairly common across the island for similar reasons.

have been found to have higher self-esteem than non-stigmatized groups using a variety of self-esteem measures and across different age groups. For example, Hoelter (1983) found higher self-esteem for African-Americans among 3rd to 12th graders in a city in the Eastern U.S. (see Porter & Washington, 1979 for review of other findings). Research in The Netherlands also supports this pattern — Turkish-Dutch and Moroccan-Dutch ethnic minority children did not display lower global self-esteem than their (majority) Dutch counterparts in (Verkuyten, 1989) and (Verkuyten, 1994). More recently, Twenge and Cocker's (2002) meta-analysis of 354 samples from the U.S. and elsewhere found Blacks to have higher global self-esteem than Whites. Resilient self-esteem of minority groups relative to the majority group has also been found among Latino-Americans and individuals with physical, mental, or developmental disabilities (see Crocker & Major, 1989 for a review). Based on this previous work, the present study proposed the Self-protective hypothesis as a major explanatory framework for the relation of skin color and residence to self-esteem among Jamaican children.

At the level of the person, self-esteem determination theories also provide helpful explanations for the influence of dark skin stigma on children's self-esteem. (Harter, 1987) and (Harter, 1990) Additive model is particularly well-suited for this task because it allows the integration of the discrepancy model of James (1892) and the reflected appraisals model of Cooley (1902). James theorized that global self-esteem is based on the discrepancy between one's actual self and one's ideal self: "our self-feeling in this world ... is determined by the ratio of our actualities to our supposed potentialities" (James, 1892/1962, p. 199). Research has supported this idea, showing that self-esteem reflects competence in areas where success is viewed as important to the self. For example, Harter's (1990) research with 8- to 15-year olds examined perceived competence and importance in several domains, and found that when competence was less than importance, self-esteem was lower. Research has also supported Cooley's reflected appraisals formulation of self-esteem, which holds that the origins of the self are essentially social in nature. Path analyses from Harter's (1990) research showed that children's feelings regarding the attitude of significant others towards them positively predicted their self-esteem. Other researchers' work has supported Harter's Additive model. For example, Luster and McAdoo's (1995) research with African-Americans showed that adolescents who were successful in life domains such as academics and family relationships, and who also perceived that their families approved of them, had higher self-esteem than their peers. Thus, the Additive model is a unique formulation in that it considers not just the person (i.e., *intrapersonal*), but also the social context of that person (i.e., *interpersonal*) in the determination of self-esteem (Harter, 2003). This model is appropriate for the present study because there are known social/interpersonal aspects of skin color in Jamaica (i.e., social stigma against darker skin and rural residence) as well as demonstrated intrapersonal aspects (i.e., personal dissatisfaction with darker skin).

In sum, the Self-protective and Additive theories were applied in the current study due to their prominence, empirical support, and the fact that they both model the impact of socializing agents on self-esteem at different levels of analysis (i.e., group versus person). In the following sections, we consider in detail how these models generate hypotheses regarding self-esteem in Jamaican children.

### Self-Protective Hypothesis

Crocker and Major (1989) postulated several self-protective mechanisms, which buffer the self-esteem of stigmatized group members: (1) Attributing unfavorable outcomes to prejudice against one's group, (2) selectively valuing or devaluing one's performance based on group strengths and weaknesses, and (3) a tendency to make ingroup rather than outgroup social comparisons. In regard to the latter, stigmatized individuals may opt for ingroup comparisons (a) to avoid threatening comparisons with the relatively advantaged outgroup, and (b) because ingroup members are more available and/or provide similar targets for social comparison. Consistent with this assumption, *within* a group of African-Americans, those with fairer skin have consistently been found to have *higher* self-esteem than those with darker skin (e.g., Harvey et al., 2005, Robinson & Ward, 1995; Thompson & Keith, 2004). Although this may at first seem contradictory given that African-Americans have higher self-esteem than Anglo Americans, it supports the explanation that African-Americans engage in intragroup (i.e., ingroup) versus intergroup (i.e., outgroup) skin tone comparisons in order to preserve their self-esteem.

As applied to the current study, the Self-protective hypothesis suggests that rural Jamaican children, who are stigmatized due to their rural residence and darker skin, will demonstrate higher self-esteem than urban Jamaican children. This is because the stigmatized rural Jamaican children may avoid comparisons with the relatively privileged urban outgroup, thus boosting their self-esteem. On the other hand, if the earlier theoretical perspective is supported (i.e., social stigma results in lower self-esteem for stigmatized individuals), rural Jamaican children should demonstrate lower self-esteem than their urban counterparts because of internalized negative messages about their worth and efficacy. Further, if these stigmatized group members opt for ingroup comparisons, fairer skinned rural Jamaican children are expected to demonstrate higher self-esteem than their darker skinned rural peers.

### Additive Model

Self-esteem may be influenced by one's perception of the extent to which one meets personal standards and the standards of important others on socially valued criteria such as skin color. There is some precedence for the idea that self-perceptions may be more predictive of self-esteem than objective reality. Stereotype threat research has shown that perceptions about others' perceptions of the self can significantly influence performance and self-identification in spite of objective abilities (e.g., Steele, 1997; Steele & Aronson, 1995). In addition, some researchers have found that perceptions of support from others are more predictive of self-evaluations than actual support (Juhász, 1992; Schrauger & Schoeneman, 1979).

The (Harter, 1987) and (Harter, 1990) Additive model of self-esteem proposed a manner in which this may function. Based on James' (1892) discrepancy model of self-esteem and Cooley's (1902) looking-glass self model of reflected appraisals, Harter's model posits that self-esteem in a domain of importance is derived both from (1) the concordance between the perception of one's actual and one's ideal self, and (2) the approval of significant socializing agents such as parents, friends, or societal standards. Harter's and others' research demonstrates that physical appearance is an

important domain of self-evaluation in childhood (e.g., Cole et al., 2001; Harter, 1999). In fact, research shows that of all personal qualities, physical appearance correlates most highly with overall self-worth (average  $r = 0.64$ ; for a brief review, see Harter, 2003). Harter suggested that this may be due to the strong emphasis modern society places on appearance, or that one's outer self, perhaps especially one's skin color, is plainly visible to all, including oneself. However, in the domain of skin color, parents and friends may not be the most powerful socializing agents. Research in the U.S. and Great Britain has found that the racial attitudes of young children are more strongly predicted by pervasive societal racial attitudes than by parents' or peers' attitudes (Milner, 1973; Quintana, 1998). Parents' socializing influences on their young children may be effective only if consistent with biases shared by society, and parental attempt to instill attitudes counter to those of society may be somewhat ineffective. Therefore, in this study, we considered the cultural ideal of White/fair skin as the primary socializing agent, rather than family or friends.

For the domain of skin color, the Additive model suggests that self-esteem is determined by the concordance between one's actual and ideal skin color. To this must be added the congruence between actual/ideal skin color and the *cultural* skin color ideal (White/fair skin). Applied to the current study, Jamaican children who self-identify as White/fair-skinned and whose ideal is to be White/fair-skinned — both in agreement with the cultural ideal — will demonstrate higher self-esteem than those who identify with and idealize Black/dark skin, or those who demonstrate a discrepancy between their self-identified and ideal selves.

### The Present Study

Because children's self-esteem and racial/ethnic cognitions change as they grow older, kindergarten and 5th/6th grade students were sampled to capture distinct developmental phases. In kindergarten, children display high self-esteem, which decreases with age due to greater cognitive sophistication in social comparison skills, and greater ability to incorporate external feedback into a more realistic self-view (e.g., Robins & Tzresniewski, 2005; Tzresniewski et al., 2003). In adolescence, self-esteem plummets to its lowest point of the lifespan (e.g., Tzresniewski et al., 2003). Therefore, we sampled pre-adolescent children (i.e., 5th/6th grade) to maximize the developmental comparison with kindergartners while minimizing the potential confound of significant influences on self-esteem (e.g., pubertal changes), which are known to occur in early adolescence.

Kindergartners and 5th/6th graders also were chosen because they represent distinct phases in the development of ethnic cognition. According to Quintana's (1998) Ethnic Perspective-Taking Ability (EPTA) model, 3- to 6-year old children are at level 0: Their awareness of race is based mainly on observable biologic racial markers (e.g., skin color: Holmes, 1995), to which they have strong affective/attitudinal responses that are more attributable to pervasive societal racial biases than to other socializing agents (e.g., Aboud, 1993). Thus, young children generally demonstrate very strong pro-White preferences and lack the cognitive flexibility to examine or moderate these biases (Aboud, 1993). On the other hand, 5th/6th graders fall into levels 1 or 2 of the EPTA model; concrete operational skills

allow them to rely not only on mere physical appearance but also non-observed characteristics of ethnicity such as social inequality (e.g., Aboud & Skerry, 1983). Also, advanced role-taking abilities enable 5th/6th grade children to consider positive and negative dimensions of all races and to develop a more balanced view (e.g., Doyle, Beaudet, & Aboud, 1988). Consequently, older children demonstrate less pro-White bias (e.g., Doyle & Aboud, 1995).

The Jamaican parish of St. Andrew was strategically chosen for the present research because it especially demonstrates the rural/urban social status divide. Urban St. Andrew, located on the plains, boasts the nation's most competitive elementary and high schools, two of the country's three universities, a majority of the country's middle and upper class communities, and relatively greater racial/skin tone diversity. In contrast, east rural St. Andrew, located in the Blue Mountains, is comprised of small, humble farming communities, low socioeconomic status, less competitive schools, less access to media (i.e., newspapers and foreign television programming), and a more homogeneously dark-skinned population. An assessment of social and economic needs of this rural area conducted by the University of the West Indies in 1998 documented the low economic, educational, and vocational opportunities and outcomes of this rural community, and the view of urban life as a way for social advancement (Shillingford, 1998).<sup>6</sup>

To our knowledge, the current research is the first to examine the predictive power of the Self-protective hypothesis and the Additive model for self-esteem among Black children outside of the United States. To summarize, the current study explored the following hypotheses:

1. Based on the Self-protective hypothesis, rural Jamaican children, who are stigmatized both on the basis of their rural residence and on the basis of their darker skin, were expected to demonstrate higher self-esteem than urban Jamaican children. Further, within both groups of children — especially the stigmatized rural children who are more likely to make ingroup comparisons — those with fairer skin were expected to demonstrate higher self-esteem than those with darker skin.
2. Based on the Additive model, Jamaican children who demonstrate concordance between skin color self-identification, skin color ideal and the cultural White/fair skin color ideal were expected to have higher self-esteem. Therefore, in agreement with the cultural ideal, those who self-identified as White/fair-skinned and whose personal ideal was to be White/fair-skinned were expected to demonstrate higher self-esteem than those who identified with and idealized Black/dark skin, or those who

<sup>6</sup> Shillingford's (1998) assessment also highlighted several positive aspects of rural life in Jamaica relative to urban life, including having the safety net of a family home during extended times of unemployment, readily available employment on farms albeit at low wages, and having a credit system at local grocery shops.



demonstrated a discrepancy between their identified and ideal selves.

3. Given that previous research in Jamaica has attributed increasing pro-White preference with age to the cumulative influence of culture as children develop, age may be an important factor in the application of these models to Jamaican children. In this case, both the Self-protective hypothesis and the Additive model would be more predictive of self-esteem in older than younger Jamaican children.

## METHOD

### Participants

Participants for the current study were solicited from five schools <sup>[1L1]</sup> <sup>[1L2]</sup> in St. Andrew, <sup>[2L3]</sup> Jamaica: two rural schools and three urban schools.

[1L1] The number of schools chosen was directly related to the desired sample size of 30 children per cell of the study design (i.e., location X, grade X, sex, e.g., rural 5<sup>th</sup>/6<sup>th</sup> grade girls).

[1L2] A sample size of 30 per cell is a generally accepted rule of thumb to achieve sufficient power to detect significant group differences. Further, to maximize representativeness of the geographical region and minimize any potential school effects, it was desirable that there be more than one rural and urban school, respectively.

[2L3] St. Andrew was chosen for specific reasons as summarized in "The Present Study" section of the journal article. Briefly, this parish demonstrated significant rural/urban economic and social disparities, a necessary feature of a sample to examine the main research questions of this study. In addition, the choice of St. Andrew was strategic in that it allowed us to capitalize on existing relationships between the first author and local school principals. Interested and cooperative school administrators are vital to the success of school-based research endeavours involving young children. Prioritizing trust and familiarity in seeking research partners (i.e., schools) was particularly relevant for this study because it was undertaken under the auspices of a U.S. based academic institution, which can raise suspicion in the minds of some Jamaicans.

Letters were sent to parents of several representative kindergarten and 5th/6th grade classrooms in each school describing the study and seeking parental permission for

participation. <sup>[3L1]</sup> <sup>[3L2]</sup> All rural parents and the vast majority of urban parents gave consent.

[3L1] Data collection for this study occurred within a one month period and both examiners traveled to Jamaica specifically for this.

[3L2] In order to facilitate the consent process so that data collection could begin as quickly as possible after the examiners arrived in Jamaica, printed permission letters were sent to school principals months in advance to distribute to students in eligible grades. Based on extremely poor return rates of permission slips from this first distribution, a second set of permission letters was sent to parents when examiners arrived on site. In smaller schools, parents of all students in eligible classes were sent permission letters; however in larger schools, principals assisted in selecting some representative classes to achieve the necessary sample size. While the strategy used in larger schools was the most practical given the need to work within the school's institutional practices, it is possible that the classes selected were not fully representative of the school population. In addition to letters, the Jamaican examiner personally approached parents during drop-off and pick-up times at the school sites to explain the study and request written consent for their children's participation. In rural schools, teachers also volunteered to provide parents with verbal explanations of the study and assistance completing the consent form as needed. These later combined methods of seeking parental approval were effective and provided most of the eventual sample in a relatively short period of time.

The overwhelming majority of participating children were African-Caribbean <sup>[4L3]</sup>, data from approximately 5–8 urban children of Indian, Chinese, and European origins were excluded. Rural Jamaican children were from predominantly lower class Jamaican backgrounds, and urban <sup>[5L1]</sup> Jamaican children came from predominantly middle class Jamaican backgrounds. <sup>[6L3]</sup>

[4L3] It was the stated preference of the journal to use the racial/ethnic description of "African-Caribbean" rather than "Black Jamaican," which was our original wording. For similar reasons, "Anglo-American" was also substituted for "White American" throughout the article.

[5L1] Non-Black students were excluded from the analyses so as not to introduce race as a potential confound. The number of excluded cases was so small that their exclusion would not be expected to have a negative impact on the statistical power to detect meaningful differences/effects.

**[6L3] The basis of these conclusions is explained in the introduction section entitled "The Present Study" as well as in the description of differential school fees located in subsequent sections.**

#### **Urban Jamaica (St. Andrew)**

One hundred and fifteen African–Caribbean children (65 girls, 50 boys; 58 kindergartners; 57 5th/6th graders) participated. All of these children attended private, 'preparatory' schools, indicating that their parents had the financial means to pay the relatively high fees for school tuition. <sup>[7L3]</sup>

**[7L3] International readers of research often have different needs than a local audience including explanations of otherwise understood features of life in the host culture. In this instance, it was important to highlight the (socio-)economic implications of attending preparatory schools in Jamaica.**

#### **Rural Jamaica (St. Andrew)**

Eighty-five African–Caribbean children (44 girls, 41 boys; 24 kindergartners; 61 5th/6th graders) participated. The large majority of these children paid minimal or no school fees: half of these children attended a public school in which the school fees were paid in large part by the government and the remaining children attended a private school in which tuition was heavily subsidized by private donors. <sup>[8L1]</sup> The majority of teachers in urban and rural schools sampled were African–Caribbean.

**[8L1] Children from rural areas attended either public or private school; however, their communities, families, and homes, were very similar, most notably in social and economic status.**

#### **Procedure**

Because prior research has shown that examiner skin color may be an important factor influencing children's responses (e.g., Annis & Corenblum, 1986; Sattler, 1970), an African–Caribbean female from Jamaica and an Anglo-American female served as examiners interviewing children at all schools. <sup>[9L1] [9L2] [9L3]</sup> Examiners were randomly assigned to separate classrooms<sup>[10L1]</sup>; there was no indication that the examiners differed in style or competence of interviewing. With the exception of rural kindergartners, all of whom were interviewed by the Anglo-American examiner, approximately half of the children at each grade level in each school were interviewed by the African–Caribbean examiner, and half by the Anglo-American examiner. <sup>[11L1]</sup>

**[9L1] Examiners were of a similar age and stature. The Black Jamaican examiner was trained by a mentor to conduct interviews/administer measures and also had several hours of practice conducting similar interviews with age-matched children for another project. The Black**

**Jamaican examiner provided necessary training for the White American examiner and during data collection examiners spoke privately at least twice daily to resolve any questions or perceived discrepancies in interviewing style.**

**[9L2] Female examiners were chosen based primarily on convenience; however, female examiners conferred the serendipitous advantage of blending in easily with the majority female school staff. This aided in rapport-building between students and examiners.**

**[9L3] The Jamaican interviewer introduced the American interviewer to the school principals and staff on the first day of data collection to build familiarity and trust.**

**[10L1] Classroom assignments were made spontaneously throughout the school day based on the convenience for the classroom teachers. That is, when a classroom teacher indicated readiness for an examiner, the interviewer available at the time was assigned to that classroom**

**[11L1] For this reason, data were collected from only 24 rural kindergartners in comparison to 58 urban kindergartners.**

Each examiner was introduced by a teacher to her classroom and it was explained that the examiner would be talking with some of the students in a quiet room. <sup>[12L1]</sup> The examiner accompanied the child from the classroom to the interview room, spending a few minutes in general conversation. Each child was then interviewed individually <sup>[13L1] [13L2]</sup> for about 15 minutes <sup>[14L1]</sup> during which time the Personal Identification tasks and the Self-esteem measure were administered. At the end of each session, a rating of skin color was made by the examiner. Several other measures, not relevant for the present paper, were also used.

**[12L1] Unoccupied classrooms, staff lounges, cafeterias and libraries were the most commonly used testing locations; however, quiet outdoor spaces were used on some occasions when indoor space was unavailable.**

**[13L1] General conversation included a greeting, introductions, and brief question about a superficial topic such as how the child's day was going, or what activity the class was working on'**

**[13L2] An individual interview methodology was chosen for several reasons. First, this is the standard procedure used to administer the Dolls Test pioneered by Clark & Clark (1947), a version of which is used in this study with paper drawings instead of dolls. Due to age, kindergartners required individual attention to ensure comprehension and task completion, and also to keep children's responses private from**

peers and adults in the school given that the topic under study—skin color—is a culturally sensitive issue

[14L1] Measures were laminated and arranged in order of presentation in a three-ring binder. Having portable measures was very convenient and facilitated speedy interviews.

## Measures

### Personal Identification Task

Dolls/paper dolls/drawings depicting figures of different racial groups have been used to assess racial self-identification and preference in many classic studies (e.g., Clark & Clark, 1947; Milner, 1973) and also in more recent studies (e.g., Gopaul-McNicol, 1988, Gopaul-McNicol, 1995; Kowalski & Lo, 2001). For each grade and sex combination in the current study (e.g., kindergarten girls) two identical sets of target figures were drawn,<sup>[15L2]</sup> differing only in the color of their clothes.<sup>[16L1]</sup>

[15L2] The use of paper drawings as target figures is an adaptation of the Dolls Test of Kenneth and Mamie Clark (1947) which used plastic diaper-clad infant dolls. For more information see Levant (2005) at <http://www.apa.org/monitor/julaug05/pc.html>. More recent research on children's self-identification and playmate preference has adapted the original doll procedure used by Clark and Clark. For example, among Black children in Trinidad and New York, Sharon Gopaul-McNicol (1995) used Black and White Cabbage Patch dolls to investigate racial identification and preference. In other studies assessing playmate preference, Kowalski and Lo (2001) used racially diverse photographs whereas Cramer and Steinwert (1998) used paper drawings. The use of paper drawings in the current study was advantageous due to their simplicity, portability, and cost-effectiveness. Further, drawings were chosen over photographs in order to keep physical features of the target figures identical except for skin color and body size (i.e., individual differences in photographed children's physical features may have introduced confounds into the current study).

[16L1] There was a total of 32 target figures used: kindergarten girls (2 sets of 4 figures—sets were identical except that one set wore red shirts and the other set wore green shirts); kindergarten boys (8 figures); 5/6<sup>th</sup> grade girls (8 figures), and 5/6<sup>th</sup> grade boys (8 figures). Appendix B displays some of the target figures used with kindergartners and Appendix C displays some of the target figures used with 5/6<sup>th</sup> graders. Target figures displayed in the appendices are representative of the entire set; they show Black and White figures, boy and girl figures, younger and older figures, and average and chubby figures.

Researchers interested in replicating these materials may easily create an entire set of target figures by following the directions in the notes at the end of Appendices B and C.

One set of target figures was randomly assigned to be used in the assessment of self-identification and ideal self for each child. Each set contained four pictures: A pair of White children and a pair of Black children; within each pair, one was a chubby figure and one an average-sized figure. For kindergartners, the target figures portrayed a young child, 9.8 cm tall and either 3.2 cm wide (average-size) or 4.2 cm wide (chubby). For Grades 5 and 6, the target figures portrayed a pre-adolescent child, 8.5 cm tall and either 2.5 cm wide (average-size) or 3.6 cm wide (chubby). Figures within each set had identical clothing, facial features, hair color and style, differing only in skin color and body size. Target figures varied in weight (i.e., chubby and average) in order to investigate children's weight preferences; however, these data are not used in the current paper. The weight variation in target figures may be a more realistic representation of actual children and so facilitate their identification with the target figures.<sup>[17L1] [17L2]</sup>

[17L1] Two sets of target figures with different colored shirts were specifically planned into the methodology to ensure that color of dolls' clothes would not be an experimental confound (i.e., systematically bias children's responses to the task). It is important to note that each child was presented with only one set of 4 target figures (all wearing the same color clothes): Black average, Black chubby, White average and White chubby. Both the average-sized and chubby Black target figures were coded as Black and both the average-sized and chubby White target figures were coded as White.

[17L2] Given that skin color was the independent variable being measured here, having identical body sizes for Black figures and White figures ensured that body size was not confounded with skin color. Rather than presenting a problem to the methodology, the presence of two body sizes for each skin color may have been advantageous by offering children a more realistic array of body types amongst which to choose.

The four target figures from one set, randomly arranged, were placed in front of the child, who was then asked, "Which picture do you look like?" (Self-Identification). After the selection was made, each child was then asked "Which picture would you like to look like?" (Ideal-Self). Selection of either of the Black target figures was coded as Black self-identification and either of the White target figures as White self-identification. Similar coding was done for Ideal-self.<sup>[18L1]</sup> Participants who selected a Black or White figure for both self-identified and ideal selves were assessed as *concordant* (i.e., B/B and W/W) and those who selected target figures of different skin colors for Self-identified and Ideal selves were labeled *discordant* (i.e., B/W and W/B).<sup>[19L1] [19L3] [19L2]</sup>

[18L1] Self-identified skin color and ideal self skin color as measured by the target figures were independent predictor variables used in regression analyses to test the Additive Model (see results section and Table 4 for more details). Regression analyses assessed for main effects of self-identified skin color and ideal skin color on children's self-esteem (dependent variable) as well as for 2-way and 3-way interaction effects between these two independent variables and age.<sup>[18L1]</sup>

[19L1] We created an additional independent variable to code whether children's choices of target figures for identified self and ideal self were concordant or discordant in skin color.

[19L3] Our research indicates that this is the first published study to measure self-concordance/discordance using a version of the Dolls Test—whether with plastic dolls, photographs, or paper target figures. Thus, our approach creatively expands the use of this measure to approach new research questions.

[19L2] There is an interesting body of research on actual/ideal self-discrepancies in identity among adolescents and emerging adults (e.g., see Harter, 1999; Higgins, 1987) including measures designed for those age groups. The current study is grounded in this conceptual work on self-discrepancy but uses methods appropriate for much younger children: we narrowed the scope of interest and made ideas more concrete (i.e., examining physical appearance vs. psychological identity), and used a highly simplified measurement format (i.e., picture game vs. word-based questionnaire)

#### *Self-Esteem Measure*

Different self-esteem measures were chosen for kindergartners and 5th/6th graders.<sup>[20L2]</sup> For kindergartners, the Preschool Self-Concept Picture Test (PS-CPT; Woolner, 1968) was used because it is designed for Black children; therefore, drawings accurately represent Black physical features.<sup>7</sup> No such measure designed for Black populations could be located for older children, and the PS-CPT pictures were too juvenile to be used with 5th/6th graders. Therefore, for the 5th/6th grade self-esteem task, a booklet of 10 age-appropriate pictures, based on Harter's Pictorial Scale of Perceived Competence and Social Acceptance for Young Children (Harter & Pike,

<sup>7</sup> Although the Piers-Harris Children's Self-Concept Scale is frequently used as a measure of Self-esteem with children, it was not appropriate for this study because it is designed for older children (ages 7-18), requires a 3rd grade reading level, and depicts White rather than Black children. Similarly, Harter's measures of perceived competence were not used because all pictures in the version for younger children (Pictorial Scale of Perceived Competence and Social Acceptance for Young Children) showed White children and the Harter Scale for older children (Self-Perception Profile for Children) is based on verbal descriptions rather than pictures. Instead of having this difference in skin color and mode of stimulus presentation, younger and older children both made judgments based on pictures of Black children.

1984), was constructed to be similar in content to the kindergarten version, with the target figures appearing as similar in age to the 5th/6th graders. Hair and facial features were modified to be consistent with Black characteristics, and the plates were printed on brown paper.

[20L2] There were a number of priorities in choosing self-esteem measures for this study, namely racial appropriateness, age appropriateness, and consistency across measures. Pictorial stimuli are most appropriate for use with kindergartners given their developmental level, and drawings depicting Black children were considered the most valid approach in this Black Jamaican sample. Further, based on the desire to keep the interview procedure as similar as possible across grades, a picture-based format was chosen for the older children instead of the questionnaire-based format of some other available self-esteem measures commonly used with that age group. Moreover, it was our intent that children not experience the interview as a test or examination. Whereas pointing to drawings was expected to be fun, completing a questionnaire may have been more anxiety provoking for 5<sup>th</sup>/6<sup>th</sup> graders who were being prepared for nationwide high school placement exams. Finally, choosing a simple pictorial measure for 5<sup>th</sup>/6<sup>th</sup> graders also minimized the possibility that differential levels of verbal/language skills might interfere with understanding or completion of the measure. (For example, it is possible that the instructions for Harter's Self-Perception Profile for Children may have been challenging for some children in the current sample).

The PS-CPT consists of 10 plates, depicting young children engaged in various situations, such as playing on a swing, playing with a friend, walking on a fence, raking leaves, pouring juice, and sharing candy. Each plate depicts two pictures; in one picture, a child is displaying positive characteristics (e.g., being happy, clean, strong, unafraid, accepted by the group); in the other picture, the child is displaying less positive characteristics (e.g., being sad, dirty, weak, afraid, not accepted by the group). The target figures are depicted with brown skin color and black hair and facial features. The sex of the target figures was matched to the sex of the child participant. For each pair of pictures, the child was to pick the target figure most like himself/herself, and then to pick the target figure he/she would most like to be. For each plate, agreement between the child's choice for actual and ideal selves is scored one point; therefore total scores may vary from 0 to 10; higher numbers indicate higher self-esteem. Evidence for construct and content validity is provided by Woolner (1968) and by Henderson and Abrams (1983), demonstrating that PS-CPT Self-esteem is related to emotional health and prosocial behavior in preschoolers. Retest reliability over a period of six months for self-concept was  $r = .90$ ; for Ideal-self,  $r = .80$  (Woolner, 1968). For the present sample, reliability (internal consistency) for the Self-esteem scale was determined; for boys, Cronbach's alpha = .84; for girls, alpha = .86.

The activities depicted by the 5th/6th grade modified Harter Self-esteem measure were chosen to correspond with those from the PS-CPT, insofar as possible. Example

plates from the Harter test include children climbing on high bars, running, playing with a group of friends, and spelling words. In each plate, one picture depicts a child displaying positive characteristics (e.g., being happy, clean, a good climber, academically successful, having many friends); in the other picture, the child is displaying less positive characteristics (e.g., unhappy, dirty, poor climber, academically unsuccessful, few friends). Target figures were matched to the sex of the child participant. For each pair of pictures, the child was to pick the picture most like himself/herself, and then to pick the picture he/she would most like to be. Again, agreement between the two choices is indicative of higher self-esteem; scores may vary from 0 to 10. For the present sample, reliability (internal consistency) for the self-esteem scale was determined. For the boys, Cronbach's alpha = 0.62; for the girls, alpha = 0.58<sup>8</sup> [211,1].

**[21L1]** Footnote 5 of the original paper provides a developmental explanation for the finding that the internal reliability of the 5<sup>th</sup>/6<sup>th</sup> grade self-esteem measure was significantly lower than the measure used with kindergartners. As discussed in annotation 19, it was important to use a pictorial measure in order to be compatible to the measure used with kindergartners. Thus, from the moment we decided to adapt this self-esteem measure to suit our study priorities, we were aware that the psychometric properties of the instrument could be impacted. We judged the risk of attaining only modest reliability to be necessary in order to attain high validity. We proceeded with data analyses despite the lower alpha coefficient for girls (.58) because we believed the developmental explanation and our research priorities outweighed the concern of this measure falling slightly below the commonly accepted standard of .60.

#### *Skin-color Assessment*

A scale was constructed to assess skin color in a manner similar to that of previous researchers in this area employing the Pantone Matching System (PMS) (Bond & Cash, 1992; Gitter et al., 1972). A swatch of horizontally arranged color tiles was created to form an 11-point Likert skin color rating scale ranging from 1 (very light, cream-colored) to 11 (very dark, ebony).<sup>9</sup> [22L1] [22L2]

**[22L1]** Our first options were to construct the Skin Tone Assessment Scale with a complete brown paint spectrum of flesh tones from a paint distributor or from Black women's make-up. However, we were

dissatisfied with the range of hues available (no dark brown to black tones) and the inconsistent resemblance to flesh tones (most hues in paint spectrums were not life-like). Therefore, we created a mixed scale consisting of some printed paint swatches and some tiles painted with make-up foundation. There was a slight difference in the texture between the printed paint swatches and the foundation-painted tiles; however, this did not interfere with color ratings. Note that there have been some changes in color and texture of the tiles due to aging.

**[22L2]** Two measures have been used by some prior North American studies to measure skin color (Bond & Cash, 1992). The scale used in the current study had very similar construction to the Skin Color Assessment Procedure (SCAP); however, it was distinct in that participants did not provide self-ratings. (See Annotation [19] for a discussion of reasons behind this decision). The Skin Color Questionnaire is a word-based self-report instrument and would not have been developmentally appropriate for use with young children.

Each examiner used this color scale to rate the skin color of each child at the conclusion of the interview, as the child was exiting the room. While this procedure involves a separation between perception of skin color and skin color rating, it was not deemed appropriate to directly compare the child's skin with a color sample because of the social status implications of skin color in Jamaica. [23L3] [23L1] Also, although it would have allowed for a measure of interrater reliability, it was not feasible to have both examiners (African-Caribbean and Anglo-American) present during each child's interview, since one of the variables under investigation was the effect of examiner's skin color.

**[23L3]** A decision was made not to have children do self-assessments of skin tone, unlike the Skin Tone Assessment Procedure of Bond & Cash (1992). Rather, it was decided to have assessments done by the interviewer after concluding the interview. Several factors influenced this decision including cultural sensitivity, age appropriateness and instrument validity. First, out of respect for cultural values and sensitivities, it was important to be as discreet as possible in assessing skin tone. Second, we recognized that kindergartners, who are just learning basic colors, would not be able to reliably differentiate among 11 shades of brown. Third, although older children would have more advanced shade discrimination skills, it was expected that self-ratings would be particularly susceptible to social desirable responding (i.e., choosing a socially preferred shade rather than the shade they actually perceive themselves to be). We favored using one strategy for both age groups of participating children; therefore we chose to have examiners make the skin tone ratings. It is important to note that no children appeared troubled or upset after participating in the interview; in fact, most children displayed positive affect and seemed to enjoy the individual attention.

<sup>8</sup> The lower alpha for the older children may be due to their increasing differentiation of domain perceived competence (Harter, 1999).

<sup>9</sup> At the time of data collection, there was no standardized Black skin tone rating system in existence. Colors comprising the skin color scale corresponded to the following Pantone Matching System (PMS) codes: #EECFB4, #E3A173, #D99164, #CC8443, #C77A58, #A56B46, #6A4342, #380000, #4E433F, #554838, #000000.

**[23L1]** Data were recorded and stored with deidentified information for purposes of confidentiality. For example, children's full names were not used on interview recording sheets and no names were entered into the dataset. Parents/guardians were given these assurances of confidentiality in their consent letters.

For the present study, interrater reliability of the skin color rating scale was determined by using a set of professional portraits of 71 African-American children who varied in skin tone.<sup>[24L1]</sup> Two raters — the African-Caribbean female examiner in this study and an Anglo-American female-rated these portraits for skin color, using the rating scale from the main study. The interrater reliability assessed with the intra-class correlation coefficient was 0.83.

**[24L1]** As a subjective, examiner-rated instrument, it was important to establish inter-rater reliability of the Skin Tone Assessment Scale, especially because it was being used by a Black and White examiner. We recognized that it was possible for the racial background of the examiner to influence their perceptions of skin color. This issue is sometimes addressed by having both examiner do ratings; however, it was challenging to accomplish dual ratings of children's skin color for specific reasons explained earlier. Thus, it was decided to establish inter-rater reliability by having two individuals—Black and White—independently rate professional photographs of Black children of varying skin tones. Unfortunately, the White American examiner in the study was not accessible at the point when inter-rate to be calculated; therefore, another White American female of similar age and from similar immediate surroundings (i.e., small majority-White rural college town) rated the portraits. These ratings were correlated with the rating of the Black examiner in the study to establish the degree of similarity in ratings. It should be noted that a journal reviewer commented specifically on liking this creative method of calculating inter-rater reliability.

## RESULTS

### Analysis Plan

In the first section, we compare the scores of rural and urban children for self-esteem and skin color. Then, we examine the relation between the children's self-identification as Black or White and their choice of an Ideal-self as Black or White. Finally, we identify the number of children in the rural and the urban group who were identity concordant for their self-identification and their ideal-self choice — i.e., those who chose Black for both (B/B) or White for both (W/W) — and the number of children who were identity discordant (B/W, W/B). These descriptive statistics are

followed by regression analyses based on two alternative models (self-protective and additive) to predict self-esteem.

### Descriptive Statistics

T-tests indicated that rural children had higher self-esteem ( $M = 8.60$ ,  $SD = 1.89$ ) than urban children ( $M = 7.69$ ,  $SD = 2.20$ ),  $t(198) = 3.08$ ,  $p < .002$ ,  $\eta = .21$ . Also, rural children had darker skin color ( $M = 6.96$ ,  $SD = 1.87$ ) than urban children ( $M = 5.02$ ,  $SD = 1.84$ ),  $t(179.65)^{10} = 7.34$ ,  $p < .001$ ,  $\eta = .46$ .

Table 1 shows the number of children who self-identified as Black or White, as related to their ideal-self as Black or White, and as contrasted with expected frequencies. Sixty-eight percent of the children self-identified as Black, and 50% of the children chose Black as an ideal-self. A chi-square analysis revealed that 44% of children who self-identified as Black chose White as an ideal-self, whereas fewer children who self-identified as White chose Black as an ideal-self (37%),  $\chi^2(3, N = 200) = 13.40$ ,  $p < .004$ .

Table 1: Number of Children Self-identified as Black or White Reporting their Ideal-self as Black or White (Expected Frequencies in Parentheses)

	Self-identification	
	Black	White
<b>Ideal self</b>		
Black	75 (67)	24 (32)
White	60 (68)	41 (33)

Note.  $\chi^2(1, N = 200) = 6.09$ ,  $p < .01$ .

Table 2 shows the number of rural and urban children who were identity concordant (B/B, W/W) for self-identification and ideal-self, and the number who were discordant (B/W, W/B), as contrasted with expected frequencies. The main difference for identity concordance/discordance between rural and urban children is seen in the number who are B/B and W/W concordant,  $\chi^2(3, N = 116) = 13.40$ ,  $p < .004$ . Concordant rural children were nearly equally divided between B/B (24%) and W/W

<sup>10</sup> Equal variances not assumed.

(28%), whereas concordant urban children were more likely to be B/B concordant (48%) than W/W concordant (15%). Among the discordant children, both rural and urban children were more likely to be B/W discordant (34%, 27%) than W/B discordant (14%, 10%).

Table 2: Number of Rural and Urban Children who are Identity-concordant and Discordant (Expected Frequencies in Parentheses).

Residence	Concordant		Discordant	
	B/B	W/W	B/W	W/B
Rural	20 (32)	24 (17)	29 (26)	12 (10)
Urban	55 (43)	17 (24)	31 (34)	12 (14)

Note. B/B = Black Self-identification, Black Ideal self; W/W = White Self-identification, White Ideal self; B/W = Black Self-identification, White Ideal self; W/B = White Self-identification, Black Ideal self.

Note.  $\chi^2(3, N = 116) = 13.40, p < .004$ .

### Predictors of Self-Esteem

The alternate models of self-esteem were used to determine the predictors of self-esteem. Following the plan of Aiken and West (1991), all continuous variables were centered prior to analysis; interactions were computed based on centered variables. Categorical variables — residence (rural/urban), self-identification, ideal-self, and the control variables of child sex and examiner race were assigned values of - 1 and + 1 (Aiken & West, 1991, Ch. 7). For each regression analysis, child sex and examiner race were entered at Step 1 as control variables. All reported beta weights ( $\beta$ ) are standardized.

### Analysis Based on the Self-protective Hypothesis

Based on the Self-protective hypothesis, self-esteem scores were regressed on the variables of child age, skin color, and residence (rural, urban), with child sex and examiner race as control variables. At Step 1, the control variables were entered. At Step 2, the variables of child age, skin color and residence were entered. At Step 3, the 2-way interactions were entered. At Step 4, the 3-way interaction term was entered.

The results are shown in Table 3. Neither child sex nor examiner race were significant predictors of self-esteem,  $F(2, 197) = .26, ns$ . At Step 2, residence was a significant predictor of self-esteem,  $\beta = -.26, p < .003$ . In support of the Self-protective hypothesis, rural children had higher self-esteem than urban children. Further, at Step 3, in support of the ingroup comparisons explanation, the interaction between skin color and residence was significant,  $\beta = .15, p < .052$ . A test of simple slopes indicated that this interaction was due to the rural children: Those with lighter skin color had higher self-esteem ( $r = -.20$ ). For urban children, there was no relation between skin color and self-esteem ( $r = .04$ ). At Step 4, the 3-way interaction was not significant.

Table 3: Self-protective Hypothesis: Summary of Regression Analysis of Children's Self-esteem on Age, Skin, and Residence<sup>a</sup>

Variable	Beta	SE Beta	t	p
Step 1 $F(2, 197) = .26, ns$				
Sex	-.05	.07	-.68	ns
Examiner	-.02	.07	-.24	ns
Step 2 $F(5, 194) = 2.12, p < .06$ $R^2$ change = .05, $p < .02$				
Age	-.04	.08	-.56	ns
Skin color	-.06	.08	-.74	ns
Residence	-.26	.08	-3.05	.003
Step 3 $F(8, 191) = 2.35, p < .02$ $R^2$ change = .04, $p < .05$				
Skin color × Residence	.15	.08	1.95	.052
Skin color × Age	.08	.09	.98	ns
Age × Residence	-.13	.09	-1.55	ns
Step 4 $F(9, 190) = 2.08, p < .03$ $R^2$ change = .00, ns				
Skin color × Residence × Age	-.01	.10	-.10	ns

<sup>a</sup>Rural = -1; Urban = +1

### Analysis Based on the Additive Model

Based on the Additive model, self-esteem was regressed on the variables of child age, self-identification and ideal-self. At Step 1, the control variables were entered. At Step 2, the variables of child age, self-identification and ideal-self were entered. At Step 3, the two-way interaction terms were entered. At Step 4, the 3-way interaction term was entered.

The results are shown in Table 4. Neither child sex nor examiner race was significant. At Step 2, self-identification was a significant predictor of self-esteem,  $\beta = .16, p < .034$ . Children who self-identified as White had higher self-esteem than those who self-identified as Black. At Step 3, the interaction between child age and ideal-self approached significance,  $\beta = .14, p < .058$ . Analysis of simple slopes indicated that for older children, self-esteem was positively related to White ideal-self ( $r = .27$ ); for younger children, there was no relation ( $r = -.01$ ). Further, in support of the Additive model, the self-identification by ideal-self interaction effect approached significance,  $\beta = .15, p < .058$ . An analysis of simple slopes indicated that for children

who self-identified as White, the choice of an ideal-self as White was positively related to self-esteem ( $r = .27$ ); however, for children who self-identified as Black, there was no relation between White ideal-self and self-esteem ( $r = .03$ ).

Table 4: Additive Model: Summary of Regression Analysis of Children's Self-Esteem on Age, Self-Identification<sup>a</sup>, Ideal-Self<sup>b</sup>, and Residence<sup>c</sup>.

Variable	Beta	SE Beta	t	p
Step 1 $F(2, 197) = .26, ns$				
Sex	-.05	.07	-.68	ns
Examiner	-.02	.07	-.24	ns
Step 2 $F(5, 194) = 1.82, ns$ $R^2$ change = .04, $p < .04$				
Age	.08	.07	1.15	ns
Self-identification	.16	.07	2.14	.034
Ideal-self	.11	.07	1.55	ns
Step 3 $F(8, 191) = 2.07, p < .04$ $R^2$ change = .04, $p < .07$				
Age × Self-identification	.07	.08	.86	ns
Age × Ideal-self	.14	.07	1.90	.058
Self-identification × Ideal-self	.15	.08	1.90	.058
Step 4 $F(9, 190) = 2.43, p < .01$ $R^2$ change = .02, $p < .03$				
Age × Self-identification × Ideal-self	-.17	.08	-2.23	.027

<sup>a,b</sup>Black = -1, White = +1 <sup>c</sup>Rural = -1, Urban = +1

Finally, at Step 4, there was a significant 3-way interaction,  $\beta = -.17, p < .027$ . As can be seen in Table 5, for younger children, one way ANOVAs showed that the four concordant/discordant groups (W/W, B/B, B/W, W/B) were not significantly different from one another in self-esteem,  $F(3, 69) = .04, p > .20$ . However, for the older group, the four concordant/discordant groups were significantly different from one another in self-esteem,  $F(3, 90) = 3.94, p < .01$ . The W/W concordant children had significantly higher self-esteem than the other combinations of Self-identification × Ideal self, Duncan's test,  $p < .05$ .



Table 5: Mean (and SD) Self-Esteem Scores as a Function of Identity Concordance/Discordance and Child Age

Age	Concordant		Discordant		F	df	p
	W/W	B/B	B/W	W/B			
Younger children	8.44 (2.88)	8.19 (2.36)	8.11 (2.65)	8.10 (2.61)	.04	3, 69	ns
Older children	9.43 (.79)	7.91 (1.81)	8.53 (1.76)	7.38 (1.80)	3.94	3, 90	.01

Note. W/W = White Self-identification, White Ideal self; B/B = Black Self-identification, Black Ideal self;

B/W = Black Self-identification, White Ideal self; W/B = White Self-identification, Black Ideal self.

## DISCUSSION

Research in the United States has shown that social processes occurring at the level of the group, as described in Crocker and Major's (1989) Self-protective hypothesis, and processes occurring at the level of the person, as described in (Harter, 1987) and (Harter, 1990) Additive model, contribute to self-esteem. The present study examined the extent to which these two models predicted the relationship between self-esteem in Jamaican children and social stigma based on darker skin and rural residence. Results based on both the Self-protective and Additive models revealed that social stigma had a significant impact on Jamaican children's self-esteem. Data provided strong support for the Self-protective hypothesis. Hypothesis 2, based on the Additive model, in conjunction with Hypothesis 3 (age effect) was also supported. Support for each major finding will be discussed first, followed by implications for the Jamaican population, limitations of the study, and potential application to other children of African descent.

### Self-Protective Hypothesis

As predicted by the Self-protective hypothesis (Hypothesis 1), rural Jamaican children, who face rural stigma and skin color stigma, demonstrated higher self-esteem than the

relatively advantaged group of urban children. This result is consistent with those for adults in the U.S. and is consistent with findings among minority children in The Netherlands, who did not differ in self-esteem from the majority children. Thus, the present findings demonstrate the applicability of Crocker and Major's (1989) hypothesis in a variety of novel contexts: 1) in a Black racial context beyond the U.S., 2) in a Caribbean cultural context, and 3) in relation to rural/urban stigma. Results provided no support for older theoretical perspectives that would have predicted that rural Jamaican children would demonstrate lower self-esteem than their urban counterparts due to negative internalized societal messages and life outcomes.

The current findings provide some support for the explanation that stigmatized group members favor ingroup over outgroup comparisons as a means for protecting self-esteem. Thus, fairer-skinned rural children had higher self-esteem than did darker-skinned rural children, suggesting that rural children engage in ingroup comparisons based on skin color. In contrast, there was no relationship between urban children's skin color and their self-esteem, suggesting that they may not engage in ingroup comparisons of skin tone in the same manner or to the same extent as do rural children. In addition, the complementary finding that rural children had higher self-esteem than urban children is consistent with the explanation that they do not engage in comparisons with the urban outgroup. As Crocker and Major (1989) proposed for members of North American stigmatized groups, it is possible that rural Jamaican children choose ingroup over outgroup comparisons for many reasons, including avoidance of painful social comparisons with the advantaged urban children, and/or greater availability and judged similarity of rural children for comparisons.

While the current findings of higher self-esteem in rural Jamaican children fall in line with the ingroup comparisons explanation of the Self-protective hypothesis, there are other possible explanations of their higher self-esteem. For example, rural Jamaican children may attribute personal unfavorable outcomes (e.g., failure on national high school placement examination) to prejudice based on their dark skin or rural residence, or they may engage in selective valuing of their performance based on strengths of their rural group (e.g., agreeableness, agricultural knowledge, physical strength and agility) or selective devaluing of their performance based on weaknesses of their rural group (e.g., academic performance, socioeconomic standing).

Contrary to expectations, age did not moderate the self-protective effect. Both rural kindergartners and 5th/6th graders had higher self-esteem than their urban counterparts, suggesting that the self-protective effect occurs even at very young ages in rural Jamaican children, who are aware of and are significantly impacted by social stigma regarding skin color and rural/urban residence.

### Additive Model

In partial support of Hypothesis 2, the Additive model, which built on the Jamesian model by introducing a social/interpersonal component to self-evaluation, was supported among older Jamaican children. Identity concordance consistent with the fair/White-skinned cultural preference (i.e., self-identifying as White and endorsing a White ideal) predicted higher self-esteem among older children. Both identity concordance, which was inconsistent with the fair/White-skinned cultural preference (i.e., self-identifying as Black and endorsing a Black ideal), and identity discordance,

predicted lower self-esteem. These results show that mere concordance between one's identified skin color and one's ideal skin color is not sufficient to predict self-esteem among older Jamaican children. Rather, as expected based on Harter's Additive model, the factor of pervasive fair/White-skinned social preference also played an important role in the prediction of children's self-esteem.

The Additive model was supported for older children but not younger children, in support of Hypothesis 3. Whereas self-esteem was higher for rural than for urban children regardless of age (self-protective effect), the findings also show that the concordance between self-identification and personal and cultural ideal-selves becomes increasingly important with age in predicting self-esteem.

Examiner skin color had no significant impact on children's self-esteem responses in this study. This finding adds information to the ongoing discussion in the literature regarding the effect of experimenter skin color in research involving children (e.g., Smith, Bradham, Chandler, & Wells, 2000). Similarly, child sex had no significant impact on self-esteem; social stigma in Jamaica regarding skin color and rural/urban residence appears to affect boys' and girls' self-esteem in a similar fashion.

## Implications

The current findings raise several interesting issues of social significance. First, there is ample evidence that a stigma exists against dark skin in Jamaica, and that Jamaican children demonstrate a pro-White preference from a very young age. This is consistent with findings from other Caribbean countries, the United States, and United Kingdom, which are populations that share histories of racial stereotyping and oppression. Thus, it is not surprising that the children in this study, younger and older alike, are aware of, and influenced by, the pervasive cultural dark skin color stigma.

This reality raises the question of how we should respond to dark skin color stigma among children of African descent, at least in western countries. The most desirable outcome for these children would be for them to correctly self-identify as Black and to have Black as their ideal skin color, with this concordance contributing to self-esteem. Unfortunately, the present data show just the opposite for African-Caribbean children. Incorrectly self-identifying as White and endorsing a White ideal actually increased self-esteem among older children.

To appropriately foster higher self-esteem in African-Caribbean children, the current research suggests that it is not enough to get children to identify as Black, and/or to verbalize and adopt Black ideals. In fact, such strategies could backfire for some children and actually lower their self-esteem because such a stance runs counter to the cultural preference. As long as the Jamaican cultural ideal remains White/fair-skinned, interventions that do not also address this cultural component in addition to the intrapersonal components of increasing Black self-identification and Black ideals may lack effectiveness. The Jamaican society as a whole must move towards a Black skin color preference if it hopes to assist its children in doing so.

Given the relative stability and longevity of cultural pro-White ideals among Black populations, effecting change at the cultural level is a daunting, and perhaps, impossible task, especially in the short-term. Therefore, it is worthwhile to consider other avenues of increasing self-esteem among Black children besides race/culture-

based interventions. There are other domains of self-evaluation, which may be targeted to increase children's self-esteem. Based on Harter's Additive model, a sense of self-competence in any domain of importance that is valued by significant others predicts higher self-esteem. For example, friendships, family relationships, and extra-curricular activities may potentially be other significant sources of self-esteem, which might offset the influence of negative skin color self-evaluations. Alternatively, based on Crocker and Major's proposed mechanisms of self-esteem protection, interventions for Black populations that promote ingroup comparisons or the selective valuing of performance in areas of group strength may also be helpful. The findings with the rural Jamaican children, who have higher self-esteem despite dark skin color stigma and rural stigma supports this idea. Despite the odds against them, rural Jamaican children are remarkably resilient and actually have higher self-esteem than relatively advantaged urban Jamaican children. It appears that certain self-protective processes buffer rural children's self-concept from the otherwise negative psychological impact of social stigma. The current study suggests that rural Jamaican children may choose to compare themselves with other rural children who are more similar to them and who come readily to their minds instead of comparing themselves to children in the city whom they realize are advantaged in socially important ways.

## Limitations and Future Research Directions

The findings of this study apply most directly to children in Eastern Jamaica. Although it seems likely that similar processes would predict self-esteem among children in Central and Western Jamaica, findings may vary somewhat based on the degree of skin color and rural stigma in those areas. In addition, these findings do not directly apply to children of African descent in other countries; however, the variables identified in this study may be important for understanding self-esteem in these populations as well.

Given that there is a strong dark skin color stigma in the United States where African-American children have demonstrated strong pro-White preferences, it is very possible that the Self-protective and Additive models would also predict the relationship between skin color stigma and self-esteem for these children. Further, to the extent that rural/urban disparities and stigma exist in the U.S., it is possible that the Self-protective hypothesis would predict self-esteem among rural groups as well. Whether the influence of these factors would change with age is a matter to be empirically explored.

Further, if the relationship between skin color and self-esteem between African-Caribbean children in Jamaica and African-American children is similar, then self-esteem enhancement interventions based primarily on increasing identification with and idealization of Black skin may also face low effectiveness among African-Americans for the reasons discussed earlier.

In interpreting these findings, it is important to note that children in this sample reported moderate to high levels of self-esteem. Therefore, the differences discussed reveal relative levels of self-esteem rather than large deficits in self-esteem resulting from skin color stigma or rural stigma. These findings are consistent with previous research demonstrating a difference between racial or collective esteem (i.e.,

evaluation of the worth of one's social group) and global or personal self-esteem (overall evaluation of one's worth) (e.g., Banks, 1984; McAdoo, 1985; Spencer, 1984). That is, Black children have demonstrated an ability to effectively compartmentalize any negative feelings they may have about their skin color from their overall feelings about themselves. Biological (e.g., puberty), psychological (e.g., ability to meet basic needs for competence, autonomy, and relatedness), and educational (e.g., academic achievement, school transitions) factors might also lead to greater differences in global self-esteem (Eccles, 1999).

In sum, the results of this study reveal a much more nuanced relationship between skin color and self-esteem among Jamaican children than has been previously reported. Pervasive social stigma against dark skin and rural residence impacts Jamaican children's self-esteem in two major ways: (1) by boosting the self-esteem of stigmatized children due self-protective mechanisms, and (2) by boosting the self-esteem of children whose self-identification and ideal-self fall in line with the cultural skin color ideal.

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#### AUTHOR NOTE (ORIGINAL PAPER)

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#### Discussion of Annotations

##### Summary

The current study employed an interesting design and innovative methods in a sample of Jamaican children to investigate an important but culturally sensitive topic—the impact of skin color and rural/urban residence on self-esteem. The design had many strengths including positive collaborative partnerships with schools, a desirable sample in terms of size and urban/rural diversity, a high parental consent rate, individual assessment of children, simple and portable materials, a creative blend of established and new measures, and last, but in no way

least, innovative research questions. This study also had to overcome many challenges including anticipated resistance from research partners and participants due to cultural sensitivity of the topic, an initially failing consent process, lack of available measures which were culturally appropriate and age-appropriate, and a time and labour-intensive data collection strategy. Overall, the strengths of this methodology far outweighed the challenges producing a successful research study on an important social issue. Priorities in selecting an academic journal for dissemination of this research included the presence of a developmental perspective, an international scope and readership, a history of publishing papers with similar content, and a stated interest in new and diverse populations.

#### *Advantages of Methodology*

The strategy of utilizing existing professional relationships to find interested collaborators was advantageous. Strong partnerships with participating school administrators were invaluable in setting the stage for a successful research project, especially given the sensitive nature of the topic under study. The relatively large sample size was also beneficial; this ensured that there was sufficient statistical power to detect hypothesized effects. Changing the parental consent strategy was instrumental in achieving the very high student participation rate. It was particularly helpful for the Jamaican examiner to prioritize talking with parents and guardians before and after school about the project. This approach served to personalize and demystify the research process, and build trust with participating families.

The choice of individual interviews to assess children was a key factor in the validity of the data. Having quiet private spaces to conduct individual interviews improved our confidence in the quality of the data collected. In addition, relatively brief individual interviews presented minimal interference of teachers' classroom routines and students' instructional time—the teachers indicated when they were ready to begin and would release consented children one at a time for short periods meanwhile continuing planned classroom activities.

It is always good practice to first seek existing instruments which are valid, reliable, and suit the research questions and sample. Unfortunately, there are relatively few measures in child development research that have been designed for or validated for use with Caribbean children. As a result, creative science is needed to either adapt existing measures that have some necessary or desirable features, or in the absence of any precedent measures, to design and pilot new instruments. Our experience with the Skin Tone Assessment Scale taught us that not only is creativity required in designing a new instrument, but also in assessing its psychometric properties.

Finally, the necessary materials for this study were simple and portable, fitting comfortably into a conventional binder. This gave examiners significant flexibility in utilizing available school spaces to conduct interviews, especially when shifts in space were necessary within a given day of testing (e.g., library to cafeteria).

#### *Disadvantages of Methodology*

From the outset, the research questions, particularly in regard to skin color, presented some barriers, which needed to be overcome in order to successfully conduct this study. Whereas many may have interest in researching sensitive topics, few may attempt it and fewer still may find collaborative partners or participants due to cultural hesitancy and taboos. Therefore, cultural understanding, respect, and sensitivity were paramount at every stage including design/planning, relationship-building, data collection, and dissemination of findings. Speaking practically, this meant that the researchers and examiners needed to invest extra time and effort at each step to anticipate and address needs and challenges (e.g., deciding on the best administration method for the Skin Tone Assessment Scale; responding to initially poor parental consent rate; talking with a concerned school principal about how the data would be used).

Notwithstanding its many benefits, the individual interview method came at a cost. First, it was very time-intensive to interview 200 children for 15 minutes each. Second, a suitable private location for the interview was sometimes difficult to secure for long periods of time in a school environment where space is at a premium. Third, children missed 15 minutes of classroom time due to the interviews, after which they may have needed a bit of help to reintegrate into the classroom activities.

#### *Forward Thinking*

If we were to replicate this study today, there may be a few considerations in choice of measures. First, we would consider using 9 skin shades in our Skin Tone Assessment Scale instead of 11; Bond and Cash (1992) found that 9 color swatches provided sufficient range. Further, we would seek a Black skin color palette from make-up manufacturers rather than painting tiles with make-up. Many make-up manufacturers today have skin color palettes available online so customers can choose the right shade of cosmetics for their skin (e.g., Dermablend Professional <http://www.dermablend.com/RightShadeForYou.aspx>; <http://www.imanbeauty.com/cheeks/makeup.htm>; (Iman Cosmetics) <http://www.marykay.com/color/foundations/mediumcoveragefoundation/default.aspx>).

We might also consider remaking the target figures to be more realistic representations of Black children through the use of technology which converts photographs to drawings, for example. Our use of generic drawings may have allowed more children to identify with the target figures; however, drawings with more realistic detail may also achieve that goal. Although there may be an advantage to using different shades of skin color for the target drawings (e.g., to delineate cognitive limitations from cultural socialization in child performance), this would make the experiment too complex given the already high number of existing variables. That question would be better answered in separate study. Furthermore, introducing a variation in target drawing skin color may cause some of the problems discussed in annotation 21, L3 (i.e., violation of cultural sensitivities in asking children to blatantly choose their skin shade).

Rather than adding complexity, it may be worth trying to simplify target figures by having the average body size only instead of both average and chubby. This would reduce the stimuli with which children are presented and may speed up administration. On the other hand, it would also constrict the representation of natural variation in physical body types, and may unintentionally make a key variable under study—skin color—more obvious to children. Overall, it would be interesting to see whether study findings would differ with any of these changes in technique.

To replicate this study today, we would also change the parental consent procedure, eliminating the first attempt at sending home permission slips before the arrival of the experimenters to the research site. We found that the physical presence of experimenters was crucial to building trust and familiarity, which resulted in a high consent rate.

Based on the fact that there were no effects of experimenter skin color, we would use one examiner instead of two—the Black Jamaican examiner.

#### *Negotiation of the Publication Process*

Dissemination is a critical step in the research process. After all, how much is knowledge worth if it is not available to others? Therefore, publication in academic journals is necessary, but it can be very challenging and is not for the faint of heart. In general, academic journals are looking for well-designed studies with good implementation and interesting results, written in an engaging style. Studies investigating novel research questions in novel populations, using novel methods, and producing novel results are especially intriguing to journal editors. Confident that our study possessed these qualities, we

considered journals that would best fit the developmental perspective and content area of our study. Of additional, if not greater, importance was to select a journal with international scope and readership and a particular interest in under-researched populations. It was a personal priority of ours to contribute to the body of knowledge in the global field of psychology by making our research available to the widest cross-section of readers. Further, we believed then, as we do now, that the world wants and needs to understand the psychology of Caribbean people; yet Caribbean research is often not accessible to those outside of the Caribbean region. Thus, publishing in a North American-based internationally available academic journal was the best option for achieving this goal. (Reprints and republications, such as this book chapter, are good options to disseminate research within the Caribbean, which has been originally published elsewhere.)

The finished product of our journal article benefited tremendously from an invested journal editor who valued the unique contribution of our research to the larger body of knowledge. She gave specific guidance throughout the 'revise and resubmit' process. Although most reviewers' comments were helpful to us in molding the paper to tell the most interesting and complete story, we also met with some resistance, which needed to be overcome with logical and diplomatic arguments. We put substantial thought, time, and effort into reshaping the paper for resubmissions and crafting respectful and reasoned responses regarding the changes made or not made to each revision. As we expected, justifying the modification/creation of measures was important to the editor and reviewers who were unfamiliar with the Jamaican cultural context.

It is important to secure and maintain the support of editors because they play a crucial role in the success of the publication process. We found it important to nurture the relationship with our corresponding editor in small but significant ways including being polite in all communications, expressing thankfulness for efforts on our behalf, asking clarifying questions instead of making assumptions, giving detailed attention to all editorial suggestions, and most importantly, observing deadlines and requesting extensions ahead of time if necessary.

In sum, the success of our publication process required a strong belief in the quality of our work, self-advocacy, patience, endurance, creativity, strong writing skills, diplomacy in wording and tone, and wisdom in choosing our battles. Though challenging, the end result—the dissemination of our research to an international audience—was personally satisfying and professionally rewarding.

### **Closing**

Despite the sensitivity of the topic, many positive and meaningful findings emerged from this research including that fact that rural Jamaican children, although more stigmatized, actually have higher self-esteem than urban children. This outcome reminds social scientists that it is not only important, but possible to form successful collaborations with institutions and families to investigate important social issues which may be taboo. If done well, such research can serve to demystify taboo topics and desensitize society to them by providing valuable new information.

Finally, because unforeseen circumstances can carve pot holes in the best paved research designs when conducting Caribbean research, flexibility in research endeavours is paramount. Hence, a helpful guiding philosophy during data collection is "all is well that ends well." If you design the best study possible to answer innovative research questions with creativity and flexibility in implementation, then despite inevitable bumps along the way, you will get to your destination with data that tell an interesting story.

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### **APPENDIX A**

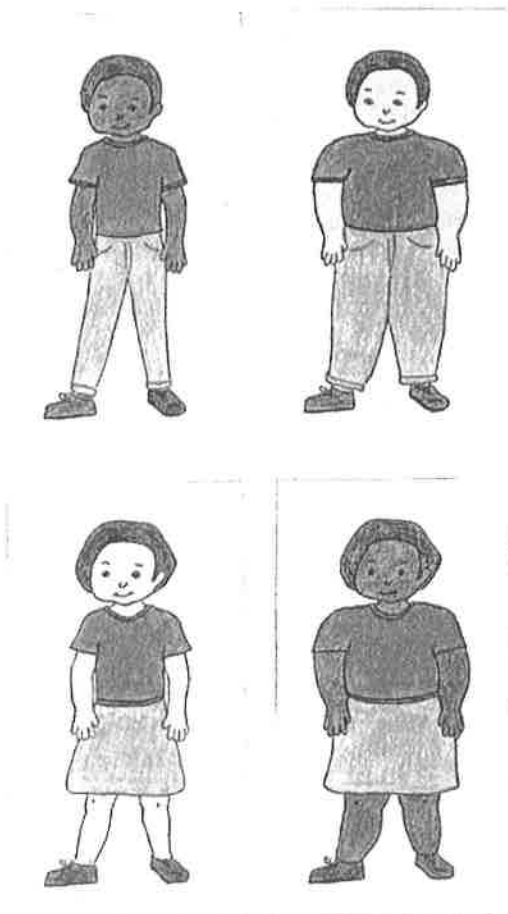
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### APPENDIX B

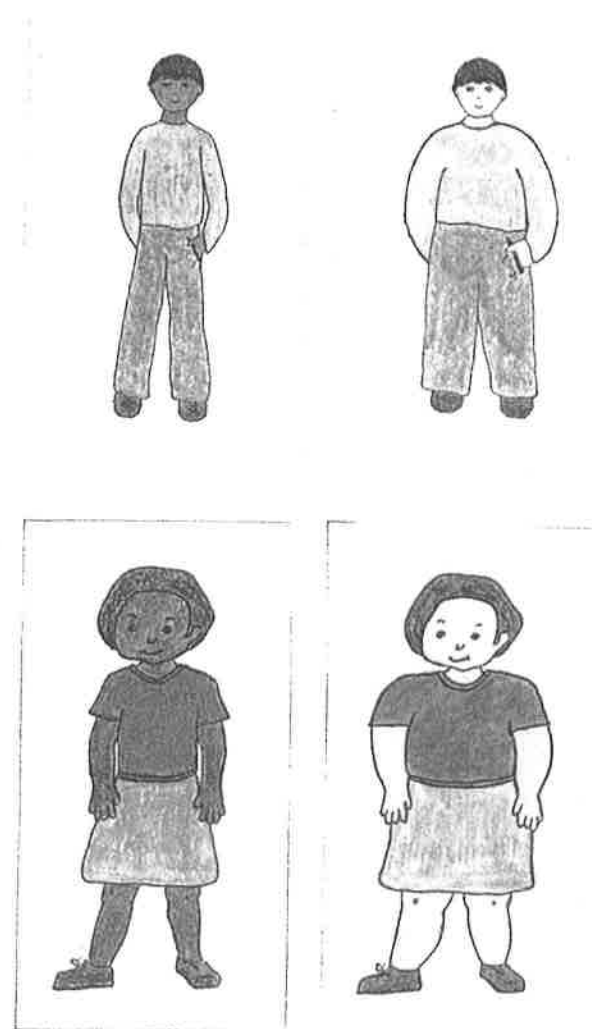
Target Figures for Kindergarten students: (L-R top row) Black Average Boy, White Chubby Boy, (L-R bottom row) White Average Girl, Black Chubby Girl.



Note: Target figures appear smaller than actual size. For each figure depicted, there are three additional replicas not shown: 1) replica with the other skin color (whether Black or White); 2) Black replica wearing a green shirt; 3) White replica wearing a green shirt.

### APPENDIX C

Target Figures for 5th/6th Grade Students: (L-R top row) Black Average Boy, White Chubby Boy, (L-R bottom row) White Average Girl, Black Chubby Girl.



Note: Target figures appear smaller than actual size. For each figure depicted, there are 3 additional replicas not shown: 1) replica with the other skin color (whether

Black or White); 2) Black replica wearing the other colored shirt; 3) White replica wearing the other colored shirt.

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