# The Effects of Skin Tone on the Perception of Discrimination in Young African American Women

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Abstract: This research focuses on the discriminatory experiences that young African American women in the American South report as a function of their actual and perceived skin tone. Participants (N = 76)were given the Pantone Skin Tone guide (Pantone, 2017) and asked to find the best color (varying on undertone and lightness) that matched closely to their skin tone. Following that, an experimenter identified participants' skin tone and they completed several questionnaires assessing perceived racism, discrimination, and self-esteem. Participants reported discrimination and biases that they regularly experience based on their skin tone and race. While qualitative data suggests that colorism does exist, the quantitative data did not establish a link between lightness of one's skin tone and levels of perceived discrimination. Individuals who reported a high frequency of experiencing racism in their lives also perceived their skin tone darker without the mirror than with it. This finding establishes a link between negative race-based experiences and one's self-perception of skin tone. While self-esteem did not moderate or mediate the skin tonediscrimination relationship, it was strongly related to reports of racism and colorism.

*Keywords:* colorism, racism, discrimination, skin tone, young African American women.

This research project focuses on colorism, a form of racism when individuals with darker skin tones are discriminated against by others including in-group members of the same race (Colorism, 2017). This is an important issue that is global; every nationality is negatively impacted by the effects of colorism (Howard, 2011; Quiros & Dawson, 2013; strmic-pawl et al., 2021). This is seen in social media and excessive skin bleaching (Adbi et al., 2021; Duke & Berry, 2011; strmic-pawl et al., 2021; Vijaya, 2019). Our work investigates the experiences that young African American women report (i.e., perceived discrimination in various spheres of life, including health care settings) as a function of their actual and perceived skin tone.

No peer-reviewed studies, to our knowledge, have assessed both actual and perceived skin tones in Black American women using an objective measure such as the Pantone Skin Tone guide (Pantone, 2017, but see Chen et al., 2019 that employed this measure for perceived self-evaluations in Chinese Americans). This research was conducted by utilizing a skin tone guide that has one hundred and ten shades and is designed to cover a wide range of skin tones. Using a skin tone guide to match the participant's skin is more likely to lessen bias amongst participants (Dent et al., 2020). The identification of the skin tone is the foundation of this research, because the participant's and

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researcher's choice of skin tone was compared and related to perceived discrimination levels reported by the participant. In addition to the Skin Tone Guide comparison, the participants completed several research questionnaires assessing their socioeconomic status, self-esteem, and perceived discrimination. The goal of this work was to assess the effects of skin tone on perceived discrimination and identify potential moderators of this relationship, such as self-esteem.

#### **Literature Review**

### Colorism

Alice Walker, a novelist and poet, first described colorism as the "prejudicial or preferential treatment of same-race people based solely on their color" (Walker, 1983, p. 290). Colorism has affected individuals internationally with the growth of skin bleaching and self-hatred within various ethnic groups (Howard, 2011; Quiros & Dawson, 2013). Colorism is identified as an ethnic taboo in which those who suffered may be unaware of its effects (Hall, 2020). Research has been conducted on colorism in children, teenagers, young adults, adults, and families (Blake et al, 2017; Bryant, 2013; Howard, 2011; Rosario et al., 2021). According to several studies, individuals with lighter complexions become wealthier and receive advanced college degrees on more occasions than those with darker skin tones (for review, see Hunter, 2007). Even though colorism is observed within a racial group when members of the same group (e.g., African Americans) hold negative attitudes and stereotypes toward ingroup members with darker skin tones, it also occurs amongst different ethnicities (Howard, 2011; Hunter, 2007). For example, any individual may subconsciously favor lighter skin tones over darker skin tones without realizing it, because he or she is not discriminating based on race alone (Hunter, 2007).

Colorism is especially prominent in the African American community; this concept originated after the creation of slavery in the United States (Reece, 2018) and continued with the growth of racial discrimination into today's world (Bryant, 2013; Fultz, 2013; Hunter, 2007). Colorism has negatively affected the various aspects of life of African Americans and other ethnic/racial groups. Colorism has contributed to low self-esteem, low self-confidence, self-hatred, excessive skin bleaching, familial issues, poorer physical and mental health outcomes, and other various economic, educational and political disadvantages in African Americans (Bryant, 2013; Duke & Berry, 2011; Foy & Ray, 2019; Hall, 2020; Howard, 2011; Hunter, 2007; Keyes et al., 2020; Njeri, 1988; Oh et al., 2021; Quiros & Dawson, 2013).

There is a strong preference for light skin tones in today's society which can be seen in media, such as advertisements and social media throughout the world (Dixon & Telles, 2017). Various studies (e.g., Adbi et al., 2021; strmic-pawl et al., 2021; Thomas et al., 2011; Vijaya, 2019; Wallace et al., 2011) have been conducted to analyze the societal beauty standards and the impact of those standards in several countries and nations (e.g., Japan, United States, India, several Middle Eastern countries, Jamaica, and several African countries).

American beauty standards have a greater impact on African American women than on Caucasian women (Bryant, 2013). Because of colorism, beauty is equated with having a lighter skin tone, curly or straight hair, and other Eurocentric features (Bryant, 2013; Duke & Berry, 2011; Fultz, 2013). Fultz (2013) found that individuals who represent the previously mentioned category were seen in advertisements on more occasions than the individuals who have a darker skin tone and a kinkier hair texture during the mid to late twentieth century. Even though advertisements are becoming more inclusive, color bias is still present within media and in American beauty standards.

Colorism is also acquired by children (Bryant, 2013; Duke & Berry, 2011) and adolescents (Abrams et al., 2020; Brown et al., 2021) through interactions with family members and their local communities but primarily their parents during the early ages. Some parents were heavily impacted by color bias. During the parents' childhoods, they received preferential treatment from African American and Caucasian communities unlike darker skinned individuals; they wanted their light skin tone feature to stay within the family (Abrams et al., 2020; Duke & Berry, 2011; Wilder & Cain, 2010). Thus, they married other individuals who had a fair skin tone similar to them. Once these individuals produce offspring, the parents pushed their children to continue the cycle of wanting to produce more fair offspring. They continued this cycle since fair skin is equated with beauty, intelligence, and more advantages that darker skin tones do not experience (e.g., Bryant, 2013).

Colorism affects both men and women, but there are gender differences in how parents treat children based on skin tone (Landor & McNeil Smith, 2019; Landor et al., 2013): dark skinned males and light skinned females receive preferential treatment from the parents to counteract negative stereotypes associated with dark skinned males and light skinned females. Both groups receive preferential treatment by parents to prepare them for the future due to the possible negative perceptions that their skin tone may lead to, such as aggressiveness for dark skinned men and pompousness for light skinned females. Yet women are more negatively affected by color bias (e.g., Fultz, 2013) with African American women most influenced by the color bias concepts of family members, and African American most influenced by their immediate peers (e.g., Veras, 2016). African American women, more so than African American men, report that colorism negatively affects their lives (Lemi & Brown, 2020). Given especially negative consequences of colorism on women and contributions of beauty standards and familial influences on young adults, we decided to focus on the young college-age females in this work as our target population.

When a male or female perceives discrimination, that individual can cope with that level of stress in various ways. Some of the negative coping strategies can physically or mentally affect the body leading to health issues such as depression or anxiety for both men and women (e.g., Borrell et al., 2006; Pascoe & Richman, 2009). Yet the effects of colorism in *healthcare settings* are largely unexplored in psychological literature, even though there is some evidence that dark skin is associated with poorer outcomes in mental health (e.g., Oh et al., 2021; Williams & Williams-Morris, 2000) and physical health (e.g., Keyes et al., 2020; Landor & McNeil Smith, 2019; Monk, 2021; Sweet et al., 2007). Therefore, this study also addressed the effects of colorism in various settings, including healthcare.

#### Self-esteem

Researchers believe self-esteem operates as a protective factor to defend against stressful events (Crocker & Major, 1989; Dent et al., 2020; Dumont & Provost, 1999; Feng & Xu, 2014). According to Dumont and Provost (1999), individuals with higher self-esteem will react to the discrimination more positively by viewing it as a conflict that can be solved. Individuals with lower self-esteem will react to the discriminatory experience more personally by concentrating on the feelings. In other words, participants will either internalize or externalize their discriminatory experiences which will lead to lower self-esteem or higher self-esteem, respectfully (Crocker & Major, 1989). In addition, newer work has shown (e.g., Dent et al., 2020) that self-esteem can mediate the relationship between skin tone and self-reported mental and physical health. Therefore, this study also addresses the role of self-esteem in the relationship between skin tone and reported discrimination.

# The Current Study

This research study is unique; it employed the self-identification of skin tone by participants and the objective assessment of actual skin tone by an experimenter. The self-identification of each participant's skin tone and the objective identification of the participant's skin tone made by the researcher was achieved by utilizing the Pantone Skin Tone Guide. This skin tone guide permitted the participant and researcher to choose a shade with a unique undertone and level of lightness to best fit each participant's skin tone. We are only aware of one peer-reviewed study that used this measure for perceived self-evaluation in Chinese Americans, see Chen et al. (2019). Most prior studies assessed the perception of skin tone by utilizing general ratings such as "very dark or very light skinned" (e.g., Thompson & Keith, 2001), with one notable exception, when researchers measured the amount of light that reflects off the skin by utilizing spectrometers or reflectometers (e.g., Dent et al., 2020). In addition to the central focus of how skin tone affects everyday discriminatory experiences in young African American women in the American South (known for its racist history of slavery and segregation), this study is one of the first to test the effects of skin tone on perceived discrimination in healthcare settings. This study tested the following hypotheses that were based on our review of previous literature and application of innovative methodology:

*H*<sub>1</sub>: Participants would report discrimination based on skin tone and race.

 $H_2$ : Individuals with darker skin tone would report more experiences of race-based discrimination and colorism than individuals with lighter skin tone.

 $H_3$ : The discriminatory experiences would affect the participant's identification of their perceived (i.e., identified without mirror) skin tone.

*H*<sub>4</sub>: Self-esteem would moderate or mediate the relationship between perceived discriminatory experiences and skin tone.

Note that we did not specify specific mechanisms of the self-esteem influence on the relationship between skin tone and perceived discrimination. While there is evidence that self-esteem might explain why there is a relationship between skin tone and discrimination (see Dent et al., 2020), there is also a possibility that self-esteem might explain the strength of relationship between skin tone and perceived discrimination.

# Method

# **Participants**

Participants were 76 self-identified African American women ( $M_{age} = 20.29$ ;  $SD_{age} = 4.17$ , age range = 18-51 years old) who were college students at the University of XXX. The sample (n = 76) consisted of freshmen (n = 31; 40.8%), sophomores (n = 9; 11.8%), juniors (n = 20, 26.3%), and seniors (n = 16; 21.1%). Regarding ethnic identification, a large portion of the sample identified exclusively as African American (n = 73; 96.1%), while the rest identified as African American with additional racial/ethnic categories (n = 3; 3.9%). Those include the following: Asian, Native Hawaiian or another Pacific Islander, Hispanic or Latino, American Indian, and Caucasian. Participants also identified their sexual orientation. Most identified their sexual orientation as heterosexual (n = 58, 76.3%), followed by as homosexual (n = 4, 5.3%), bisexual (n = 4, 5.3%), or pansexual (n = 1, 1.3%). A portion of the participants did not respond to question concerning sexual orientation (n = 9; 11.8%). The rest of participant's demographics are reported in Table 1 including

parents'/guardians' education levels, parents' general skin complexions, and participants' general skin complexions. All skin tone measures reported in Table 1 are based upon self-reports in the demographic questionnaire.

# Table 1

Participants

	Ν	%
Parent's Combined Income		
Below \$25000	17	22.4
\$25,001-\$50000	21	27.6
\$50,001- \$75,000	22	28.9
\$75,001-\$100,000	13	17.1
\$100,000 +	2	2.6
Mother's Education	-	210
Less than high school	3	3.9
Some high school	3	3.9
High school	16	21.1
Some college	15	19.7
Associate's degree	15	19.7
Bachelor's degree	16	21.1
	10	14.5
Master's degree	1	
Doctoral degree	1	1.3
Father's Education	2	2.6
Less than high school	2	2.6
Some high school	7	9.2
High school	18	23.7
Some college	23	30.3
Associate's degree	13	17.1
Bachelor's degree	7	9.2
Master's degree	6	7.9
Doctoral degree	0	0
Participant's General Skin Tone		
<u>– reported on demographics</u>		
<u>questionnaire</u>		
Very Light	2	2.6
Light	17	22.4
Medium	44	57.9
Dark	13	17.1
Very Dark	0	0
Mother's General Skin Tone		
Very Light	7	9.2
Light	21	27.6
Medium	29	38.2
Dark	18	23.7
Very Dark	1	1.3
<u>Father's General Skin Tone</u>		
Very Light	2	2.6
	14	18.4
Light		
Light Medium	24	31.6
Light Medium Dark	24 28	31.6 36.8

# Materials

# Skin Tone

The skin tone was measured by using the Pantone Skin Tone Guide which contains 110 different shades. These shades of skin tones were created by scientists that compared various human skin tones (Pantone, 2017). Each shade in the Skin Tone Guide was identified by corresponding numbers (1-110, from lightest to darkest). Each shade has a unique undertone and lightness; those undertones ranged from yellow to red (see Figure 1). The undertone of each shade is represented as a number (1-5) and a letter (Y or R). The lightness is scaled from 1 to 15. For example, one shade is identified as 5R01 which as a deep red undertone and a lightness of one. For the ease of interpretation, each number/letter combination was recoded to a number, from 1 (5R) to 10 (5Y) on the red-yellow undertone continuum.

## Figure 1



*Note.* The undertones are represented by a "Y" or "R" to indicate the primary undertone and number to indicate the level of that undertone.

# Self-Esteem

Rosenberg's self-esteem scale (1965) was utilized to objectively measure each participant's self-esteem level. The scale consisted of ten statements that each female participant could strongly agree, agree, disagree, or strongly disagree with. Examples of these statements include: "I can do things as well as most other people" and "Overall, I am satisfied with myself." The average scores determined the level of self-esteem. Any score under 15 indicated a low self-esteem, and any score above 25 indicated a high self-esteem.

# General Perceived (Racial) Discrimination

This construct was measured by several questionnaires. One of the measures was the Everyday Discrimination Survey ([EDS], Williams et al., 1997) which evaluates the personal experiences of discrimination. The EDS describes daily situations and personal characteristics that may be influenced by race including general interactions with people, service at restaurants, levels of intelligence, and temperament. The second part of the EDS asked participants to identify additional reason(s) for everyday discrimination such as gender, sexual orientation, weight, or other reasons.

Discrimination in various environments and various situations based on race/ethnicity was assessed with 19 scaled questions, 17 of which come from Brondolo's Brief Perceived Ethnic

Discrimination Questionnaire-Community Version (Brondolo et al, 2005) and two additional questions were created by us. The response options ranged from 1 (never happens) to 5 (always happens). Examples of these questions include: "Because of your race/ethnicity, how often have you been treated unfairly by teachers, professors, or other staff at school/college?" and "Because of your race/ethnicity, how often have others threatened to hurt you (or said they would hit you)?" Two of those 19 scaled questions were created to ask about possible discrimination found in the healthcare system. Examples of those scaled questions concerning healthcare are as follows: "Because of your race/ethnicity, how often have you been treated unfairly in healthcare settings such as a hospital or health clinic?" and "Because of your race/ethnicity, how often have you received improper care in healthcare settings such as a hospital or health clinic?" Higher average scores indicated more experiences of discrimination.

At the end of this survey, two more questions were asked to allow the participants to share their relative experiences and ratings related to general racial discrimination, respectively. Those questions were as followed: "If you would like to tell us more about your experiences of discrimination because of your race/ethnicity, please write your experiences here" and "On a scale from 1 (Not at All) to 5 (Very Often), please select the choice that best represents your beliefs. Overall, how often has racism affected your life?"

### Discrimination Based on Skin Tone

This construct was measured by utilizing the modified Brondolo's Brief Perceived Ethnic Discrimination Questionnaire-Community Version (the modified brief PEDQ-CV-skin tone, Brondolo et al., 2005) to assess the levels of discrimination in various environments with the focus of discrimination being on skin tone. Seventeen questions originated from the perceived discrimination survey mentioned above and 2 were created to assess discrimination in healthcare settings. Response options for the scaled questions ranged from 1 (never happens) to 5 (always happens). Overall, the same questions were asked as for the previous questionnaire, but the beginning phrases were altered to allow the focus to be on skin tone. An example of a question from this survey was "Because of your skin tone, how often have others thought you couldn't do things or handle a job?"

The additional open-ended question to assess skin tone-based discrimination was the following: "If you would like to tell us more about your experiences of discrimination because of your skin tone, please write your experiences here." This question allowed the participant to mention any experiences relevant to colorism.

## Discrimination by Ingroup Members

This construct was assessed by two questions assessing participants' discriminatory experiences by fellow African Americans. This question was described as "Do you believe that members of your race (fellow African Americans) are discriminating against you based on your skin tone (i.e., shade)? This was a yes-no response question. If answered as "yes", it was indicative of discrimination by fellow African Americans. In addition, participants were asked: "If you believe that members of your race are discriminating against you based on your skin tone, please describe below."

### Effects of Colorism

This construct was assessed by utilizing several questions. These questions covered topics relating to overall experience of colorism, understanding of colorism, experiences with bleaching, experiences with tanning, colorism being a minor or major issue, and the relevant experiences to each question. The questions were the following: a) Have you ever had any experience where you feel you were treated different because of your skin tone? If so, please describe. b) What is your definition of colorism? Please describe below. c) Do you feel that colorism is an issue today? Why? Why not? d) At any point in your life, have you ever wished that you were a different skin tone? If so, approximate the age range & feelings/actions associated with that event. e) Have you ever thought about bleaching or have bleached your skin? If so, approximate the age range & feelings/actions associated with that event. g) Do you feel that colorism has had a minor or major effect on your life? Describe your skin tone in your own words.

### **Demographics**

The demographics survey asked about race(s)/ethnicity, age, sexual orientation, college classification, birthplace, household income, parent(s)/guardian(s) education levels, parent(s)/guardian(s) general skin complexions, and participant's general skin complexion.

### Procedure

African American women were recruited through the SONA Experiment Management system. They were instructed to come to the lab without makeup on their face. Each participant entered the lab and was presented with a consent form by an African American female researcher. After the consent form was read and signed, the participant was asked to have her makeup removed if any was present on her face with makeup remover and cotton pads.

Next, the participant completed skin tone identification measure herself, and the researcher completed the participant's skin tone identification as well. The order of identification of the individual's skin tone by the participant and researcher was chosen at random before the participant entered the lab to dismiss any order effects. For some participants, the researcher indicated the skin tone shades first. In those moments, the participant was asked to close her eyes after they have removed the makeup.

For the self-identification, the participant was given the skin tone guide and asked to find the best color that matched closely to their skin tone without any feedback from any reflective surfaces and to record the identifying numbers on a separate sheet of paper given by the researcher. After the participant recorded the identifying numbers on a separate sheet of paper, then she was asked to turn the paper over. Thus, the researcher did not receive any feedback before she determined the skin tone of the participant. Then, the participant repeated the same tasks while using a handheld mirror. The researcher identified the participant's skin tone by using the same skin tone guide on the areas of the face that is makeup free and record the identifying numbers on a sheet of paper.

Following the skin tone identification procedures, the female participant completed the Rosenberg Self-Esteem Scale (1965). Then, the female participant was asked to complete several surveys in a random order: the modified Everyday Discrimination Survey (Williams et al., 1997),

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two versions the modified Brief Perceived Ethnic Discrimination Questionnaire-Community Version (Brief PEDQ-CV, Brondolo et al., 2005), one for race/ethnicity and the second for the skin tone; and several additional questions. At end of the experimental session, she filled out the demographics survey. Following that, the participant was debriefed. All the questionnaires and debriefing were administered on one of the lab computers. Following the completion of the study, participants were given an option of applying makeup in the lab.

#### Results

For each of the hypotheses, the study tested overall effects of discrimination and racism, as well as discrimination in different settings, as measured by the following subscales in the modified Brief PEDQ-CV-race and modified Brief PEDQ-CV-skin tone: work/school area, criminal justice system, threat or aggression area, exclusion or rejection area, stigmatization or disvaluation area, and healthcare. For each of the scales and subscales (including the healthcare subscales that were created in the modified Brief PEDQ-CV-race and modified Brief PEDQ-CV-skin tone) the total and average scores for each participant were computed.

## **Discrimination Measures and Skin Tone: Hypothesis 1**

### Discrimination Based on Skin Tone and Race - Quantitative Analyses

Participants did report discrimination on the basis of race and skin tone. We ran a series of one-sample t-tests to assess levels of discrimination. For example, on the EDS, measured on a scale from 1 (never) to 6 (almost every day), participants indicated an average level of discrimination that was significantly different from 1 (never): M = 2.58, SD = .90, t(75) = 15.35, p < .001. Most indicated that discrimination was based on race (85.5%) and shade of skin tone (65.8%). Analogously, on the modified brief PEDQ-CV-race, measured on a scale from 1 (never) to 5 (almost), participants indicated a level of discrimination significantly different from 1 (never): M = 1.69, SD = .54, t(74) = 11.00, p < .001. On the modified brief PEDQ-CV-skin tone, measured on a scale from 1 (never) to 5 (almost), participants indicated a level of discrimination significantly different from 1 (never): M = 1.60, SD = .48, t (75) = 11.08, p < .001. When asked "On a scale from 1 (Not at All) to 5 (Very Often), please select the choice that best represents your beliefs. -Overall, how often has racism affected your life?" participants indicated a level of racism significantly different from 1 (Not at All): M = 2.68, SD = .91, t (75) = 16.09, p < .001. 51.3% of participants believed that members of their own race (fellow African Americans) are discriminating against them based on skin tone. Similarly, 51.3% of participants believed that members of other ethnic groups are discriminating against them based on skin tone.

## Discrimination Based on Skin Tone and Race - Qualitative Analyses

Two first authors reviewed answers on the open-ended questions asking participants about their experiences of discrimination based on their skin tone and race. The most common following themes emerged for discrimination based on skin tone: lighter skin = good, darker skin = bad; lighter skin = beautiful, darker skin = ugly; name-calling; feeling like an outsider or not belonging; discrimination at social events including but not limited to stores, restaurants, or fairs; discrimination in educational settings by faculty and/or students (See Appendix for the inclusive list).

The most common themes focusing on race-based discrimination were racial stereotypes of being loud, ghetto, or thieves, the battle between inferiority versus superiority, black tax, and segregation (See Appendix for the inclusive list). Each theme gave insight to specific ways to how the participants were discriminated against. Therefore, we concluded that discrimination on the basis of skin tone and race was reported, and Hypothesis 1 was confirmed.

#### Relationship between Skin Tone and Discrimination: Hypothesis 2

The relationship between each of the perceived discrimination/racism measures and lightness and undertone of skin tone (self-identified with mirror, self-identified without mirror, and identified by the experimenter) were examined. There were no statistically significant relationships between participants' identification of skin tone/how the researcher identified participants' skin tone and each measure of her life experiences with discrimination based on race or skin tone (all ps > .01) (see Table 2 for correlations). Specifically, there were no significant relationship between each of the skin tone measures (participants' identification of lightness with mirror, participants' identification of lightness without mirror, experimenter's identification of participant's lightness, participants' identification of undertone with mirror, participants' identification of undertone without mirror, experimenter's undertone) and each of the scales (Table 2).

To examine whether lightness of skin tone predicted discrimination by ingroup members, a series of logistic regression models was run, always with a dichotomous outcome variable (Yes-No), an answer to "Do you believe that members of your race (fellow African Americans) are discriminating against you based on your skin tone (i.e., shade)?" One predictor was entered in a model (participants' identification of lightness with mirror, participants' identification of lightness without mirror, experimenter's identification of participant's lightness, participants' identification of undertone with mirror, participants' identification of undertone without mirror, experimenter's undertone) at a time. None of the models produced significant results. Thus, Hypothesis 2 was not supported.

#### Skin Tone Identification with and without Mirror: Hypothesis 3

Individuals who perceived their skin tone darker without the mirror than with it reported more frequent experiences of racism (M = 2.93, SD = .83) than those who perceived it lighter without the mirror (M = 2.25, SD = .97), F(2,73) = 3.53, p < .001, as indicated by a one-way ANOVA. Racism was measured by the following question: "Overall, how often has racism affected your life?" (see Figure 2). Thus, Hypothesis 3 was partially supported.

#### **Role of Self-Esteem: Hypothesis 4**

Two types of analyses were run: a moderation and classical mediation. Two types of linear regression models were employed using the PROCESS Macro in SPSS (Hayes, 2013), Model 1 to test self-esteem as a moderator and Model 4 to test self-esteem as a mediator of the skin tonediscrimination relationship. Each model included one of the measures for skin tone (self-identified with mirror, self-identified without mirror, and identified by the experimenter), and one of the measures of the perceived discrimination/racism. Self-esteem was entered as either the moderator (Model 1) or mediator (Model 4) for each of the analyses.

# Figure 2



Reported Levels of Racism in Different Skin Tone Groups

*Note.* Darker without mirror = participants rated lightness of their skin tone darker without than with mirror. Same = participants rated lightness of their skin tone the same with and without mirror. Darker with mirror = participants rated lightness of their skin tone darker with than without mirror. Higher numbers indicate more frequent experiences of racism as measured by the following question: "Overall, how often has racism affected your life?"

Results showed that the relationship between lightness of skin tone (self-identified with mirror, self-identified without mirror, and identified by the experimenter) and each of the perceived discrimination/racism measures was not moderated or mediated by self-esteem (all ps > .01). Thus, Hypothesis 4 was not supported. However, self-esteem was strongly related to measures assessing racism and skin tone-based discrimination (see Tables 2 and 3). The modified Brief PEDQ-CV-race, modified Brief PEDQ-CV-skin tone, and overall racism question were all significantly related to self-esteem: The following subscales for both versions of the PEDQ-CV were significantly related to self-esteem: exclusion or rejection area, discrimination at work or school area, and threat or aggression area. Self-esteem was also significantly related to the healthcare subscale in the modified Brief PEDQ-CV-race questionnaire. All significant correlations reported were positive indicating that individuals who reported higher self-esteem also reported higher levels of discrimination.

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# Table 2

Correlations between Self-Esteem, Measures of Discrimination, Undertone, and Lightness of Skin Tone (Self-identified with Mirror, without Mirror and Identified by the Experimenter)

Meas	ure	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.
1.	Self-esteem	1	.14	.29*	.39**	.41**	09	06	17	06	.13	.13	.16	.24*
2.	Everyday Discrimination	.14	1	.65**	.63**	.59**	.04	.20	.05	11	.01	23	.44**	.34*
Scale														
3.	PEDQ-CV skin tone sum	.29*	.65**	1	.81**	.52**	.07	.14	.02	08	.05	12	.57**	.54**
4.	PEDQ-CV race sum	.39*	.63**	.81**	1	.55**	.10	.10	.03	15	02	18	.36**	.36**
5.	Overall, how often has	.41**	.59**	.52**	.55**	1	.07	.19	04	14	.13	.02	.35**	.37**
racisi	n affected your life?													
6.	Experimenter's identification	09	.04	.07	.10	.07	1	.61**	.78**	-	.53	.58**	01	10
of par	rticipant's skin tone lightness									.42**				
7.	Participant's identification of	06	.19	.14	.10	.19	.61**	1	.81**	-	-	-	.04	.07
skin tone- lightness without mirror										.59**	.56**	.51**		
8.	Participant's identification of	17	.05	.02	.03	04	.78**	.81**	1	.57**	-	-	06	01
skin t	one- lightness with mirror										.68**	.58**		
9.	Participant's undertone	06	11	08	15	14	42	59	57	1	.62**	.28*	.06	.032
withc	out the mirror													
10.	Participant's undertone with	.13	.01	.05	02	.13	-	-	-	.62**	1	.44**	.13	.04
the m	irror						.53**	.56**	.68**					
11.	Experimenter' identification	.13	23	12	18	02	-	-	-	.28*	.44**	1	04	03
for pa	articipant's undertone						.58**	.51**	.58**					
12.	Healthcare discrimination –	.16	.44**	.57**	.36**	.35**	01	.04	06	.06	.13	04	1	.84**
Skin	Tone Sum													
13.	Healthcare discrimination –	.24*	.34*	.54**	.36**	.37**	.04	.07	01	.03	.04	.03	.84**	1
Race	Sum													

*Note.* \*\* Correlation is significant at the 0.01 level (2-tailed).

\* Correlation is significant at the 0.05 level (2-tailed).

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# Table 3

Correlations between Self-esteem and Subscales of Measures of Discrimination

Measure	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.
1. Self-esteem	1	.39**	.13	.42**	.29*	.24*	.21	.29*	06	.31**	.34**	.16	.26*
2. Exclusion or rejection area – PEDQCV Race	.39**	1	.52**	.74**	.40**	.37**	.41**	.81**	.33*	.74**	.21	.37**	.37**
3. Stigmatization or disvaluation area. – PEDQCV Race	.13	.52**	1	.51**	.51**	.12	.52**	.54**	.82**	.48**	.43**	.19	.43**
<ol> <li>Discrimination at work/school area–</li> <li>PEDQCV Race</li> </ol>	.42**	.74**	.51**	1	.59**	.48**	.60**	.66**	.24*	.88**	.43**	.44**	.49**
5. Threat or aggression area. – PEDQCV Race	.29*	.40**	.51**	.59**	1	.01	.53**	.26*	.13	.49**	.46**	.07	.21
6. Discrimination in healthcare area – PEDQCV Race	.24*	.37**	12	.48**	.10	1	.27*	.45**	.15	.47**	.32**	.84**	.38**
7. Discrimination in the criminal justice system. – PEDQCV Race	.21	.41**	.52**	.60**	.53**	.27*	1	.38*	.29*	.55**	.35**	.28*	.77**
8. Exclusion or rejection - PEDQCV Skin Tone	.29*	.81**	.54**	.66**	.26*	.45**	.38**	1	.52**	.74**	.32**	.47**	.39**
9. Stigmatization or disvaluation	06	.34**	.82**	.24*	.13	.15	.29*	.52**	1	.32**	.20	.24*	.35**
PEDQCV Skin Tone 10. Discrimination at work or school area - PEDQCV Skin Tone	.31*	.74**	.48*	.88**	.49**	.47**	.55**	.74**	.32**	1	.40**	.46**	.46**
11. Threat or aggression area - PEDQCV Skin Tone	.34*	.21	.24*	.43*	.46**	.32**	.35**	.32**	.20	.40**	1	.27*	.37**
12. Discrimination in healthcare - PEDQCV Skin Tone	.16	.37**	.19*	.44*	.07	.84**	.28*	.47**	.24*	.46**	.27*	1	.37**
13. Discrimination in the criminal justice system - PEDQCV Skin Tone	.26*	.37**	.43**	.49**	.21	.38**	.77**	.39**	.35**	.46*	.37**	.37**	1

Note.\*\*Correlation is significant at the 0.01 level (2-tailed).

\*Correlation is significant at the 0.05 level (2-tailed).

### Discussion

The current study examined whether skin tone identification was related to the participant's discriminatory experiences based on their race and skin tone. As hypothesized (**Hypothesis 1** stated that participants would report discrimination based on skin tone and race), the participants did report discrimination and biases based on their skin tone (even by their fellow African Americans) and race, as evidenced by both qualitative and quantitative data. Such biases were reported by the participants in many spheres of their lives, including healthcare settings, which was a novel finding. Therefore, the findings that both racism and colorism affect lives of young African-American women in the American South call for action. While our findings are not completely novel, as literature suggests, they contribute to the existing research by (a) tapping into experiences of a unique population and (b) relying on various quantitative and qualitative measures to assess experiences of colorism and racism.

To our surprise, skin tone and reported discrimination were not related and thus **Hypothesis 2** was not supported. Although our data suggests that colorism does exist, there was not a link between lightness of one's skin tone and levels of perceived discrimination. Interestingly, not only all of the skin tone measures (participants' identification of lightness with mirror, participants' identification of lightness without mirror, experimenter's identification of participant's lightness, participants' identification of undertone with mirror, participants' identification of undertone without mirror, experimenter's undertone) were unrelated to general perceived discrimination, they were also unrelated to discrimination by ingroup members.

One possible explanation is that although participants were keenly aware of the effects that colorism had in their lives, the restricted range of skin tones represented in the study might have obscured the relationship between the perceived discrimination and skin tone measured by the Pantone Skin Tone Guide. In addition, it is possible that we were able to confirm Hypothesis 1 because the effects of colorism are somewhat overlapping with the effects of racism, especially since the PDEQ-CV-race and the PEDQ-CV-skin tone measure were very highly correlated (r = .81). Skin tone might have served as a proxy for race when participants were answering questions about daily discriminatory experiences in the PDEQ-CV-race and the PEDQ-CV-skin tone measures. Our findings will need to be replicated in future studies employing the Pantone Skin Tone Guide for skin tone measurements, especially given the relative objectivity of the measure.

**Hypothesis 3** received only partial support. It was hypothesized that the discriminatory experiences would affect the participant's identification of their perceived (i.e., identified without mirror) skin tone. Yet, there were no differences in skin tone identifications in individuals with differing levels of discrimination. Skin tone identification may be independent of the personal impact of discriminatory events. In today's world, a lighter skin tone may be the ideal skin tone of African American women as shown in various forms of media including TV shows, music videos, advertisements, and social media. Maybe skin tone bias and racism do not affect young African American women in the American South compared to other areas, such as Jamaica (e.g., Charles, 2011; Kelly, 2020). Perhaps young African Americans are not dramatically affected by these standards of beauty as originally thought. The discriminatory experiences did not affect the participant's identification of their perceived skin tone. However, individuals who perceived their skin tone darker without the mirror reported more frequent experiences of racism than those who perceived it lighter without the mirror. Due to the correlational nature of this study, two alternative explanations of this effect are possible: (a) knowledge that individuals with dark skin tone experience more discrimination led the participants who reported high levels of discrimination to believe that they possess darker skin tone than they are or (b) the participants who perceived themselves as darker (and hence as less attractive) somehow act in ways that elicit more discriminatory negative treatment from others. Given support received for Hypothesis 1, the first explanation seems more plausible. Perhaps unfair treatment alters one's self-perception of skin tone, due to pervasiveness of colorism. The relationship between negative characteristics and skin tone is learned early in childhood (e.g., Anderson & Cromwell, 1977; Lewis & White, 2021; Wilder & Cain, 2010). These participants could have internalized negative thoughts pertaining to their skin tone during their childhood and tend to make correspondent attributions to their skin tone (i.e., it must be dark) based on negative experiences in their lives.

While self-esteem did not moderate or mediate the skin tone-discrimination relationship, as predicted in **Hypothesis 4**, it was strongly related to reports of racism and colorism. This is consistent with prior work showing that individuals with higher self-esteem can cope better when facing discrimination (e.g., Corning, 2002; Feng & Xu, 2014; Tynes et al., 2012; Umaña-Taylor et al., 2008; Wei et al., 2008). As mentioned earlier, this study confirms that self-esteem is related to discrimination, and it is consistent with an earlier study conducted by Crocker and Major (1989). Even if the cause of a negative event is not based on racial discrimination, self-esteem may be used as a protective factor to shift the blame of a negative event on the race of an individual instead of the individual's personal capabilities (Crocker & Major, 1989). Self-esteem may protect an individual from experiences of racial discrimination and negative experiences that appear to originate from racial discrimination.

Corning (2002) emphasized self-esteem acting as a buffer when confronting discrimination in women. Yet in Cassidy's and O'Conner's study (2004) and Fischer's and Shaw's study (1999), self-esteem was not considered to be a buffer for teenage minorities and young adults. More recent work suggests that self-esteem does act as a buffer in African American adolescents and South American immigrants in Chile (Tynes et al., 2012; Urzúa et al., 2018). The results for self-esteem acting as a protective buffer is mixed. Since personal self-esteem was determined by utilizing the Rosenburg's Self-Esteem scale and the coping strategies were not determined, this current study cannot definitively deny or confirm whether self-esteem acted as a buffer when handling discriminatory experiences. Furthermore, according to research conducted by Umaña-Taylor et al. (2008) and Tynes et al. (2012), self-esteem is related to discrimination and the strength of the ethnic identity. Individuals who possess a strong ethnic identity and high self-esteem can cope with discrimination in a positive way to soften the impact of the discrimination. Researchers (Tynes et al., 2012; Umaña-Taylor et al, 2008) believe a strong ethnic identity allows an individual to utilize strategies to fight against discrimination. In return, those experiences build the self-esteem, but the direct relationship between self-esteem and discriminatory experiences has not been confirmed. Nevertheless, the strength of the ethnic identity is related to the coping strategies utilized, and the coping strategies affect the self-esteem level. However, the current study did not assess the strength of the ethnic identity to test such a relationship.

## **Limitations and Future Directions**

The current study only recruited young African American females from one public university in the southeastern United States. This sample was readily accessible, but probably it is not representative of young African American females across the country. The experiences of discrimination vary from state-to-state, from country to country and they should be addressed in future research. While recruiting new samples from various cultures would make our work more generalizable, we also would like to point out that studying colorism and racism in this geographically unique population is a valuable addition to the current literature.

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Skin tone range was also limited and might need further exploration. While there was a variety of skin tones present within the sample, the experimenter did not get a range to capture a full representation of skin tone in the African American community, which might have obscured the true relationship between the Pantone Guide measures and measures of discrimination.

Another limitation of this study was the heavy reliance on self-reports. The results were based on the information the participants choose to disclose. Some individuals provided a lot of details while others chose not to share their experiences. In addition, some participants may not have felt comfortable to share information. One reason could be that the experimenter had a dark skin tone. Even though the experimenter is an African American female, just like all the participants, the participants who possessed lighter skin tones may have felt uncomfortable during the study when answering questions about discrimination in the presence of an African American female with dark skin tone. They might have also used her skin tone as an anchor during the skin tone identification procedure in different ways, and consequently obscuring the relationship between their skin tone and reported discrimination. In addition, our work largely relied on descriptive research and correlational design, with only one element of the study being truly experimental (e.g., manipulation of the three measurements of skin tone with the Pantone Guide). While future studies might consider employing vignettes with photographs of varying skin tones to manipulate skin tone experimentally, we believe that our approach truly attempted to tap into experiences of racism and colorism participants face in real-life settings.

The final limitation of this study is a lack of measures related to self-esteem such as the strength of the ethnic identity and coping strategies. Such measures should be incorporated in future studies adapting a similar methodology to this work.

### Conclusion

The current study focused on the perceived discriminatory experiences (i.e., colorism and racism) that young African American women living in the American South report as a function of their actual and perceived skin tone. This work confirmed that colorism and race-based discrimination are prominent in the American South throughout various settings such as healthcare, school, work, and restaurants; and might alter how women view their skin tone: individuals who perceived their skin tone darker without the mirror reported more frequent experiences of racism than those who perceived it lighter without the mirror. This study also suggests that self-esteem is related to skin tone bias and racism. Conversely, the impact of skin tone measured with the Pantone Guide on experiences of colorism and racism was not established and requires further investigation. Nevertheless, racism and skin tone bias are still important global social issues that need to be addressed in various populations.

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## Appendix

## Inclusive List of Emerging Themes Present in the Open-ended Questions Survey

If you would like to tell us more about your experiences because of your race/ethnicity, please write your experiences here.

- 1. Stereotypes
- 2. Privileges in White Culture
- 3. Inferior VS Superior
- 4. Interracial Relationships
- 5. Segregation
- 6. Black Tax
- 7. N/A

If you have had experiences where you were treated differently because of your skin tone (i.e. shade).

- 1. Lighter skin = good, darker skin = bad
- 2. Name-calling
- 3. Discrimination at work (because of race and skin tone)
- 4. Lighter skin = beautiful, darker = ugly
- 5. Choosing to segregate at events by race
- 6. Constant battle between shades (light skin VS dark skin)
- 7. Discrimination in educational settings by faculty
- 8. Discrimination in educational setting by students
- 9. Discrimination at social events (shopping, restaurants, fairs)
- 10. Punishments based on race
- 11. Lighter skin = smarter, Darker skin = dumber
- 12. Feeling like an outsider
- 13. Both discrimination in education settings by faculty & students
- 14. Bleaching
- 15. N/A

If you would like to tell us more about your experiences of discrimination because of your skin tone, please write your experiences here:

- 1. Name-calling
- 2. Feeling like an outsider/ not belonging
- 3. Lighter skin = beautiful, darker skin = ugly
- 4. Faking the belief of inclusivity
- 5. Discrimination in education settings by faculty & students
- 6. Discrimination at social events (shopping, restaurants, fairs)
- 7. Racial stereotypes (loud, ghetto, thieves)
- 8. Segregation
- 9. Lighter skin = smarter, Darker skin = dumber; Lighter skin = beautiful, darker = ugly
- 10. Name-calling and discrimination by in-group members
- 11. Discrimination at work
- 12. N/A

If you believe that members of your races are discriminating against you based on your skin tone, please describe below.

- 1. Lighter skin = good, darker skin= bad
- 2. Lighter skin = beautiful, darker skin= ugly
- 3. Both Lighter skin = good, darker skin= bad & Lighter skin = beautiful, darker skin= ugly
- 4. Stereotype of light = conceited
- 5. Lighter skin = smarter, Darker skin = dumber
- 6. Makeup for certain skin tones
- 7. Constant Battles between shades (Light skin VS Dark Skin)
- 8. Social Class
- 9. Both Constant Battles between shades (Light skin VS Dark Skin) & Lighter skin = good, darker skin= bad
- 10. Racial Profiling
- 11. N/A
- 12. Parents recognizing the shade differences
- 13. Both Stereotype of light = conceited & Lighter skin = beautiful, darker skin= ugly
- 14. Stereotype of light = conceited + Lighter skin = good, darker skin= bad + Lighter skin = beautiful, darker skin= ugly

Why do you feel that colorism is an issue, today?

- 1. Lighter skin = good, Darker skin = bad
- 2. Don't feel this issue is important enough to be resolve
- 3. Used to divide people (superior VS inferior)
- 4. Media favors light-skin
- 5. Constant battle between shades
- 6. Lighter skin = beautiful, darker = ugly
- 7. Both media favors light-skin & Lighter skin = good, Darker skin = bad
- 8. Discrimination based on race
- 9. Slavery
- 10. Both slavery + Lighter skin = good, Darker skin = bad
- 11. Both Lighter skin = beautiful, darker = ugly & Lighter skin = good, Darker skin = bad
- 12. Jealousy
- 13. Both Media favors light-skin & Lighter skin = beautiful, darker = ugly
- 14. N/A

Why do you not feel that colorism is not an issue, today?

- 1. Same people, Same history
- 2. Uninformed about history
- 3. Becoming more accepting of dark-skin individuals
- 4. N/A
- Description of your skin tone in your own words and in detail.
- 1. Shades
- 2. Food
- 3. Shades + Food
- 4. N/A

Describe the age range associated with that event of wishing you were a different skin tone.

- 1. Adolescence (11- 18)
- 2. Preadolescence (before 11)
- 3. Young Adults (19-25)
- 4. N/A

Describe the feelings/actions associated with that event of wishing you were a different skin tone.

- 1. Lighter skin = good, dark skin = bad
- 2. Feeling like an Outsider
- 3. Lighter skin = beautiful, Darker skin = ugly
- 4. Media favors light skin
- 5. Lighter skin is a trend
- 6. Hair texture
- 7. Name- calling/ jokes
- 8. N/A

Describe the age range associated with that event of the thought of bleaching your skin or the act of bleaching your skin.

- 1. Adolescence (11-18)
- 2. Preadolescence (before 11)
- 3. Young Adults (19-25)
- 4. N/A

Describe the feelings/actions associated with that event of the thought of bleaching your skin or the act of bleaching your skin.

- 1. Lighter skin = good, Dark skin = bad
- 2. Media favors lighter skin
- 3. N/A

Describe the age range associated with that event of the event of tanning your skin or excessively tanning your skin.

- 1. Adolescence (11-18)
- 2. Preadolescence (before 11)
- 3. Young Adults (19-25)
- 4. N/A

Describe the feelings/actions associated with that event of the event of tanning your skin or excessively tanning your skin.

- 1. Feeling like an outsider
- 2. Darker = beautiful, lighter = ugly
- 3. Darker = better, lighter = bad

### Stamps, D.

What do you think is the main reason/reasons for these experiences? If you selected "Some Other Aspect of Physical Appearance" or "Other" for the previous, please explain below.

- 1. Body shape
- 2. Clothing
- 3. Personality
- 4. Facial features/hair
- 5. Pregnancy
- 6. Walking position
- 7. Both facial features/hair + clothing
- 8. N/A