JOURNAL OF APPLIED SOCIAL PSYCHOLOGY

How Do Forced-Choice Dilemmas Affect Multiracial People? The Role of Identity Autonomy and Public Regard in Depressive Symptoms

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The present study reports on correlational data gathered from an Internet survey to explore why forced-choice dilemma situations relate to depressive symptoms among multiracial people (N = 317). Specifically, a model was tested that explored the role of identity autonomy (the extent to which multiracial people feel they can racially identify however they desire) and public regard (the extent to which multiracial people think others value their multiracial identity). The results of the model suggest that forced-choice dilemmas predict greater depressive symptoms because forced-choice dilemmas may promote greater beliefs that their multiracial identity is devalued in society and more generally restrict identity autonomy. Implications are discussed in terms of multiracial health and public policies regarding assessments of racial identities.

Researchers widely accept that people of multiracial heritage face unique challenges associated with their membership in multiple racial categories. These unique challenges have been proposed as precipitating factors in racial identity development, overall psychological health, and the occurrence of problem behaviors, including poor academic performance among multiracial people (Gillem, Cohn, & Throne, 2001; Logan, 1981; Rockquemore & Brunsma, 2002a, 2002b; Shih & Sanchez, 2005). In a review of work on multiracial health, Shih and Sanchez proposed that forced-choice dilemmas may contribute to multiracial people's psychological well-being. Thus, the present study is designed to examine empirically the possible link between self-reported experiences of forced-choice dilemmas and psychological well-being, as well as the mechanisms that may account for the relationship.

Forced-choice dilemmas refer to situations in which multiracial people are asked or pressured to choose between their multiple racial identities, rather than being allowed to identify with their multiple racial identities (Standen, 1996). Because of the difficulties multiracial people face, many theorists have erroneously predicted that multiracial people will exhibit worse

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Journal of Applied Social Psychology, 2010, **40**, 7, pp. 1657–1677. © 2010 Copyright the Author Journal compilation © 2010 Wiley Periodicals, Inc.

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psychological health and behavioral problems than other racial minorities. However, a review of the literature revealed few differences between multiracial people and other racial minorities regarding their levels of psychological health or behavioral problems (Shih & Sanchez, 2005). A possible explanation for this lack of difference is that multiracial people vary in the degree to which they encounter the challenges associated with having a multiracial identity. For example, not every multiracial person will encounter forced-choice dilemmas.

The proposed challenges associated with multiracial identity mostly emerged in theoretical and qualitative work that did not fully explore the implications of forced-choice dilemmas for psychological health (e.g., Hall, 1992; Herman, 2004; Nakashima, 1992; Sebring, 1985; Standen, 1996). The present study fills this gap by examining whether self-reported forced-choice experiences predict psychological health (as measured by depressive symptoms) and the mechanisms that may underlie this link (namely, public regard and identity autonomy). This work builds on current empirical work on multiracial identity, as well as the broader literature on identity denial to further understand these phenomena to help build a foundation for future research as well as to inform others (e.g., teachers, community members, parents, peers, public policymakers) about how forced-choice dilemmas may affect people of mixed racial ancestry.

Multiple Racial Identities

From an outsider perspective, multiracial people are difficult to categorize into simple racial categories. A perceiver often cannot assume the racial identification of multiracial people because, for example, multiracial people have racially ambiguous physical appearances. Moreover, even if the perceiver accurately identifies the person as multiracial, this information would not necessarily translate into an assumed racial identity because people of multiracial descent may or may not identify with various aspects of their racial backgrounds. Being unable to categorize a person into his or her racial identity can create an awkward and uncomfortable social situation, as race is one of the primary features people notice about each other (James & Tucker, 2003; Nakashima, 1992; Omi & Winant, 1986). The difficulty others encounter with multiracial people is evidenced in the words of Chela Delgado, a 14-year-old multiracial girl (Gaskins, 1999), "Being biracial isn't hard because we're confused about our racial identity. It's hard because everyone else is confused. The problem isn't us—it's everyone else" (p. 15).

To understand multiracial identity, it is important to recognize the complexity within multiracial people's racial identification. Because multiracial people belong to multiple racial groups, their racial identity choices are far more complicated than those of singularly raced individuals (Rockquemore & Brunsma, 2002a, 2002b). For example, a multiracial person of Asian/White descent may choose to identify as "Asian," "White," or some combination of their multiracial heritages (e.g., "multiracial," "Asian/ White," or "Hapa"). Thus, from the perspective of multiracial people, their racial identity process can be complicated, flexible, and unique from other racial minorities. In fact, many theorists have argued that experiencing a sense of freedom with regard to one's racial identity choices (i.e., racial autonomy) may be particularly helpful for positive multiracial identity development (Root, 1996). Thus, the present study examines whether forcedchoice dilemmas are associated with thwarted racial autonomy, which is posited as an important foundation for multiracial identity and health.

Forced-Choice Dilemmas

Multiracial people experience social situations, termed *forced-choice dilemmas*, in which there is either an implicit or an explicit message that they need to pick one racial identity over another (Hall, 1992; Herman, 2004; Standen, 1996). Forced-choice dilemmas may make multiracial people feel pressure to deny one part of their racial heritage or feel disloyal toward part of their families (Sebring, 1985; Shih & Sanchez, 2005). These situations can occur when multiracial people are asked to "check one box" on any survey, or even in casual conversations when multiracial people are asked to describe themselves in traditional, single-race categories. Before 2001, for example, the U.S. Census prohibited indicating more than one racial category, presenting a forced-choice dilemma for people who identified with multiple racial categories. Forced-choice practices continue to pervade in public policies, including the analysis and collection of ethnicity data in U.S. K–12 and postsecondary education (Renn, 2009).

Self-verification theory suggests that people generally have the desire to be accurately perceived and known by others (Swann, 1983, 1990; Swann, Pelham, & Krull, 1989; Swann, Rentfrow, & Guinn, 2002). This holds true for personal identities and characteristics, as well as for social identities (Barreto & Ellemers, 2002; Bosson, Prewitt-Freilino, & Taylor, 2005; Cheryan & Monin, 2005; Lemay & Ashmore, 2004). People experience great discomfort and anxiety when they fear misclassification into social identities and groups to which they do not belong (Bosson et al., 2005; Bosson, Taylor, & Prewitt-Freilino, 2006). For example, Cheryan and Monin misidentified Asian Americans as non-Americans in a series of experimental studies and found that misidentification caused psychological reactance and hostile moods among those who were misidentified. Forced-choice dilemmas represent situations in which others deny multiracial people the opportunity to indicate their multiple racial identities. Thus, forced-choice experiences should predict poorer psychological health among those who identify as multiracial.

To our knowledge, only one study (Townsend, Markus, & Bergsieker, 2009) has examined this type of identity denial among multiracial people. Townsend et al. manipulated the race question on a survey with one multiracial group randomly assigned to receive the race question with the directions and restrictions to "check only one box," while another group was allowed to "check all that apply." The researchers found that multiracial people who were forced to check only one box showed lower state performance self-esteem, poorer performance on an achievement word-search task, and less self-efficacy in possible future selves and were more likely to reassert their multiracial identity later, as compared to those in the "check all that apply" condition.

Based on these new findings, experiencing frequent forced-choice dilemmas should relate to greater depressive symptoms because of the tendency for forced-choice dilemmas to cause negative feelings about the self. In addition, others imposing forced-choice dilemmas on multiracial people should affect depressive symptoms because these experiences restrict multiracial people's personal feelings about the freedom they generally have in any situation to identify how they want (i.e., lower identity autonomy). Townsend et al. (2009) suggested that multiracial people in forced-choice scenarios may feel a lack of control in their environments. Lacking racial autonomy could explain why, when given the opportunity, multiracial people reassert their multiracial identity after forced-choice situations (Townsend et al., 2009). In the present study, we examine whether forced-choice scenarios will predict feeling less autonomy with regard to how one identifies racially.

Forced-choice dilemmas may also send the message that one's multiracial background is unacceptable and devalued (i.e., lower public regard). Thus, forced-choice dilemmas are expected to predict greater depressive symptoms through lower public regard and lower identity autonomy. Although the study is correlational in nature, previous work showing that forced-choice dilemmas and identity denial (e.g., Townsend et al., 2009) cause negative mood, lower state self-esteem, and lower self-efficacy about the future provide support for the hypothesized causal paths in the model (see Figure 1).

Racial Autonomy

Autonomy generally refers to the feeling that one's actions are freely chosen, authentic expressions of the self (Deci & Ryan, 1995). In the present

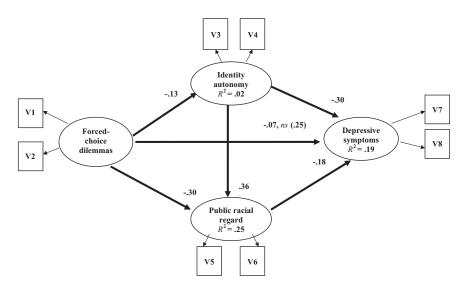


Figure 1. Hypothesized structural model. Squares represent indicators of the underlying factors. Circles represent factors. All betas are significant at p < .05, unless otherwise noted. Betas in parentheses were derived from direct-effects analyses.

study, *racial identity autonomy* refers to the extent to which multiracial people feel as though they can choose their racial identification freely. Unlike forced-choice dilemmas, which refer to external situations in which multiracial people are not allowed to indicate their multiple identities, racial identity autonomy refers to global, internal feelings about the extent to which an individual feels personal control and freedom over his or her identity choices. Root (1996) argued that a sense of racial autonomy among multiracial people is paramount in healthy multiracial identity development, yet this contention has never been measured empirically. Feeling the freedom to express one's racial identity may make the experience of being multiracial and attitudes toward one's racial identity more positive.

A well-developed literature has explored the necessity of autonomy in healthy psychological adjustment (for a review, see Deci & Ryan, 2000). Researchers have proposed that autonomy is important for many reasons. Autonomy provides individuals with a sense of control and mastery over their lives and decisions (Deci & Ryan, 1985). Multiracial people who have racial autonomy feel a greater sense of control over their identity expression. Autonomy allows for people to express their true selves and desires authentically, which can make people feel more related and connected to others because their relationships feel more authentic (Hodgins, Koestner, & Duncan, 1996). Because of the numerous benefits of autonomy for health and identity, as well as Root's (1996) contention about the importance of racial identity autonomy for multiracial people, racial autonomy should foster multiracial public regard and psychological health among multiracial people (see Figure 1).

Multiracial Public Regard

Racial minorities and women tend to report lower public regard for their identities than do members of valued groups, suggesting that they believe others generally devalue their identities more (Crocker, Luhtanen, Blaine, & Broadnax, 1994; Katz, Joiner, & Kwon, 2002). Perceptions of public regard may essentially serve as a proxy of the degree to which devalued group members are aware of their stigmatization. When multiracial people encounter a form that allows them to check only one box for their racial identity, they may interpret this situation as evidence that multiracial people are either impermissible or undesirable in society. When someone asks a multiracial person to choose one identity, this situation may suggest that the perceiver is either refuting or disapproving of multiracial identification. Thus, greater forced-choice dilemma experiences are expected to predict lower perceptions of public regard for their multiracial identity. In addition, lower public regard is expected to predict greater symptoms of depression (see Figure 1).

We found no previous empirical work that has examined the link between public regard and psychological well-being for multiracial people. However, several studies have examined these constructs among racial minorities and women. While public regard does not often predict the self-worth of devalued group members (for further discussion, see Crocker & Major, 1989), lower public regard does predict anxious mood, psychological distress, and depressive symptoms among women and African Americans (Katz et al., 2002; Katz, Swindell, & Farrow, 2004; Sellers, Caldwell, Schmeelk-Cone, & Zimmerman, 2003). Thus, perceptions of public regard are expected to predict depressive symptoms (see Figure 1). In addition, multiracial people who perceive their environments as accepting (i.e., high public regard) should also feel greater feelings of identity autonomy because feeling that multiple racial identities are valued and acceptable may allow multiracial people to experiment with how they will identify racially.

The Present Study

The present study examines the links between forced-choice dilemma experiences, depressive symptoms, multiracial public regard, and identity autonomy. This study represents the first model of the relationship between these variables. Because no previous work has examined self-reported forced-choice dilemmas, it was necessary to create items to assess the experience of forced-choice dilemmas. The items were based on previous qualitative and theoretical accounts of forced-choice dilemmas (e.g., Hall, 1992; Nakashima, 1992; Sebring, 1985; Standen, 1996). Several hypotheses are proposed, utilizing structural equation modeling (see Figure 1):

Hypothesis 1. Forced-choice dilemmas will predict depressive symptoms.

Hypothesis 2. Forced-choice dilemmas will predict lower multiracial public regard and lower identity autonomy.

Hypothesis 3. Lower public regard and lower identity autonomy will predict greater symptoms of depression, which will fully mediate the original relationship between forced-choice dilemmas and depressive symptoms (Baron & Kenny, 1986).

Hypothesis 4. Greater public regard will foster greater identity autonomy.

The current project reports on an Internet-based convenience sample of self-identified multiracial people. Although some debate has surrounded the treatment of a multiracial population as a group, growing research has suggested that multiracial people have common experiences based on their multiracial backgrounds (Root, 1992, 1996), which necessitates examining their collective experiences as multiracial people. However, some comparisons within the multiracial population were conducted when sample sizes allowed.

Method

Participants

Study participants were 317 individuals (57 males, 260 females) who completed an Internet survey over a 3-month period (July 2006 to October 2006) as part of a larger project on multiracial life and experiences. Participants were recruited primarily through the Mavin FoundationTM and Swirl BostonTM, which are dedicated to serving the multiracial community. All participants had biological parents of different backgrounds and self-identified as multiracial. Participants ranged in age from 18 to 62 years (M = 29.1 years, SD = 9.2).

Demographic Information

Participants were asked to report their personal racial identity, as well as that of their biological parents. They were allowed to indicate more than one racial identity of the six Census options $(1 = White; 2 = Black \ or \ African$ American; $3 = American \ Indian \ or \ Alaska \ Native; 4 = Asian \ including \ Asian \ Indian, \ Chinese, \ Filipino, \ Japanese, \ Korean, \ Vietnamese, \ and \ other \ Asian; 5 = Native \ Hawaiian, \ Guamanian, \ Chamorro, \ Samoan \ or \ other \ Pacific \ Islander; 6 = Other). In addition, participants were asked to indicate whether or not they were Hispanic or Latino. Hispanic/Latino was considered a racial category for the present study.$

In total, the sample included 24 different racial combinations. There were 30% who indicated an Asian/White background, 22% indicated a Black/White heritage, 11% indicated a Black/American Indian/White background, 6% indicated a Latino/White background, and 5% indicated an American Indian/White background. The rest of the participants were of other multi-racial backgrounds.

Participants reported the highest educational attainment on a 4-point scale ranging from 0 (*high school completed*) to 6 (*Ph.D., M.D., Psy.D.* or *equivalent*). The median score was 3, indicating completion of college. The sample was drawn largely from the United States, with 92% of the sample indicating that they currently lived in the U.S and 83% having been born in the U.S. Exclusion of non-U.S. participants did not alter the results. Of those living in the U.S., most participants lived in the Northwest (49%), Northeast (30%), or Southwest (15%), while only 7% and 5% lived in the Southeast and Southwest, respectively.

Materials

Forced-choice dilemmas. Forced-choice dilemmas were assessed with three questions, which were rated on a 7-point scale ranging from 1 (*strongly disagree*) to 7 (*strongly agree*). The items showed strong internal consistency ($\alpha = .82$). A sample item is "People have often told me that I should identify with one racial identity over another."

Depressive symptoms. Depressive symptoms were assessed using an abbreviated 10-item version of the Center for Epidemiological Studies Depression scale (CES-D; Radloff, 1977). The final measure was an average of the responses and had strong reliability ($\alpha = .88$). Participants indicated their frequency of depressive symptoms on a 4-point scale ranging from 1 (rarely or none of the time, less than once a day) to 4 (most or all of the time, 5–7 days/wk). The mean score was 1.67 (SD = 0.63) suggesting that the

sample was, on the whole, well within the range for normal; that is, not clinically depressed.

Racial autonomy. Racial autonomy was measured with two items that were adapted from previously used scales of relationship autonomy (LaGuardia, Ryan, Couchman, & Deci, 2000). Participants indicated their agreement with the following statements on a 7-point scale ranging from 1 (*strongly disagree*) to 7 (*strongly agree*): "I feel free to racially identify however I want"; and "I feel that I decide how I want to racially identify." The scale was reliable for the entire sample ($\alpha = .83$). The mean score was 5.86 (*SD* = 1.20).

Multiracial public regard. Multiracial public regard was measured with four items that were obtained from private regard subscales from the Collective Self-Esteem Scale–Race Version (CSE-R; Luhtanen & Crocker, 1992). The scale was modified such that items measure favorability toward one's multiracial background. A sample item is "Overall, multiracial people are considered good by others." Participants were asked to indicate their agreement with the four items on a 7-point scale ranging from 1 (*strongly disagree*) to 7 (*strongly agree*). The mean score was 5.03 (*SD* = 1.22), and the scale was reliable ($\alpha = .76$).

Results

Table 1 shows the zero-order correlations between the variables of interest. All correlations were in the expected direction. While the sample consisted of a disproportionate number of women to men because of the tendency for women to be more likely to volunteer, no gender differences were found on the variables of interest (see Table 2).

Table 1

Correlation Coefficients From the Measurement Model	Correlation	Coefficients	From	the	Measurement	Model
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Variable	1	2	3
1. Forced-choice dilemmas			
2. Racial autonomy	13*		
3. Public regard	34**	.40**	
4. Depressive symptoms	.18*	38**	33**

p < .05. p < .01.

Table 2

	Women		Men			
	М	SD	М	SD	Cohen's d	t
Forced-choice dilemmas	4.92	1.54	4.89	1.54	.02	-0.11
Racial autonomy	5.93	1.15	5.70	1.32	.19	-1.29
Public regard	5.05	1.23	4.86	1.11	.16	-1.01
Depressive symptoms	1.65	0.63	1.76	0.67	17	1.07

Statistics for Study Variables

Note. N = 317 (260 women, 57 men). All of the scales ranged from 1 to 7, with higher scores indicating higher levels of the construct.

Notably, there was a direct, significant positive relationship between forced-choice dilemmas and depressive symptoms. The largest groups (n > 15) of respondents were of Asian/White (n = 94), Latino/White (n = 19), American Indian/White (n = 19), Black/White (n = 69), and Black/White/ American Indian (n = 36) descent. ANOVA reveals that the multiracial groups differed on the frequency of their forced-choice dilemma experiences. F(4, 234) = 4.08, p < .01; and public regard, F(4, 227) = 6.12, p < .001.Follow-up Tukey tests reveal that people of Asian/White descent reported fewer forced-choice dilemmas (M = 4.52, SD = 1.67) than did people of Black/White (M = 5.32, SD = 1.60, p < .05) and of Black/American Indian/ White multiracial descent (M = 5.56, SD = 1.68, p < .05). In addition, people of White/Asian descent (M = 5.32, SD = 1.23) perceived higher public regard for their multiracial identity than did people of Black/American Indian/ White multiracial descent (M = 4.63, SD = 1.29, p < .01) and of American Indian/White descent (M = 3.94, SD = 1.22, p < .001). People of American Indian/White descent had lower public regard scores than did people of Black/White descent as well (M = 5.03, SD = 1.16, p < .01).

To test the a priori prediction that forced-choice dilemmas would predict depressive symptoms through lower identity autonomy and public regard, we tested the model shown in Figure 1 using structural equation modeling (SEM). SEM provides the simplest test to examine whether identity autonomy and public regard would mediate the link between forced-choice scenarios and depressive symptoms. In accordance with SEM, using EQS software (Raykov, Tomer, & Nesselroade, 1991), the following goodness-of-fit indexes were reported: χ^2/df , non-normed fit index (NNFI), and comparative fit (CFI). Acceptable fit indexes exceed .95 (Bentler & Bonett, 1980; Raykov et al., 1991). The root mean square error of approximation

(RMSEA) was also reported. RMSEA misfit indexes should be at or below .06 (Hu & Bentler, 1999) to indicate a model with a good fit. Chi square was used to compare between the hypothesized and alternative models.

In the structural models, each corresponding survey item served as an indicator for forced-choice dilemmas, identity autonomy, and public regard. Because the depression measure had several items, the measure was randomly parceled into two indicators. Parceling is a common procedure that is used when factors have several items and the sample size is small.

Before testing the fit of SEMs, it is important to test how well the indicators relate to the latent variables in a measurement model. Measurement models do not include any direct paths between factors, but instead essentially test a confirmatory factor analysis of all the latent variables in the model linked by covariances (Kline, 2005). The measurement model fit the data well (see Table 3). Thus, the SEM was tested.

The direct link between forced-choice dilemmas and depressive symptoms was tested within a nested model, excluding the paths from identity autonomy and public regard to depressive symptoms. The nested model confirms the correlational analyses; forced-choice dilemmas predicted greater depressive symptoms ($\beta = .25$; see Table 3). The hypothesized structural model (shown in Figure 1) fit the data well and was a better fit to the data than was the nested direct-effects model (see Table 3).

Table 3

Model	χ^2	df	RMSEA
Measurement model	54.93*	39	.04
Nested direct-effects model	329.00***	41	.16
Hypothesized structural model	54.93*	39	.04
Alternative Model 1: Outcome- mediator reversed	72.89**	40	.06
Alternative Model 2: Outcome— forced-choice dilemmas	128.32***	43	.09
Alternative Model 3: Predictors— identity autonomy and public regard	122.79***	43	.08

Fit Statistics and Chi-Square Comparisons for All Models

Note: Each row represents the structural model performed. Normed fit index, nonnormed fit index, and comparative fit index were 1.00 for all models. RMSEA = root mean square error of approximation. *p < .05. **p < .01. ***p < .001.

As expected, forced-choice dilemmas predicted lower identity autonomy and lower public regard, which both, in turn, predicted depressive symptoms. As predicted, the original link between forced-choice dilemmas and depressive symptoms was no longer significant when the paths from autonomy and public regard to depression were included. This model accounted for 19% of the variance in depressive symptoms and 25% of the variance in public regard among the multiracial respondents.

Several plausible alternative structural models were tested and compared to the hypothesized model (see Table 3). Alternative Model 1 tested a model with depressive symptoms as the mediator of the relationship between forced-choice dilemmas and identity autonomy, and the relationship between forced-choice dilemmas and public regard (see Figure 2). Comparing the chi-square statistics, the hypothesized model was a better fitting model than was Alternative Model 1, $\chi^2(1) = 17.96$, p < .001.

Alternative Model 2 tested a model with depressive symptoms, public regard, and identity autonomy as simultaneous predictors of forced-choice dilemmas (see Figure 3). Comparing the chi-square statistics, the hypothesized model was a better fitting model than was Alternative Model 2, $\chi^2(4) = 73.39$, p < .001.

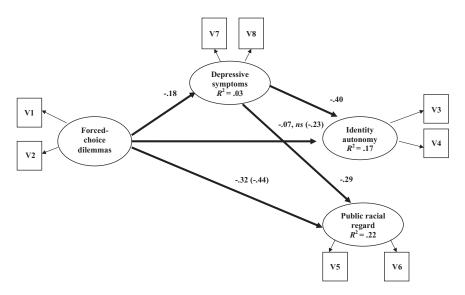


Figure 2. Alternative Model 1. Squares represent indicators of the underlying factors. Circles represent factors. All betas are significant at p < .05, unless otherwise noted. Betas in parentheses were derived from direct-effects analyses.

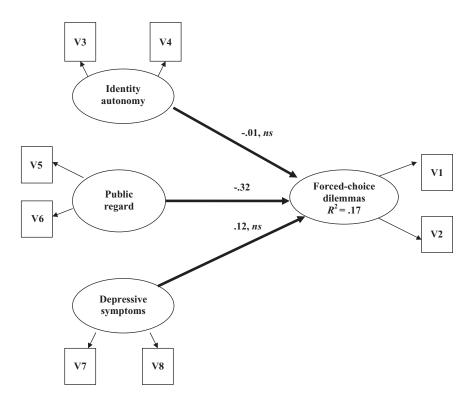


Figure 3. Alternative Model 2. Squares represent indicators of the underlying factors. Circles represent factors. All betas are significant at p < .05, unless otherwise noted. Betas in parentheses were derived from direct-effects analyses.

Alternative Model 3 tested a model with public regard and identity autonomy as predictors of forced-choice dilemmas, and forced-choice dilemmas as the sole predictor of depressive symptoms (see Figure 4). Comparing the chi-square statistics, the hypothesized model was a better fitting model than was Alternative Model 2, $\chi^2(4) = 67.86$, p < .001. While these results support the hypotheses, the data are correlational; thus, no causal conclusions can be made.

Discussion

The results of this study are consistent with our predictions. Notably, forced-choice dilemmas were significantly correlated with greater depressive symptoms. However, this relationship appears to have been driven by lower

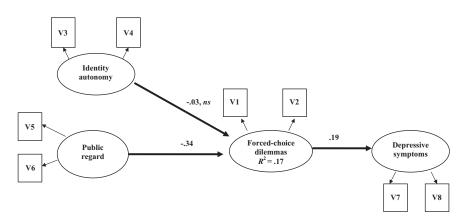


Figure 4. Alternative Model 3. Squares represent indicators of the underlying factors. Circles represent factors. All betas are significant at p < .0,5 unless otherwise noted. Betas in parentheses were derived from direct-effects analyses.

public regard and identity autonomy. Specifically, forced-choice dilemmas predicted perceiving greater disapproval for one's multiracial background and overall feelings of restriction with one's racial identity choices. In addition, having greater positive public regard afforded multiracial people more identity autonomy. Although the data were correlational in nature, these causal paths are consistent with previous work on identity denial (Cheryan & Monin, 2005) and forced-choice dilemmas (Townsend et al., 2009), suggesting that denying people identities causes negative self-views and moods.

One reason why negative mood may result in situations of denial is that denying people's identities or forcing them into specific identities may restrict their global feelings of identity autonomy and send the message that certain identities are devalued. This study is an important step in understanding the experience for multiracial people and why forced-choice dilemmas may be psychologically problematic.

Forced to Choose

The present study provides preliminary evidence regarding some of the psychological processes at play that may cause negative mood among multiracial people when they encounter forced-choice dilemmas (Townsend et al., 2009). Notably, the present study suggests that Black multiracial people may encounter greater forced-choice dilemmas than people of an Asian multiracial background. This is not surprising, given the historical treatment of Black identity and heritage.

The one-drop rule, which has long governed the treatment of mixed-race Black people in the U.S., suggests that any person with any fraction of Black heritage in their blood is considered to be Black (Hickman, 1997; Spickard, 1992). Because of the long history of the one-drop rule regarding mixed-race Black people, many Black multiracial people may be told to identify themselves as Black. Their parents and peers may advise them to do so because the world will see them as Black. People outside the Black community may reinforce this by seeing and treating people of Black mixed-race backgrounds as Black. Thus, people of Black mixed-race descent may experience the most forced-choice dilemmas because others expect them to identify as Black, not multiracial. Future studies should further explore which multiracial groups experience the most forced-choice dilemmas and resistance to multiracial labels to understand why certain communities and belief systems may be more likely to put specific subgroups of multiracial people in forced-choice scenarios.

It is important to note that while Black multiracial people may have reported greater forced-choice scenarios, they did not report the greatest symptoms of depression, suggesting that they may have adopted some strategies that buffer them against the negative effects of forced-choice dilemmas. Future studies should examine whether attributing forced-choice dilemmas to prejudice against multiracial people may, over time, ameliorate the negative effects of these situations. Previous work on racial minorities has suggested that attributing mistreatment to prejudice can buffer minorities from the psychological effects of mistreatment and rejection (Crocker & Major, 1989; Sellers et al., 2003; Sellers & Shelton, 2003). An alternative explanation for why greater forced-choice scenarios may not translate into greater depressive symptoms is that Black multiracial people may have multiracial identities that are less salient; thus, forced-choice scenarios carry less negative connotations.

Identity Autonomy

No prior research was found examining identity autonomy in multiracial people. Thus, the present study stands to make an important contribution regarding the importance of identity autonomy for multiracial people.

Evidence was found that public regard contributes to greater identity autonomy and that greater identity autonomy predicts greater psychological health. This finding is consistent with several other studies demonstrating the widespread psychological benefits of fostering autonomy (e.g., Deci & Ryan,

2000; Hodgins, et al., 1996; Reis, Sheldon, Gable, Roscoe, & Ryan, 2000). Because multiracial people have several identity choices and often change their racial identification (Harris & Sim, 2002; Hitlin, Brown, & Elder, 2006), autonomy with regard to these choices is paramount. These findings support Root's (1996) contention that racial autonomy is an important aspect of healthy multiracial identity development. For example, Root developed a Multiracial Bill of Rights to underscore how multiracial people should be treated. Included among these rights is the right for multiracial people to identity however they want (Root, 1996).

The results of the present study are important in empirically demonstrating the links between identity autonomy and psychological health. Because autonomy also has benefits for sustaining satisfying relationships with others (Hodgins et al., 1996), identity autonomy may also foster positive intra- and interrelationships between multiracial people and racially similar and dissimilar others.

Public Regard

An important additional mechanism through which forced-choice scenarios relate to higher depressive symptoms is public regard. Although the present data were correlational, it seems likely that forced-choice dilemmas could cause people to perceive their multiracial identity to be devalued or unacceptable. Thus, when multiracial people encounter race questions on college applications, scholarship forms, employment equal-opportunity assessments, and other national public assessments of the demography of the U.S. that allow an individual to check more than one box, this simple adjustment may send the clear message that the multiracial community is visible and valued.

The political movement within the multiracial community has already lobbied successfully for changes in public policy regarding national demographic assessments that previously did not allow for multiple racial identities (e.g., U.S. Census, National Center for Education Statistics). The present study provides empirical support for changes to any public policies that disallow multiracial people to check more than one box. According to the present study's findings, failure to do so may further stigmatize the multiracial community with negative psychological repercussions.

Study Limitations

Because the study was correlational and based on self-reported Internet data, several limitations apply. Future studies should use experimental

techniques to examine the causal paths to the proposed mediators (i.e., identity autonomy, public regard). In addition, self-report measures are vulnerable to socially desirable responding. Moreover, we had a disproportionate number of women to men. Thus, it is unclear whether this model holds reliably for men. In addition, the Internet sample was selective because participants were members of multiracial organizations. Thus, participants in the study were likely strongly identified with their multiracial backgrounds.

Forced-choice dilemmas will certainly affect those who identify highly with their multiracial identity, more than those who choose single-race identities or who are less identified with their multiracial identity. For those who choose single-race identities (e.g., Black multiracial people who identify solely as Black), being asked to choose one racial identity may not represent a dilemma. However, forced-choice situations may still send the message that multiracial identities are devalued, but public regard for one's multiracial background may have little effect on the health of single-race-identified multiracial populations.

Moreover, participants from multiracial organizations are likely politically and culturally involved with the multiracial community, which means that their multiracial identity is very salient to them. These results may be limited primarily to those multiracial people for whom their multiracial identity is salient. For example, public regard for their multiracial group may be more important to those with salient multiracial identities than other multiracial people. Follow-up studies should examine whether support is found for the model in the current study among more representative multiracial samples and should include identification as well as salience as possible moderators.

The present study represents an imperative preliminary exploration of how forced-choice dilemmas may affect depressive symptoms. Identity autonomy and multiracial public regard emerged as two important variables mediating these relationships. Because multiracial people have an uncommon number of racial identity choices and do not fit into the typical understanding of race and color lines in the U.S., there are many unique challenges associated with being multiracial in today's society. However, multiracial people vary in the degree to which they experience these challenges and how they cope with them. Research on multiracial identity should focus on identifying the challenges and benefits of multiracial identity to promote psychological wellness among rapidly growing multiracial communities.

References

Baron, R. M., & Kenny, D. A. (1986). The moderator-mediator variable distinction in social psychological research: Conceptual, strategic, and statistical considerations. *Journal of Personality and Social Psychology*, *51*, 1173–1182.

- Barreto, M., & Ellemers, N. (2002). The impact of respect versus neglect of self-identities on identification and group loyalty. *Personality and Social Psychology Bulletin*, 28, 629–639.
- Bentler, P. M., & Bonett, D. G. (1980). Significance tests and goodness of fit in the analysis of covariance structures. *Psychological Bulletin*, 88, 588–606.
- Bosson, J. K., Prewitt-Freilino, J. L., & Taylor, J. N. (2005). Role rigidity: A problem of identity misclassification? *Journal of Personality and Social Psychology*, 89, 552–565.
- Bosson, J. K., Taylor, J. N., & Prewitt-Freilino, J. L. (2006). Gender role violations and identity misclassification: The roles of audience and actor variables. Sex Roles, 55, 13–24.
- Cheryan, S., & Monin, B. (2005). "Where are you really from?" Asian Americans and identity denial. *Journal of Personality and Social Psychology*, 89, 717–730.
- Crocker, J., Luhtanen, R., Blaine, B., & Broadnax, S. (1994). Collective self-esteem and psychological well-being among White, Black, and Asian college students. *Personality and Social Psychology Bulletin*, 20, 503–513.
- Crocker, J., & Major, B. (1989). Social stigma and self-esteem: The selfprotective properties of stigma. *Psychological Review*, 96, 608–630.
- Deci, E. L., & Ryan, R. M. (1985). *Intrinsic motivation and self-determination in human behavior*. New York: Plenum.
- Deci, E. L., & Ryan, R. M. (1995). Human autonomy: The basis for true self-esteem. In M. H. Kernis (Ed.), *Efficacy, agency, and self-esteem* (pp. 31–49). New York: Plenum.
- Deci, E. L., & Ryan, R. M. (2000). The "what" and "why" of goal pursuits: Human needs and the self-determination of behavior. *Psychological Inquiry*, *11*, 227–268.
- Gaskins, P. (1999). What are you? Voices of mixed-race young people. New York: Holt & Co.
- Gillem, A. R., Cohn, L. R., & Throne, C. (2001). Black identity in biracial Black/White people: A comparison of Jacqueline who refuses to be exclusively Black and Adolphus who wishes he were. *Cultural Diversity and Ethnic Minority Psychology*, 7, 182–196.
- Hall, C. C. (1992). Please choose one: Ethnic identity choices for biracials. In M. P. P. Root (Ed.), *Racially mixed people in America* (pp. 250–264). Newbury Park, CA: Sage.
- Harris, D. R., & Sim, J. J. (2002). Who is multiracial? Assessing the complexity of lived race. *American Sociological Review*, 67, 614–627.

- Herman, M. (2004). Forced to choose: Some determinants of racial identification in multiracial adolescents. *Child Development*, 75, 730–748.
- Hickman, C. B. (1997). The devil and the one-drop rule: Racial categories, African Americans, and the U.S. Census. *Michigan Law Review*, 95, 1175–1176.
- Hitlin, S., Brown, J. S., & Elder, G. H., Jr. (2006). Racial self-categorization in adolescence: Multiracial development and social pathways. *Child Development*, 77, 1298–1308.
- Hodgins, H. S., Koestner, R., & Duncan, N. (1996). On the compatibility of autonomy and relatedness. *Personality and Social Psychology Bulletin*, 22, 227–237.
- Hu, L., & Bentler, P. M. (1999). Cutoff criteria for fit indexes in covariance structure analysis: Conventional criteria versus new alternatives. *Structural Equation Modeling*, 6, 1–55.
- James A. D., & Tucker M. B. (2003). Racial ambiguity and relationship formation in the United States: Theoretical and practical considerations. *Journal of Social and Personal Relationships*, 20, 153–169.
- Katz, J., Joiner, T., & Kwon, P. (2002). Membership in a devalued social group and emotional well-being: Testing a model of personal self-esteem, collective self-esteem, and group socialization. Sex Roles, 47, 419–431.
- Katz, J., Swindell, S., & Farrow, S. (2004). Effects of participation in a first women's studies course on collective self-esteem, gender-related attitudes, and emotional well-being. *Journal of Applied Social Psychology*, 34, 2179– 2199.
- Kline, R. B. (2005). *Principles and practice of structural equation modeling*. New York: Guilford.
- LaGuardia, J. G., Ryan, R. M., Couchman, C. E., & Deci, E. L. (2000). Within-person variation in security of attachment: A self-determination theory perspective on attachment, need fulfillment, and well-being. *Journal of Personality and Social Psychology*, 79, 367–384.
- Lemay, E. P., & Ashmore, R. D. (2004). Reactions to perceived categorization by others during the transition to college: Internalizaton of selfverification processes. *Group Processes and Interpersonal Relations*, 7, 173–187.
- Logan, S. L. (1981). Race identity and Black children: A developmental perspective. Social Casework, 62, 47–56.
- Luhtanen, R., & Crocker, J. (1992). A collective self-esteem scale: Selfevaluation of one's social identity. *Personality and Social Psychology Bulletin*, 18, 302–318.
- Nakashima, C. L. (1992). An invisible monster: The creation and denial of mixed-race people in America. In M. P. P. Root (Ed.), *The multiracial*

experience: Racial borders as the new frontier (pp. 162–180). Thousand Oaks, CA: Sage.

- Omi. M., & Winant, H. (1986). Racial formation in the United States: From the 1960's to the 1980's. Boston: Routledge.
- Radloff, L. S. (1977). The CES-D Scale: A self-report depression scale for research in the general population. *Applied Psychological Measurement*, 1, 385–401.
- Raykov, T., Tomer, A., & Nesselroade, J. R. (1991). Reporting structural equation modeling results in *Psychology and Aging*: Some proposed guidelines. *Psychology and Aging*, 6, 499–503.
- Reis, H. T., Sheldon, K. M., Gable, S. L., Roscoe, J., & Ryan, R. (2000). Daily well-being: The role of autonomy, competence, and relatedness. *Personality and Social Psychology Bulletin*, 26, 419–435.
- Renn, K. A. (2009). Educational policy, politics, and mixed heritage students in the United States. *Journal of Social Issues*, 65, 165–183.
- Rockquemore, K. A., & Brunsma, D. L. (2002a). *Beyond Black: Biracial identity in America*. Thousand Oaks, CA: Sage.
- Rockquemore, K. A., & Brunsma, D. L. (2002b). Socially embedded identities: Theories, typologies, and processes of racial identity among Black/ White biracials. *Sociological Quarterly*, 43, 335–356.
- Root, M. P. P. (1992). *Racially mixed people in America*. Newbury Park, CA: Sage.
- Root, M. P. P. (1996). The multiracial experience: Racial borders as a significant frontier in race relations. In M. P. P. Root (Ed.), *The multiracial experience: Racial borders as the new frontier* (pp. xiii–xxviii). Thousand Oaks, CA: Sage.
- Sebring, D. L. (1985). Considerations in counseling interracial children. Journal of Non-White Concerns in Personnel and Guidance, 13, 3–9.
- Sellers, R. M., Caldwell, C. H., Schmeelk-Cone, K. H., & Zimmerman, M. A. (2003). The role of racial identity and racial discrimination in the mental health of African American young adults. *Journal of Health and Social Behavior*, 44, 302–317.
- Sellers, R. M., & Shelton, J. N. (2003). The role of racial identity in perceived racial discrimination. *Journal of Personality and Social Psychology*, 84, 1079–1092.
- Shih, M., & Sanchez, D. T. (2005). Perspectives and research on the positive and negative implications of having multiple racial identities. *Psychological Bulletin*, 131, 569–591.
- Spickard, P. R. (1992). The illogic of American racial categories. In M. P. P. Root (Ed.), *Racially mixed people in America* (pp. 12–23). Newbury Park, CA: Sage.

- Standen, B. C. (1996). Without a template: The biracial Korean/White experience. In M. P. P. Root (Ed.), *The multiracial experience: Racial borders as the new frontier* (pp. 245–262). Newbury Park, CA: Sage.
- Swann, W. B., Jr. (1983). Self-verification: Bringing social reality into harmony with the self. In J. Suls & A. G. Greenwald (Eds.), *Psychological perspectives on the self* (Vol. 2, pp. 33–66). Hillsdale, NJ: Lawrence Erlbaum.
- Swann, W. B., Jr. (1990). To be adored or to be known: The interplay of self-enhancement and self-verification. In R. M. Sorrentino & E. T. Higgins (Eds.), *Foundations of social behavior* (Vol. 2, pp. 408–448). New York: Guilford.
- Swann, W. B., Jr., Pelham, B. W., & Krull, D. S. (1989). Agreeable fancy or disagreeable truth? How people reconcile their self-enhancement and selfverification needs. *Journal of Personality and Social Psychology*, 57, 782– 791.
- Swann, W. B., Jr., Rentfrow, P. J., & Guinn, J. (2002). Self-verification: The search for coherence. In M. Leary & J. Tagney (Eds.), *Handbook of self* and identity (pp. 33–66). New York: Guilford.
- Townsend, S. M., Markus, H. R., & Bergsieker, H. B. (2009). My choice, your categories: The denial of multiracial identities. *Journal of Social Issues*, 65, 183–202.