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Racial Discrimination and Interpersonal Violence in Asian American Adolescents During the COVID-19 Pandemic

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Abstract

Objectives: Racial discrimination targeting Asians in the U.S. has increased sharply since the COVID-19 pandemic. Despite a well-established link with mental/physical health outcomes, little is known about how racial discrimination relates to interpersonal violence, particularly in adolescents. To address this gap in knowledge, we examined cross-sectional and longitudinal (one year follow-up) associations between racial discrimination and interpersonal violence perpetration and victimization in Asian American adolescents in a large U.S. city.

Methods: Data from Waves 3 (2020) and 4 (2021) of a randomized clinical trial of a school-based violence prevention program were examined. We limited our sample to participants who identified as Asian American ($n = 344$; 48.3% female; $\text{Mean}_{\text{age}} = 14.6$ years at Wave 3).

Results: At Wave 3, 26.5% of the adolescents reported experiencing some form of racial discrimination, including 18.3% experiencing verbal harassment due to race and 16.0% reporting inequitable treatment due to race. Relative to their non-victimized counterparts, adolescents who experienced racial discrimination were more likely to report being a victim of bullying and teen dating violence cross-sectionally and being a bullying victim longitudinally. Moreover, those who experienced racial discrimination reported more bullying and teen dating violence perpetration concurrently, as well as more dating violence perpetration one year later.

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Conclusion: In the understudied population of Asian American adolescents, we found that experiencing racial discrimination contributes to both interpersonal violence victimization and perpetration. Youth violence prevention could include strategies addressing racial discrimination.

Keywords

Asian American adolescents; racial discrimination; interpersonal violence

Introduction

Despite making up 7% of the U.S. population and being the fastest growing racial minority group [1], Asian Americans are the most understudied population in peer-reviewed literature [2]. Further, due to the “model minority” myth (i.e., Asian Americans are considered healthy and wealthy despite large within-group disparities), problems facing Asian Americans are often dismissed as non-issues [3]. Even prior to the COVID-19 pandemic, Asian American adolescents were more frequent victims of peer discrimination and bullying compared to their counterparts of other races/ethnicities [4]. Since the COVID-19 pandemic, racial discrimination targeting Asians in the U.S. has sharply increased [5] and become more overt (e.g., being called names or physically harassed) than covert (e.g., being treated with less courtesy) [6], even escalating into hate crimes [7]. Racial discrimination is defined as “differential treatment on the basis of race that disadvantages a racial group” [8, p.917] and can manifest in various forms. A 2020 Pew Research Center study found that 31% of Asian American adults were subject to slurs or jokes because of their race [9]. A nationally representative study in 2021 reported that one in five adult Asian Americans (21.1%) experienced an incident of Asian hate in the prior year [10]. Between March 2020–March 2022 (during the height of the COVID-19 pandemic), 11,467 Asian hate incidents were documented by the Stop AAPI Hate reporting center [11], with 17% of them being physical assaults. These reports of Asian American discrimination are tied to the misinformation and perception that China, Chinese people, or Asian people were responsible for causing and spreading COVID-19 [3,5].

Despite the known COVID-induced reports of racial discrimination directed at Asian Americans, research is generally scarce and primarily limited to adult populations [5,6,7,12]. Few studies have examined COVID-related racial discrimination in Asian American adolescents [13–15]. One of them found that 50% of Chinese American youth experienced COVID-related racial discrimination (e.g., being treated unfriendly or unwelcoming due to being Chinese) and 92% of them witnessed at least one COVID-related discrimination incident targeting a Chinese person, with about 25% witnessing it every day [13]. Given the psychosocial development that takes place during this critically important time-period [16] and the impact of the pandemic on adolescent health [17], it is vital to understand racial discrimination in adolescence. As one key social determinant of health, racial discrimination has a profound impact on adolescent physical and psychological health outcomes [18], resulting in psychological distress, somatic symptoms (e.g., headache), poor academic performance, low self-esteem, and diminished life satisfaction [8,18,19]. Further, Evidence suggest that these outcomes may vary by developmental stages [20]. Thus, examining both the cross-sectional and longitudinal impacts of racial discrimination is imperative.

Existing theories (e.g., race-based traumatic stress theory) [21] and prior research [8,18,19] primarily focus on psychological or physical health outcomes of victims of racial discrimination. However, how racial discrimination is associated with adolescent behavioral outcomes, particularly interpersonal violence, remains largely unknown [18]. Interpersonal violence (e.g., bullying, fighting) is defined as “the intentional use of physical force or power against other persons by an individual or small group of individuals” [22, p. 71]. While existing literature has established an increased risk for interpersonal violence victimization among adolescents of color [23], few studies have looked at racial discrimination as a risk factor for interpersonal violence. However, according to target vulnerability theory [24], victims of adverse life events (e.g., abuse victimization) are likely to experience psychological distress, which impairs their ability to recognize and respond to threats and consequently puts them at greater risk of revictimization (e.g., interpersonal violence victimization). Further, according to general strain theory [25], stressful life events (e.g., violence victimization), could result in negative emotional responses (e.g., anger) or hostile attitudes toward others, which may further lead to delinquency or aggression. Indeed, studies show that victimization in adolescence (e.g., teen dating violence) is linked to victimization [26] and perpetration [27] of dating violence in adulthood. Evidence suggests that Asians who are victims of racial discrimination may turn to purchasing and carrying firearms [28] or avoidant behaviors (e.g., order groceries online to avoid going out) [29] as self-protection. However, research has yet to examine whether racial discrimination victimization would result in violence perpetration or victimization among Asian Americans.

That youth violence results in various physical, psychological, social health problems, including injuries, suicide, and homicide [30], and that violence tends to escalate from adolescence to adulthood [27] makes the possible link between racial discrimination and interpersonal violence victimization and perpetration alarming. Currently, there is a dearth of research examining the link between racial discrimination and interpersonal violence with the few existing studies primarily focusing on African American adolescents [31]. To address this gap in knowledge, we examine the cross-sectional and longitudinal (i.e., one year after experiencing racial discrimination) association between racial discrimination and interpersonal violence (i.e., bullying, teen dating violence) among Asian American adolescents during the height of the COVID-19 pandemic.

Methods

Participants

We examined data from Waves 3 (2020) and 4 (2021) of a randomized controlled trial of a school-based violence prevention program [32] that focuses on promoting healthy relationships and preventing violence through an intensive classroom-based curriculum. Participants included a subsample of 344 Asian American adolescents (48.3% female) enrolled in 24 middle schools in a large city in southeast Texas. Most of the participants reported living with both parents (90.0%) and had at least one parent with a college degree or higher (70.0%). At Wave 3, participants were, on average, 14.6 years of age ($SD = .54$, range: 12–16 years) and mostly (92.1%) in the 9th grade.

Procedure

Participant recruitment occurred in 2018 during school hours in mandated classes (e.g., health, science, physical education). Those who returned signed parental consent forms and gave assent completed paper-and-pencil surveys in class. Students completed the survey online during Waves 3 (March–October 2020) and 4 (March–September 2021) of data collection. All seventh-grade students attending the study schools were eligible to participate. A total of 3,738 students were recruited, 3,028 completed the baseline survey (Response Rate: 81.0%) and were followed up annually for Waves 2–4. The retention rates from baseline were 82.6%, 81.6%, and 79.1% for Waves 2, 3, and 4, respectively. Additional study details are reported elsewhere [32]. We used Waves 3 and 4 data and limited our sample to those who self-identified as Asian American when reporting race and completed surveys in both waves. Participants received \$5 gift cards for participating at baseline, \$10 at Wave 2, and \$20 at Waves 3 and 4. The study was approved by a university Institutional Review Board.

Measures

Racial Discrimination (Wave 3).—We added two items assessing different types of discrimination to our annual questionnaire in 2020 (during the height of the COVID-19 pandemic). Specifically, *verbal harassment due to race* was measured with the question, “In the past year, has anyone called you an insulting or bad name having to do with your race, religion, ethnic background or national origin, immigration status, disability, gender, or sexual orientation?”. Those who reported “yes” and chose “race” as the reason for verbal harassment were considered to have experienced verbal harassment due to race. *Inequitable treatment due to race* was measured with the question, “Since the coronavirus pandemic, do you feel you have been treated worse than, the same as, or better than people of other races?”. Participants who reported being treated “worse than other races” were considered to have experienced inequitable treatment due to race.

Bullying (Waves 3 & 4).—We measured bully victimization and perpetration with 16 items from the revised Olweus Bully/Victim Questionnaire [33]. On a scale of 1 (never) to 5 (often), participants reported bullying victimization by answering the question, “In the past year, have you experienced the following from peers...” followed by 8 types of bullying behaviors (e.g., “left you out of things, excluded, or ignored you;” “hit, kicked, pushed, and shoved you around, or locked you indoors”). The same 8 items were presented for bullying perpetration with the stem, “In the past year, have you done these things to someone?”. Responses were dichotomized (“never” coded as no and “rarely” to “often” coded as yes) for analysis. Participants who reported yes to at least one item were considered as having experienced bullying. The scale had acceptable reliability for bullying victimization (Cronbach’s α : .83 at Wave 3, .86 at W4) and perpetration (Cronbach’s α : .87 at Wave 3, .89 at Wave 4).

Teen Dating Violence (Waves 3 & 4).—We measured teen dating violence (TDV) victimization and perpetration with 46 yes/no items from the Conflict in Adolescent Dating Relationship Inventory [34]. Participants reported past year victimization (23 items; e.g., “He/she pushed, shoved, or shook me,” “He/she insulted me with put-downs”) and

perpetration (23 items; e.g., “I pushed, shoved, or shook him/her,” “I insulted him/her with put-downs”). These who reported “yes” to at least one item were considered as having experienced TDV. The scales had acceptable reliability for victimization (Cronbach’s α : .81 at Wave 3 and .87 at W4) and perpetration (Cronbach’s α : .85 at Wave 3 and .68 at W4).

Demographic Characteristics.—Participants reported age, sex, living situation (i.e., lived with both parents or not), and parental education level (i.e., whether at least one parent had college degree or higher).

Data Analysis

Using IBM SPSS v. 28, we first analyzed the prevalence of the two racial discrimination experiences (i.e., verbal harassment and inequitable treatment) at Wave 3 and examined whether they differed by demographic characteristics and intervention condition (i.e., intervention vs. control). We performed Chi-square tests except when the expected cell count was too small, in which case we used Fisher’s exact tests. Next, controlling for age, gender, living situation, intervention condition, and Wave 3 interpersonal violence (for the longitudinal association only), we performed multivariate logistic regression analyses in Mplus 8.0 to test the effects of racial discrimination on bullying and TDV perpetration and victimization both cross-sectionally and one year later. Specifically, we examined cross-sectional associations between Wave 3 racial discrimination and Wave 3 interpersonal violence experiences, as well as the one-year longitudinal associations between Wave 3 racial discrimination and Wave 4 interpersonal violence. The two racial discrimination experiences were tested in separate regression models.

Results

Of the 344 Asian American adolescents, 26.5% ($n = 91$) reported at least one type of racial discrimination at Wave 3. Specifically, 18.3% ($n = 63$) reported experiencing verbal harassment due to race and 16.0% ($n = 55$) reported inequitable treatment due to race. Neither of the two racial discrimination experiences differed by sex (verbal harassment: $\chi^2 = .95$, $p = .33$, inequitable treatment: $\chi^2 = 3.24$, $p = .07$), living situation (verbal harassment: $\chi^2 = .15$, $p = .70$, inequitable treatment: $\chi^2 = .52$, $p = .43$), parental education (verbal harassment: $\chi^2 = .13$, $p = .72$, inequitable treatment: $\chi^2 = 3.66$, $p = .06$), or intervention conditions (verbal harassment: $\chi^2 = .05$, $p = .83$, inequitable treatment: $\chi^2 = 1.45$, $p = .23$).

Participants’ interpersonal violence experiences are reported in Table 1. Over half of Asian American adolescents reported past year bullying victimization at Wave 3 (67.3%) and Wave 4 (56.3%), and about a third reported past year bullying perpetration at Wave 3 (41.2%) and Wave 4 (32.4%). Past year experiences of other types of interpersonal violence (i.e., cyberbullying, dating violence, and fighting) ranged from 1.5% to 10.8%.

Regression analyses results (see Table 2) indicated that being verbally harassed due to race was cross-sectionally associated with heightened risk of bullying victimization [adjusted odds ratio (AOR) = 7.86, 95% confidence interval (CI): 3.07, 20.15], bullying perpetration (AOR = 4.24, 95% CI: 2.33, 7.72), TDV victimization (AOR = 2.88, 95% CI: 1.35, 6.14) and TDV perpetration (AOR = 2.19, 95% CI: 1.01, 4.75). Being treated worse than people

of another race was associated with greater risk of bullying victimization (AOR = 7.25, 95% CI: 2.53, 20.72), bullying perpetration (AOR = 2.10, 95% CI: 1.12, 3.93), and TDV victimization (AOR = 2.48, 95% CI: 1.11, 5.54), even after controlling for age, gender, living situation, and intervention effects. Longitudinally, being verbally harassed due to race was associated with greater risk of bullying victimization (AOR = 2.03, 95% CI: 1.02, 4.03) and TDV perpetration (AOR = 3.03, 95% CI: 1.11, 8.23) one year later. However, being treated worse than people of another race was not related to interpersonal violence after controlling for age, gender, living situation, intervention effects, and prior year interpersonal violence experiences.

Discussion

The current study is the first to examine self-reported experiences of racial discrimination and interpersonal violence among Asian American adolescents during the COVID-19 pandemic. In our sample of Asian American adolescents, 18.3% reported experiencing verbal harassment due to their race, 16.0% reported inequitable treatment due to race, and 26.5% reported experiencing either or both types of racial discrimination. These percentages are especially alarming given the young age of our sample (~14 years old) and the fact that this developmental period coincides with the onset of a host of risky behaviors [35]. As a social determinant of health, experiencing racial discrimination at a young age may have profound effects on adolescent development [16]. Given prior research [13], it is likely that even non-victimized Asian American participants who witness racial discrimination, either in person or through (social) media, could contribute to internalized racial oppression and impact their capacity for resilience [36]. A 2022 study of 5,113 U.S. adults [37] revealed that close to half of Americans (44%) do not believe Asian Americans are being discriminated against and a third (33%) were unaware that attacks against Asian Americans are increasing. Our study provides important insights into what Asian American adolescents are facing every day during the COVID-19 pandemic. Together with the recorded increase in racial discrimination against Asians in the U.S. [5], our findings call for immediate action to address this pressing issue.

Although the reports of interpersonal violence experiences in our data decreased from 2020 to 2021 – likely due to reduced chances of interpersonal interactions during the COVID-19 pandemic when schools went virtual – interpersonal violence victimization and perpetration among Asian American adolescents were consistently associated with racial discrimination, especially the experiences of verbal harassment due to race, both cross-sectionally and longitudinally. These findings add to our understanding of the short-term consequences of experiencing racial discrimination. In addition to the well documented physical (e.g., headache) [8] and psychological (e.g., depression) [19] consequences, experiencing racial discrimination increases individuals' risks to both interpersonal violence perpetration and victimization. This latter point is important given the known consequences of violence victimization, including depression, posttraumatic stress disorder symptoms, physical injury, homicide, and suicide [30]. Further, research indicates that racial/ethnic minority groups experience especially high rates of interpersonal violence victimization [23]. It is possible that these disparities in rates of violence are explained by racial discrimination experienced by these racial and ethnic minority groups. One potential explanation for

the link between racial discrimination and interpersonal violence victimization may be consistent with target vulnerability theory. This theory posits that consequences of racial discrimination victimization such as emotional disturbance and psychological problems, may put the victims at higher risk of revictimization of interpersonal violence. Another possibility is interpersonal violence could be racially motivated, hence the identified link may represent the escalation of racial discrimination over time, initially in the form of hostile communication (e.g., verbal harassment), then to physical abuse (e.g., hitting or kicking as a form of bullying). Future research could examine whether and how racial discrimination intersects with interpersonal violence victimization, the joint and separate health effects in Asian American adolescents, and how such effects progress longitudinally into young adulthood.

Importantly, we also found that victims of racial discrimination are at heightened risk for perpetrating violence. It is possible that adolescent victims of racial discrimination use interpersonal violence as self-protection or retaliation, as suggested in general strain theory [25]. Future data on the race/ethnicity of the interpersonal violence victim and the motives of interpersonal violence will be helpful to test this assumption. Prior research suggests that adolescent abuse victims are more likely to perpetrate future violence [27]. However, this link is often documented within the context of physical abuse and abuse of similar types (e.g., dating violence victimization in adolescence and intimate partner violence victimization and perpetration in adulthood) [26]. Conversely, the link between victimization of racial discrimination and future perpetration of violent behavior is rarely documented in the literature. This notable finding calls for an extension of racial discrimination theories [21] and research beyond psychological and physical health [8,19] to examine behavioral outcomes. Violence prevention strategies may benefit from addressing racial discrimination. For example, existing school-based violence prevention programs could consider including additional components addressing racial discrimination. Schools could provide anti-racism training for all staff, enforce anti-bullying policies that encourage safe and accessible reporting systems and restorative justice practices, and implement bystander programs to encourage students to help their victimized peers [4].

Limitations

As with all research, several limitations should be noted. First, data were from one region of the U.S. and may not be representative. Also, adolescents in this study were enrolled in a randomized trial study and 58% were exposed to a violence prevention program, which could limit the generalizability to the general Asian American adolescent population. Second, our data did not account for diversities within the Asian American adolescent population, such as origin (e.g., Chinese, Vietnamese) or immigration status (e.g., 1st vs. 2nd generation). Future research with nationally representative data that differentiates subgroups of Asian Americans is needed. Third, data in this study were self-reported, which is limited by adolescents' willingness to report and (for racial discrimination), their ability to recognize and label it. Furthermore, the verbal harassment due to race question asked participants to report their experiences "in the past year," which could have resulted in inclusion of racial discrimination experienced prior to the COVID-19 pandemic. Finally, racial discrimination exists in many forms and this study only examined verbal harassment

and inequitable treatment due to race. More severe forms of racial discrimination such as physical assault, which are also forms of interpersonal violence, were not included. Also, because our measures did not ask for motives of interpersonal violence, we cannot rule out the possibility that some of the interpersonal violence experiences were other acts of racial discrimination. The findings provide one explanation for where interpersonal violence may stem from and provide important insights for violence prevention, especially among Asian American adolescents, an understudied population.

Conclusions

As the first study to examine the association between racial discrimination and interpersonal violence in Asian American adolescents, our findings provide important insights and directions for future research. Overall, the findings add to the extant literature that Asian American adolescents who experience racial discrimination have a heightened risk of perpetrating and being victimized by interpersonal violence. Without timely intervention, Asian Americans will continue experiencing deteriorated health outcomes, including increased risk of violence perpetration and victimization. Future research could examine this long-term impact, as well as the effects of racial discrimination during the COVID-19 pandemic over time.

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Implications and Contribution

By examining the association between self-reported racial discrimination and interpersonal violence in an Asian American adolescent population, these data extend existing theory and research by identifying racial discrimination as a risk factor for interpersonal violence victimization and perpetration, both cross-sectionally and one year later.

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Table 1.

Interpersonal Violence Experiences of Asian American Adolescents (n = 344)

Interpersonal Violence	Wave 3 Frequency (%)	Wave 4 Frequency (%)
Victimization		
Bullying Victimization	230 (67.3%)	193 (56.3%)
Dating Violence Victimization	37 (10.8%)	31 (9.0%)
Perpetration		
Bullying Perpetration	141 (41.2%)	111 (32.4%)
Dating Violence Perpetration	37 (10.8%)	30 (8.7%)

Note. The % are valid %.

Table 2.
Multivariate Logistic Regression Analyses Results of Racial Discrimination Predicting Interpersonal Violence

	Cross-sectional Associations with W3 Interpersonal Violence AOR (95% CI)				Longitudinal Associations with W4 Interpersonal Violence AOR (95% CI)			
	Bullying Perpetration	Bullying Victimization	TDV Perpetration	TDV Victimization	Bullying Perpetration	Bullying Victimization	TDV Perpetration	TDV Victimization
Verbal	4.24 ^{***}	7.86 ^{***}	2.19 [*]	2.88 ^{**}	1.11	2.03 [*]	3.03 [*]	1.67
Harassment	(2.33, 7.72)	(3.07, 20.15)	(1.01, 4.75)	(1.35, 6.14)	(.57, 2.14)	(1.02, 4.03)	(1.11, 8.23)	(.52, 5.31)
Inequitable	2.10 [*]	7.25 ^{***}	1.81	2.48 [*]	1.71	1.92	.96	.54
Treatment	(1.12, 3.93)	(2.53, 20.72)	(.80, 4.12)	(1.11, 5.54)	(.82, 3.58)	(.92, 4.03)	(.36, 2.54)	(.19, 1.50)

Note: W3 = Wave 3, W4 = Wave 4, TDV = teen dating violence, * $p < .05$, ** $p < .01$, *** $p < .001$. Longitudinal Associations are based on data one year later. Verbal harassment and Inequitable treatment were tested in separate regression models. Cross-sectional results controlled for age, gender, living situation, and intervention effects, longitudinal results controlled for age, gender, living situation, intervention effects, and prior year interpersonal violence.