The Portrait Project: Content and Process of Identity Development Among Young Men of Color in East Oakland

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Abstract

Identity is the key psychological task of adolescence, with lifelong implications on health and behavior. A holistic understanding of content and process of identity development among male adolescents and emerging adults of color may lead to more effective interventions to improve health outcomes. Men aged 18 to 24 years were recruited from a nonprofit serving predominantly low-income Black and Latino youth in Oakland, CA. This exploratory, multimethod study utilized self-portraiture, interviews, and a focus group. Procedures were approved by the University of California (UC), Berkeley Committee for Protection of Human Subjects (CPHS). Phenomenology and grounded theory principles facilitated a rich understanding of the lived experiences and meanings participants attributed to their identities. Participants used positively valenced language to describe multifaceted, intersectional identities. Despite identifying with stigmatized groups, participants were proud to be male, Black or Latino, and from Oakland. Cognitive processes and adaptive behaviors mediated the impact of

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environmental factors—including discrimination, family members, peers, and place—on identity development. Practitioners will benefit from recognizing the complex identities of boys and young men of color. Further research should explore the intersectional nature of identity, cumulative health effects of developing and maintaining positive identities despite pervasive discrimination, and role of positive youth development programming in positive identity formation.

Keywords

adolescence, identity issues, gender, Latinos (U.S.), African Americans (U.S.), positive youth development

Introduction

Identity development is the key psychological task of adolescence (Erikson, 1968). During adolescence, pubertal changes, cognitive development, and social transitions create a ripe opportunity for youth to organize and attach meaning to the dynamic mosaic of personal characteristics, social roles, and group memberships that define their identity (Deaux & Burke, 2010; Oyserman et al., 2012).

According to Erikson's lifespan psychosocial theory, adolescents reach optimal psychological health when they achieve an optimal balance between role confusion and identity formation (Dunkel & Sefcek, 2009). Several dominant streams of identity theory have emerged from Erikson's work. The psychological thread takes a more individual, internal approach. For example, James Marcia's identity status paradigm argues that personal identity—a stable, core sense of self—develops through a process of exploration and commitment to a set of values and beliefs (Levesque, 2011). More recently, narrative identity theory proposed by Dan Adams suggests that individuals seek unity and purpose by constructing internalized and evolving narratives of the self (McAdams & McLean, 2013).

In contrast, the sociological thread emphasizes the influence of the public, exterior world. George H. Mead argued that identity is not just an individual's self-definition, but also its social construction lived out through roles and relationships. This influential theory later became known as symbolic interactionism. Erving Goffman carried forward Mead's work with his theory of identity and stigma, arguing that identities are performances managed in social interaction (Hammack, 2015). He distinguished ego identity, a person's sense of self, from personal and social identity, which are concerned with perceptions of others. Specifically, personal identity is aspects of an

individual's biography that are shared intentionally through social interaction. Social identity is composed of an individual's social roles and statuses, which informs interactions depending on whether the other person is part of the same or different group. Both personal and social identity are expressed through impression management, or determining which aspects of identity to reveal in a given interaction. According to Goffman, impression management proves especially important for individuals with stigmatized identities, who constantly engage in impression management in social interactions (Hammack, 2015). W. E. B. Du Bois's double consciousness theory also recognizes the importance of social context, positing that African Americans must reconcile their own racial identities with society's "overwhelmingly negative view of the Negro" to develop a healthy ego (Du Bois, 1903; Sellers, Smith, et al., 1998).

Building on theory in sociology, anthropology, and psychology, public health studies have demonstrated that identity has important implications for health and behavior during adolescence and throughout adulthood. Indeed, empirical evidence based on Marcia's identity status paradigm shows that a more stable personal identity is associated with decreased risky behaviors like substance abuse and physical violence and increased engagement in school, prosocial activity, and relationships among adolescents (Dumas et al., 2012; Oyserman et al., 2012; Schwartz et al., 2010; Steinberg, 2013).

Group identities have also been tied to health. Strong, positive ethnic, and racial identities are associated with increased self-esteem and resilience and decreased depression and anxiety during adolescence and over the life course (Burnett-Zeigler et al., 2013; Greig, 2003; Hardy et al., 2013; Mandara et al., 2009; Miller & MacIntosh, 1999). Gender identity, particularly hegemonic masculinity, belief in male dominance, is a predictor of increased risky behaviors over the life course and decreased health-promoting behaviors. Furthermore, people who identify as male but fall outside the bounds of hegemonic masculinity may attempt to contest their subordinate status by amplifying physical risk taking and other forms of hyper-masculinity (Courtenay, 2000; Evans, 2011; Robertson, 2007). While health outcomes have been associated with specific group identities, the intersectional, cumulative relationship between multiple group identities and health is unclear.

Young men of color in urban areas represent one group contending with multiple stigmatized identities. Furthermore, the process of identity formation is often made more challenging by high rates of poverty and single-parent households, residence in low-resource environments, and exposure to community violence, structural violence, and racial discrimination (Brooks-Gunn & Duncan, 1997; Dashiff et al., 2011; Ginwright, 2010; Hattery, 2007). Current literature on the content of identity for this population is fragmented.

Most studies investigate facets of identity such as race, gender, or personal characteristics independently rather than intersectionally. Furthermore, empirical identity research is highly quantitative and theoretical, using scales to measure the strength of components of identity and their relation to life and health outcomes. For example, building on W. E. B. DuBois's work, Sellers, Smith, et al. (1998) proposed a multidimensional model of racial identity (MMRI) that accounts for the salience and centrality of an African American person's racial identity as well as their regard and ideology about their racial group. This model has been used to study the links between various aspects of racial identity and important outcomes among adolescents such as academic performance and psychological function (Sellers, Chavous, & Cooke, 1998; Sellers et al., 2006).

However, lived realities are often more complex and intersectional. According to intersectionality theory, overlapping social categories create interdependent systems of oppression (Cole, 2009; Crenshaw, 1991). While the theory was initially proposed by queer Black women and coined by in 1989, intersectionality is a useful lens for understanding holistically the identity of people with multiple multidimensional aspects of identity such as young men of color from underserved areas (de Vries, 2012). Among the few qualitative studies of identity among vulnerable youth, further investigation is needed to identify resilience factors in healthy, positive identity development (Noble-Carr & Woodman, 2018).

Given the relationships between identity and behaviors, psychological well-being, and physical health, more exploratory research is needed to understand the content and process of identity development among young men of color. To begin to address these gaps, we drew up on symbolic interactionism, double consciousness, and intersectionality theories to design an exploratory, multi-method qualitative study. We investigate the following research questions: (a) how do young men of color aged 18 to 24 years in Oakland, CA describe their identities? and (b) what key factors and processes have led to the development of these identities? An in-depth understanding of the content of young men of colors' identities and the processes through which their identities developed will lead to more effective interventions and settings that promote positive identity formation, resilience, and improved health outcomes.

Method

Study Setting

Oakland is a city with a complex history of social movements, economic shifts, and inequality (Rhomberg, 2004). A broad geographic, and often

economic and racial, distinction is made between the hills and flats of Oakland: working class communities of color typically live in the flatlands adjacent to the San Francisco Bay, while many of the upper-class neighborhoods are in the Oakland hills. Between these areas, life expectancy varies by as much as 24 years (Joint Center for Political and Economic Studies, 2012). The present study was conducted in the Elmhurst District, a particularly disadvantaged area in the flats of Oakland, in partnership with the East Oakland Youth Development Center (EOYDC). EOYDC is a nonprofit organization focused on developing social and leadership capacities of youth so that they achieve excellence in education, career, and service to their communities. EOYDC offers free, year-round programming in arts, athletics, education, and job training to youth aged 5 to 24 years.

Study Design

This mixed-method qualitative study incorporated traditional qualitative methods and participatory visual methods. Participatory visual methods utilize small sample sizes, encourage active participant involvement, and emphasize in-depth understandings of lived experiences (Pink, 2013). Given our study aims, we combined elements of self-portraiture, photo-elicitation, and photovoice.

In the spirit of youth participatory action research (YPAR) and community-based participatory research (CBPR) principles, self-portraiture was used to partner with youth as experts of their own narratives. Visualization as a methodology also offered an interactive and multisensory experience for participants to express themselves through posture, facial expression, and attire, the meanings of which were drawn out through photo-elicitation. In accordance with photo-elicitation, these self-portraits were used during the individual interviews to glean richer data than traditional qualitative methods when discussing identity, an inherently abstract and personal concept (Clark-Ibáñez, 2004; Drew et al., 2010; Harper, 2002; Richard & Lahman, 2015). Finally, photovoice methodology typically involves participatory photography and focus groups to enable people to capture and reflect upon their community's strengths and concerns and promote critical dialogue (Collins et al., 2018) Borrowing from photovoice, a focus group session was held through which participants clarified and expanded upon emerging themes. Often, photovoice projects also lead to communal action. While this was not a research objective for this study, the research team did assist a subset of the participants to arrange two photo galleries open to local community stakeholders (Wang, 2006; Wang & Burris, 1997).

Study Participants

Using a phenomenological lens, we collaborated with EOYDC to recruit participants with specific characteristics suited to elucidate our phenomenon of interest: identity development among young men of color. Participants were recruited between June and July of 2014. Inclusion criteria consisted of age 18 to 24 years, self-identification as male, and residency in Oakland for at least 5 years. Low socioeconomic position and self-identification as an ethnic or racial minority were not explicit inclusion criteria because 80% of youth who attend EOYDC programming qualify for free lunch, indicating that their household incomes are less than 135% of the federal poverty level, and the majority are African American (70%) or Latino (20%). These demographics are reflective of the neighborhood where the center is located. Youth in late adolescence and early adulthood were selected because they have more stable, formed identities than younger adolescents and are better able to reflect upon and articulate their experiences (Steinberg, 2013).

EOYDC staff distributed recruitment flyers at the center's age-appropriate programs, which included general educational development (GED) classes, a college preparation program, and athletic programs. 13 prospective participants who expressed interest attended the informational session; all were deemed eligible and consented to study participation. Study participants were all young men of color including a mix of African American/Black, Latino, and multiethnic (i.e., Black and Puerto Rican) aged 19 to 24 years residing in Oakland ($n = 13$). Their involvement at EOYDC ranged from a few years to over a decade.

Study Procedures

Procedures consisted of three components: an informational session, an individual "selfie session" involving self-portraiture and an interview, and a focus group session. All sessions took place at EOYDC. The study procedures were approved by the University of California, Berkeley Committee for Protection of Human Subjects.

At the informational session, all prospective participants consented to join the study and signed media release forms, which included consent for images to be shared in academic publications. Next, participants discussed the role of portraits in everyday life to build a common understanding of the study methods and social cohesion among participants. To prepare for the selfie sessions, they were given notebooks to write down responses to sample interview questions. At selfie sessions with lead researcher S.F.G., five to 10 photos were taken with natural lighting in front of a solid, neutral backdrop that

removed contextual cues from the self-portraits, instead allowing participants to review and contextualize their images with thick descriptions during the subsequent semistructured, in-depth interviews. The selfie session interview guide consisted of open-ended, exploratory questions with probes informed by review of the literature such as: "What are some of the most important words that describe you, and why?" and "What influences or has influenced the way you see yourself?" While looking at the selfies, they were asked questions such as: "What does this photo say about you?" "What does it leave unsaid?" and "What do you think others would think about your identity based on this photo? Why?" Domains of interest included the most central and salient aspects participants' identities and formative influences and processes of identity development.

Audio recordings from the interviews were transcribed verbatim, and emerging themes from preliminary thematic analysis by S.F.G. were clarified and fact checked in a focus group with the same participants. For example, participants were shown posters that displayed the range of responses to the question, "What are some of the most important words that describe you and why?" and asked what they noticed about the list, which words were most important to their identities, and whether anything was missing. Finally, audio from the focus group was transcribed verbatim.

Data Analysis

Phenomenology is a methodology that seeks to describe lived experiences surrounding a specific phenomenon, and grounded theory is a methodology that aims to generate new theory grounded in concepts and constructs illustrated by the data (Hesse-Biber & Leavy, 2011 ; Starks & Brown Trinidad, 2007). This study was predominantly informed by phenomenology to glean a rich understanding of identity development. The analytical process also incorporated practices of grounded theory such as axial coding, as we were open to new theoretical concepts about the content, structure, and process of identity development.

S.F.G. and two research assistants trained in qualitative methods completed an iterative, multistep coding process of the interviews ($n = 13$) and focus group ($n = 1$). Of note, the photographs were reviewed alongside corresponding transcripts during the analysis process. We first performed manual open coding of the transcripts individually, then built consensus and developed axial codes to create a multilevel codebook with descriptive categories as well as theoretical constructs showing the relationship of aspects of identity to each other and common processes in identity formation. Then, using the finalized codebook, the research assistants recoded all data using

Dedoose software, and S.F.G. reviewed a sample of coded transcripts. Differences between coders were discussed, and parameters of codes were refined to ensure consistency between coders. Throughout analysis, self-reflection memos were used to reflect upon and minimize personal biases and maximize internal validity. The final set of themes were identified and reviewed by a sample of participants to ensure validity of the results.

Results

Demographics

The following self-described demographics were later compiled based on review of interview transcripts: participants ranged from 19 to 24 years of age. Twelve identified as African American or Black, with most using both terms interchangeably, and one as Salvadoran. Of the Black participants, one also identified as Puerto Rican and two as Native American. Twelve of thirteen participants were high school graduates and one earned a GED. Eight participants were currently pursuing bachelor's degrees and three were pursuing associate's degrees. In their own words, participants described their socioeconomic positions as "poor," "working class," or "middle class," and one participant identified as "privileged."

Emergent Themes

Study results are divided into four major categories: (a) the content and structure of participants' identities, (b) key cognitive processes in identity development, (c) the role of discrimination, and (d) key environmental factors.

Content and structure of identities

Individual characteristics were central to participants' identities. Central to identity, personality traits were frequently the first phrases participants used to describe the most important aspects of their identity. This participant, who described himself as "laid back" when discussing the selfie in Figure 1, later explained,

> You might have a lot of similarities with somebody but y'all aren't the same person . . . I feel like personal traits, like "I'm laid back" and stuff make me who I am. (Participant 2 during focus group)

Personality traits lent participants a sense of uniqueness and served to differentiate oneself from others. Nearly all participants described their personalities with positively valenced words such as "chill," "funny," "kind," and

Figure 1. Self-portrait by Participant 2 that displays his "laid back" personality.

"driven" only one participant shared an aspect of his identity in which he was self-critical, noting that at times, he can be "too proud."

In terms of physical attributes, participants volunteered descriptions about what their height, clothes, posture, and facial expressions in the photo conveyed about their identity. Skin color was rarely brought up unless participants were probed about what others may see in the photo.

Participants commonly identified as scholars, representatives, and role models. Relational attributes are roles that participants identify as enacting. The most common roles were "young scholars," "representatives," and "role models." Many participants promptly brought up their educational attainment near the beginning of the interview:

> I am a college student. I graduated from [the GED program] last year. It took me four years to graduate 'cause I had a problem with math, but I chose not to give up. I'm determined. (Participant 3 during selfie session)

In addition, seeing themselves in a positive light as described above, participants identified as ambassadors of their communities, families, ethnoracial groups, and hometown to others who were not part of those spheres. The majority of participants considered themselves positive role models for younger family members and youth in the community:

> It's crazy that [when] you work with kids, you see how much they aspire to be like you. It's like that (snaps). They soak up so fast—you see "em doin" stuff, and it's like, "Woah! Dude, you're acting just like me!" . . . If you have that power, you can inspire people to do more with their life. (Participant 5 during selfie session)

While less prevalent, participants also described roles based on specific activities such as being artists, rappers, and athletes.

Participants took pride in their membership in racial, gender, and place identities despite perceived stigma. All participants identified with multiple groups, including ethnoracial, gender, and geographical groups, which were often described in an intersectional manner:

> I represent my city. I represent my family . . . I represent the black community in America. I represent black men. (Participant 7 during selfie session)

Participants frequently described experiences being stereotyped and profiled, yet they retained pride in their group memberships. In reference to his racial identity, one participant stated,

> Being black [is] one of the most beautifulest things you can be. It shows that you could overcome any and everything if you push for it. (Participant 9 during selfie session)

The same held true for place identity:

> I'm from here. I obviously act like I'm from Oakland. I say "hella" a lot, and I will not change to say "a lot of" . . . I have that culture already in me. I accept and I love it, because it's made me who I am. It's a part of me. (Participant 5 during selfie session)

Participants viewed their Oakland (i.e., place-based) identity as a source of pride, cultural distinction, and strength.

Facets of identity were overlapping, intersectional, and positively valenced. Identities were complex and multifaceted. Participants described their identities

Figure 2. Self-portrait by Participant 13, a strong, passionate, proud but humble African American male.

in terms of individual-level characteristics, relational attributes, and group memberships, which were not mutually exclusive categories. For example, reflecting upon the self-portrait in Figure 2, Participant 13 identified as,

> Strong, passionate, proud but humble, hardworking man. African American males are those things. (Participant 13 during selfie session)

Participants commonly suggested that the intersection of several group identities, such as being "African American" and "male," informed individual-level characteristics like being strong, passionate, proud, humble, and hardworking.

Key cognitive processes in identity development. Participants were not passive agents whose identities were solely shaped by extrinsic forces. They described

internal, cognitive processes that mediated the impact of influential people, places, and experiences and strengthened their sense of self. Common cognitive processes included self-reflection, comparison with others, and positive reframing. One participant explains how comparison and self-reflection affected his identity:

> You just be around them, observe, conversate. You kinda find yourself through that because it tells you "I don't wanna be like that. It's not me." So, you find yourself right there, "Okay, this is who I am and this is who I'm going to be." (Participant 13 during selfie session)

Interpersonal interactions provided participants opportunities to see if aspects of others' identities resonated with their own.

Positive reframing and cognitive reappraisal also lent participants self-acceptance and confidence. Speaking about his experiences leaving Oakland for college, one young man explained,

> There was a lot of doubt and questioning myself [and] havin' to reflect and say, okay, you're looking at the negatives. Now, be optimistic. Look at the positives. What are your strengths? What do you stand for? Where do you come from? What makes you strong? (Participant 7 in selfie session)

He consciously redirected his thoughts from negative to positive, reminding himself of different positive aspects of his identity to overcome doubt. Similarly, another participant stated,

> Just be happy. Like at the end of the day if you're still alive and walking around breathing, you should be happy . . . Because if you're happy then other people will be happy and it's just, I don't know, a happy epidemic. (Participant 8 during selfie session)

For this participant who used "happy" as one of the most important words to describe his identity, viewing situations positively grounded his identity and offered helpful perspective.

Through cognitive processes, they were also able to "learn from [their] mistakes," "overcome," and make informed choices about future interactions and behaviors in the external world.

The role of stereotyping and discrimination in identity development. Participants recounted early encounters with discrimination in the form of interpersonal violence and criminalization perpetuated by store-keepers, law enforcement officials, and other adults in positions of power. These experiences were

Figure 3. Self-portrait by Participant 9, who explained that he, family, and friends would first notice his smile in this photo but strangers like the security officer above would see his race, gender, dreadlocks, and tattoos.

described as leading to a state of cognitive dissonance between their self-definitions and others' perceptions of them. One participant shared,

> I got stopped by this security officer, and he searched me for no reason. He thought I had stole something when I had bought it, like clearly I had the receipt in my hand and everything. He was like, "We were looking for someone tall African American male with long hair, uh, tattoos, who stole something." . . . And he associated him, that person, with me when all I did was buy a jacket. (Participant 9 during selfie session; Figure 3)

Here, we see the contrast between the security officer's identification of Participant 9 as a criminal based on external symbols like skin color, tattoos, and dreadlocks, versus his self-definition as an honest, intelligent young man. He continued,

I was shocked, surprised to see that because like if you know me, my grades are high . . . I don't want to be this type of statistic or live up to the stereotype. I know I can beat it.

This quote also illustrates the process of participants recognizing that they cannot expect their self-definitions to match others' presumptions about their identities. Instead, they must work to overcome negative stereotypes to avoid becoming less honorable "statistics." Similar experiences among participants during adolescence all initially elicited surprise. Another shared that five of his brothers had been incarcerated and revealed a sense of hopelessness due to stereotyping and discrimination against Black men:

You know you're a great person but you won't ever succeed in this life. (Participant 5 during selfie session)

Repeated experiences, often corroborated by experiences of friends and family, led to expectations of being prejudged and systemically disadvantaged. Some participants stated that they are now desensitized and do not respond emotionally. In contrast, others still find themselves angry but attempt to suppress their emotions to avoid fulfilling stereotypes of being angry Black men.

The portrait series shown in Figure 4 illustrates the difference between the way that participants defined their identities and how they expect strangers to characterize their identities. They have warm facial expressions and open, relaxed body language in their self-portraits, compared with their closed-off postures and serious, sullen expressions on the pictures on the right that portray how they think strangers would view their identities.

Experiences with discrimination prompted participants to employ adaptive behaviors to minimize mistaken identity. Internally, self-reflection and cognitive reappraisal helped participants to reframe their situations in a more positive light. Externally, they changed their patterns of moving about the world, investing in safer activities such as athletics, arts, and leadership groups; avoiding behaviors that might elicit suspicion, like hanging out with a group of other young men of color; maintaining hyper vigilance in new social environments; and "code switching," or modifying behaviors to fit various contexts.

Analogous to being multilingual and conversing in the predominant language of a given place, code switching through participants' eyes involved modifying speech, attire, and other ways of carrying oneself to fit into different settings. One of the most common adaptive behaviors that participants described, code switching gave visible signals that decreased discrimination.
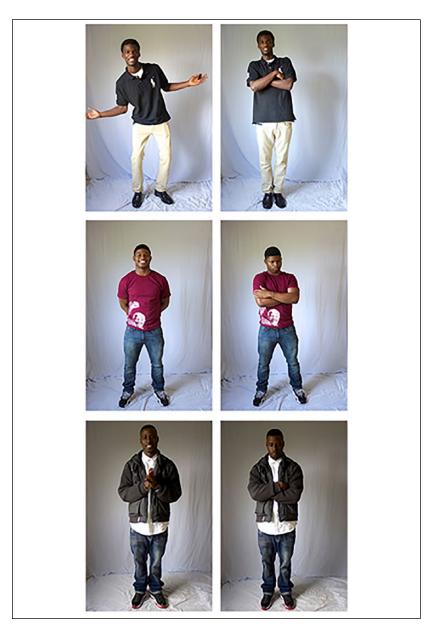
Figure 4. Dissonance. This series of self-portraits shows how participants see themselves (left) versus how participants believe that a stranger would perceive them (right).

Figure 5. Self portrait of Participant 4 wearing a blazer.

Explaining his decision to wear a blazer for the selfie session (Figure 5), the participant pictured here said,

> There's something just powerful about black men in particular with blazers and suits on. If you see me this well put-together, you know I'm not out here bullshitting . . . You won't assume that I'm out here sellin, you know, drugs or killin people or whatever the stereotype of me wearing a black hoodie or large white tees that I used to wear back in the day. You wouldn't think very negatively. (Participant 4 during selfie session)

To ensure that his internal self-definition is perceived accurately by others, this young man adjusts his external appearance to be look more "put-together" than the casual, baggy clothes he wore in the past, which others might associate with selling drugs and violence.

   Despite all these behavioral strategies, participants denied that discrimination had any impact on their identities. The young man pictured in Figure 6 said,

Figure 6. Self-portrait of Participant 1, who describes himself as positive and welcoming.

> Racism still exists. Discrimination still exists, but it doesn't really have a huge effect on me because I know my personality and my self-identity. (Participant 1 during focus group)

Like many other participants, he made a clear distinction between his own identity and how others perceived him and overtly denied that such experiences had an effect on his identity. However, they also implied that discrimination and dissonance provide motivation to identify as positive representatives:

> It really makes a difference, just holding yourself a certain way. You know, accountable for your own actions. Especially in public. I try to do it on my own too, you know, just . . . being conscious of what's out there. What stereotypes are out there. Trying to battle them, challenge them. (Participant 7 during selfie session)

As described prior, participants strongly identified as representatives and role models. Here, we see an underlying motivation: experiences with discrimination

and dissonance indirectly and subconsciously prompted them to serve as an accountable, positive representatives and counterpoints to pervasive and overwhelmingly negative stereotypes. This role identity requires considerable effort, including "being conscious of what's out there," then publicly "trying to battle [stereotypes]" by "holding yourself a certain way."

Key environmental factors in identity development

Family members played key roles in identity development. People were important sources of social and emotional support, information, access to opportunities, and inspiration. The scope of their influence depended on their relationship to the participant as well as their identity and interests.

In particular, families shaped participants' identities by imbuing values, providing racial socialization, and serving as cautionary tales as well as inspiration. Some participants elucidated how elder family members—grandparents, parents, foster parents, aunts, and uncles—shaped their values and choices:

> I wasn't allowed to stay out past streetlights. The rules kind of guided me . . . I'm pretty sure that that was [my parents'] goal . . . They was just instilling all these good things in me and showing me the right things to do so when I did start getting older, I wasn't persuaded to go into [dealing drugs]. I just go to the park, play basketball, and go home. (Participant 6 during selfie session)

Other participants shared how elder family members passed down stories about familial, community, and racial history, which lent a sense of rootedness and belonging and also provided ethnoracial socialization,

> I asked [my dad], "Why do we get black skin?" When I was younger, I thought it was because we were out in the sun longer than everyone else. He explained [it] to me, and that's when the whole discussion of Africa and our ancestors came up . . . Malcolm X, Martin Luther King . . . the Black Panther Party . . . It made me feel, knowledgeable. I was like, "Actually that's kinda cool!" . . . As you get older, you understand more and you appreciate it more. (Participant 8 during selfie session)

Beyond sharing oral history, family members also taught participants through their actions, which participants either sought to emulate or avoid. Participants spoke of wanting to escape intergenerational trauma such as poverty after seeing parents and grandparents "work for pennies" and viewed educational attainment as a way out. They also discussed learning from siblings' mistakes, especially as related to involvement in "the street life." Finally, the presence of younger family members—siblings, nieces, and nephews—provided additional motivation to be positive role models:

My younger brothers [influenced my identity] because I always wanted them to look at me and . . . see nothing but good things so there'd be no excuse for them, you know, "Well, he didn't do this." Basically, they can just follow in my footsteps. I did it! It was hard, but I did it. You can do it too. (Participant 6 during selfie session)

Peer influence varied. Peer influence on identity depended on the identities and interests of friends. Participants who associated primarily with other academically oriented peers accessed opportunities like enrichment programs and employment, which reinforced participants' identities as young scholars and contributing community members. Other participants described the negative influence of peers. For instance, one participant did not foresee himself "going somewhere" in life until he switched peer networks.

The role of place on identity. Place influenced identity in two distinct ways. First, the neighborhoods where they grew up affected their proximity to poverty, community and institutional violence, housing instability, educational and extracurricular opportunities, and community assets. In turn, these exposures shaped the subjective meanings participants attributed to being from Oakland, as well as personal traits like grit and resilience:

Oakland is a beautiful place, but it's not Disneyland . . . it's a real world. Those lessons that I've learned are positive because they helped me make better choices for my future. I feel like I'm ready for any situation I can deal with it cause I probably had some type of experience with it. (Participant 2 during selfie session)

Second, local opportunities like programs at EOYDC enabled participants access to caring adults. This participant details his experience meeting a mentor through an internship at EOYDC:

She was like my mother, because I don't really have a mother. She brought me in. She is very strict. You learn a lot from her. You learn a lot from everyone here. (Participant 1 during selfie session)

Similarly, sports teams and activities like art and music provided safe spaces for participants to explore new roles and develop supportive relationships.

Discussion

We used a multimethod qualitative approach to explore the content and structure of identity and the process of identity development through the eyes and

voices of young men of color in East Oakland, CA. The results revealed that participants' identities are multifaceted, intersectional, and positively valenced. Participants affiliated with multiple groups, particularly being from Oakland, male, and Black or Latino. Cognitive processes and adaptive behaviors mediated the impact of key environmental factors—including discrimination, family members, peers, and place—on identity development. In the context of prior literature, these findings have implications for identity theory as well as interdisciplinary research and practice.

The results of this study affirm that young men of color define their identities, or what Goffman and Mead would consider ego identities, in an intersectional way. Several contemporary identity researchers have applied intersectionality to group identities (Deaux & Burke, 2010; Oyserman et al., 2012; Phinney, 2008). For instance, Jones and McEwen (2000) argue that personal identity serves as a person's "core identity" with intersecting group identities orbiting the core. The present study suggests that identity involves unique, central personal identities and interrelated role and group identities. For instance, participants identified not only as strong *and* Black, but resilient *because* Black men are strong. Thus, to expand upon the atomic model proposed by Jones and McEwen, our findings suggest that identity involves intersecting facets like racial identity and gender identity that exist in three dimensions—personal, relational, and social—similar to a coordinate system. In line with Goffman and Meads' theories, these ego identities are expressed or performed through various outward symbols, like wearing suits, especially when social contexts threaten to conflict with participants' identities. More empiric investigation across broader, more heterogeneous groups of urban men of color is needed to build robust theory regarding the intersectional nature of identity.

Participants' descriptions of the cognitive processes and adaptive behaviors required to maintain positive identities and serve as positive representatives evoke a vast body of literature on the detrimental health effects of stereotype threat, stigma, and racism. While code switching, hypervigilance, and cognitive reappraisal proved to be useful strategies for participants to avoid mistaken identity, they also require increased mental capacity. This mental toll detracts from cognitive functioning, which is the mechanism through which stereotype threat diminishes peak performance, and code switching and hypervigilance decrease resilience to additional stressors (Gallo et al., 2005; Staudinger et al., 1995; Steele, 2010). Moreover, code switching inherently requires cognitive dissonance, which has been associated with psychological distress and physiologic disruption (Cooper, 2007). We also know that stigma itself causes stress and is a fundamental cause of health inequities (Hatzenbuehler et al., 2013; Link & Phelan, 1995). In

summary, dissonance between self-defined identity and others' presumed identification in this population detracts from peak performance and psychological resilience while causing stress and physiologic disruption.

At the same time, participants' positive perceptions of their identities, strategy of cognitive reappraisal, and ability to externalize negative stereotypes are associated with positive health implications. Research has shown that over time, frequent reappraisal leads to increased control of emotion, interpersonal functioning, and psychological and physical well-being (McRae et al., 2012; Troy et al., 2010). Sellers et al. (2006) found that while African American adolescents who believe that other groups hold more negative attitudes toward African Americans were more likely to experience racial discrimination, this belief also buffered the impact of racial discrimination on psychological functioning. The content of identity among young men of color in East Oakland and processes through which they navigate the space between their self-definition and others' perceptions suggest complex associations with both positive and adverse health outcomes. Further research is needed to investigate potentially protective effects of positive evaluation of intersectional identities on health as well as the cumulative relationship between multiple stigmatized identities and health.

In terms of environmental factors of identity development, participants emphasized predominantly proximal influences like relationships and interpersonal encounters. Policy-level or systemic factors were rarely brought up aside from discussions of discrimination and structural disadvantage. Further research is needed to evaluate the links between identity development and broader realms of the social ecological model such as organizational, community, or policy-level factors (Bronfenbrenner, 1994).

Several methodological considerations should be noted. Key strengths of this study include use of an inductive approach steeped in theoretical constructs, lived experience, and rigorous analysis validated by multiple member checks. Also, through an innovative blend of participatory visual methods, this study took a culturally humble approach to engaging youth from historically marginalized populations as subject-matter experts and created a space for them to paint their identities and stories on their own terms (Tervalon & Murray-García, 1998). Participant selection presents both a strength and limitation. Because participants were recruited at a youth development center, there was a higher likelihood of commitment to personal growth and development. This is a strength of the study in that participants elucidated factors that bolstered their positively valenced identities and investment in activities with known to improve health and economic outcomes, like higher education. On the contrary, young people participating in programming grounded in positive youth development (PYD) may be more likely to describe their identities

positively. Further investigation is needed to explore the connection between positive identity development and PYD programming. While generalizability was not a goal of this study, this small sample at a single point in time does not speak to the experiences and perspectives of all young men of color in urban locales. This exploratory study has nonetheless addressed a critical gap in the literature and generated several hypotheses to inform future research.

Conclusion and Future Directions

Shaped through the interplay between both conscious and subconscious cognitive processes and environmental factors like family, friends, place, and discrimination, identity is multifaceted and intersectional. Practitioners including educators, pediatricians, mental health and social work providers, and public health professionals will benefit from taking a culturally humble, holistic approach to recognizing the complex, diverse identities of boys and young men of color. Further research is needed to explore the intersectional nature of identity, investigate cumulative and long-term health effects of developing and maintaining positive identities in the face of pervasive discrimination, and examine the role of PYD programming in supporting positive identity formation. Against a backdrop of possibilities presented by the biological, cognitive, and social transitions of adolescence, these findings offer insight for promoting health through stable, strong identities among boys and young men of color in low-income, urban contexts.

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References

Bronfenbrenner, U. (1994). Ecological model of human development. In T. Husén & T. N. Postlethwaite (Eds.), *International encyclopedia of education* (Vol. 3, 2nd ed., pp. 1643–1647). Elsevier.

Brooks-Gunn, J., & Duncan, G. J. (1997). The effects of poverty on children. *The Future of Children*, *7*(2), 55–71. https://doi.org/10.2307/1602387

Burnett-Zeigler, I., Bohnert, K. M., & Ilgen, M. A. (2013). Ethnic identity, acculturation and the prevalence of lifetime psychiatric disorders among Black, Hispanic, and Asian adults in the U.S. *Journal of Psychiatric Research*, *47*(1), 56–63. https://doi.org/10.1016/j.jpsychires.2012.08.029

Clark-Ibáñez, M. (2004). Framing the social world with photo-elicitation interviews. *American Behavioral Scientist*, *47*(12), 1507–1527. https://doi.org/10.1177/0002764204266236

Cole, E. R. (2009). Intersectionality and research in psychology. *American Psychologist*, *64*(3), 170–180. https://doi.org/10.1037/a0014564

Collins, S., Clifasefi, S., Stanton, J., Straits, K., Rodriguez Espinoza, P., Andrasik, M., . . . Wallerstein, N. (2018). Community-based Participatory Research (CBPR): Towards equitable involvement of community in psychology research. *American Psychologist*, *73*(7), 884–898. https://doi.org/10.1037/amp0000167

Cooper, J. (2007). *Cognitive dissonance: 50 years of a classic theory*. SAGE.

Courtenay, W. H. (2000). Constructions of masculinity and their influence on men's well-being: A theory of gender and health. *Social Science & Medicine*, *50*(10), 1385–1401. https://doi.org/10.1016/S0277-9536(99)00390-1

Crenshaw, K. (1991). Mapping the margins: Intersectionality, identity politics, and violence against women of color. *Stanford Law Review*, *43*(6), 1241–1299.

Dashiff, C., Childs, G., & Roberson, A. J. (2011). Poverty. In R. J. R. Levesque (Ed.), *Encyclopedia of adolescence* (pp. 2126–2134). http://link.springer.com/referenceworkentry/10.1007/978-1-4419-1695-2_225

Deaux, K., & Burke, P. (2010). Bridging identities. *Social Psychology Quarterly*, *73*(4), 315–320. https://doi.org/10.1177/0190272510388996

de Vries, K. (2012). Intersectional identities and conceptions of the self: The Experience of transgender people. *Symbolic Interaction*, *35*(1), 49–67.

Drew, S. E., Duncan, R. E., & Sawyer, S. M. (2010). Visual storytelling: A beneficial but challenging method for health research with young people. *Qualitative Health Research*, *20*(12), 1677–1688. https://doi.org/10.1177/1049732310377455

Du Bois, W. E. B. (1903). *The souls of black folk*. Dover.

Dumas, T. M., Ellis, W. E., & Wolfe, D. A. (2012). Identity development as a buffer of adolescent risk behaviors in the context of peer group pressure and control. *Journal of Adolescence*, *35*(4), 917–927. https://doi.org/10.1016/j.adolescence.2011.12.012

Dunkel, C. S., & Sefcek, J. A. (2009). Eriksonian lifespan theory and life history theory: An integration using the example of identity formation. *Review of General Psychology*, *13*(1), 13–23. https://doi.org/10.1037/a0013687

Erikson, E. H. (1968). *Identity: Youth and crisis*. W.W. Norton.

Evans, J. F. B. (2011). Health, illness, men and masculinities (HIMM): A theoretical framework for understanding men and their health. *Journal of Men & Health*, *8*(1), 7–15. https://doi.org/10.1016/j.jomh.2010.09.227

Gallo, L. C., Bogart, L. M., Vranceanu, A.-M., & Matthews, K. A. (2005). Socioeconomic status, resources, psychological experiences, and emotional responses: A test of the reserve capacity model. *Journal of Personality and Social Psychology*, *88*(2), 386–399.

Ginwright, S. (2010). *Black youth rising: Activism & radical healing in urban America*. Teachers College Press, Columbia University.

Greig, R. (2003). Ethnic identity development: Implications for mental health in African-American and Hispanic adolescents. *Issues in Mental Health Nursing*, *24*(3), 317–331. https://doi.org/10.1080/01612840305278

Hammack, P. L. (2015). Theoretical foundations of identity. In K. McLean & M. Syed (Eds.), *The Oxford handbook of identity development* (pp. 11–30). Oxford University Press.

Hardy, S. A., Francis, S. W., Zamboanga, B. L., Kim, S. Y., Anderson, S. G., & Forthun, L. F. (2013). The roles of identity formation and moral identity in College Student Mental Health, health-risk behaviors, and psychological well-being. *Journal of Clinical Psychology*, *69*(4), 364–382. https://doi.org/10.1002/jclp.21913

Harper, D. (2002). Talking about pictures: A case for photo elicitation. *Visual Studies*, *17*(1), 13–26. https://doi.org/10.1080/14725860220137345

Hattery, A. (2007). *African American families*. SAGE.

Hatzenbuehler, M. L., Phelan, J. C., & Link, B. G. (2013). Stigma as a fundamental cause of population health inequalities. *American Journal of Public Health*, *103*(5), 813–821. https://doi.org/10.2105/AJPH.2012.301069

Hesse-Biber, S., & Leavy, P. (2011). *The practice of qualitative research* (2nd ed.). SAGE.

Joint Center for Political and Economic Studies. (2012). *Place matters for health in Alameda County: Ensuring opportunities for good health for all: A report on health inequities in Alameda County, California*. Virginia Commonwealth University.

Jones, S. R., & McEwen, M. K. (2000). A conceptual model of multiple dimensions of identity. *Journal of College Student Development*, *41*(4), 405–414.

Levesque, R. J. R. (2011). Identity formation. In R. J. R. Levesque (Ed.), *Encyclopedia of adolescence* (pp. 1362–1363). http://link.springer.com/referenceworkentry/10.1007/978-1-4419-1695-2_501

Link, B. G., & Phelan, J. (1995). Social conditions as fundamental causes of disease. *Journal of Health and Social Behavior*, *35*, 80–94.

Mandara, J., Gaylord-Harden, N. K., Richards, M. H., & Ragsdale, B. L. (2009). The effects of changes in racial identity and self-esteem on changes in African American adolescents' mental health. *Child Development*, *80*(6), 1660–1675. https://doi.org/10.1111/j.1467-8624.2009.01360.x

McAdams, D. P., & McLean, K. C. (2013). Narrative identity. *Current Directions in Psychological Science*, *22*(3), 233–238. https://doi.org/10.1177/0963721413475622

McRae, K., Gross, J. J., Weber, J., Robertson, E. R., Sokol-Hessner, P., Ray, R. D., . . . Ochsner, K. N. (2012). The development of emotion regulation: An fMRI study of cognitive reappraisal in children, adolescents and young adults. *Social Cognitive and Affective Neuroscience*, *7*(1), 11–22. https://doi.org/10.1093/scan/nsr093

Miller, D. B., & MacIntosh, R. (1999). Promoting resilience in urban African American adolescents: Racial socialization and identity as protective factors. *Social Work Research*, *23*(3), 159–169. https://doi.org/10.1093/swr/23.3.159

Noble-Carr, D., & Woodman, E. (2018). Considering identity and meaning constructions for vulnerable young people. *Journal of Adolescent Research*, *33*(6), 672–698. https://doi.org/10.1177/0743558416684952

Oyserman, D., Elmore, K., & Smith, G. (2012). Self, self-concept, and identity. In M. Leary & J. P. Tangney (Eds.), *Handbook of self and identity* (2nd ed., pp. 69–104). Guilford Press.

Phinney, J. S. (2008). Bridging identities and disciplines: Advances and challenges in understanding multiple identities. *New Directions for Child and Adolescent Development*, *2008*(120), 97–109. https://doi.org/10.1002/cd.218

Pink, S. (2013). *Doing visual ethnography*. SAGE.

Rhomberg, C. (2004). *No there there*. http://www.ucpress.edu/book.php?isbn=9780520251663

Richard, V. M., & Lahman, M. K. E. (2015). Photo-elicitation: Reflexivity on method, analysis, and graphic portraits. *International Journal of Research & Method in Education*, *38*(1), 3–22. https://doi.org/10.1080/1743727X.2013.843073

Robertson, S. (2007). *Understanding men and health: Masculinities, identity and well-being*. Open University Press.

Schwartz, S. J., Forthun, L. F., Ravert, R. D., Zamboanga, B. L., Umaña-Taylor, A. J., Filton, B. J., . . . Hudson, M. (2010). Identity consolidation and health risk behaviors in college students. *American Journal of Health Behavior*, *34*(2), 214–224.

Sellers, R. M., Chavous, T. M., & Cooke, D. Y. (1998). Racial ideology and racial centrality as predictors of African American college students' academic performance. *Journal of Black Psychology*, *24*(1), 8–27. https://doi.org/10.1177/00957984980241002

Sellers, R. M., Copeland-Linder, N., Martin, P. P., & Lewis, R. L. (2006). Racial identity matters: The relationship between racial discrimination and psychological functioning in African American adolescents. *Journal of Research on Adolescence*, *16*(2), 187–216. https://doi.org/10.1111/j.1532-7795.2006.00128.x

Sellers, R. M., Smith, M. A., Shelton, J. N., Rowley, S. A. J., & Chavous, T. M. (1998). Multidimensional model of racial identity: A reconceptualization of African American racial identity. *Personality and Social Psychology Review*, *2*(1), 18–39. https://doi.org/10.1207/s15327957pspr0201_2

Starks, H., & Brown Trinidad, S. (2007). Choose your method: A comparison of phenomenology, discourse analysis, and grounded theory. *Qualitative Health Research*, *17*(10), 1372–1380. https://doi.org/10.1177/1049732307307031

Staudinger, U. M., Marsiske, M., & Baltes, P. B. (1995). Resilience and reserve capacity in later adulthood: Potentials and limits of development across the life span. In D. Cicchetti & D. J. Cohen (Eds.), *Developmental psychopathology, Volume 2: Risk, disorder, and adaptation* (pp. 801–847). John Wiley.

Steele, C. (2010). *Whistling vivaldi: How stereotypes affect us and what we can do*. W.W. Norton.

Steinberg, L. (2013). Identity. In L. Steinberg (Ed.), *Adolescence* (10th ed.) (pp. 245–275). McGrawHill.

Tervalon, M., & Murray-García, J. (1998). Cultural humility versus cultural competence: A critical distinction in defining physician training outcomes in multicultural education. *Journal of Health Care for the Poor and Underserved*, *9*(2), 117–125. https://doi.org/10.1353/hpu.2010.0233

Troy, A. S., Wilhelm, F. H., Shallcross, A. J., & Mauss, I. B. (2010). Seeing the silver lining: Cognitive reappraisal ability moderates the relationship between stress and depressive symptoms. *Emotion*, *10*(6), 783–795. https://doi.org/10.1037/a0020262

Wang, C. C. (2006). Youth participation in photovoice as a strategy for community change. *Journal of Community Practice*, *14*(1–2), 147–161. https://doi.org/10.1300/J125v14n01_09

Wang, C. C., & Burris, M. A. (1997). Photovoice: Concept, methodology, and use for participatory needs assessment. *Health Education & Behavior*, *24*(3), 369–387. https://doi.org/10.1177/109019819702400309

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