FINDING MINAGÅHET: THE MENTAL HEALTH IMPLICATION OF CHAMORU CULTURAL KNOWLEDGE AMONG PEOPLE OF CHAMORU DESCENT

by

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(Under the Direction of Drs. Linda Campbell and Collette Chapman-Hilliard)

ABSTRACT

Micronesia has one of the highest suicide rates in the world (WHO, 2016), with numbers reaching alarming and epidemic-like heights for decades (Lowe, 2019). Within this population, research has identified the CHamoru people (e.g., Indigenous Pacific Islanders of the Northern Mariana Islands and Guam) are at the highest risk for suicide attempts and death. Yet, there is a paucity of literature on CHamoru mental health, with only a handful of research studies examining the mental health experiences of the CHamoru people. Thus, little is known to help counseling psychologists understand the mental health of the CHamoru community. Utilizing constructivist grounded theory and liberation psychology, this mixed-method research study offers foundational insight into how CHamoru Cultural Knowledge (e.g., ethnic identity and consciousness) and colonial mentality impact the mental health outcomes of CHamoru people. Quantitative results from this study indicate that ethnic identity and consciousness improved depression and anxiety symptoms and demonstrated that higher levels of consciousness decreased depressive symptoms. Qualitative findings corroborated these results while also further elucidating these findings. These findings provide initial documentation on the impact of colonial mentality and CHamoru Cultural Knowledge on the mental health of CHamoru adults.

INDEX WORDS: pacific islander, mental health, colonial mentality, Indigenous, ethnic identity, historical knowledge, social justice, Chamoru, consciousness, colonization

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A Dissertation Submitted to the Graduate Faculty of The University of Georgia in Partial Fulfillment of the Requirements for the Degree

DOCTOR OF PHILOSOPHY

ATHENS, GEORGIA

2024

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August 2024

DEDICATION

To my mom, Martha Manglona-Pace. For all the battles you fought and the mountains, you moved for being tough on me while always being a soft-landing space. I may have been a daddy's girl, but you have always been my anchor amid storms and my compass when all seemed lost. This journey could not have happened without your endless support, encouragement, and love. Thank you for teaching me not to fear the fire but to *become it*. Hu guaiya hao para siempre.

To my daddy, Kenneth Eric Pace, who left this earth too soon. The lessons you taught me while you were here have carried me throughout this process.

And to every one of my CHamoru mañe'lu who finds themselves lost at sea in search of home, I hope you remember your wayfinding blood and know that the diaspora desperately loves you and needs you.

Lastly, too little Shawntell, who was always a force to be reckoned with…you did it, girl.

ACKOWLEDGEMENTS

Bell hooks once wrote, “Solidarity is not the same as support…Support can be occasional. It can be given and just as easily withdrawn. Solidarity requires sustained, ongoing commitment.” This dissertation could not have been conceivable without my community. Those who have continuously committed to going before me, standing beside me, and most times in the gap, in solidarity as I grappled, processed, labored, and evolved throughout this process. Believe it or not, this section was the most challenging part of my dissertation. There are not enough pages to accurately depict my love and deep appreciation for the people who have consistently been in my corner. Thus, this is my attempt to put in writing my gratitude for the people who have helped me capture the stories of my people.

To God, my spirit guides, and my ancestors, thank you for your protection and constant work behind the scenes to ensure every room was prepared for me. I am grateful for every opened door, redirection, divine intervention, and temporary disappointment that has led to this long-term experience of joy, knowing, and achievement.

Si Yu'os Ma'åse' to My Dissertation Committee and Research Team

To my fantastic committee, who selflessly offered their insight and guidance as this dissertation was birthed and completed. Dr. Craig Santos Perez, thank you for sharing your expertise, time, and passion for our CHamoru people and culture. I am forever grateful that you answered my email and agreed to be part of my committee. Saina Ma'åse'. Dr. Alan Stewart, thank you for your endless support, sharing your love for research, and helping me birth this idea in your research class. You will forever be one of my favorite teachers. DR, thank you for your

feedback and thoughtful questions, which developed my critical thinking skills throughout this process.

To my research team, who held the stories of my people working diligently to ensure that their experiences were accurately told. Thank you for your commitment and your labor.

My Academic Mothers

All the work I have done has been because of two brilliant women who have modeled to me what it means to be a boss. Women who always had time to hop on a call to mentor me despite their busy schedules. I am incredibly blessed to have worked alongside these two powerhouses—my advisors. Dr. Linda Campbell, the legend, we share a bond like no other. I will forever deeply appreciate how you have poured into me, championed me, and helped me become a better leader and human. Thank you for your consistent belief in me, weekly meetings of guidance and tea, for supporting my wild ideas, and for your consistent protection. I promised myself in the beginning that I would be a good steward of your decision, and I will continue to make good on that.

To my academic mother, Dr. Collette Chapman-Hilliard, who often saw what I could not see in myself, I am who I am because of all your intentional decisions. You nurtured my genius, ignited my researcher's heart, and challenged me to "go deeper" when I thought I had nothing left. This could not have happened without you and your guidance. Thank you for seeing all parts of me, holding on to hope, and being a sacred space for my many moments of distress, tears, righteous rage, and joy. I am eternally grateful that God decided to let our paths meet so that we can become family. Your teachings, your example, and your accountability have completely transformed me.

To the Hilliard family

Fredrick, thank you for being my other parent, looking out for me, and helping me prepare for the next chapter in my life. To Hardison and Addison, thank you for sharing your mom with me and allowing me to become part of your lives. I do not take it lightly.

My Mentors

This work could not have been possible without the work and mentorship of Drs. Erica McKinney, Christina Clarke, Lauren Harper, Brean'a Parker, Natalie Watson-Singleton, and Shanteria Owens. You women have been beacons of light and pathed the way for me. Thank you immensely.

To My Cohort

To my cohort, who loves to learn, laugh, and exchange tea, you have made this journey much sweeter. I could not imagine going through this stressful process with anyone else. To Drew, my co-coordinator and the person I can always count on to make crazy reaction faces in class, thank you for your brilliance and always saving the day when we desperately needed help. Denise, my partner in crime since the master's program, thank you for sharing your life and knowledge with me. I look forward to continuing to watch your genius in action. Lauren, thank you for making our classes more exciting with your work and experience and helping us think critically about systems. Julie, oh, my cheetah girl. Thank you for always answering our (me, Jacky, and Charmaine) calls, for the nights of endless dancing and study dates, and your incredible friendship.

My UGA Family

This section would only be complete by acknowledging my UGA family, who has been there for me every step of the way. You all have taught me so much, celebrated with me, cried with me, and continuously encouraged me when I needed it. Thank you for the many nights and

days that have led to my most treasured memories. To Drs. Ecclesia Savage and Tanisha Pelham, the most intelligent and hilarious women I know, thank you for being my ride-or-die people, writing partners, healing space co-facilitators, and creative gurus. I am forever grateful for your mentorship and for doing life with me throughout this journey. Dr. Elizabeth Cardenas-Bautista, my co-activist. Thank you for always being an inspiration and allowing me to bear witness to your genius. Jasiah McCalla, my brother. I am forever grateful for our bond, debates, and long conversations. I love you. Dr. Ana THE Carina, you have always been the sun. Thank you for always making me talk about my feelings and being a soft-landing space just to be me. I have grown because of you. To my best friend Jatawn, thank you for being my sounding board, spiritual advisor, consultant, and honestly, for just being you.

To my UGA family, who is next to becoming doctors, you got this.

My Family and Friends

I am no one without the ones who have been there for me before I even started this journey and have been the driving force to completing this dissertation. This is your dissertation as much as it is mine. To my mom, Martha Manglona-Pace, thank you for constantly reminding me of who I am and where I come from and for teaching me at a young age to work hard and to always seek justice for those most vulnerable. I love you. Thank you to my brothers, Maurice and Marcus Pace, for stepping up when I returned to school. Thank you to my cousin-siblings, John, Danielle, and Alexis Williams, who continuously brought me joy and made me laugh during this time. I am deeply grateful for my aunts, uncles, cousins, nephews, and nieces who have prayed for, fed, nurtured, and loved me during this time.

Additionally, I want to express my gratitude to my friends who have held it down for me and ensured I experienced life outside the academic walls. To my very best friends, Phillip Sidberry, Chrissandra Jallah, and Quanecia Beasley thank you for always being my anchor.

My Cohort Sistas

To the two women who have become my sisters, I do not know what I would have done without you two. You have given me the gift of your friendship, and we have created a beautiful and unbreakable sisterhood. Jacky, my buja roommate. From day one, you have been the ying to my yang, balancing me out and reminding me to "don't trip boo." Your love for life, intellect, and activist heart are unmatched. I constantly learn from you and stand in awe at how your mind works. I am always able to put the pieces of the puzzle together for systemic change. You are beautiful inside and out, and I am beyond blessed to have you in my life. Charmaine, my Taurus twin. Thank you for teaching me to celebrate, work hard, and play harder. You are one of the most caring and thoughtful people I know. Thank you for sharing your go-getter spirit, love for a job, energy, and heart for social justice with me. I love you both dearly, and I am excited to continue to learn from you, work alongside you, and celebrate you in the years to come. We did it!

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CHAPTER 1

INTRODUCTION

> Ginen i mas takhelo' gi Hinasso-ku, i mas takhalom gi Kurason-hu, yan i mas figo' na Nina'siñå-hu, Hu ufresen maisa yu' para bai hu Prutehi yan hu Difende i Hinengge, i Kottura, i Lengguahi, i Aire, i Hanom yan i tano' CHamoru.
>
> —Camacho-Dungca, Inifresi CHamoru Pledge,1991.

In 1671, Maga'låhi[1] Hurao—a CHamoru Chief from the island of Guahån (i.e. Guam)—rallied an army of 2,000 CHamoru warriors to deliver an inspiring speech before leading the resistance to fight the Spanish (Delisle, 2016). The Spaniards had been on a colonizing conquest throughout the Micronesian islands, including Guahån, violently manipulating, threatening, and forcing CHamorus to leave their Indigenous ways of living and knowing to adopt what the Spanish missionaries believed was a more "civilized" and "accurate" way of life. The CHamoru people rebelled against this vicious tactic, organizing and arming themselves to fight for their people, their islands, and their beliefs. Surrounded by CHamoru warriors, Maga'låhi Hurao declared:

> They treat our history as fable and fiction. Haven't we the same right concerning that which they teach us as incontestable truths? They exploit our simplicity and good faith. All their skill is directed towards tricking us; all their knowledge tends only to make us unhappy. If we are ignorant and blind, as they would have us believe, it is because we have learned their evil plans too late and have allowed them to settle here.

[1] *Maga'låhi* is the CHamoru word for high ranking or chief.

> Let us not lose courage in the presence of our misfortunes. They are only a handful. We can easily defeat them. Even though we don't have their deadly weapons which spread destruction all over, we can overcome them by our large numbers. We are stronger than we think! We can quickly free ourselves from these foreigners! We must regain our former freedom!

Maga'låhi Hurao's "Enough is enough" anti-colonial speech incited the 25-year-long CHamoru-Spanish Wars and has become one of the most pivotal events in CHamoru history (Na'puti & Frain, 2017). CHamoru scholars have identified Maga'låhi Hurao as the living embodiment of *matatgna*—standing up with a specific fierce determination, a form of courage (Na'puti & Frain, 2017). This story of resistance and strength remains at the heart of the CHamoru people and is today's anchor to CHamoru resistance. However, this historical event does not exist in American history books. Equally concerning, the average American is unaware of the CHamoru people's story, let alone their existence, a population that enlists more U.S. soldiers per capita than any other population (Topol, 2023). Colonization has done its best to erase the CHamoru people, their culture, their history, and their legacy; yet, what cannot easily be erased or ignored are the stark and horrific statistics that tell us the story that the mental health of the CHamoru people should be everyone's concern.

According to the World Health Organization (2016), Micronesia has one of the highest suicide rates in the world, with numbers remaining elevated above global averages and reaching unprecedented and epidemic-like heights in the past decades (Lowe, 2019). Particularly within the Micronesian community, research has indicated that CHamorus are at the highest risk for suicide attempts and death, with approximately 38% of the CHamoru population reported having thought about suicide (Monteith et al., 2023). These alarming numbers call for the need for the

mental health field to examine the contributing factors that cause psychological distress that may lead to suicide ideation within the Micronesian community. However, psychological research examining mental health among Micronesian communities remains scarce despite this population being one of the fastest-growing Pacific Islander (PI) ethnic groups among the 1.5 million people who identify as PIs within the United States (Empowering Pacific Islander Communities & Asian Americans Advancing Justice, 2014; U.S. Census, 2010). With such a lack of research on Micronesian mental health, this leaves counseling psychologists and other mental health professionals with little information about the mental health of Pacific Islander communities, and even less information is available regarding CHamoru mental health.

Broader research on PIs living in the United States underscores higher levels of psychological distress when compared to other populations. For instance, findings from The Native Hawaiian and Pacific Islander National Health Survey (2014) conducted by the U.S. Census Bureau and the National Center for Health Statistics indicated that PIs experienced more psychological distress within the past 30 days when compared to single-race Asian adults (Zelaya et al., 2017). These results also suggest that PIs (4.1%) experience higher psychological distress in comparison to the total U.S. population (3.1%). Wyatt et al. (2015) further elucidated these findings as they noted that the higher levels of psychological distress, such as depression, were mainly explained by discrimination, ethnic marginalization, and acculturated stress. A conducted by Subica et al. (2019) corroborated this finding, as their results revealed that the higher prevalence of mental health problems among PIs is due to factors like colonization, cultural oppression, forced assimilation, and historical trauma. These conclusions illustrate the necessity for psychological scholarship to consider each PI culture's unique histories, identities, cultural contexts, and experiences when working to understand mental health better. Thus, it

stands to reason that in beginning to capture the mental health experiences of the CHamoru community, it is essential to understand their history, identities, cultural context, and how their specific colonialization experiences have impacted these components, as mentioned earlier.

Historical Background: I Taotao Tåno – The People of the Land

CHamorus, or *Taotao Tano*, meaning People of the Land, are the Indigenous Pacific Islanders of the Mariana Islands situated in the northwestern half of the South Pacific Ocean (Russel, 1998). According to anthropologists, CHamorus have called the Mariana Islands home for over 4,000 years and are one of the oldest Pacific Peoples within Oceania (Russel, 1998). The story of the CHamoru people is one of perseverance, resilience, strength, and persistent resistance and negotiation of colonization by the hands of four entities: Spain, Germany, Japan, and the United States. The Mariana Islands are an archipelago of fifteen islands, with four of these islands (e.g., Saipan, Tinian, Rota, and Guam) being presently inhabited. Today, The Mariana Islands are composed of two administrative units: (1) Guam, a territory of the United States, and (2) the Northern Mariana Islands (e.g., Saipan, Rota, and Tinian), a Commonwealth of the U.S.

Prior to colonization, the story of the CHamoru people was one of freedom. CHamorus were wayfinding people. They were skilled navigators who deeply understood the ocean and stars, equipping them with the knowledge and skillset to take long voyages across Oceania (Bennet, 2021). CHamorus lived a rich life with a vibrant aesthetic tradition of orature, dance, weaving, and carving within a matrilineal society (Bennet, 2021). They created a sustainable clan-based society centered on aquaculture and agriculture, with labor shared across gender and class. CHamoru culture was grounded in a system of reciprocity and balance between extended

family and village members. The CHamoru people were spiritual people revering their ancestors, with the acknowledgement that their ancestors lived on earth alongside them.

Then in 1521, colonization arrived on their shores with the arrival of Ferdinand Magellan, who falsely claimed to have "discovered" Guam, calling the CHamoru people "thieves" (Cruz, 2012) due to his misunderstanding of CHamoru values and traditions. In 1668, Spain invaded Guam, bringing disease and genocide to the island. The Spaniards destroyed villages, murdered the CHamoru people, and raped as well as forced marriage unto the CHamoru women. The Spaniards forced CHamorus to convert to Catholicism and mandated that the CHamoru people learn Spanish, resulting in the indigenous CHamoru language becoming approximately 40 percent Spanish (Cruz, 2012). During 1521-1898, the CHamorus experienced violence, terrorism, and almost complete genocide at the hands of the Spanish. For 300 years, the Spanish maintained colonial rule over Guam initiating the deculturation process, stripping them of their indigenous language, ancestral beliefs, matriarchal society, and dismantling the once unified archipelago of islands (Cruz, 2012).

At the end of the Spanish-American War, Guam was officially seized by the United States via the Treaty of Paris (Perez, 2005). Under United States rule, CHamorus underwent more deculturation through complete military rule, the banning of their language, and denial of their rights. For instance, in 1901, the United States Supreme Court deemed CHamorus an "alien race" and solidified into law that the constitution could not be applied to CHamoru people (Cruz, 2012). In 1941, the United States received word that Guam would be attacked and bombed alongside Pearl Harbor. This caused a mass exodus of White Americans including their wives and children from the island, leaving the CHamoru people vulnerable and ultimately defenseless. After the attack on Pearl Harbor, the Japanese then bombed and invaded Guam. Subsequently,

Japan occupied Guam from 1941-1944. During the Japanese occupation, the CHamoru people experienced terrorism and mass murder. CHamoru women were constantly sexually assaulted by Japanese soldiers, children and adults were mandated to work fields to provide food to the Japanese, CHamoru people were forced off their lands and put into concentration camps, and there were periods where there were mass beheadings of men and mass murders of children and women. In a study conducted by Cruz (2012), CHamoru survivors recalled the massacre of 46 CHamoru men and women by the Japanese, being forced to work with no wages, living on rationed food, and the constant sexual assault of CHamoru women and girls. As a result of these beyond-hard conditions, CHamorus found themselves identifying with their previous colonizers causing them to want to be under those conditions rather than the ones they were experiencing presently (Hattori, 1995).

Due to Guam's proximity to Asia, the island was well positioned as an ideal location for the United States military strategy, leaving it too essential to surrender to Japan (Perez, 2005). Therefore, on July 21, 1944, the United States recaptured Guam from the Japanese. After what is often coined as the "liberation" of Guam from Japanese rule, CHamorus became particularly patriotic (Souder, 1991; Underwood, 1987) to the United States as the US occupation was better than the Japanese. Militarization of CHamoru land began to take place. The US coerced and, most times, forced CHamorus to sign their lands over to prove their patriotism. The CHamoru people began to experience a mass increase in displacement through landlessness and homelessness. CHamorus found themselves in a complicated position, wanting to protect their cultural background and land while also desiring American citizenship and civil government. Thus, in 1950, through the efforts of the CHamoru people, the United States passed the Organic Act of Guam, which granted Guam self-government, citizenship, revenue through taxes, and

military presence (Hattori, 1995; Cruz, 2012). However, this act was not without its complications. The Organic Act of Guam also established into law that although the people of Guam would be acknowledged as U.S. citizens, they could not vote in general elections such as the presidency of the United States. Guam's delegate to the House of Representatives would also be a non-voting member. Although each territory would be designated one representative to Congress, they would have no voting rights. Ultimately, The Mariana Islands would be observers at the table with no voice or choice. This established Guam as an unincorporated territory of the United States while the rest of the Mariana Islands (e.g., Saipan, Tinian, and Rota) were a commonwealth of the United States. Currently, Guam is one of the few remaining colonies of the world with no power and a history of being a US colony for over 110 years (Cruz, 2012).

Cultural change among the CHamoru people resulted from colonization and loss of political power by the Spanish, Germans, Japanese, and the United States. Despite their history and present-day experiences of colonization, the CHamoru people have maintained a distinct cultural and social identity that remains strong today (Kanton Tasi, 2012).

Justification of the Study

Micronesia consists of various diverse, rich cultures that each have their own unique experiences textured by aspects such as colonization, discrimination, and historical trauma, which impact mental health (Wyatt et al., 2015). As previously mentioned, research focused on the Pacific Islander populations' mental health is growing, but there is a paucity of scholarship examining the mental health experience of Micronesians. Even more concerning, scholarly work examining CHamoru mental health within psychological literature only includes a handful of studies. Specifically, within the field of counseling psychology, CHamoru mental health continues to remain devastatingly invisible. The absence of literature contributes to the silencing

and erasure of a population that often gets unacknowledged in conversations regarding mental health. Research on populations adjacent to the CHamoru people, such as Native Hawaiians and Puerto Ricans, has illustrated significant mental health distress because of colonization (Capielo Rosario et al., 2019; Yeh et al., 2021). Thus, it stands to reason that to attend to CHamoru mental health accurately; it is imperative to understand better the contributing factors that worsen and improve mental health.

In a call to action made by DeBlaere et al. (2019), the authors challenged counseling psychologists to engage in social justice-oriented research that draws attention to understudied areas centering marginalized communities' voices and lived experiences to increase awareness and provide data that will help in the provision of much-needed resources. CHamoru scholars in adjacent fields are making intentional efforts to resist the isolation and silencing that exists within scholarship by making visible the strengths, resilience, and voices of the CHamoru community as well as the atrocities, injustices, and continued colonization imposed upon our CHamoru community. CHamoru people are distinct people with a context that needs to be studied when identifying efforts to improve their well-being. Although research has focused on CHamoru ethnic identity in relation to their history of colonization in fields such as sociology, this topic remains underreported (Perez, 2005). Moreover, to this author's knowledge, no research has been published investigating how ethnic identity and consciousness impact CHamoru mental health. There is no existing literature that begins to help the psychology field understand how cultural knowledge, consciousness, and the impact of an extensive colonization history impact the psychological well-being of people of CHamoru descent. The only studies to date, being to confirm the significant mental health distress present among the CHamoru community. Although there is a paucity of research that begins to examine the mental health of

CHamoru people, there is no significant body of literature that explicitly addresses interventions that can be utilized to improve CHamoru mental health. Given this scarcity of research on mental health, psychological distress, and the absence of scholarship regarding coping among people CHamoru descent, research on this population is desperately needed.

This present study is a response to the call to action to produce research that will inform best practices and mental health interventions and support and drive social change. Equally important, this study is an act of solidarity as I join the lineage of fellow CHamoru scholar-activists working to spread awareness of our people and culture to bring justice to our home finally.

Purpose Statement

The purpose of this mixed-methods study is two-fold. First, this study aims to explore how consciousness and ethnic identity (e.g., CHamoru Cultural Knowledge) impact the mental health outcomes of CHamoru people. Secondly, this study examines how CHamoru cultural knowledge can be utilized as a psychological tool for liberation. This study seeks to fill in the gaps in the literature regarding CHamoru people and their mental health, a population that continues to be invisible within psychological research. The findings of this study will provide initial documentation of the impact of colonization, consciousness, and ethnic identity on the mental health of CHamoru people. These findings can be utilized to inform clinical practice by providing practitioners (e.g., counseling psychologists) with insight on interventions tailored explicitly to the CHamoru people, promoting overall well-being, critical consciousness, and ethnic identity.

Research Questions

Rooted in Constructivist Grounded Theory (Charmaz, 2016, 2017) and Liberation Psychology (Martin-Baro, 1994; Prilleltensky, 1989), the following research questions will serve as a guide for this mixed-methods study:

1. How does CHamoru Cultural Knowledge (e.g., ethnic identity and consciousness) impact the mental health of CHamoru people?
2. How does colonization (e.g., colonial mentality) impact CHamoru Cultural Knowledge and the mental health of CHamoru people?

Definitions and Operational Terms

To ensure the understanding and uniformity of terms throughout this dissertation, the following are terms and their respective definitions.

Oceania – This is the collective name for the geographic region that includes Australia, Melanesia, Micronesia, and Polynesia (Kayser, 2020).

Micronesia is a subregion of Oceania that means "small islands" and consists of the Mariana Islands, Marshall Islands, Caroline Islands, and Palau.

CHamoru/Chamorro – Indigenous people of the Northern Mariana Islands, also known as Micronesia.

CHamoru Cultural Knowledge- CHamoru cultural knowledge is the value and beliefs of the CHamoru people, which encompasses language, food, fishing, agriculture, medicinal, superstition, way of life, religion, folklore, legends, respectu, ancestral spirits, constructions of homes, and history.

Colonial Mentality – David & Okazaki (2006) defined colonial mentality as a form of internalized oppression resulting from colonization. It is characterized by having feelings of gratitude and indebtedness to the colonizer, an automatic rejection of the individual's

respective culture, a preference for the colonizer's society and culture, and a desire to emulate the colonizer. This mentality also outlines the adoption by members of the oppressed group of the racist and prejudiced beliefs aimed at them by the dominant society (Speight, 2007).

Consciousness – Consciousness is defined as an individual's awareness of their socio-political positioning, cultural values, historical legacy (Cross, 1991; Fanon, 1963), and an individual's collective action orientation (Baldwin, 1984).

Ethnic Identity- Phinney (1992) described ethnic identity as the identification of a specific ethnic group that consists of four components: (1) a sense of belonging with an ethnic group, (2) participation in social activities and cultural traditions alongside other members of that group, (3) feelings of attachment towards the group, and (4) exploration and understanding of their identity as a member of that ethnic group.

CHAPTER 2

REVIEW OF RELEVANT LITERATURE

> So, the next time someone tells you islanders were illiterate, teach them about our visual literacies, about how we still read and write the intertextual sacredness of all things. And always remember: if you can write the ocean we will never be silenced
>
> —Perez, The Pacific Written Tradition

This literature review provides a foundation and context to the current study that examines the relationships between ethnic identity, consciousness, colonial mentality, and psychological distress among adults of CHamoru descent. This chapter includes pertinent literature related to the variables included in this study. Throughout this chapter, scholarship on ethnic identity, consciousness, critical consciousness, the psychological impact of colonization, colonial mentality, and Pacific Islander mental health are presented. As a result of the paucity of research that explores these variables within the CHamoru population, literature on how these variables impact the mental health experiences of adjacent populations, such as other Pacific Islanders, Indigenous populations, and people of African descent is discussed.

Colonization

In Dr. Jennifer Mullan's book *Decolonizing Therapy,* she describes colonization as a "psychological and spiritual trauma" (p. 42) that continues to wreak havoc, deeply affecting generations and causing debilitating and long-lasting mental and physical health consequences (2023). Colonization violently erodes the foundations of thriving Indigenous societies across the world through the process of systemic oppression, denigration, and exploitation. Frantz Fanon

(1965) contended that colonization occurs in four phases: (1) the violent and forced entry and occupation of Indigenous land to exploit natural resources and Indigenous peoples, (2) the deculturation of the Indigenous culture while forcefully imposing the colonizer's culture, (3) the portrayal of the Indigenous group by the colonizers as “animalistic, wild, and savage” positioning the colonizer as being responsible for “taming, monitoring, and civilizing” the Indigenous people, and (4) the establishment of a society that perpetuates a colonial mindset that maintains the superiority of the colonizer where the social, political, and economic institutions are created to benefit the colonizer directly. Through the dispossession of lands, the stealing and enslavement of people, the destruction of Indigenous spiritual ways, the erasure of Indigenous languages, militarization, forced assimilation, and genocide, amongst other unspeakable acts of violence, Fanon's conceptualization of colonization is seen throughout communities that have continuously been marginalized and oppressed. Colonization's legacy lives on through various forms of oppression, such as racism, discrimination, poverty, xenophobia, trans oppression, health disparities, climate change, and gentrification (Mullan, 2023).

Colonial Mentality

One of the significant consequences of colonization and a legacy of colonial violence is a form of internalized oppression called colonial mentality (David, 2008), which is considered to affect all populations that have endured colonization (Okazaki et al., 2008). David (2008) defined colonial mentality as the internalized belief by the colonized that their colonizer is superior. He described how individuals with colonial mentality may have feelings of gratitude and/or indebtedness towards their colonizers, prefer the colonizer's culture and society rather than their own, express a desire to disconnect from members of their group, and want to emulate aspects (e.g., physical, cultural, and societal traits) of their colonizer (David, 2008). Choi, Israel,

and Maeda (2017) highlighted how colonial mentality causes members of the oppressed group to adopt racist ideologies that are directed at them by the dominant society. Colonial mentality can manifest in overt (e.g., an individual assimilating to the dominant culture rejecting their respective culture) as well as covert ways (e.g., feeling embarrassed by their respective culture) and can occur independently (David & Okazaki, 2010), meaning an individual can express covert forms of colonial mentality and vice versa. Scholars Fanon (1965) and Memmi (1965) contended that internalizing colonial mentality may result in unstable identity, self-doubt, and internalized feelings of inferiority.

There is a burgeoning body of literature examining colonial mentality among populations with a history of colonization. Results from a study conducted by David and Okazaki (2006) revealed four distinct presentations of colonial mentality in Filipino Americans, which included: lack of a strong positive and self-concept as a Filipino American, rejection of Filipino cultural practices associated with shame in engaging with these practices, downward social comparison of and discrimination against less Americanized Filipinos, and increased acceptance and tolerance of the modern oppression of Filipinos. Findings from a study by Estrellado et al. (2022) indicated that higher levels of colonial mentality among Filipino Americans were related to lower psychological flexibility, which included tolerance for negative emotions and the ability to cope with adversities. Scholars David and Nadal (2013) found that Filipino American adults typically received messages about the cultural and societal superiority of White Americans over Filipinos during childhood and before migrating to the United States. Additional research has linked colonial mentality with depression symptoms amongst Filipino Americans (David, 2008), Ghanaians (Utsey, Abrams, Opare-Henku, Bolden, & Williams, 2015), Puerto Ricans (Capielo Rosario et al., 2019), and Asian Indians (Nikalje & Çiftçi, 2023).

Although research in this area is growing, little is known about how colonial mentality impacts the mental health experiences of Pacific Islander populations. This is partly due to the grouping of Pacific Islanders with Asian American populations despite the different colonial histories and diversity of cultures. What is known about colonial mentality within Pacific Islander populations illuminates the importance of investigating internalized oppression as the manifestation may differ by population. For example, Faaleava (2020) conducted a study on a sample of Samoans and found that while participants endorsed some ideas consistent with colonial mentality (e.g., a desire for a lighter complexion, perception of white individuals as more business savvy than Samoans, attributing colonialism for assistance in the evolution of Samoan society), participants did not experience shame or denigrate their culture like previous studies with other populations have found. Participants fully embraced Samoan cultural traditions and norms and eagerly sought ways to express their cultural pride (Faaleava, 2020). Given the previously mentioned studies have illustrated how colonial mentality influences mental health outcomes among populations that share colonization experiences, it stands to reason that colonial mentality will be present and impact the findings of this present study.

Ethnic Identity

Ethnic identity has become a well-researched topic in the psychological field, especially within the Black, Indigenous, and People of Color (BIPOC) populations. This multidimensional construct speaks to an individual's sense of affiliation with their ethnic group that begins in adolescence and evolves (Marcia, 1980). The origins of ethnic identity can be traced back to Erikson's (1968) developmental theory of ego identity and Tajfel's (1981) social identity theory. Erikson's theory contends that identity (e.g., ethnic group membership) is at the core of self and shaped by a developmental process (1968). He posited that individuals resolve how they feel

about their identity and broader self-concept through reflection, exploration, and commitment. Extending on this, Tajfel's (1981) social identity theory postulates that an individual's identity development results from their sense of belonging and accompanying feelings toward their group membership.

Ethnic identity encompasses an individual's held knowledge of their respective ethnic group as well as an individual's perception, attitudes, emotional connection, values, and beliefs attached to their group membership and how they are included and aligned with their ethnic group (Tajfel, 1981; Tajfel and Turner, 1986; Marcia, 1980). Other research on ethnic identity describes its composition as including shared values, behavior, language, and historical knowledge (Parham & Helms, 1981; Singh, 1977). For instance, Phinney (1992) described four components of ethnic identity, which include a sense of belonging with an ethnic group (i.e., belonging), participation in cultural traditions and social activities with others who are members of the ethnic group (i.e., affirmation), and exploration and understanding of their identity as a member of their ethnic group (i.e., exploration and commitment).

Other conceptualizations of ethnic identity focus further elucidate these components of ethnic identity. For example, Umaña-Taylor, Yazedijan, and Bámaca-Gómez (2004) suggest there are three components of ethnic identity: (1) the degree to which someone has explored their ethnicity, (2) the degree to which an individual has resolved what their ethnic identity means to them, and (3) the effect, whether positive or negative, the individual associates with their resolution. Scholars have also posited that self-esteem is impacted by an individual's sense of group membership, suggesting that someone with favorable group membership will demonstrate positive self-esteem (Phinney, 1992; Phinney, Cantu & Kurtz, 1997). Extending this work, scholars have examined how contextual factors such as historical and cultural circumstances,

political contexts, social locations, economic circumstances, environmental settings, as well as activities or tasks people engage in impact ethnic identity development (Liebkind, 2006; Phinney, 2003, Ying and Lee, 2000; Yip, 2005). For instance, individuals who live in environments where their ethnic group is not valued and/or who have experienced discrimination or prejudice tend to exhibit lower self-esteem when compared to groups who have not had those experiences (Umaña-Taylor, Yazedjian & Bámaca-Gómez, 2004).

Moreover, research has identified a strong ethnic identity as a culturally relevant resource that promotes wellbeing, which can be utilized as a buffer against harmful consequences of stressors (Kimayer et al., 2000) such as discrimination (Bombay et al., 2010). In two meta-analyses, results showed a strong correlation to positive health indicators such as self-esteem, self-mastery, and wellbeing (Rivas-Drake et al., 2014; T. B. Smith & Silva, 2011). A study by Ruiz (1990) found that a strong ethnic identity helps individuals identify positive virtues about their ethnic group, which minimizes the impact of denigrating stereotypes and beliefs perpetuated by society.

Although research on ethnic identity has grown over the past decade, scholarship on the effect of ethnic identity in Indigenous and Pacific Islander populations is underresearched. Findings from an ethnographic study that included four generations of a Native American family highlighted the importance of identity to resilience when combating historical trauma (Denham, 2008). Kenyon & Carter (2011) found that ethnic identity was related to wellbeing amongst tribal high school students with an "achieved" ethnic identity. In a study conducted by Fetter & Thompson (2023), results emphasized a robust ethnic identity served as a protective factor to students' wellbeing when examining the impact of historical loss on Native American college students' mental health.

Despite ethnic identity being researched for many years in the psychological field, scholarship exploring ethnic identity among Pacific Islander populations such as the CHamoru people remains nonexistent. Thus, this study aims to document initial findings of how ethnic identity may influence mental health outcomes.

Origins of Consciousness

The origins of consciousness within psychological literature can be traced back to Black Consciousness (BC), a concept developed out of Black Liberation and Black Consciousness Movements in South Africa and the United States during the 1960s and 1970s and further advanced by Black Psychology (Chapman-Hilliard, 2013; Washington, 2022). These movements illuminated the experiences of people of African descent who underwent an unlearning and relearning process of who they are, dispelling harmful and inaccurate messaging about their history, which is often informed by white supremacy (Chapman-Hilliard, 2013; Washington, 2022).

BC is described as "an individual's perceived importance of and their reflection on Black historical narratives for self and community advancement" (Chapman-Hilliard, 2013). Baldwin posited that when essential characteristics of African consciousness (i.e., Black consciousness) are operating and present, it generates self-affirming behaviors. These characteristics Baldwin identified include: (1) an individual's awareness of their African identity and cultural heritage as well as finding the pursuit of knowledge meaningful, (2) the acknowledgment of survival priorities of Black folx and the necessity for Africentric institutions to affirm Black life, (3) the active engagement in the survival, liberation, and proactive development of Black people defending their dignity, worth, and integrity, and (4) recognition of the detrimental nature of racial oppression to Black survival while actively resisting oppression (1981).

Scholars noted that African self-consciousness can either hinder or promote health development and expression of consciousness, noting it is deeply informed by socialization experiences (e.g., socioenvironmental factors and institutional-systemic processes) (Baldwin, 1987; Duncan & Bell, 1987; Baldwin, Brown & Rackley, 1990). For instance, Baldwin et al. (1990) posited that African Americans/Africans who engage in indigenous or racially-culturally homogenous socioenvironmental forces are expected to possess a stronger sense of African self-consciousness than those in a more heterogeneous racial-culturally mixed socioenvironmental forces. Additional research highlighted the increase of agency, liberation (Lewis et al., 2006), self-worth (Constantine et al., 2006), and critical thinking skills (Watts, Adbul-Abdil, & Pratt, 2002) that occur when BC is present.

Since its introduction into psychological literature, consciousness and its effect on mental health outcomes have been investigated among people across the lifespan. Since consciousness is a significant aspect that informs an individual's relationship with their ethnic identity, this present study seeks to consider the role of consciousness in the mental health outcomes of CHamoru people and how it affects ethnic identity and colonial mentality. This study defines consciousness as an individual's "awareness of their socio-political positioning, cultural values, historical legacy and investment in collection action" (Chapman-Hilliard, 2013) and how meaningful those, as mentioned earlier, are to them. Moreover, this study will also consider critical consciousness and cultural knowledge, two significant components reflecting the overall consciousness construct.

Critical Consciousness and Cultural Knowledge

Many scholars who have examined consciousness have identified critical consciousness and cultural knowledge as aspects that help to strengthen consciousness. Paulo Freire (1993) developed critical consciousness to assist Brazilians in fostering literacy and critical thinking

skills. Critical consciousness (CC) has been defined as the critical analysis of social conditions and the individual and/or collective action taken to change these perceived inequities by oppressed people (Freire, 1973; Diemer & Voight, 2011; Diemer, Rapa, Park, and Perry, 2013). Alongside critical consciousness, cultural knowledge is another factor that helps support an individual's consciousness. Cultural knowledge has been described as a vehicle for people to build their historical and cultural awareness (King, 2004).

CC includes critical reflection and critical action (Prilleltensky, 2012; Watts et al., 2011; Diemer et al., 2015). Critical reflection consists of two subcomponents: (a) critical analysis of perceived social inequalities (e.g., racial/ethnic and socioeconomic limitations on education/occupation opportunity) and (b) the endorsement of societal equality. Critical action is when a person participates in individual and/or collective action to create meaningful and transformative change socio-politically through activism and civic engagement (Diemer et al., 2014). Critical consciousness scholars postulate that the presence of CC enables people to participate in a more intricate and nuanced understanding of structures that restrict their lives, motivates them to negotiate and challenge these limitations to engage in self-determination, and sparks individual and collective human agency, which combats the constraints in place by sociopolitical inequities (Freire, 1993; Prilleltensky, 2012). Seider and Graves (2020) describe CC as an "internal resource or psychological armor" that oppressed people can utilize to mitigate and resist interpersonal, structural, and institutional obstacles. Watts et al. (2011) postulated that CC typically described some amalgamation of collective social identity, critical analysis, political self-efficacy, and social justice-oriented actions. Watts & Hipolito-Delgado (2015) contended that all the previously mentioned elements, excluding action, are psychological

processes that assist individuals with addressing internalized attitudes and knowledge that inform how they make sense of themselves and the world.

Research among populations that have been and continue to be oppressed and/or marginalized has linked CC with positive outcomes. Studies indicate that CC promoted academic achievement and engagement among Black adolescents (O'Connor, 1997), mental health among urban adolescents (Zimmerman et al., 1997), and healthier sexual decision-making among youth of color in South Africa (Campbell & MacPhail, 2002). In a quantitative study on 205 Black adolescents, researchers found a positive association between CC and academic attitudes as well as results underscoring how CC serves as a protective factor buffering against the detrimental effects of racial discrimination (Gale, Johnson, Golden, Channey, Marchand, Anyiwo, and Byrd, 2023). Hope & Spencer (2017) found that CC contributes to positive coping for youth who experience racial discrimination. In a study examining cultural stressors during COVID-19 concerning Latinx youth critical consciousness, Alvarado, Patel, Salcido, and Stein (2024) highlighted that CC contributed to their sense of agency to resist oppression and create social change.

Pacific Islander Mental Health

Historically, research examining the mental health of Pacific Islanders (PI) has been significantly underrepresented within psychological literature despite PI being the third fastest-growing ethnic group in the United States (United States Census Bureau, 2021). This is due primarily to mental health research consistently combining PI populations with Asian Americans. This is problematic as Pacific Islanders and Asian American cultures are vastly different (Park, 2021), with varying histories, cultural contexts, and values. Pacific Islanders are people within the U.S. jurisdictions of Melanesia, Micronesia, and Polynesia whose origins include Samoan,

CHamoru, Hawaiian, Fijian, Tongan, Tahitian, Maʻori, or Marshallese peoples (Allen & Heppner, 2011; Asian Pacific Institute on Gender-Based Violence, 2020). The research that does exist has consistently revealed the overrepresentation of PI in the underutilization of mental health services and in adverse mental health outcomes (Allen et al., 2016).

Overall, research has revealed higher rates of psychological distress among Pacific Islanders, particularly among children and adolescents (Mew et al., 2023) and older adults (Kapeli et al., 2020). Additionally, there are alarming findings that emphasize the necessity for the mental health field to attend to the needs of PI populations. In a recent study conducted by the Centers for Disease Control and Prevention (2023), results revealed that death by suicide was the leading cause of death for PI individuals between 15-24 years old. This finding aligns with additional studies that found that PI populations have some of the highest suicide deaths in the world (Else et al., 2007). Even more alarming, deaths by suicide among youth in the United States are approximately seven times the national average (Else et al., 2007).

Scholars investigating PI mental health have examined the contextual and societal factors that may have influenced these adverse mental health outcomes. For instance, racial discrimination has been found to yield higher symptoms of anger, stress, depression, stress decrease in life satisfaction, and lower self-esteem (Antonio et al., 2016; Allen et al., 2017). In tandem with racial discrimination, scholars have contended that factors such as colonization and militarization were associated with elevated psychological distress, specifically among Native Hawaiians and Micronesians (Hee et al., 2022). Other studies have suggested that acculturative stress, enculturation, poverty, and even generational status are risk factors for depression and suicide (Kwan et al., 2020; Wyatt et al., 2015). J.K. Kaholokula and colleagues (2009)

highlighted that forced acculturation and displacement of PI take a psychological toll that impacts mental health and wellbeing.

In addition to the adverse mental health outcomes, there have been some studies that have focused on examining the barriers to treatment that exist among PI populations, providing the field with insight into the underutilization of mental health services. Findings from a study by Artiga and colleagues (2021) indicated a disparity in the number of PIs, with insurance finding that PIs have a much higher rate of being uninsured than their White counterparts. Scholars have also called attention to how mainstream Eurocentric psychology practices neglect Indigenous Pacific Islanders' cultural values, ways of knowing, and ways of being (Cutrer-Párraga et al., 2022). Existing literature emphasizes how culturally specific treatment is needed and is associated with better and more effective results in treatment (Allen & Smith, 2015; Allen & Heppner, 2011; Parraga et al., 2024). More recently, Parraga and colleagues (2024) found that the mistrust that exists among PIs is partly due to difficulties in finding a therapist who understands their struggles and who will not pathologize their experiences. Subsequently, research has started to identify protective factors that help to mitigate psychological distress and trauma among Pacific Islanders. Allen & Heppner (2011) found that using collectivistic coping styles (e.g., family support and spirituality) led to positive psychological wellbeing.

With little research centered on Pacific Islander mental health, psychological literature must continue to grow in this area. Specifically, research needs to examine subcultures' unique mental health experiences and needs across the Pasifika diaspora.

CHamoru Mental Health

Despite the existing gap in the literature on CHamoru mental health, a lineage of dedicated scholars has emerged, committed to capturing the mental health experiences of the

CHamoru people. Their work is of immense significance, as they have contended that to provide mental health services that are effective and beneficial, mental health providers must use treatment methods that align with CHamoru culture (Penningroth & Penningroth, 1977; Robillard & Marsella, 1987; Taimanglo, 1998). For instance, Taimanglo (1998) devoted her doctoral dissertation to exploring the impact of historical events on the CHamoru population through interviews with nine counseling professionals who worked extensively with CHamoru clients. Her findings identified cultural strengths and barriers to treatment, highlighting the need for counselors providing mental health services to understand the history, culture, values, and beliefs of the CHamoru people in Guam.

Scholarship has also started to explore CHamoru community narratives regarding the conceptualization of mental health as well as mental health problems such as domestic violence (Meno & Allen, 2021), illuminating the need to examine further cultural understandings and definitions of concepts defined by Western society. Twaddle et al. (2003) conducted a qualitative study investigating CHamoru perspectives on mental health issues in Guam. The results suggest that participants viewed people with mental health concerns as "sick," "abnormal," "bad," or "immoral." Additionally, the findings suggest that negative attitudes and labels contributed to CHamorus' perspectives on mental health. The results also indicated that CHamorus coped with mental health by keeping it within the family or hiding it from others (Twaddle et al., 2003), as doing so may contribute to shame of oneself and the family. This is consistent with Yamashiro and Matsuoka's (1997) notion that in Pacific Islander communities, one person's behavior impacts how the entire family system is viewed.

Recently, Aguon and Kawabata (2022) sought to determine if there was a relationship between public stigma and intent to seek mental health treatment. Additionally, the authors

wanted to examine whether this relationship would be mediated by self-stigma and attitudes toward seeking mental health treatment. Their quantitative study included a sample size of 111 CHamoru adults. Their findings indicate that high public stigma can lead to lower intent to seek mental health treatment for CHamorus but only through an indirect path of self-stigma and attitudes toward seeking mental health treatment (Aguon & Kawabata, 2022). The work of these scholars offers insight into the psychological field of what is needed for CHamorus living in Guam. However, to this author's knowledge, there has not been literature focused on CHamoru people across the diaspora living in varying geographic locations.

CHAPTER III

METHODOLOGY

With the strength we inherit from our ancestors,

We will engage in this war to preserve our past,

Using our vocal cords as slings and our vocal tones as stones,

they are thrown, not to break bones, but to break the silence of our people,

to all of you this is just a poem,

but to us, it's the chance to bring justice to our home.

— Wai and Guerrero, Self-Guamination, 2011

The goal of this study is to understand how cultural consciousness and ethnic identity impact the mental health of CHamoru adults while accounting for the unique effects of colonization (e.g., colonial mentality). As a result of the CHamoru people's extensive and complicated relationship with colonization (past and present), selecting a social justice-oriented and liberation-focused methodology was a priority when designing this study. Hence, a mixed methods triangulation convergence design was chosen to center the distinct and multifaceted experiences of the CHamoru people who encounter marginalization and continue to experience colonization and unended violence. This chapter provides details of the methodology for this mixed methods study, frameworks that ground this study, and details of the quantitative and qualitative phases.

Justification for Mixed Methods

The decision to employ a mixed methods design was intentionally made to ensure the present study fully captured Indigenous voices and lived experiences, which are often oppressed into silence and overlooked in various spaces, including within the counseling psychology profession. As mentioned previously, to this author's knowledge, counseling psychology has no existing research related to or centering the mental health experiences of CHamoru people to date. In recent years, the field of counseling psychology has endorsed a commitment to social justice, encouraging counseling psychologists to incorporate this value within their teaching, clinical praxis, and research (DeBlaere et al., 2019). Ponterotto et al. (2013) contend that mixed methods research can help to develop this commitment to social justice research further as it lends itself to "provide researchers with multiple windows into the lives of the less empowered and historically silenced." By combining the strengths of quantitative and qualitative methods, research questions are answered with breadth and depth through a more comprehensive examination of a phenomenon (Anchin, 2008; Ponterotto et al., 2013). According to Watson-Singleton and colleagues (2021), mixed methods offer researchers the opportunity to fully reflect on the experiences of the population that they seek to learn from by attending to their lived experiences through qualitative data collection while also examining testable patterns and relationships of essential variables that provide further context to their lived experiences.

In tandem with the previously mentioned benefits, mixed-methods research has been long accepted as an appropriate and culturally responsive methodology for research involving Indigenous people (Drawson et al., 2017). Mixed methods align well with Indigenous collectivist worldviews and philosophies (Fetters & Molina-Azorin, 2018). Specifically, with Pacific Islander populations, Martel and colleagues (2021) contended that a mixed methods approach fully captures the Pacific worldview through its collective (e.g., qualitative and quantitative)

nature that is consistent with the Pacific philosophy of connectedness and collective holistic approach, interwoven to create new knowledge. In fact, Indigenous researchers have enhanced mixed methods by incorporating mixed methods foundations with their specific Indigenous thought. For example, Martel et al. (2021) utilized mixed methods to develop a research framework influenced by Māori (e.g., Indigenous people of New Zealand) culture, history, Indigenous knowledge, language, values, and worldview. Their mixed methods approach allowed researchers to integrate strengths from quantitative and qualitative methods to produce numerical and opinion-driven results that identified a community need. This led to the development and implementation of an online mental health and lifestyle screening tool for Māori adolescents. Though some scholars caution against mixed methods, suggesting that one phase of the study may dilute the other and question the attempt to do "too much" in a single study (Chwalisz et al., 2008), the culturally contextual experiences of the population of interest and research questions for the current study are best suited for a mixed methods design, a choice is well-supported in current scholarship. Hence, a mixed methods design is social justice-oriented and culturally appropriate for the CHamoru population.

Current Study Design

A mixed methods triangulation convergence model will be employed, consisting of quantitative and qualitative data collected separately and concurrently (Creswell, 1999). This model requires the researcher to collect and analyze the quantitative and qualitative data separately (Creswell, 1999). The quantitative and qualitative data are equally weighted (e.g., considered with the same degree of importance). After data collection, the researcher converges (e.g., discusses the findings alongside one another) the findings during the interpretation. This increases the meaningfulness of the data and decreases researcher bias (Watson-Singleton et al.,

2021). Due to the absence of literature examining the mental health of people of CHamoru descent, a mixed methods design is appropriate to better understand the role of CHamoru cultural knowledge (i.e., ethnic identity and consciousness) on the mental health of this population. It allows a process to identify outcomes and contextualize the findings to reach a more holistic and comprehensive conclusion (Watson-Singleton et al., 2021). Additionally, this design is utilized to corroborate the quantitative and qualitative results to increase the validity and trustworthiness of the findings. The quantitative and qualitative phases will discuss specific research questions and relevant hypotheses.

Recruitment Strategies

After receiving approval from the University of Georgia Institutional Review Board, I began recruitment. Eligibility criteria for this study included participants who self-identified as persons of CHamoru descent and were 18 years old or older. Due to the small population of CHamoru people, only 143,947 CHamorus globally (U.S. Census Bureau, 2023), and the desire to honor their various migration stories, I chose to include all geographical locations in the eligibility criteria. The demographic questionnaire included a geographic question to capture the variability in geographic location. Using purposive sampling, recruitment began through social media platforms such as Instagram, Twitter, and Facebook. Additionally, I emailed various CHamoru-focused state, regional, and national organizations to solicit their help to share recruitment materials via their respective networks.

Quantitative Data Collection Phase

Participants and Procedure

Participants. The average age of participants was 38.77 years old, with most participants reporting having obtained a bachelor's degree (31.9%, n = 23). Regarding annual household

income, the average income for respondents was $50,001 - $75,000 annually (23.6%, n = 17). Most participants identified as women (73.6%, n = 53) and heterosexual (70.8%, n = 51). Additionally, respondents primarily did not live in the Northern Mariana Islands (58.3%, n = 42). Further demographic data is presented in **Table 1**.

Procedures. Individuals interested in participating in this phase of the study utilized a URL link that led them to a consent form via Qualtrics detailing the purpose of the study, eligibility criteria, participation information, risks, benefits, incentives, information on confidentiality and privacy, data collection processes as well as data analysis procedures. Once the consent form was reviewed, interested parties were asked to consent to participate by indicating either "*Yes, I consent to participate in this study*" or "*No, I do not consent to participate in this study*." Those who did not opt to consent were routed to a page thanking them for their time. Individuals who elected to consent to participation were then asked if they identified as a person of CHamoru descent and if they were 18 years or older. If participants elected "no" to either question, they were directed to a page thanking them for their time and interest. For individuals who indicated being 18 years or older and an individual of CHamoru descent they were led to a page via Qualtrics to start and complete the questionnaire. To protect the integrity of the data collection process, participants were asked to complete a Captcha verification process before proceeding to the survey. Once participants completed the questionnaire, they were asked if they would like to enter a raffle to receive a $50 Amazon gift card. Individuals who opted into the drawing were then led to a separate Qualtrics survey asking for their names and to provide their primary and secondary email addresses.

Study Instruments

Demographic Questionnaire. A demographic questionnaire developed by the researcher was administered to determine sample characteristics (e.g., age, race, ethnicity, socioeconomic status, religion, marital status, etc.). Participants were also asked about their island of origin and their relationship to the CHamoru language. Given the study methodology and how data was collected, this demographic questionnaire was used across the quantitative and qualitative phases of the study such that participants only completed this questionnaire once. This demographic questionnaire was utilized for this study's quantitative and qualitative phases.

Colonial Mentality Scale (CMS). The CMS (David & Okazaki, 2006) is a 36-item scale intended to assess colonial mentality across five subscales: Internalized Cultural/Ethnic Inferiority (e.g., *There are situations where I feel inferior because of my ethnic/cultural background*), Cultural Shame (e.g., *There are moments when I wish I were a member of a cultural group that is different from my own*), Physical Characteristics (e.g., *I would like to have a skin-tone that is lighter than the skin-tone I have*), Within-Group Discrimination (e.g., *I make fun of, tease, or badmouth Filipinos who speak English with strong accents*), and Colonial Debt (e.g., Filipinos should be thankful to the United States for transforming the Filipino ways of life into a White/European American way of life). Items containing the terms “Philippines” or “Filipino/s” were modified to reflect the terms “The Northern Marianas” and “CHamoru/Chamorro/s.” Participants rated each statement on a 6-point Likert scale from 1 (Strongly disagree) to 6 (Strongly agree). Higher scores on this scale reflect greater internalization, behavior, attitudes, and feelings of colonial mentality. Established Cronbach’s alpha for the measure’s subscales range from .80 to .91, and in the current study, the internal consistency of each subscale ranged from .71 to .89

Scale of Black Consciousness (SBC). The SBC (Chapman-Hilliard, 2013) is a 12-item instrument that assesses beliefs about the significance and meaning of history knowledge concerning socio-political positioning and empowerment. This measure includes 2subscales: Sociopolitical Beliefs (e.g., *Knowledge of Black History is necessary to promote the enhancement.*) and Empowerment Beliefs (e.g., *Because of my understanding of African Americans' historical experiences, I am more inclined to speak out against injustice).* Items containing "Black," African American/s," or "African descent" will be modified to reflect the terms "Chamorro/CHamoru" and "Chamorro/CHamoru descent." Participants rated each item on a 6-point Likert scale ranging from 1 (*Strongly disagree*) to 6 (*Strongly agree*). Higher scores on the subscales indicate higher levels of history consciousness, while low scores suggest lower levels of history consciousness or limited awareness of cultural knowledge. The SBC subscales of sociopolitical beliefs and empowerment beliefs have Cronbach's alphas of .90 and .81, respectively. In the current study, the reliability estimates were between .73 and .86

Critical Consciousness Scale (CCS). The CCS assesses the capacity of marginalized people to analyze their social and political conditions critically, take action to change perceived inequities and endorse societal equality (Diemer et al., 2017). The CCS consists of three subscales: Critical Reflection: Perceived Inequality (e.g., *Certain racial or ethnic groups have fewer chances to get good jobs*), Critical Action: Sociopolitical Participation (e.g., *Joined in a protest march, political demonstration, or political meeting*), Critical Reflection: Egalitarianism (e.g., *All groups should be given an equal chance in life*). Participants rated each item on a 6-point Likert scale from 1 (*Strongly disagree)* to 6 (*Strongly agree*). Higher scores on each subscale reflect a greater degree of critical reflection/action. Established Cronbach's alpha for

the measure's subscales range from .80 to .91, and in the current study, the internal consistency of each subscale ranged from .75 to .96.

Ethnic Identity Scale (EIS). The Ethnic Identity Scale (Umaña-Taylor et al., 2004) measures three distinct components of ethnic-racial identity: (1) Exploration (e.g., *I have attended events that have helped me learn more about my ethnicity*) – the degree to which an individual has explored their ethnicity, (2) Resolution (e.g., *I understand how I feel about my ethnicity*) – the degree to which they have resolved what their ethnicity identity means to them, (3) Affirmation (e.g., *I wish I were of a different ethnicity*) – the positive/negative effect that they associate with their ethnic-group membership.

Participants rated each item on a 4-point Likert scale from 1 (*Does not describe me at all*) to 4 (*Describes me very well*). Higher scores indicate higher levels of affirmation, exploration, and resolution. The subscales of the EIS have obtained moderately strong alpha coefficients ranging from .84 to .89, and in the current study, the internal consistency of each subscale ranged from .76 to .89.

Pacific Identity and Well Being Scale (PIWS). The Pacific Identity and Well Being Scale (Manuela & Sibley, 2013) is a 35-item measure that assesses five factors of Pacific Identity and wellbeing, essential for a holistic conceptualization of the Pacific self-concept. The five factors include (1) Perceived Familial Wellbeing (PFW) (e.g., question) – perceived satisfaction with one's family indicated by satisfaction with familial relationships, respect, happiness, and society, (2) Perceived Societal Wellbeing (PSW) (e.g., question) – perceived satisfaction with NZ society which is indicated by satisfaction with support from government, local communities, and one's position in NZ society, (3) Group Membership Evaluation (GME) (e.g., question) – evaluation of one's perceived membership in the Pacific group indicated by positive affect

derived from group membership, (4) Pacific Connectedness and Belonging (PCB) (e.g., question) – sense of belonging and connection with Pacific others and the Pacific group at a general level, and (5) Religious Centrality Embeddedness (RCE) (e.g., question) – the extent to which an individual feels that religion is intertwined with one's Pacific and culture identity. Questions were adapted for the CHamoru population. This survey is divided into two sections. In the first section, participants rated each item on a 7-point Likert scale from 1 (*Completely dissatisfied)* to 7 (*Completely satisfied*). Within the second section, participants rated each item on a 7-point Likert scale from 1 (*Strongly disagree*) to 7 (*Strongly agree*). Higher scores demonstrate positive feelings toward ethnicity. The subscales of the PIWS have obtained moderately strong alpha coefficients ranging from .74 to .88, and in the current study, the internal consistency of each subscale ranged from .91 to .93.

Mental Health Inventory (MHI). The MHI (Veil & Ware, 1983) is an 18-item measure that assesses psychological distress and wellbeing across four subscales of emotional status: Anxiety, Depression, Behavioral Control, and Positive Affect. The current study only utilized the anxiety and depression subscales. Participants indicated their degree of agreement with each item using a 6-point Likert scale ranging from 1 (*All of the time*) to 6 (*None of the time*). The MHI has a Cronbach's alpha of .93, and in the current study, the Cronbach's alpha is .96.

Data Analytic Plan

Hypothesis 1. It is expected that there will be a positive correlation between ethnic identity and psychological distress, such that higher levels of ethnic identity will be related to higher levels of mental health.

A linear regression analysis will be performed to assess the relationship between ethnic identity and psychological distress. The predictor variable for the proposed

analysis is ethnic identity (as measured by EIS and PIWS). The outcome variable for the proposed analysis is mental health (as measured by MHI Anxiety and MHI Depression subscales).

Hypothesis 2. It is expected that there will be a positive correlation between consciousness and psychological distress, such that the higher the level of consciousness, the higher the levels of mental health.

To assess the relationship between consciousness and psychological distress, a linear regression analysis will be performed. The predictor variable for the proposed analysis is consciousness (as measured by SBC and CCS). The outcome variable for the proposed analysis is psychological distress (as measured by MHI Anxiety and MHI Depression subscales).

Hypothesis 3. There is expected to be a positive correlation between ethnic identity and consciousness, such that the higher levels of consciousness will be related to higher levels of ethnic identity.

To assess the relationship between ethnic identity and consciousness, a linear regression analysis will be performed. The predictor variable for the proposed analysis is ethnic identity (as measured by EIS and PIWS). The outcome variable for the proposed analysis is consciousness (as measured by SBC and CCS).

Hypothesis 4. It is expected that colonial mentality would moderate the relationship between ethnic identity and psychological distress, such that the higher levels of colonial mentality would strengthen the relationship between ethnic identity and psychological distress, causing lower levels of mental health.

A multiple regression analysis will be performed to analyze the structural relationship between variables, specifically, the extent to which colonial mentality (as measured by CMS) moderates the relationship between ethnic identity (measured by EIS and PIWS) and mental health (measured by the MHI Anxiety and MHI Depression subscales).

Hypothesis 5. It is expected that colonial mentality would moderate the relationship between consciousness and psychological distress, such that the higher levels of colonial mentality would weaken the relationship between consciousness and mental health, causing decreased levels of mental health.

A multiple regression analysis will be performed to analyze the structural relationship between variables, specifically, the extent to which colonial mentality (as measured by CMS) moderates the relationship between consciousness (measured by SBC and CCS) and mental health (measured by the MHI Anxiety and MHI Depression subscales).

Qualitative Data Collection Phase

Participants and Procedures

Participants. Fifteen CHamoru adults were recruited via purposive sampling. Participants were recruited online via social media platforms, emailing CHamoru-centered organizations, and through CHamoru networks by word of mouth. Participants ranged from 26 to 53 years old, with a mean age of 37.9. Within this sample were 11 women and 4 men. Regarding education, one participant had a high school diploma, three had their associate's, eight had a bachelor's degree, and three had a graduate degree. Island origins: Eighteen were from Saipan,

five were from Guam, and two were from Rota. Additional demographic information is presented in **Table 2**.

Procedures. Individuals interested in participating in this phase of the study utilized a URL link that led them to a consent form via Qualtrics detailing the purpose of the study, eligibility criteria, participation information, risks, benefits, incentives, information on confidentiality and privacy, data collection processes, and data analysis procedures. Once the consent form was reviewed, interested parties were asked to consent to participate by indicating either "Yes, I consent to participate in this study" or "No, I do not consent to participate in this study. Those who did not opt to consent were routed to a page thanking them for their time. Individuals who elected to consent to participation were then asked if they identified as a person of CHamoru descent and if they were 18 years or older. If participants elected "no" to either question, they were directed to a page thanking them for their time and interest. Individuals who indicated being 18 years or older and of CHamoru descent were led to a page via Qualtrics to provide their name, pronouns, and email address to be contacted to schedule an interview. Once that was received, I emailed the participant, thanking them for their interest and a link to schedule their interview via Calendly. Due to the wide geographical range of where participants lived (e.g., Hawaii, Japan, and the Northern Mariana Islands), the researcher ensured that availability in various time zones was accessible, including on weekends. Once the participants had selected the day and time of the interview, I emailed them a confirmation with the protected Zoom link and a link to the demographic questionnaire.

Interviews were semi-structured as this type included more participant voices, offering a richer understanding of a phenomenon (Hays & Singh, 2012). The interviews lasted 30-60 minutes, averaging 45 minutes. All interviews were conducted in English. All interviews were

conducted via Zoom due to the variety of locations of participants. After each interview, I engaged in reflexivity journaling. All interviews were transcribed verbatim. After completing the transcriptions, I sent the respective transcriptions to the interviewees to check for accuracy through email. Participants were encouraged to make any corrections and provide notes if they wished to expand on their responses. Participants had 48 hours to provide corrections and/or additional notes by responding to the email sent previously with the de-identified transcription attached. Participants who did not elect to review and/or did not have any corrections and/or notes indicated their approval either through responding to the email communicating their approval or through no response to the email. **Appendix A** provides the semi-structured interview protocol used for this data collection portion.

Strategies for Trustworthiness

Several strategies were implemented within this phase to increase trustworthiness. During interviews, I utilized member checking through commentary and probing questions (Hays & Singh, 2012). Additionally, memoing after each interview was used as a part of the data collection process, following recommendations by Hays & Singh (2012) suggesting that memos can be used with other data analyses to summarize preliminary findings.

Member checking was employed after each thematic analysis of an interview to ensure that participants' voices were centered. Participants were allowed to participate in a focus group to review initial codes and patterns in addition to the findings of this study. Information was offered regarding how the research team came to their conclusions. The focus group was used as a platform for feedback on the process and findings.

Positionality Statement

I have always been drawn to history. It was something about how events, circumstances, places, and people connected to make people who they were that fascinated me. I was interested in understanding how people "fit." Looking back, I tried to understand how people made sense of things as I always felt I lived between two worlds. As a person of African and CHamoru descent, my personal history has always been and more than likely will forever be complicated. I did not have the language then, but I lived as an outsider within my community. I do not fit in a nice little box, and depending on who you ask, I can be ascribed a different ethnic/racial identity at any given moment. I always knew I was Black, but it was not until second grade that I understood my identity as a Chamorro girl. My mother brought my brothers and me to Saipan, and I was immersed in the culture. I have fond memories of parties on the beach, learning the Chamorro language, exploring the caves on the island, and developing my Chamorro pride. I came face to face with anti-Black racism. My island life was tainted by being called the n-word by an older Chamorro woman who refused to serve me and my brothers' ice cream. It was at this moment that my personal history became complicated. I noticed that family members that I had to navigate a family who consistently made comments about my hair and unknowingly practiced anti-Blackness.

Fortunately, my mother raised me to be proud of my culture. I have witnessed my mother being taught by Black women, praising and loving Black women. She always told me that although I come from her, there were things she would not be privy to because the discrimination she faced, although connected, was not the same. Additionally, I had a Nana who always made me feel loved and saw my Blackness as a strength.

This dissertation is my act of resistance and the reclaiming of an identity that was stolen from me. It is a love letter to my ancestors who experienced the erasure of their culture, history,

and language. This dissertation is also a love letter to my mother and my nana, who taught me how to seek refuge in truth. Lastly, this dissertation is a love letter to myself and a reminder that our stories, my story, are meant to be told. Now, I stand firmly on the shoulders of my ancestors, my nana, and my mother, and I proudly join the lineage of CHamorus that protects our story and amplifies the lived experiences of our community.

Theoretical Frameworks

Qualitative researchers have long employed theoretical frameworks. These frameworks bolster the qualitative approach by clarifying epistemological dispositions regarding how to build theory based on research findings and serving as a guiding framework for the study (Collins & Stockton, 2018). This section offers insight into the theoretical frameworks guiding this study.

Constructivist Grounded Theory

This study was structured after the Constructivist Grounded Theory (CGT) developed by Kathy Charmaz (2016) to continue the goal of ensuring a social justice-oriented study. CGT (Charmaz 2016, 2017) is informed by the traditional Grounded Theory methodology (Glaser & Strauss, 1967). CGT (1) assumes a relativist epistemology and ontology, (2) recognizes the researcher's and participants' various realities, (3) encompasses a researcher's reflexive stance, and (4) positions the study in the historical, social, and situational conditions (Charmaz, 2017). CGT views data as reliant upon language, meanings, and actions. With the foundation of Glaser and Strauss's (1967) method, CGT still incorporates the technique of inductively collecting data and simultaneous comparative analysis to ensure the theory is data-grounded and more culturally grounded. CGT as a methodology fits well with the aim of this study and blends well with Liberation Psychology, which serves as the epistemological framework of this study.

Liberation Psychology

To go a step further in ensuring that this study was social justice oriented, constructivist grounded theory was anchored within a Liberation Psychology approach. It was vital for me to select an approach that was actively resistant to colonization and would task me with the responsibility to ensure that in every step, I kept the voices and lived experiences of the CHamoru people at the forefront. Developed by psychologist Martin-Baro, Liberation Psychology theory (LP) is a decolonizing holistic approach (Comas-Diaz & Torres Rivera, 2020) that emerged as a response to counter Western Psychology's ahistorical decontextualized views (Bryant-Davis & Moore-Lobban, 2020). LP seeks to understand and address oppression by examining people's experiences and identities within socio-political and socio-cultural contexts. LP views research as existing in a culture of privilege where those with privilege exert their dominance and power over those who are marginalized. LP contends that knowledge is socially and politically constructed and results from social interactions (Freire, 1973). Understanding this, LP tasks the researcher to conduct research that benefits the community, honors multiple ways of knowing and centers personal liberation, which leads to collective liberation. It is not just about acknowledging and understanding oppression; liberation and freedom are equally important.

Liberation Psychology is utilized by psychologists who want to engage in an anti-oppressive theory whose mission is to decolonize psychology. This approach is guided by several principles, which include: (a) re-orientation of psychology- a psychology of liberation that addresses psychological maladies through addressing sociopolitical etiology (b) recovering historical memory – the process of rediscovering the shared history of oppressed populations (c) de-ideologizing everyday experience – the investigation of dominate messages as well as the analysis of the everyday experiences (d) virtues of the people – utilization of a strengths-based approach that positions the marginalized populations as the producer of tools and energy that

lead to liberation (e) problematization – a method of understanding issues faced by marginalized populations from their respective perspective (f) conscientization – to become aware of and involved in the process of continued discovery and action, and (g) praxis – the confluence of theory and action (Martin-Baro, 1994). These guidelines will serve as anchors within this mixed-method study.

Data Analysis

Thematic Analysis

The foundations of constructivist grounded theory were employed to collect and analyze data from the interviews (Charmaz, 2017), and memos were made after each interview. After completing interviews, team members code for themes, observed patterns, and interpretations. All members participated in reflexivity journaling after coding. The research team then met after each interview to engage in the coding process to discuss the themes, patterns, and interpretations (Hays & Singh, 2012). After the interviews were coded and codes were finalized, I engaged in comparative analysis and constant comparison to establish trustworthiness and reliability (Hays & Singh, 2017).

Research Team

For the qualitative phase of this mixed methods study, I utilized a research team to execute the data analysis procedures. This was guided by Hays and Singh's (2011) recommendation to include a research team in qualitative research comprised of individuals from diverse backgrounds and experiences. Having team members with varied lived experiences to guide the thematic analysis helps as the diverse perspectives and insights attend to the reactions and biases that may manifest throughout the data analysis process, which is imperative when researching an understudied topic and a population that is not well known (Hays & Singh, 2011).

Additionally, collaborating with a diverse research team enhances a study's rigor and trustworthiness (Finley & Gough, 2008).

Table 3 notes my research team's salient identities and critical assumptions. This information was collected via their positionality statements and reflexivity journaling and discussed throughout the data analysis process.

Table 1
Participant Demographic Characteristics

Characteristic	Frequency	Percentage
Ethnicity		
Chamorro	36	50
CHamoru	8	11.1
Bi-racial	16	22.2
Multiracial	12	16.7
Sexual Orientation		
Heterosexual	51	70.8
Bisexual	7	9.7
Gay/Lesbian	6	8.3
Queer	3	4.2
Pansexual	2	2.8
Asexual	1	1.4
Prefer not to answer	1	1.4
Age		
18-25	8	11.1
25-30	12	16.67
31-35	12	16.67
36-40	6	8.33
41-45	7	9.72
46-50	18	25
51-55	3	4.16
56-60	4	5.55
61-65	2	2.78
Education		
High School Diploma	11	15.3
Vocational/Technical	4	5.6
Associate degree	13	18.1
Bachelor’s degree	23	31.9
Graduate degree	21	29.2
Annual Household Income		
$0 - $15,000	2	2.8
$15,001 - $25,000	6	8.3
$25,001 - $50,000	12	16.7

$50,001 - $75,000	17	23.6
$75,001 - $100,000	8	11.1
$100,001 - $125,000	9	12.5
$125,001 - $200,000	12	16.7
$200,001 - above	6	8.3
Speaking CHamoru		
Doesn't speak	16	22.2
Conversational	33	45.8
Fluent	23	31.9
Reading CHamoru		
Doesn't read	18	25.0
Conversational	29	40.3
Fluent	25	34.7
Writing in CHamoru		
Doesn't read	25	34.7
Conversational	30	41.7
Fluent	17	23.6
Current Location		
NMI Resident	30	41.7
NMI non-resident	42	58.3
Island Family Origins*		
Saipan	40	55.6
Tinian	1	1.4
Rota	7	9.7
Guam	31	43.1

Table 2

Qualitative Participant Demographics

Pseudonym	Age	Gender	Sexual Orientation	Race and Ethnicity	Education	Island Roots	Language Proficiency
Bam	42	Woman	Heterosexual	CHamoru and White	Graduate Degree	Guam	C
Benita	26	Woman	Heterosexual	CHamoru and Filipino	Bachelor's degree	Rota	E
Flora	38	Woman	Heterosexual	CHamoru and Filipino	Bachelor's degree	Guam	C
G	31	Man	Gay	CHamoru	Bachelor's degree	Saipan	F
Gorgo	46	Man	Heterosexual	CHamoru	Bachelor's degree	Saipan	E
Haggas	27	Woman	Bisexual	CHamoru Asian	Bachelor's degree	Guam	N
Jessica	24	Woman	Heterosexual	CHamoru and Thai	Graduate degree	Guam	C
Joe	49	Man	Heterosexual	CHamoru and White	Bachelor's degree	Saipan	N
Justahlia	46	Woman	Heterosexual	CHamoru and Filipino	Graduate degree	Guam	C
Leila	31	Woman	Heterosexual	CHamoru	Associate degree	Saipan	F
M	33	Woman	Heterosexual	CHamoru	Bachelor's degree	Guam	N
Teresa	50	Woman	Heterosexual	CHamoru, Carolinian, and White	Bachelor's degree	Guam	C

Note. E = elementary, C = conversational, F = Fluent, N = no proficiency

Table 3

Research Team Members' Salient Identities

Research Team Member	Salient Identities	Key Assumptions and Biases
AE	Black, gay, cisgender man	"Admittedly, my knowledge of CHamoru culture is still sparse but I intend to be very open-minded as I start gaining more knowledge in my continued work on this research team. Though this may be an initial impediment, I think my first-hand experience as a Black person in America helps me understand the importance of cultural knowledge for the integration of one's ethnic identity into their overall self-concept."
TR	Chinese American, cisgender woman	"There is still much for me to learn, and while my identities as a Chinese American woman as well as being the daughter of an immigrant influences the way that I think about Pacific Islanders, colonized groups, and immigrant populations, this perspective is very different than those who have lived and breathed their CHamoru identity."
EK	Immigrant, African American	"As an immigrant and an African American person living in the United States, I feel a deep connection to marginalized and underserved communities."
TB	Afro-Caribbean, heterosexual, cisgender woman	"I felt a sense of awe in being taught about the history and the culture of this population [CHamoru] as well as frustration because of never being taught in any classes that I've taken during my time in school. I come from a family of Caribbean background and descent."
DL	African American, gay, cisgender man, Christian	"My perspective as coming from a culturally marginalized and disenfranchised community provides me with a level of understanding on the experiences of this study's participants. However, I recognize that my positions regarding my citizenship status and non-traditional upbringing could influence my understanding of the study's participants as well."
SS	Guyanese and Black, woman, lesbian	"I believe my identity as a Guyanese woman impacts how I see the research about CHamoru people. Similarly to the Guyanese population, the CHamoru population is one that does not have a lot of research surrounding their specific community."

CHAPTER IV

RESULTS

> The seas bring us together, they do not separate us. Our islands sustain us, our island nation enlarges us and make us stronger. Our ancestors, who made their homes on these islands, displaced no other people. Having been divided, we wish unity. Having been ruled, we seek freedom.
>
> — The Constitution of the Federated States of Micronesia, 1975.

The purpose of this study was to understand how ethnic identity, consciousness, and colonial mentality impact the mental health of adults of CHamoru descent. This mixed-methods study incorporated simultaneous data collection, reflected in the study's concurrent triangulation design (Creswell, 1999). This model calls for the researcher to collect and analyze the qualitative and quantitative data separately. Both data sets are equally weighted, and findings are compared and contrasted during the interpretation (Creswell, 1999). For clarity, the results of the quantitative phase of this study will be presented first, followed by the qualitative results.

Quantitative Analyses

Data Screening

A total of 95 participant submissions were collected via Qualtrics. These responses were downloaded from Qualtrics and then transferred to SPSS version 29 to be examined for accuracy. Participants who did not complete the demographic portion of the survey were eliminated. This resulted in 72 remaining cases. The data were then inspected for consent and adherence to inclusion criteria, ensuring that respondents endorsed being 18 years or older and

self-identified as a person of CHamoru descent. Next, the data were examined for patterns of missingness. Little's MCAR test was conducted and indicated that the data were missing completely at random [X^2 (635, N = 72) = 411, p > .05]. The expectation-maximization method was used to impute the missing data among participants who were missing data. Data were also evaluated for descriptive values and multivariate assumptions. The data met the criteria for multivariate assumptions after inspection of skewness and kurtosis. Scatterplots and histograms were examined to assess for linearity and homoscedasticity. Additionally, singularity and multicollinearity were evaluated through SPSS version 29 statistical software package collinearity diagnostics. There were no cases present that were perceived to be outliers. Thus, 72 cases remained for preliminary and main analyses.

Preliminary Analysis

All analyses were completed using Statistical Package for Social Sciences (SPSS) Version 22. Preliminary evaluation of the data included an examination of intercorrelations, means, and standard deviations among the measured study variables. **Table 4** and **Table 5** includes all bivariate correlations among the study variables. To highlight patterns of association among the study variables, this section will note the findings of selected correlations. Anxiety was significantly and inversely associated with the colonial mentality – cultural shame and embarrassment subscale (r = -.269, p < .05) and the physical characteristics (r = -.304). The MHI Anxiety subscale was also statistically significant in an inverse direction with CCS' Critical Action Sociopolitical Participation subscale (r = - .320). Additionally, the MHI Anxiety scale was statistically significant in a positive direction with the Pacific Identity Wellbeing's Perceived Societal Wellbeing (r = .420), Perceived Familial Wellbeing (r = .303), Pacific Connection and Belongingness (r = .259), and the Group Membership Evaluation (r = .268) subscales. This

association was the strongest between MHI Anxiety and the Perceived Societal Wellbeing subscale. All other subscales failed to meet statistical significance.

The pattern of associations between MHI depression and PIWS subscales differed, with the Perceived Familial Wellbeing, Perceived Societal Wellbeing, Pacific Connectedness and Belongingness, and Group Membership Evaluation demonstrating statistically significant positive correlations. Conversely, colonial mentality and consciousness were negatively associated with MHI depression. Specifically, within CMS, all subscales revealed statistically significant correlation except for Internalized Ethnic and Cultural Inferiority. Consciousness also demonstrated statistical significance with only the Critical Action Sociopolitical Action subscale ($r = -.428$). Given the number of bivariate correlations among study variables, only variables with significant correlations were considered for the main analyses.

Main Analyses

Multiple Linear Regression Analyses

Multiple linear regression analyses were conducted to assess the predictive relations among ethnic identity, consciousness, colonial mentality, and mental health; all study variables had statistically significant bivariate correlations to be included in the main analyses. I hypothesized that ethnic identity and consciousness would positively and significantly predict mental health (e.g., MHI total score). For this sample of CHamoru adults, the hypothesis was partially supported. From the simultaneous multiple regression analysis findings focused on ethnic identity subscales as predictors of mental health, only Perceived Societal Wellbeing significantly predicted mental health within this sample. The ethnic identity focused regression model indicated an approximate 20.9% variance of mental health scores ($R^2 = .209$, $F(4,67) = 4.422$, $p < 0.05$). Like the ethnic identity focused regression hypothesis, for the consciousness

focused regression, I hypothesized that consciousness would predict mental health (e.g., MHI depression and MHI anxiety subscales) which was also partially supported in this sample. This regression model explained that Critical Action Sociopolitical Participation accounted for 21.3% of the variation in depression scores as measured by the Mental Health Inventory depression subscale ($R^2 = .213$, $F (3, 68) = 6.139$, $p < 0.001$). Additionally, Critical Action Sociopolitical Participation accounted for approximately 14.2 % of the variation of the anxiety symptoms ($R^2 = .142$, $F (3,68) = 3.746$, $p < 0.005$). Table XX displays the coefficients for each regression model tested.

Tests of Moderation

Using multiple regressions and calculating interaction terms, tests of moderation were performed with consciousness and ethnic identity as the criterion variables, colonial mentality as a moderator, and mental health (i.e., total score of all mental health inventory subscales) as the independent variable. The results of the consciousness moderation model indicate that Colonial Debt trended toward statistical significance, such that this variable appeared to impact the relationship between Perceived Societal Wellbeing and mental health ($p = .052$); however, not to the degree of statistical significance. This pattern of interaction indicated a trend that as Perceived Societal Wellbeing increased, mental health scores also increased; however, for participants who endorsed higher levels of Colonial Debt the degree of the mental health decreased. The test of moderation with ethnic identity as the criterion variable was not statistically significant ($\beta = .194$, $t (.168) = 3$, $p > 0.05$).

Qualitative Results

This section details themes from the qualitative data. Throughout the thematic analysis process, Liberation Psychology was employed to ensure that the themes captured strengths-based

perspectives, considered how CHamoru people are systematically marginalized, and centered the voices and experiences of participants. Constructivist Grounded Theory was utilized to allow the data to form on its own and determine data saturation. Themes were determined after meeting code saturation and meaning saturation (Charmaz, 2006). Specifically, four themes emerged from the data: (1) destruction by colonization, (2) decolonization through remembering and reconnection, (3) CHamoru sacred grief, and (4) culturally rooted resistance. The following sections will detail each theme, including the general theme's name first, relevant subthemes, and descriptions of both. Sample quotes from study participants are also incorporated to further illustrate the meaning of each theme and to capture the specific narratives shared by participants, centering their experiences. The themes are presented based on frequency. Themes 1 and 2 were discussed by all participants. Most participants discussed theme 3, but not all, and theme 4 was discussed by some participants.

General Theme 1: Destruction by Colonization

Destruction by Colonization is a central theme that refers to the many ways that colonization has destroyed the CHamoru people, negatively impacting their individual and collective wellbeing. Participants' reported experiences of the deleterious consequences by the hands of Spain, Germany, Japan, and the United States are captured within three subthemes Destruction *of Spirt, Destruction of Motherland,* and *Destruction of Existence*.

Destruction of Spirit. All participants within this study expressed the importance of recognizing the prevalent trauma and internalized oppression present among their CHamoru community, which they described as negatively impacting the CHamoru spirit (e.g., mind, body, and soul), thus creating the first subtheme of the *destruction of spirit*. Bam illustrated how colonization is hurtful to the mental health of the CHamoru people. The participant stated: "I

think being a colonized people and its own respect, is, uh, is hurtful to the psyche. You know, like, there's, there's inherent harm done in in those kinds of like, power imbalances and oppression." Another participant, Benita indicated how colonization "comes also with a price like to their mental health." Most participants identified this price as intergenerational trauma, a symptom of colonization describing it as a "pain point" and the "root cause" for many problems within the CHamoru culture like PTSD and domestic violence. Justahlia noted, "They don't process their own trauma. So, it kind of makes them [CHamoru people] become violent." Others illustrated the personal impact intergenerational trauma has had on their lives and within their respective family units. Jessica stated, "We see the aftereffects, we see the aftermath. We live through it with our parents, with our grandparents, aunties, and uncles." The aftereffects and aftermath discussed by many participants were attributed to colonization. Respondents recalled examples within their life when they realized the impact of colonization on their close relatives. Leila described:

> I was asking my grandparents like I moved back to help take care of you and go to college at the same time. Like can you teach me how to speak Chamorro? And while that has never been an issue, especially after being in the class, I've had to count my blessings. I did hit that brick wall. And maybe it didn't come out as lashing out to me. But it was total stonewalling. And it wasn't until my godparents stepped in. And we're like, you do not realize what they went through. And I'm like, well, how am I supposed to know what they went through if they don't talk about it?!

Many of the participants also discussed the social constructs and ideologies imposed on their community by colonization. Teresa discussed how shame and stress within the CHamoru culture

can be attributed to colonizing countries not allowing space for CHamoru people to be their authentic selves and painting indigenous CHamoru ways as abnormal or wrong. She states:

> "I think it's imposed, it's imposed, like European and other [countries], like social constructs onto the island that make it harder for people to perhaps, like, be their authentic self. And I think in doing that, that causes the people, you know, causes people to feel stressed and ashamed. Like, there's all these kinds of turbulent, negative emotions that can come up from imposing."

Participants explained how these social constructs and ideologies negatively impact the way CHamoru people view themselves and their culture resulting in internalized oppression such as coloniality mentality. Responses indicated the frustration and sadness felt by participants who witnessed colonial mentality within their community describing it as "hatred of your own culture in that way and it's [colonial mentality] so insidious." Other participants, such as Bam, mentioned witnessing and experiencing the "internalized and adopted sort of the mindset and tactics of the oppressor." Whether on or off island, participants illustrated the various ways that colonial mentality manifested in their lives. As described by many participants, colonial mentality contributed to the growing disconnection between CHamoru individuals and their indigenous ways of life leading to an adoption of the westernized culture, traditions, and thinking. Participants conveyed examples within their lives of family members who adopted other cultures such as the Japanese culture, refusal to speak CHamoru despite being fluent, and even recalled instances related to others showing disdain for their culture. One participant shared when faced with the decision to be part of his CHamoru culture or assimilate, he chose assimilation. Joe stated:

> "And I picked the White culture. And I, you know what and then I, I spoke better English than all my friends. I enunciated my words better, I became more involved, I became more in tune with what was happening in the States more than on Guam…I really started pulling away from the culture."

Many respondents expressed frustration at the lack of acknowledgement by members of their community of the deleterious effects of colonization. Participants highlighted the patriotism prevalent within their family and community that exists which causes a lack of awareness of the effects of colonization. G shared how this lack of awareness can cause people to conflate the CHamoru culture with the ways of colonization. He noted, "I don't even know how many like Chamorro people acknowledge the colonization. Yeah, it has been around for so many generations that they're like, this is Chamorro."

Destruction of Motherland. This subtheme refers to the destruction caused by colonization to the participant's motherland (e.g., Saipan, Tinian, Rota, and Guam). As participants highlighted, an integral part of CHamoru mental health is their connection with their environment which includes the lands, ocean, and air. One participant highlighted this connection by explaining how the indigenous word for CHamoru is Tao Tao Tano "which means people of the land." For CHamorus, their motherland (e.g., indigenous islands) is viewed as a highly revered living and breathing entity whom they are in a spiritual and reciprocal relationship with. Participants all described this "deep respect with the land" derived from their ancestors. Leila illustrated this:

> We must have been very spiritual. You know, the sun, the moon the air like we were. And even you know now like, taotaomo'nas You know, ancient people of

> the land who are protectors of Guam and stuff like that, but they're also something to be like, feared and respected. Yeah. Feared first and then respected.

Participants discussed how their relationship with their indigenous lands elicited feelings of peace, joy, and security. G shared:

> I think for most of us, like we crave the beach, and we crave the water. And so, for me, just like even just putting my foot in the beach or in the water, like already the serotonin in my brain and the dopamine or whatever it is just like skyrockets.

Participants spoke of the beauty that exist amongst their islands highlighting the way in which the sun, water, plants, and animal life moves around them. Another responded noted how being home on their motherland promotes a sense of belonging, he said, "there's just something magical about being home and being here, you know, in our native lands, like, I just, I can't really describe it more than that. It's just that I'm here. And I feel like on all different levels of my being, I feel very much at home." Others described how experiences of peace as they farmed their land harvesting fruit. Additionally, participants offered insight on how the practice of respecting their motherland contributes their mental health wellbeing. They noted how when you steward the land well offering it what it needs to thrive, the land will also provide you with nourishment.

Participants also spoke of the many ways colonization has ruptured their relationship with their motherland citing militarization, imperialism, and capitalism. Teresa explained "The US doesn't give a sh*t about its colonies, you know, outside of the, you know military use that it sees itself for." Many participants noted how the military is taking over the island and experiencing their lands being seized from their community contributes to not just their individual emotional distress, but also the emotional distress of their community. Participants

expressed frustration at settlers on their islands who have no reverence for the motherland. Bam indicated, “They [non-CHamorus] can’t experience the fact the ocean is very dangerous and it’s not your friend and you need to respect it.” Respondents also highlighted the changes to the physical environment in Guam as a result from the militarization. Haggas illustrated this:

> Definitely the physical environment of Guam, like the waters being polluted, or like the fact that the brown tree snake like, basically killed all the birds. In fact, I didn’t see one bird in Guam. I did look, I did not see one when I was there. Yeah. And then the invasive species from, you know, colonization and all of that I think definitely has impacted the island.

Others highlighted the economic shift resulting from colonization that has caused financial insecurity in their community. There were many stories among the participants that described how their families went from being well off financially to now having barely anything living in poor conditions (e.g., tin shacks) and without a livable wage. This financial insecurity, as some participants mentioned, is deeply conflated with their culture as they reflected on behaviors taught to them by their caregivers based on a scarcity mindset. Benita recalled:

> “There are these hidden traumas that trauma actions, I will call them, you know, that occur from, from our parents teaching us like, like, right now, I’m living as if I have to reuse everything that I used, like, because if I don’t reuse it, then, you know, we kind of have a new one. Gotta get all the napkins in McDonald’s, or how many plastic spoons you can get because, like, it’s like, we’re still in that mindset that a war is coming. Or, like, you know, like, maybe that’s our thinking that and also, being in poverty. It’s like, our mindset is we have to, to make sure we make things like, last long.”

Respondents also discussed how the current occupation of the United States which impacts their role as protectors and stewards of their motherland that will negatively impact future generations. Haggas highlights this point:

> "And I imagine that the natural resources of climate change, and all of that might be, you know, different in the future, and not different, in a good way. So, I would say those all can impact mental health because you see your home being destroyed..."

Destruction of Existence. All participants noted the silencing and erasure of their culture, history, and language causing deleterious effects to CHamoru mental health. Respondents described how this silencing and erasure perpetuates experiences of invisibility and discrimination. Participants identified colonizing countries as the root cause of the erasure and silencing of their culture. As one participant put it, "America has a history of squashing, as does Japan, and Germany." Participants spoke to how this squashing manifested in laws and policies that cultivated an environment where CHamoru culture was not only seen as wrong but engaging in indigenous practices can result in prison or death. To this point, Joe stated, "So, that's something that's scary that in for sure. An entire culture can be wiped out. Yeah, that's people and its historic and pretty much the island." According to responses from participants, this fear intentionally created by colonizers caused a vibrant and rich culture to become silent out of survival. This type of conditioning mentioned by most participants led participants to coin their grandparent's generation as the *silent generation* noting how their vibrant and rich culture became quiet. Like Bam, many participants expressed their frustration and anger regarding colonization's impact on their community's voice. Bam said:

> While we have an entire generation of people that refuse to give us access to these things. And it has everything to do with the fact that the US did some communist sh*t over here in Guam. And then after World War II, there was several years where we, we were in internment camps in the CNMI. Because of the US, and what, for what? For why? We were not a communist country. They were just communist people there. I don't think that we would be okay with being quiet if we didn't have communist type of conditioning. We're not even as bad as other communist countries. But we are silent."

Participants highlighted the devastating consequences to this silence such as loss of history, language, and cultural traditions which leads to the erasure of their culture and ultimately the destruction of their existence. Benita mentioned that "when you have all of that [laws and policies], and things we're not being respected, or like understood, culturally speaking, then it kind of like you don't, um, affects the culture in a way because they forget who they really are." Another respondent noted, "Our culture is mostly oral. But a lot of the people that are my parents age, which is like 50s, 60s, 70s. They're all very quiet. Which doesn't help an oral culture perpetuate itself!"

Participants indicated the various ways colonization has impacted their ability to learn about their history and their indigenous language. Participants all discussed the CHamoru language and how it is on the brink of extinction. Others emphasized the barriers that exist present-day within the traditional educational system in learning about their language and history. Bam noted:

> So, Chamorro bilingual stops after the eighth grade. So, in high school, like my high school, in particular, on Saipan had Japanese classes there, other high

> schools had other languages, but there was no way to learn Chamorro after middle school. So, you were kind of just out of luck, nobody was gonna help you. So, it's kind of a mishmash, at a certain age, you have this kind of help. And then that stops."

General Theme 2: Decolonization through Remembering and Reconnection

Decolonization through remembering and describes the various ways their mental health was impacted as they worked to recover their culture memory and reconnect with their culture values specifically from a decolonization lens which for many participants strengthened their ethnic identity and critical consciousness. Decolonization represents the moving from being dependent on westernized truths and ways to CHamoru self-determination and indigenous ways of life. Responses were indicative of the varying stages of ethnic identity and critical consciousness of participants. Emotions such as frustration, pride, excitement, motivation, sense of belonging and connection were underscored within this theme.

It was evident throughout the data that participants differed in their introductions and educational experiences regarding CHamoru identity, culture, and consciousness. Most participants underwent their unlearning and relearning process in adulthood, while others reported learning in early childhood. Those who started their decolonization process in adulthood noted experiencing distress and symptoms related to anxiety and depression. While respondents who recalled attending CHamoru centered schools and/or having an upbringing that facilitated an ongoing decolonization educated denied emotional distress related to their identity and history, but rather reported feelings of pride and belonging about their culture and community. For example, one adult learner, G's response illuminates this point:

> Once you start realizing sort of the socio political and historical sort of the impact the world has had on CHamoru's, you know, colonization, imperialism, the war. And the current American, you know, you could call it administration, you could call it occupation, you could call it whatever you want to call it. But, you know, just, I am very proud to be CHamoru, but it also pains me that, you know, our people have been through so much since the 15-1600s. And just like being so critically aware of all of that, definitely, just like, it keeps me up at night, every now and then. And I'm just like, sometimes I want to shut off my critical thinking brain, because I'm just like, stop thinking about colonialism, or stop thinking about how these oppressive systems are still alive and well today. It's depressing.

Some participants reflected on learning about their cultural values, history, and legacy in K-12 schools that were CHamoru centered starting their unlearning and relearning process earlier than other participants. One participant recalled, "So as a child, like learning about my culture, it definitely made me feel like proud to be where I'm from." Benita reported, "Throughout my educational journey and knowing what rights I have, you know, and like, what it means, like, it really impacted me in having that strong sense of belonging." Bam noted:

> We learned every single day what it [being CHamoru] meant. We said the national anthem in the CNMI which was in CHamoru and in Carolinian, every single morning. And the Pledge of Allegiance? Yeah, the Pledge of Allegiance [Inifresi] in, in CHamoru every morning. And we did it right alongside the English but because we...I don't know what the federal standards are, but because we were living in CNMI, we did the CNMI stuff last. Not because it was less important, but because it was more important. So, that was what you would have in your head when you're

> going to your class, class times. So, the dancing and the music helps a lot. Just because that is what my school pushed.

This unlearning and relearning process motivated participants to research more and reconnect with their personal familial histories healing parts of themselves they were not aware needed healing. As one respondent put it, “Understanding that, and this is an ongoing lesson, that that journey is not just me, or even within my family, that responsibility to heal is not just me.” Additionally, Leila shared:

> This past couple of years, I have been trying to redefine and understand the maternal story of my lineage. So, coming into terms with who they were as people, what influences you know, raise their resiliency, and what can I do to not only heal that part of me that they’ve hurt, or I’ve come to just normalized, but how am I going to be better for my daughter and my future lineage. So, to encompass that my journey right now is understanding the strong women that have come before me, and empowering myself that within my lifetime, when I heal, I heal the before and after, which is a huge daunting task.

For many participants, reconnection and remembering occurred through conversations with family members, reading historical archives, books, music, dance, and photo albums from everything “like anthropology to like child rearing practices from a holistic standpoint.” Joe exclaimed:

> “As my dad got older in age, he would shares he would now have time to share stories with me on Saipan, about Guam, and about the things he used to do and the things that were difficult for him after the war and, and stories about my

> grandparents and my uncles and, and the things that they did, and they experienced pre, prewar and after the war."

Other participants described how researching to recover their histories was a reclamation of their indigenous storytelling and fostered empathy, a sense of reverence and pride for those who came before them. Leila's response further elucidates this point:

> I got to learn about my family through photo albums, you know, I have... a picture's worth 1000 words. And my grandparents had stacks of albums that just aided in the storytelling that they provided, or I've had the opportunity to see like what my great grandmother looks like, and hear stories about her or what their housing looked like when they lived in Georgia, and hearing how tough it was for them being off island for the first time in, during the Civil Rights Movement in the south. And scary that was and being in a place where their people don't understand that it's not just two colors, and then being put in a position of I don't know where I belong, and it's affecting safety.

Additionally, responses highlighted the significance of decolonizing through reconnection and remembering in participant's identification of cultural strengths which served as safeguards to mental health. Participants described engagement with their spirituality and "supernatural elements of the island" promoting their mental health wellbeing. Leila mentioned,

> "With my like, spiritual metaphysical journey, I do feel empowered by that, because I, like go down this and make connections with like philosophy, like I always come back to like, you know, the universe needs one song, our voice, our greatest vibration, our energy that we put out into this world is the one that comes from within, and we project, you know, to others, is this."

Another participant noted how understanding ancient CHamoru society has helped reconcile beliefs about death particularly after losing her grandfather. She said,

> "Understanding that our ancient society believe in ancestral veneration, and I'm like, I could do this, I could do this with you, because the Bond we had between my tata, and I is so strong that I knew that it doesn't end in this physical realm. And while that's been a whole subject in itself, it's like helped me understand that I am connected to people I haven't met before."

This act of remembering and reconnection, for most participants, aided in the shifting of their perspective from a negative to a positive view of their ethnic identity and culture. Benita's response illustrates this: "Now I feel like I'm exactly enough CHamoru and that there's no one or right way to be." Others noted this process has equipped them with the skills to navigate discrimination. One response illuminated how one participant navigates microaggressions, she expressed:

> I have gotten better at changing my narrative and highlighting my strengths. This can be a time to educate, as well as allow myself to appreciate, like where I come from, and being able to have someone embrace my culture, as well.

For others, reconnection and remembering allowed them to continue to critically analyze colonization within their culture. Jessica shared, "There are things in it where I question...where I'm like....is that really CHamoru or like are you just being an asshole?" Others shared how decolonization keeps them connected to their culture and identity. Others indicated taking pride and finding purpose in "highlighting the core values of our culture, being family oriented, and our own sense of filial piety, representing everybody who has come before me and allowed me to be here in this space." Respondents also emphasized how their decolonization attitude and efforts

extended beyond their CHamoru culture to support decolonization among populations who are also struggling for self-determination. Benita indicated:

> Like, I'm so proud of being Chamorro, but at the same time, like a more rooted into, like, what connects everyone together as a Pacific Islander as everyone.

General Theme 3: CHamoru Sacred Grief

The theme *CHamoru Sacred Grief* represents the grief response and stages experienced by participants as they developed and strengthened their critical consciousness. Participants shared stories of undergoing a nonlinear mourning process that at first caused emotional distress, but ultimately led to healing and hope for liberation. Reponses within this theme underscore feelings of sadness, righteous rage, anxiety, hopelessness, and empathy. Respondents reported grief related to the loss of connection and in some cases exposure to their indigenous culture identity and ways of living due to colonization. Haggas indicated, "There was a lot of grief. I felt like there was a culture identity community that I missed out on. I'm only 27. But still, I feel like, like, 20 plus years where I missed out." This yearning for a stronger connection to culture was felt by many respondents whose families saw the military as one of the only ways to earn a living. Haggas reflected:

> So, I grew up in the US kind of moving around a lot, because both my parents were in the military. And I knew my mom was from Guam. And I knew who my family was, but that was about it. Like we were never really exposed to other Chamorro people, or the language, the food only on like, special occasions.

This yearning, as described by many participants, led them to question what life could have been like if colonization never existed. Jessica shared:

> "Had we not been colonized by the four different administrations Spain, Germany, Japan and now America... like what could have it been? Right? What were our names? Like we're so far removed. What would have our names have been? What religion we would have been? Like, a lot of the colonization has erased much of, much of who we are."

In addition to the longing felt by respondents, most participants identified "anger at colonization" for the indoctrination of lies about their history. Participants reported having "gone through stages of grief of like being bitter." One respondent shared, "I feel like I could go on about like how mad I am about white people." This anger was accompanied by shock and sadness as they became more aware of the social conditions, inequalities, and oppression that have and continue to impose limitations on their individual lives and their community. One participant said, "Like your white tears and white guilt like doesn't over like over...Like it doesn't matter more than like the pain and oppression that you know our people have gone through." Some participants noted feeling sadness related to witnessing the indoctrination of lies about their CHamoru culture manifest through community members via colonial mentality. Others described the depressed mood experienced when realizing what their people have been through over hundreds of years. G recalled:

> They [some CHamoru people] don't often, like fully try to wrap their minds around it, because I don't blame anyone, because it honestly, it's kind of, it bogs me down, being like, you know, thinking about that [colonization]. And I guess that's like, the impact on mental health where, when you just realize, you know, how our people have been through so much over the hundreds of years. It's like, it is very depressing.

While many participants expressed distressing emotions related to grief, most of all the respondents' reported their grief was essential to their healing. They noted grief was a necessary part in reconnecting with their culture and family as well as in promoting and activating consciousness raising. In tandem with the previously mentioned, some participants expressed empathy towards communities that faced similar struggles. Teresa's exclaims:

> And even though our cultures are different, like there were so many parallels that I saw as far as like, you know, the indigenous Americans being put in, like, you know, like, in, in the schools where the language was forced out of them, and like the adults of a certain generation not wanting to, you know, not speaking their language with their children because of their own preconceived notions of what it meant to, to, to be an indigenous speaker.

Theme 4: Culturally Rooted Resistance

The essential theme of *Culturally Rooted Resistance* provides insight to the various ways participants described resisting colonization and engaging in actions that lead to CHamoru self-determination through culturally rooted platforms promoting a sense of belonging, empowerment, community, joy, pride, and hope. Participants noted a significant part of their resistance is interrogating and redefining CHamoru cultural values delineating indigenous ways from colonization. Jessica demonstrated this as she discusses the CHamoru cultural value of respetu:

> "Like how do we...yeah, we want to be respectful, but like, how do we define respect in the Chamorro community? Like, yeah, talking back is disrespectful. But what about also expressing inclusivity of all of our opinions in a respectful manner?" Another participant

> shared: “How do we break that cycle? It’s by redefining a lot of like, our values, or like, at least, I guess sharpening it.”

Respondents discussed not only redefining their values, but also their personal histories. Leila shared “trying to redefine and understand the maternal story of my lineage.” Others used this as momentum to involve their families into breaking generational patterns in their family which were caused by the hands of colonization.

In tandem with CHamoru values and their familial stories, most of all the participants within this sample size indicated learning their indigenous CHamoru language as pivotal to their mental health wellbeing. Being able to learn the indigenous language fostered feelings of empowerment, pride, and belonging. Haggas highlighted this:

> And, yeah, I feel empowered now that I’m really trying to learn the language and so many people like across the world, like, my whole life, I was seen as an “other.” And for the first time, like, I feel like I belong.

Respondents indicated enrolling in a free online CHamoru language class and attending immersion programs which has helped them access their language in new ways. To take it a step further, some respondents mentioned refusing to use CHamoru words that were altered by the Japanese, Germans, and/or Spaniards describing going the extra mile to research indigenous words rather than use what is widely accepted. One participant reflected: “I’m not just accepting. Oh, this is a Japanese word in the CNMI Oh, it’s just a German word of the CNMI. This is a Spanish word here as well. I’m not just gonna accept that.”

In addition to reviving the CHamoru language, respondents described participating in traditional CHamoru cooking to recover cultural practices. The following response from Bam

provides further insight as she details her joy for indigenous cooking that keeps her connected to her heritage:

> "So, when you're making traditional old Chamorro food, it's like this many [holds up four fingers] ingredients. And it might take you a little like it might take you a lot of time. But anybody can find four ingredients of simple things, it doesn't cost a lot. And it's something that you could give your kids to be like, this is what we've been eating for at least 2,000 years maybe longer. You know, nobody knows how old these recipes are."

Responses also highlighted the importance of CHamoru led organizations and institutions in combating the erasure and invisibility of CHamoru voices and experiences within various fields like literature. The following response by one participant further illuminates this:

> "We live in this amazing time of the internet, where like, you can learn more, and like you UOG press is doing such great work of like, putting out literature and like getting, getting the culture down in words."

Respondents also emphasized the importance of social media in connecting them to spaces to inform their resistance practices and a platform to spread awareness and garner support to keep the culture and language alive. This dedication to keeping the CHamoru culture alive is rooted in participants' commitment to paying homage to their ancestors, elders, and future generations. Teresa professed:

> "And I would hope that that's a positive for the elders of the Chamorro community. And I think there's hope and knowing that even though we're a widespread diaspora, you know, that we're, we're torchbearers in our own little areas."

Others reported having a sense of purpose as they worked on "continuing on the resistance, advocating, and pride." One respondent said, "I don't feel burdened, but I have greater sense of responsibility." Some participants reported finding comfort and encouragement in understanding this was a shared sharing the responsibility with other CHamorus. One respondent shared, "realizing that, you know, like, I'm sharing in that responsibility and that respect with the people around you, your community." This reality also fostered feelings of solidarity and belonging as participants described being part of a diasporic family that extends beyond their family unit and even into Pasifika. Respondents felt honored to have been "given a wider window into culture."

Moreover, responses also illuminated how resistance rooted in combating colonization to maintain and revitalize the culture fostered feelings of hope for the future for their people and their islands. Leila reported: I think by having the tools to keep the language and the culture alive, that makes us the bearers of passing it on to other to future generations and ensuring the survival of our culture." Another participant profoundly exclaimed: "I think there's hope and knowing that even though we're a widespread diaspora, you know, that we're, we're torchbearers."

Table 4

Means, Standard Deviations, and Intercorrelations for All Study Variables

Variable	M	SD	1	2	3	4	5	6	7	8	9	10
1. IntInferior	13.70	1.55										
2.Cultural Shame	6.22	.736	.064									
3. WGDiscrim	6.55	.758	.067	.582**								
4. Phys Char	7.78	1.08	-.016	.528**	.695**							
5. Colonial Debt	11.48	1.04	-.063	.370**	.319**	.243*						
6. CRPI	4.94	.1.45	.030	.054	.079	.212	-.324**					
7. CRE	5.38	.767	.036	-.257*	-.333**	-.305**	-.164	-.030				
8. CASP	7.69	.980	-.015	.592**	.735**	.987**	.221	.205	-.302**			
9. Sociopolitical Beliefs	5.41	.687	.151	-.272*	.047	.231	.503**	-.091	.053			
10.Empowerment Beliefs	5.02	1.02	.085	-.264*	-.241*	-.026	-.331**	.415**	.117	-.069	.788**	
11. EIS Affirmation	3.78	.393	-.012	-.768**	-.444**	-.494**	-.233	-.203	.385**	-.544**	.261*	.110

Note. *p < 0.05; ** p < 0.001; IntInferior = Internalized Inferiority; Cultural Shame = Cultural Shame and Embarrassment; WGDiscrim = Within Group Discrimination; Phys Char = Physical Characteristics; CRPI = Critical Reflection Perceived Inequality; CRE = Critical Reflection Egalitarianism; CASP = Critical Action Sociopolitical Participation.

Table 5

Means, Standard Deviations, and Intercorrelations for All Study Variables Continued

Variable	M	SD	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
EIS Exploration	3.78	.60	-.062	-.304**	-.198	-.102	-.240*	.165	.071	-133	.474**	.569**	.210							
EIS Resolution	3.38	.757	-.070	-.331**	-.199	-.096	-.095	.014	-.022	-.128	.151	.296*	.442**							
PSW	3.94	1.27	-168	-.129	-.081	-.265	-.458**	.248*	-.269*	-.272	-.183	.219	-.187	.004						
PFW	5.31	1.38	-.238	-.326**	-.237*	-.249*	.038	-.145	.153	-.275*	.047	.104	.379**	-.016	.252*	.594**				
PCB	5.62	1.33	.003	-.391**	-.269*	-.296*	-.152	.251*	.081	-.327**	.231	.356**	.271*	.170	.201	.290*	.528*			
GME	6.42	.920	-.017	-.593**	-.375**	-.290*	-.121	.187	.242*	-.348**	.503**	.525**	.497**	.416**	.436**	.226	.503**	.740**		
MHI Anxiety	3.62	1.22	-.040	-.269*	-.223	-.304**	-.070	-.172	-.064	-.320	-.091	-.051	.115	-.077	.090	.420**	.303**	.259*	.268*	
MHI Depression	4.25	1.04	-.125	-.337**	-.287*	-.423**	-.234*	.009	-.004	-.428*	.053	.096	.224	.055	.231	.334**	.393*	.368**	.317**	.762**

Note. *p < 0.05; ** p < 0.01; PSW = Perceived Societal Wellbeing; PFW = Perceived Familial Wellbeing; PCB = Pacific Connectedness and Belonging; GME = Group Membership Evaluation.

CHAPTER 5

DISCUSSION, IMPLICATIONS, AND CONCLUSION

> The truth is there's nothing small about the greatness from which we come. We come from wayfinders. Seafarers who sliced through millions of miles of open ocean with little more than curved sticks and cowrie shells…If that's not magic, I don't know what is. So, draw close to the well, drink that water, then kindly bring someone else something to drink.
>
> —Aguon, No Country for Eight-Spot Butterflies, 2022.

This study provides invaluable insight into the mental health experience of CHamoru adults, a population that remains understudied, perpetuating invisibility within the psychological literature. The current research provides the first known mixed-methods examination into the relationship between consciousness, ethnic identity, and colonial mentality on mental health. Results from both the quantitative and qualitative phases were examined, compared, and contrasted with one another. Findings are reviewed based on the questions assessed in each phase, discussing where results converged and diverged in anticipated and unanticipated ways. Additionally, this section details the implications for counseling psychologists, limitations, and conclusions.

DISCUSSION

Findings from this study's quantitative and qualitative phases offer great holistic insight into how ethnic identity and consciousness promote mental health and well-being. Results from the quantitative phase revealed that both ethnic identity and consciousness improved anxiety and depression-related symptoms. More specifically, respondents who perceived satisfaction with the

support they received from society (e.g., one's local community to the national government) and in their respective community as Pacific Islanders reported lower levels of anxiety. Responses from the qualitative phase align with this finding and provide additional understanding of how CHamorus conceptualizes the word society. Participants described separating themselves from American society and identifying more with their CHamoru community and the global society of Pasifika people. Overall, participants shared that the support they received from their CHamoru and Pasifika communities elicited feelings of connectedness, belonging, pride, and purpose and fostered solidarity.

Furthermore, participants described feeling comfort and encouragement as feeling honored to be in solidarity with other Pacific Islanders in their fight for justice. Moreover, results indicated that having a strong ethnic identity improved participants' mental health, which aligns with the substantial body of literature underscoring the positive mental health outcomes experienced by marginalized populations when developing their ethnic identity (Phinney, 1990; Umaña-Taylor et al., 2004, 2014). The scholarship also identifies ethnic identity as a cultural resource utilized by many communities of color to facilitate mental health and well-being. Additionally, previous research has indicated that ethnic identity is beneficial in decreasing adverse factors such as racial discrimination and race-related stress, reducing depressive symptoms (Rivas-Drake et al., 2014), and promoting better mental health outcomes (Smith & Silva, 2011).

Comparably, quantitative findings revealed that individuals who indicated higher levels of consciousness (e.g., participating in social and political activities to change perceived inequalities) reported fewer depression-related symptoms. This is corroborated by the qualitative data as one of the essential themes was *Culturally Rooted Resistance, which described the*

culturally rooted ways participants engaged in social justice-oriented actions aimed at CHamoru self-determination and resistance to colonization. Respondents described how decolonizing CHamoru cultural values, redefining personal histories, joining cultural revival and resistance movements, participating in traditional CHamoru cooking, and creating visibility of culture and injustices served as protective factors and coping skills. Notably, combatting colonization through maintaining and reviving their CHamoru culture strengthened their consciousness and engendered feelings of belonging, community, resilience, pride, hope, and empowerment. This finding is consistent with research examining the impact of consciousness on communities of color. Research has shown that positive mental health outcomes increase when individuals engage in social action and activism (Klar & Kasser, 2009). Equally important, having the ability to critically examine one's sociopolitical positioning, cultural values, and historical legacy helped many participants navigate instances of discrimination and race-related stress, aligning with literature that postulates that consciousness serves as a protective factor against the effects of racial discrimination (Gale et al., 2023) contributing to positive coping skills, sense of agency, and collective action for social change (Alvarado et al., 2024).

In addition to the effects of ethnic identity and consciousness on mental health, findings also provided further nuance to the relationship between ethnic identity and consciousness. Quantitative results indicated that individuals who were in the process of exploring and learning about their ethnic background endorsed beliefs regarding the importance of cultural/historical experiences aimed at supporting the social and political development of the CHamoru people. Findings also revealed that CHamorus, who indicated feeling more positively about their CHamoru ethnic identity membership, participated in social and political activities to address disparities. Qualitative findings further expound upon the relationship between ethnic identity

and consciousness, providing an additional understanding of how ethnic identity raises consciousness levels. Themes of *Destruction of Colonization*, *Decolonization through Remembering and Reconnection,* and *Culturally Rooted Resistance* are interrelated and describe how the unlearning and relearning process (e.g., ethnic identity exploration and ethnic identity affirmation) strengthens CHamoru ethnic identity, resulting in participants' awareness of the historical and present-day impact of colonization, their sociopolitical positioning, cultural values, and historical legacy. This conclusion is supported by research contending that consciousness informs ethnic identity as it helps individuals address internalized oppression, informs how individuals make sense of themselves, and helps foster historical and cultural awareness, strengthening the connection to ethnic identity (Watts et al., 2011; Watts & Hipolito-Delgado, 2015).

Conversely, findings from the quantitative and qualitative phases differed in the examination of the effect colonial mentality has on the relationships between ethnic identity and mental health as well as consciousness and mental health. Although findings varied, this contrast offers a better understanding of the way colonial mentality manifests in the CHamoru community. Quantitative results failed to meet a statistical significance when determining if colonial mentality moderated the relationship between ethnic identity and mental health. Results from the consciousness model also failed to meet statistical significance. However, they did indicate a trend toward statistical significance, revealing that higher levels of colonial debt (e.g., explicit feelings and thoughts of indebtedness to the colonizer) moderated the relationship between consciousness and mental health. Essentially, the more an individual indicated colonial debt, the more they reported adverse mental health outcomes. Qualitative findings further expound on this conclusion as participants described the many forms of colonial mentality in the

CHamoru community, including feelings of indebtedness and patriotism towards their colonizer(s). Responses illustrate how participants and/or family members adopted the mindset and ways of their colonizer(s), valuing their colonizer's culture over their own, negatively impacting mental health. This was depicted in the subtheme of the *destruction of spirit*. Most participants described instances of CHamorus adopting other cultures, refusing to speak CHamoru despite fluency, the silence experienced in an oral culture, and witnessing overt disdain for CHamoru culture, highlighting the insidious pervasiveness of colonial mentality. The presence of colonial mentality within the CHamoru community contributed to adverse mental health outcomes, a conclusion consistent with previous literature exploring the effects of colonial mentality in Asian Indians (Nikalje & Çiftçi, 2021), Filipinos (David, 2008; David & Okazaki, 2006), Ghanaians (Utsey et al., 2015) and Puerto Ricans (Capielo Rosario et al., 2019) identifying colonial mentality as a determinant of depression symptoms.

Nonetheless, it is worth noting that when comparing the qualitative responses to the questions on the Colonial Mentality Scale, questions from the CMS needed to capture the uniqueness of colonial mentality amongst CHamorus fully. This is consistent with a study conducted by Faaleava (2021) in which findings indicated that Samoans did not experience a colonial mentality like other colonized populations, suggesting the importance of examining the impact of internalized oppression in each colonized population.

Moreover, true to the underpinnings of CGT and Liberation Psychology, new insights emerged from the qualitative data that could not be fully captured with the questions asked in the quantitative phase, contributing to new knowledge of how ethnic identity, consciousness, and colonization impact the mental health of CHamoru adults. For all participants, the relationship between ethnic identity and consciousness resulted in *CHamoru sacred grief* that promoted

mental health wellbeing. This grief process prompted symptoms related to grief, anxiety, and depression as they realized the havoc caused by colonization. Interestingly, participants contended that this grief was necessary to their healing, fostering righteous rage, empathy, community, connectedness, and the promotion of consciousness-raising. Although this grief is not named explicitly within the literature, previous scholarship focused on Indigenous populations does allude to the individual and communal grief experienced as Indigenous communities endure various interruptions and disruptions by the hands of settler colonialism, such as the forced removal of Indigenous children from Indigenous homes (Koolmatrie & Ross, 2000).

Findings also reference that CHamorus' conceptualization of mental health includes their environment (e.g., land, ocean, air, and animals) and Indigenous language. This is essential as these factors are interconnected to CHamoru's mental health and well-being. This conclusion was illuminated throughout all qualitative themes as participants described how witnessing the destruction of their ancestral land and language resulted in depression, anxiety, and trauma-related symptoms. Equally, reconnecting and strengthening their relationship with their motherland and language were protective factors to their mental health despite the geographic location (e.g., on or off the island) or proficiency in the language. This is also seen in scholarship postulating that engagement and cultural connection with Indigenous languages promote mental health wellbeing and facilitate spiritual balance (Whalen et al., 2022). Much like the responses in this study, previous literature has highlighted that it is necessary to understand that Indigenous physical, spiritual, mental, and emotional health is inextricably connected to ancestral land. Thus, being disconnected from ancestral land has health and healing implications (Walsh et al., 2018). Studies also postulate that this connection to land, like other Indigenous communities, can

mitigate and decrease anxiety and depression symptoms (Chiblow & Meighan, 2022; McCubbin & Marsella, 2009; McKenzie, 2022; Yeh et al., 2021).

Finally, qualitative results suggest that CHamorus's understanding and experience of trauma may differ from Westernized psychological conceptualizations. Participants in this study note the multilayered ways that colonization-induced trauma negatively impacts their individual and collective mental health. Participants discussed aspects such as PTSD and domestic violence within their community, which they attributed to the intergenerational trauma generated by colonization that engenders shame, internalized oppression, frustration, sadness, and anxiety. Many spoke on the inherent harm to the well-being of the CHamoru people resulting from colonization. This is consistent with literature centered on the impact of dispossession, discrimination, trauma, separation, and loss due to continued colonialism amongst Indigenous communities. Scholarship by Duran and colleagues (1998) calls attention to the "soul wound" prevalent among Indigenous communities inflicted by the American Indian Holocaust, which is associated with depression, suicidal ideation and behavior, and social problems (e.g., substance use). In one study amongst Lakota Indigenous people, a mental health intervention was created to aid in the healing of the soul wound, and found that 100% of the participants found the intervention helped them with grief resolution. In contrast, 72% reported that the intervention was helpful. This mental health intervention designed to help heal the soul included education about historical loss, increased awareness about trauma and its impact on grief, sharing in the community, and an engagement in a culturally bound healing and morning process.

Implications

The results of this study emphasize important considerations and offer critical opportunities for addressing the mental health disparities that exist among the CHamoru people.

With social justice as an anchor, counseling psychologists are uniquely equipped with the awareness, knowledge, and skillset to be change agents (DeBlaere et al., 2019) and attend to the multifaceted mental health needs of the CHamoru community. This section illuminates how counseling psychologists can support and promote CHamoru mental health in clinical practice, research, and advocacy.

Clinical Practice

In clinical practice, a reorientation of how counseling psychologists conceptualize the facets of mental health and healing is essential when working with CHamoru people. Consistent with the findings of this study, cultural legacy, culturally rooted coping skills, community ties, connection to ancestral lands, language, ethnic identity and consciousness were all significant to the promotion of positive mental health outcomes and wellbeing. This knowledge calls for counseling psychologists to move away from mainstream Eurocentric modalities and frameworks often taught and used within clinical practice. These modalities and frameworks miss the mark in fully capturing the lived experiences of CHamoru people and do not provide counseling psychologists with the necessary awareness, knowledge, and skills to assess and treat mental health. For example, the biopsychosocial model is often utilized as a framework in clinical practice to help counseling psychologists attend to biological, psychological, and societal factors when understanding health, illness, and treatment (citation YEAR). However, this model does not consider the distal histories of a person, including generational trauma, colonization experiences, cultural assets, spiritual practices, connection to ancestral lands and Indigenous languages, etc. Thus, counseling psychologists must employ treatment modalities and frameworks incorporating cultural healing resources, cultural assets, and support systems. For example, counseling psychologists working alongside CHamoru people in their healing journey

can operate from theories emphasizing the interrelatedness of all living people and things, such as Linda James Myers' Optimal Psychology Theory. This theory aligns well with the CHamoru worldview and is more culturally appropriate than cognitive behavioral theory.

The findings of this study provide valuable insight that can be applied in formulating culturally appropriate questions for clinical interviews. These questions are instrumental in assessing the understanding of significant factors and how discrimination, race-related stress, colonization experiences, and invisibility impact the lives of CHamoru clients. The study also highlights the detrimental impact of colonization, underscoring the need for counseling psychologists to consider the ways historical and present-day colonialism influences psychological distress. This practical application of the research can aid counseling psychologists in assessing CHamoru clients' mental health and tailoring their treatment plans accordingly. For instance, counseling psychologists should inquire about relationships across generations within family systems rather than focusing solely on the immediate family when assessing social support networks. Similarly, they can develop questions that provide insight into CHamoru clients' connection to their ethnic identity, culture, and Indigenous worldview.

Another important implication for clinical praxis involves CHamoru Sacred Grief. Most participants described experiencing this phenomenon as essential to their healing process and wellbeing. Participants discussed the various symptoms experienced, which could be misdiagnosed as anxiety and depression. Counseling psychologists need to be able to differentiate this sacred grieving process from anxiety and depression to develop and implement effective treatment accurately. Additionally, this study offers some insight into the utility of cultural theories and interventions that focus on ethnic identity and consciousness-raising in support of and promotion of CHamoru wellbeing.

For training programs, results highlight the need to train burgeoning counseling psychologists on tangible skills to work alongside populations often overlooked in the psychological literature and the curriculum. Training programs are encouraged to incorporate the CHamoru culture within case studies, helping trainees become familiar with CHamoru's contributions, struggles, and healing practices. Moreover, training programs are encouraged to create a pathway for CHamoru scholar-practitioners within the counseling psychology profession, facilitating more representation to combat erasure and invisibility.

Research Praxis

There is a clear gap in research within the psychological literature of scholarly work focused on CHamoru mental health. This is particularly important given the significance of suicide rates and overall psychological distress within the CHamoru community. To address these mental health concerns that exist in the CHamoru community, more research needs to be conducted to inform the ways counseling psychologists understand and work with CHamoru people. Although results from this study provide foundational knowledge to CHamoru mental health, future research should further elucidate these findings. For instance, future quantitative and qualitative studies examining the implications and understanding of CHamoru Sacred Grief are needed to help inform the assessment and treatment of this phenomenon to avoid misdiagnosis and harmful treatment. Researchers are also encouraged to develop quantitative measures that accurately assess the unique ways colonial mentality manifests specifically within the CHamoru community.

Additionally, researchers are encouraged to conduct studies examining how mental health and healing are viewed among CHamoru people and culturally rooted healing practices promoting mental health. This will provide counseling psychologists with valuable insight,

which can have implications for therapy goals and how to achieve them. Future research should also include assessments of culturally responsive treatment modalities that promote CHamoru ethnic identity and consciousness that can be used to mitigate psychological distress. Furthermore, research funding organizations and academic journals within counseling psychology should prioritize research focused on CHamoru mental health.

Advocacy

With the knowledge and skill set counseling psychologists have regarding individual, systemic, and cultural level interventions, they can help support and advocate alongside the CHamoru people. In line with the results, CHamoru's mental health is heavily impacted by the historical and present-day legacies of colonization. Illuminating the psychological and deleterious effects of colonial violence on CHamoru mental health can be the first step for counseling psychologists in advocacy. For instance, counseling psychologists can use their research skills to support CHamoru activism movements to help CHamorus reclaim their ancestral lands, combat climate change, seek self-determination and independence, and revitalize their indigenous language. This can be done by leveraging counseling psychology's voice and presence, working with community organizers to secure grant funding and additional resources as well as financially supporting organizations such as Independent Guahan, Organization of People for Indigenous Rights, Nasion Chamoru, and the Micronesia Climate Change Alliance. In addition to the aforementioned, counseling psychologists are encouraged to partner with CHamoru-led organizations in the provision of training and workshops to bring awareness to the struggles and cultural resources of CHamoru people, providing concrete examples of how counseling psychologists can utilize their sphere of influence to advocate for CHamoru people. This information can be translated to social media to disseminate this knowledge. Furthermore,

the field of counseling psychology is encouraged to advocate for the development of laws and policies that protect the CHamoru people and their lands, holding the legislature accountable for how they continue to engage in colonial practices.

Limitations

Although this current mixed method study offers valuable insight into the ways ethnic identity, consciousness, and colonial mentality affect CHamoru mental health, this study is not without its limitations. One limitation was the quantitative sample size. It was difficult to recruit participants virtually as it was challenging to build trust and rapport, which was essential in researching understudied people. With the qualitative phase of the study, it was easier to recruit as participants were more likely to tell their stories and could properly vet me as a member of the CHamoru community. Due to the small quantitative sample size, findings must be interpreted with caution.

Additionally, participants' demographics varied across categories; however, most participants identified as women, heterosexual, and received some form of higher education (e.g., undergraduate and/or graduate degree). Without a more diverse sample, this could leave out experiences and perspectives from CHamoru people who are older, queer, trans, underemployed, and have not obtained a college degree. Additionally, there is complexity of multiple histories across the CHamoru diaspora with colonization histories differing depending on which island a CHamoru participant originated. This should be noted when considering the results of this study.

Finally, measures used in the quantitative phase had to be adapted to the CHamoru population as no existing measure precisely measures the ethnic identity, consciousness, or

colonial mentality of the CHamoru population. This could impact the results as questions may need to fully align with the purview of the CHamoru people on various concepts.

Conclusion

The purpose of this study was to examine the relationship between ethnic identity and consciousness on the mental health of CHamoru people while considering the effects of colonization (e.g., colonial mentality). This mixed-method inquiry documented initial findings that can be used as a foundation for creating culturally responsive interventions to support and promote CHamoru mental health in clinical practice, research, and advocacy.

With the clear instructions voiced by the CHamoru people illuminated within this study, counseling psychologists are tasked with a grave responsibility not to deny what we know but to hold the stories, honor CHamoru culture, and finally *na'lå'lå' e minagåhet-ta*[2].

[2]Na'lå'lå' E Minagåhet-ta is CHamoru for “give life to our truth.”

REFERENCES

Aguon, C. T., & Kawabata, Y. (2022). Examining mental health stigma on Guam: A serial mediation model. *Asian American Journal of Psychology.* Advance online publication. https://doi.org/10.1037/aap0000286

Allan, A. T., Tydingco, P., & Perez, V. (1985). Clinical aspects of cultural psychiatry on Guam. *The International Journal of Social Psychiatry*, 31, 198–204.

Allen, G. E. K., Conklin, H., & Kane, D. K. (2017). Racial discrimination and psychological health among Polynesians in the U.S. *Cultural diversity & ethnic minority psychology*, *23*(3), 416–424. https://doi.org/10.1037/cdp0000133

Allen, G. E. K., & Heppner, P. P. (2011). Religiosity, coping, and psychological well-being among Latter-Day Saint Polynesians in the U.S. *Asian American Journal of Psychology*, *2*(1), 13–24. https://doi.org/10.1037/a0023266

Allen, G. E. K., Kim, B. S. K., Smith, T. B., & Hafoka, O. (2016). Counseling attitudes and stigma among Polynesian Americans. *The Counseling Psychologist, 44*(1), 6–27. https://doi.org/10.1177/0011000015618762

Anchin, J. C. (2008). Contextualizing discourse on a philosophy of science for psychotherapy integration. *Journal of Psychotherapy Integration*, *18*(1), 1–24. https://doi.org/10.1037/1053-0479.18.1.1

Gomez Alvarado, C. J., Patel, P., Salcido, V., & Stein, G. L. (2024). Cultural stress and critical consciousness among Latinx adolescents. *Cultural Diversity & Ethnic Minority Psychology.* Advance online publication. https://doi.org/10.1037/cdp0000660

Baldwin, J. A. (1984). African self-consciousness and the mental health of African Americans. Journal of Black Studies, 15, 177-194.

Baldwin, J. A., Brown, R., & Rackley, R. (1990). Some socio-behavioral correlates of African self-consciousness in African-American college students. Journal of Black Psychology, 17(1), 1-17. doi: 10.1177/00957984900171002

Baldwin, J. A., Duncan, J. A., & Bell, Y. R. (1987). Assessment of African self- consciousness among Black students from two college environments. Journal of Black Psychology, 13(2), 27-41.

Bennett, J. "Migrating Beyond the Mattingan: Chamoru Diasporic Routes, Indigenous Identities, and Public Exhibitions." PhD diss., University of Hawai‘i at Mānoa, 2021

Bevacqua, M. L., & Bowman, I. K. (2016). Histories of Wonder, Futures of Wonder: Chamorro Activist Identity, Community, and Leadership in “The Legend of Gadao” and “The Women Who Saved Guåhan from a Giant Fish.” Marvels & Tales, 30(1), 70–89.

Bombay, A., Matheson, K., & Anisman, H. (2010). Decomposing identity: differential relationships between several aspects of ethnic identity and the negative effects of perceived discrimination among First Nations adults in Canada. *Cultural diversity & ethnic minority psychology*, *16*(4), 507–516. https://doi.org/10.1037/a0021373

Bosqui, T. J., Kouvonen, A., & Kawabata, Y. (2019). Ethnic Inequalities in Psychological Distress: A Population Data Linkage Study on the Pacific Island of Guahan/Guam. Journal of Immigrant and Minority Health, 21(5), 1026. https://doi.org/10.1007/s10903-018-0815-5

Bryant-Davis, T., & Moore-Lobban, S. J. (2020). Black minds matter: Applying liberation psychology to Black Americans. In L. Comas-Díaz & E. Torres Rivera (Eds.), *Liberation*

psychology: Theory, method, practice, and social justice (pp. 189–206). American Psychological Association. https://doi.org/10.1037/0000198-011

Campbell, C., & MacPhail, C. (2002). Peer education, gender and the development of critical consciousness: Participatory HIV prevention by South African youth. *Social Science & Medicine, 55*(2), 331–345. https://doi.org/10.1016/S0277-9536(01)00289-1

Capielo Rosario, C., Schaefer, A., Ballesteros, J., Rentería, R., & David, E. J. R. (2019). A caballo regalao no se le mira el colmillo: Colonial mentality and Puerto Rican depression. Journal of Counseling Psychology, 66(4), 396–408. https://doi.org/10.1037/cou0000347

Center for Disease Control and Prevention. (2023, April 24). Retrieved from https://www.cdc.gov/suicide/facts/data.html

Chapman-Hilliard, C. (2013). *Telling the lion's story: Developing a measure of Black consciousness* (Doctoral dissertation). Retrived from http://catalog.lib.utexas. edu/record=b8703554~S2. (Record No. b8703554)

Chapman-Hilliard, C., & Adams-Bass, V. (2016). A Conceptual Framework for Utilizing Black History Knowledge as a Path to Psychological Liberation for Black Youth. Journal of Black Psychology, 42(6), 479–507. https://doi.org/10.1177/0095798415597840

Charmaz, K. (2017a). The Power of Constructivist Grounded Theory for Critical Inquiry. Qualitative Inquiry, 23(1), 34-45. https://doi.org/10.1177/1077800416657105

Charmaz, K. (2017b). Constructivist grounded theory. *The Journal of Positive Psychology, 12*(3), 299–300. https://doi.org/10.1080/17439760.2016.1262612

Chiblow, S., & Meighan, P. J. (2022). Language Is Land, Land Is Language: The Importance of Indigenous Languages. *Human Geography, 15*(2), 206–210.

Choi, A. Y., Israel, T., & Maeda, H. (2017). Development and evaluation of the Internalized Racism in Asian Americans Scale (IRAAS). *Journal of Counseling Psychology, 64*(1), 52–64. https://doi.org/10.1037/cou0000183

Chwalisz, K., Shah, S. R., & Hand, K. M. (2008). Facilitating rigorous qualitative research in rehabilitation psychology. *Rehabilitation Psychology, 53*(3), 387–399. https://doi.org/10.1037/a0012998

Comas-Díaz, L., & Torres Rivera, E. (Eds.). (2020). *Liberation psychology: Theory, method, practice, and social justice.*American Psychological Association. https://doi.org/10.1037/0000198-000

Constantine, M. G., Anderson, G. M., Berkel, L. A., Caldwell, L. D., & Utsey, S. O. (2005). Examining the Cultural Adjustment Experiences of African International College Students: A Qualitative Analysis. *Journal of Counseling Psychology, 52*(1), 57–66. https://doi.org/10.1037/0022-0167.52.1.57

Creswell, J.W. (1999). Mixed method research: Introduction and application. In T.Cijek (ED.), *Handbook of educational policy* (pp.455-472). San Diego, CA: Academic Press.

Cross, W. E., Jr. (1991). *Shades of black: Diversity in African-American identity.* Temple University Press.

Cruz, M. T. F. (2012). (Re) searching identity: Being Chamorro in an American colony [Unpublished Doctoral dissertation]. University of Hawaii at Manoa.

Cunningham, L. (1992). *Ancient Chamorro society*. Honolulu, HI: The Bess Press, Inc.

Cutrer-Párraga, E. A., Allen, G. E. K., Miller, E. E., Garrett, M. F., Conklin, H., Franklin, C. N., Norton, A., Hee, C., & Coffey, B. K. (2024). Perceptions and barriers about mental health

services among Pacific Islanders: An interpretative phenomenological analysis. *Journal of Counseling Psychology, 71*(2), 89–103. https://doi.org/10.1037/cou0000719

David, E. J. R., & Nadal, K. L. (2013). The colonial context of Filipino American immigrants' psychological experiences. Cultural Diversity & Ethnic Minority Psychology, 19(3), 298–309. https://doi.org/10.1037/a0032903

David, E. J. R., & Okazaki, S. (2006). Colonial mentality: A review and recommendation for filipino american psychology. Cultural Diversity and Ethnic Minority Psychology, 12(1), 1–16. https://doi.org/10.1037/1099-9809.12.1.1

David, E. J. R., & Okazaki, S. (2010). Activation and automaticity of colonial mentality. Journal of Applied Social Psychology, 40(4), 850–887. https://doi.org/10.1111/j.1559-1816.2010.00601.x

DeBlaere, C., Singh, A. A., Wilcox, M. M., Cokley, K. O., Delgado-Romero, E. A., Scalise, D. A., & Shawahin, L. (2019). Social justice in counseling psychology: Then, now, and looking forward. *The Counseling Psychologist*, *47*(6), 938–962. https://doi.org/10.1177/0011000019893283

Diemer, M. A., McWhirter, E. H., Ozer, E. J., & Rapa, L. J. (2015). Advances in the conceptualization and measurement of critical consciousness. *The Urban Review*, *47*(5), 809–823. https://doi.org/10.1007/s11256-015-0336-7

Diemer, M. A., Rapa, L. J., Park, C. J., & Perry, J. C. (2017). Development and Validation of the Critical Consciousness Scale. *Youth & Society*, 49(4), 461-483. https://doi.org/10.1177/0044118X14538289

DeLisle, C. T. (2016). Destination Chamorro Culture: Notes on Realignment, Rebranding, and Post-9/11 Militourism in Guam. *American Quarterly*, *68*(3), 563–572. http://www.jstor.org/stable/26360914

Denham, A. R. (2008). Rethinking historical trauma: Narratives of resilience. *Transcultural Psychiatry*, *45*(3), 391–414. https://doi.org/10.1177/1363461508094673

Drawson, A.S., Toombs, E., & Mushquash, C.J. (2017). Indigenous Research Methods: A Systematic Review. *International Indigenous Policy Journal, 8*, 5.

Duran, E., Duran, B., Brave Heart, M. Y. H., & Yellow Horse-Davis, S. (1998). Healing the American Indian soul wound. In Y. Danieli (Ed.), *International handbook of multigenerational legacies of trauma* (pp. 341–354). Plenum Press. https://doi.org/10.1007/978-1-4757-5567-1_22

Else, I. R. N., Andrade, N. N., & Nahulu, L. B. (2007). Suicide and suicidal-related behaviours among Indigenous Pacific Islanders in the United States. *Death Studies, 31,* 479–501.

Erikson, E.H. (1968). Identity: youth and crisis. Norton & Co.

Estrellado, J. E., Felipe, L. C. S., & Celestial, J. E. (2022). Colonial mentality and psychological flexibility among Filipinx Americans. *Asian American Journal of Psychology, 13*(1), 8–17. https://doi.org/10.1037/aap0000257

Faaleava, F., & Alefaio, S. (2022). Psychology in Samoa and throughout the diaspora. In G. J. Rich & N. A.

Faaleava. (2021). Identifying colonial mentality among Samoans in America. In *Identifying colonial mentality among Samoans in America.* (Vol. 82, Issues 4-B).

Fanon, F. (1963). The Wretched of the Earth New York: Grove Press.

Fetters, M. D., & Molina-Azorin, J. F. (2017). The Journal of Mixed Methods Research Starts a New Decade: The Mixed Methods Research Integration Trilogy and Its Dimensions. Journal of Mixed Methods Research, 11(3), 291-307. https://doi.org/10.1177/1558689817714066

Fetter, A. K., & Thompson, M. N. (2023). The impact of historical loss on Native American college students' mental health: The protective role of ethnic identity. *Journal of Counseling Psychology, 70*(5), 486–497. https://doi.org/10.1037/cou0000686

Freire, P. (1973). *Education for critical consciousness*. New York: Seabury Press.

Finlay, L., & Gough, B. (2008). Reflexivity: A Practical Guide for Researchers in Health and Social Sciences.

Gale, A., Johnson, N. C., Golden, A., Channey, J., Marchand, A. D., Anyiwo, N., & Byrd, C. M. (2023). Reflecting on change: Critical consciousness as a protective factor for Black youth. *Cultural Diversity & Ethnic Minority Psychology.* Advance online publication. https://doi.org/10.1037/cdp0000612

Glaser, B., & Strauss, A. (1967). *The Discovery of Grounded Theory: Strategies for Qualitative Research.* Mill Valley, CA: Sociology Press.

Hatala, A. R., Njeze, C., Morton, D., Pearl, T., & Bird-Naytowhow, K. (2020). Land and nature as sources of health and resilience among Indigenous youth in an urban Canadian context: a photovoice exploration. *BMC public health*, *20*(1), 538. https://doi.org/10.1186/s12889-020-08647-z

Hattori, A. P. (1995). *The Navy Blues: U.S. navy policies on Guam, 1899-1941*.

Hays, D. G., & Singh, A. A. (2012). *Qualitative inquiry in clinical and educational settings.* The Guilford Press.

Hope, E. C., & Spencer, M. B. (2017). Civic engagement as an adaptive coping response to conditions of inequality: An application of Phenomenological Variant of Ecological Systems Theory (PVEST). In N. J. Cabrera & B. Leyendecker (Eds.), *Handbook on positive development of minority children and youth* (pp. 421–435). Springer Science + Business Media. https://doi.org/10.1007/978-3-319-43645-6_25

Kaholokula, J. K. (2016). Racism and physical health disparities. In A. N. Alvarez, C. T. H. Liang, & H. A. Neville (Eds.), *The cost of racism for people of color: Contextualizing experiences of discrimination* (pp. 163–188). American Psychological Association. https://doi.org/10.1037/14852-008

Kanton Tasi. (2012, June 6). *Guam's Draft Commonwealth Act*. Retrieved from http://web.archive.org/web/20100930025941/http:/www.chamorro.com/kantontasi/commonw.html

Kapeli, S.A., Manuela, S., & Sibley, C.G. (2020). UNDERSTANDING PASIFIKA MENTAL HEALTH IN NEW ZEALAND: A review of the literature.

Kayser, M. (2010). The Human Genetic History of Oceania: Near and Remote Views of Dispersal. *Current Biology*, *20*(4), R194–R201. https://doi.org/10.1016/j.cub.2009.12.004

Keith, L. (1996). An investigation of psychosis in Chamorro culture: Relating delusional thought to cultural context [Doctoral dissertation, University of Windsor]. Scholarship at UWindsor. https://scholar.uwindsor.ca/etd/?utm_source=scholar.uwindsor.ca%2Fetd%2F1118&utm_medium=PDF&utm_campaign=PDFCoverPages

Kenyon, D. B., & Carter, J. S. (2011). Ethnic identity, sense of community, and psychological well-being among Northern Plains American Indian youth. *Journal of Community Psychology*, *39*(1), 1–9. https://doi.org/10.1002/jcop.20412

King, L. J. (2014). Learning other people's history: pre-service teachers' developing African American historical knowledge. *Teaching Education*, *25*(4), 427–456. https://doi.org/10.1080/10476210.2014.926881

Kirmayer, L.J., Brass, G.M., & Tait, C.L. (2000). The Mental Health of Aboriginal Peoples: Transformations of Identity and Community. *The Canadian Journal of Psychiatry, 45*, 607 - 616.

Klar, M., & Kasser, T. (2009). Some benefits of being an activist: Measuring activism and its role in psychological well-being. *Political Psychology, 30*(5), 755–777. https://doi.org/10.1111/j.1467-9221.2009.00724.x

Koolmatrie, J., & Williams, R. (2000). Unresolved grief and the removal of indigenous Australian children. *Australian Psychologist*, *35*(2), 158–166. https://doi.org/10.1080/00050060008260338

Lévesque, R. (1992). *History of Micronesia: A Collection of Source Documents*. *Vol. I.* Lévesque Publications, Quebec.

Liebkind, K. (2006). Ethnic identity and acculturation. In D. L. Sam & J. W. Berry (Eds.), *The Cambridge handbook of acculturation psychology* (pp. 78–96). Cambridge University Press. https://doi.org/10.1017/CBO9780511489891.009

Lowe, E. D. (2019). Social Change and Micronesian Suicide Mortality: A Test of Competing Hypotheses. *Cross-Cultural Research,* 53(1), 3-32. https://doi.org/10.1177/1069397118759004

Manuela, S., & Sibley, C. G. (2013). The Pacific Identity and Wellbeing Scale (PIWBS): A culturally-appropriate self-report measure for Pacific peoples in New Zealand. *Social Indicators Research, 112*(1), 83–103. https://doi.org/10.1007/s11205-012-0041-9

Marcia, J. E. (1980). Identity in Adolescence. In J. Adelson (Ed.), *Handbook of Adolescent Psychology*. New York: Wiley.

Martel, R.M., Shepherd, M., & Goodyear-Smith, F.A. (2021). He awa whiria—A "Braided River": An Indigenous Māori Approach to Mixed Methods Research. *Journal of Mixed Methods Research, 16*, 17 - 33.

Martín-Baró, I. (1994). *Writings for a liberation psychology.* (A. Aron & S. Corne, Eds.). Harvard University Press.

McCubbin, L. D., & Marsella, A. (2009). Native Hawaiians and psychology: The cultural and historical context of Indigenous ways of knowing. *Cultural Diversity and Ethnic Minority Psychology, 15*(4), 374–387. https://doi.org/10.1037/a0016774

McKenzie, J. (2022). Addressing historical trauma and healing in Indigenous language cultivation and revitalization. *Annual Review of Applied Linguistics*, *42*, 71-77. doi:10.1017/S0267190521000167

Memmi, Albert. (1965). *The colonizer and the colonized*. New York: Orion Press.

Meno, C. G., & Allen, N. E. (2021). Exploring Community Narratives of Violence Against Women among Domestic Violence Responders in Guam. *American journal of community psychology*, *67*(3-4), 338–352. https://doi.org/10.1002/ajcp.12476

Mew, E. J., Hunt, L., Toelupe, R. L. M., Blas, V., Winschel, J., Naseri, J., Soliai-Lemusu, S., Tofaeono, J. F., Seui, M. A., Ledoux-Sunia, T., Sunia, F., Reid, A., Helsham, D., Lowe, S. R., Poulin, R., Hawley, N. L., & McCutchan-Tofaeono, J. (2024). O le tagata ma lona

aiga, o le tagata ma lona fa'asinomaga (Every person belongs to a family and every family belongs to a person): Development of a parenting framework for adolescent mental wellbeing in American Samoa. *Children and Youth Services Review, 160,* 1–11. https://doi.org/10.1016/j.childyouth.2024.107502

Monnig, Laurel. "Proving CHamoru: Indigenous Narratives of Race, Identity, and Decolonization on Guam." PhD diss., University of Illinois at Urbana-Champaign, 2007.

Monteith, L. L., Holliday, R., Iglesias, C. D., Sherrill, A., Brenner, L. A., & Hoffmire, C. A. (2023). Suicide risk and prevention in Guam: Clinical and research considerations and a call to action. *Asian journal of psychiatry, 83*, 103546. https://doi.org/10.1016/j.ajp.2023.103546

Mullan, J. (2023). *Decolonizing therapy: Oppression, historical trauma, and politicizing your practice*. W. W. Norton.

Na'puti, T.R., & Bevacqua, M.L. (2015). Militarization and Resistance from Guåhan: Protecting and Defending Pågat. American Quarterly 67(3), 837-858. doi:10.1353/aq.2015.0040.

Na'puti, T.R., & Frain, S.C. (2017). Decolonize Oceania! Free Guåhan! *Amerasia Journal, 43*, 2 - 35.

Nikalje, A., & Çiftçi, A. (2023). Colonial mentality, racism, and depressive symptoms: Asian Indians in the United States. Asian American Journal of Psychology, 14(1), 73–85. https://doi.org/10.1037/aap0000262

O'Connor C. (1997). Dispositions toward collective struggle and educational resilience in the inner city: A case analysis of six African-American high school students. *American Educational Research Journal*, 34 (4), 593–629.

Okazaki, S., David, E. J. R., & Abelmann, N. (2008). Colonialism and psychology of culture. *Social and Personality Psychology Compass, 2*(1), 90–106. https://doi.org/10.1111/j.1751-9004.2007.00046.x

Parham, T. A., & Helms, J. E. (1981). The influence of Black students' racial identity attitudes on preferences for counselor's race. *Journal of Counseling Psychology, 28*(3), 250–257. https://doi.org/10.1037/0022-0167.28.3.250

Penningroth, P. E., & Penningroth, B. A. (1977). Cross-cultural mental health practice on Guam. *Social Psychiatry*, 12, 43–48.

Perez, M. P. (2005). Colonialism, Americanization, and indigenous identity: A research note on Chamorro identity in Guam. Sociological Spectrum, 25(5), 571–591. https://doi.org/10.1080/02732170500176138

Phinney, J. S. (1992). The multigroup ethnic identity measure: A new scale for use with diverse groups. *Journal of Adolescent Research, 7*(2), 156–176. https://doi.org/10.1177/074355489272003

Phinney, J. S., Cantu, C. L., & Kurtz, D. A. (1997). Ethnic and American identity as predictors of self-esteem among African American, Latino, and White adolescents. Journal of Youth and Adolescence, 26(2), 165–185. https://doi.org/10.1023/A:1024500514834

Phinney, J. S., Shin, R., Daly, B., & Vera, E. (2007). Multigroup Ethnic Identity Measure. *Professional School Counseling*, *10*(4), 379–388.

Pier, P. (1998). An exploratory study of community trauma and culturally responsive counseling with Chamorro clients. Dissertation, University of Massachusetts Amherst.

Ponterotto, J. G., Mathew, J. T., & Raughley, B. (2013). The Value of Mixed Methods Designs to Social Justice Research in Counseling and Psychology. *Journal for Social Action in Counseling & Psychology, 5*(2), 42–68. https://doi.org/10.33043/JSACP.5.2.42-68

Prilleltensky, I. (1989). Psychology and the status quo. American Psychologist, 44, 795–802.CrossRefGoogle Scholar

Rivas-Drake, D., Seaton, E. K., Markstrom, C., Quintana, S., Syed, M., Lee, R. M., Schwartz, S. J., Umaña-Taylor, A. J., French, S., Yip, T., & Ethnic and Racial Identity in the 21st Century Study Group (2014). Ethnic and racial identity in adolescence: implications for psychosocial, academic, and health outcomes. *Child development, 85*(1), 40–57. https://doi.org/10.1111/cdev.12200

Robillard, A. B., & Marsella, A. J. (1987). *Contemporary issues in mental health research in the Pacific Islands*. Social Science Research Institute, University of Hawaii.

Rosenfarb, Sharma-Gopinath, R., & Bhavsar, V. (2021). First episode of psychosis in Guam: The role of ethnicity and neighbourhood factors. Early Intervention in Psychiatry. https://doi.org/10.1111/eip.13205

Ruiz, A. S. (1990). Ethnic identity: Crisis and resolution. *Journal of Multicultural Counseling and Development, 18*(1), 29–40. https://doi.org/10.1002/j.2161-1912.1990.tb00434.x

Russell, S. 1998. *Tiempon I Manmofo'na:* Ancient Chamorro Culture and History of the Northern Mariana Islands. Micronesian Archaeological Survey Report No. 32. Division of Historic Preservation, Saipan, CNMI.

Seider S., Graves D. (2020). *Schooling for critical consciousness: Engaging Black and Latinx youth in analyzing, navigating, and challenging racial injustice*. Harvard Education Press.

Seider, S., El-Amin, A., & Kelly, L. L. (2020). The development of critical consciousness. In L. A. Jensen (Ed.), *The Oxford handbook of moral development: An interdisciplinary perspective* (pp. 203–221). Oxford University Press.

Seider, S., Henry, D. A., Edwards, E. C., Huguley, J. P., Diaz, B., & Daza, K. (2023). Investigating the relation between critical consciousness and academic achievement for adolescents of color and White adolescents. *Cultural Diversity & Ethnic Minority Psychology*, *29*(4), 516–529. https://doi.org/10.1037/cdp0000613

Smith, T. B., & Silva, L. (2011). Ethnic identity and personal well-being of people of color: A meta-analysis. *Journal of Counseling Psychology*, *58*(1), 42–60. https://doi.org/10.1037/a0021528

Souder, L. (1991). Feminism and Women's Studies on Guam. *NWSA Journal*, *3*(3), 442–446. http://www.jstor.org/stable/4316157

Speight, S. (2007). Internalized racism: One more piece of the puzzle. *The Counseling Psychologist, 35,* 126–134. http://dx.doi.org/10.1177/ 0011000006295119

Subica, A. M., Aitaoto, N., Link, B. G., Yamada, A. M., Henwood, B. F., & Sullivan, G. (2019). Mental Health Status, Need, and Unmet Need for Mental Health Services Among U.S. Pacific Islanders. *Psychiatric services (Washington, D.C.)*, *70*(7), 578–585. https://doi.org/10.1176/appi.ps.201800455

Tajfel, H. (1981). *Human Groups and Social Categories—Studies in Social Psychology*. Cambridge: Cambridge University Press.

Tajfel, H., & Turner, J. C. (2004). The Social Identity Theory of Intergroup Behavior. In J. T. Jost & J. Sidanius (Eds.), *Political psychology: Key readings* (pp. 276–293). Psychology Press. https://doi.org/10.4324/9780203505984-16

Topol, S. (2023, April 12). *The America that Americans Forget*. New York Times. https://www.nytimes.com/2023/07/07/magazine/guam-american-military.html

Tuazon, V. E., Gonzalez, E., Gutierrez, D., & Nelson, L. (2019). Colonial mentality and mental health help-seeking of Filipino Americans. Journal of Counseling & Development, 97(4), 352–363. https://doi.org/10.1002/jcad.12284

Twaddle, I., Roberto, J., & Quintanilla, L. (2003). Chamorro Perspectives on Mental Health Issues in Guam: Cross-Currents of Indigenous and Western Cultural Discourses. *South Pacific Journal of Psychology, 14*, 30-59. doi:10.1017/S0257543400000237

Umaña-Taylor, A. J., Diversi, M., & Fine, M. A. (2002). Ethnic identity and self-esteem among Latino adolescents: Distinctions among the Latino populations. *Journal of Adolescent Research, 17*(3), 303-327.

Umaña-Taylor, A. J., Yazedjian, A., & Bámaca-Gómez, M. Y. (2004). Developing the ethnic identity scale using Eriksonian and social identity perspectives. *Identity, 4*(1), 9-37.

Underwood, R. A. (1987). *American education and the acculturation of the Chamorros of Guam* (dissertation).

U.S Census Bureau. (2010). Guam demographic profile summary file. https://www.census.gov/prod/cen2010/doc/dpsfgu.pdf

U.S Census Bureau. (2023). Guam demographic profile summary file. https://www.census.gov/prod/cen2010/doc/dpsfgu.pdf

Utsey, S.O., Abrams, J.A., Opare-Henaku, A., Bolden, M.A., & Williams, O. (2015). Assessing the Psychological Consequences of Internalized Colonialism on the Psychological Well-Being of Young Adults in Ghana. *Journal of Black Psychology, 41*, 195 - 220.

Veit, C. T., & Ware, J. E., Jr (1983). The structure of psychological distress and well-being in general populations. *Journal of consulting and clinical psychology*, *51*(5), 730–742. https://doi.org/10.1037//0022-006x.51.5.730

Walsh, R., Danto, D. & Sommerfeld, J. Land-Based Intervention: a Qualitative Study of the Knowledge and Practices Associated with One Approach to Mental Health in a Cree Community. *Int J Ment Health Addiction* 18, 207–221 (2020). https://doi.org/10.1007/s11469-018-9996-3

Watson-Singleton, N. N., Lewis, J. A., & Dworkin, E. R. (2021). Toward a Socially Just Diversity Science: Using Intersectional Mixed Methods Research to Center Multiply Marginalized Black, Indigenous, and People of Color (BIPOC). *Cultural Diversity and Ethnic Minority Psychology*. Advance online publication. http://dx.doi.org/10.1037/cdp0000477

Watts, R. J., Abdul-Adil, J. K., & Pratt, T. (2002). Enhancing critical consciousness in young African American men: A psychoeducational approach. *Psychology of Men & Masculinity, 3*(1), 41–50. https://doi.org/10.1037/1524-9220.3.1.41

Watts, R. J., Diemer, M. A., & Voight, A. M. (2011). Critical consciousness: current status and future directions. *New directions for child and adolescent development*, *2011*(134), 43–57. https://doi.org/10.1002/cd.310

Watts, R. J., & Hipolito-Delgado, C. P. (2015). Thinking ourselves to liberation?: Advancing sociopolitical action in critical consciousness. *The Urban Review*, *47*(5), 847–867. https://doi.org/10.1007/s11256-015-0341-x

Whalen, D., Lewis, M.E., Gillson, S.L., McBeath, B., Alexander, B., & Nyhan, K. (2022). Health effects of Indigenous language use and revitalization: a realist review. *International Journal for Equity in Health, 21*.

WHO. Pacific Islands mental health network (PIMHNET). Geneva: World Health Organization. 2016. http://www.who.int/ mental_health/policy/country/pimhnet/en/. Accessed 17 October 2016.

Wyatt, L. C., Ung, T., Park, R., Kwon, S. C., & Trinh-Shevrin, C. (2015). Risk Factors of Suicide and Depression among Asian American, Native Hawaiian, and Pacific Islander Youth: A Systematic Literature Review. *Journal of health care for the poor and underserved*, *26*(2 Suppl), 191–237. https://doi.org/10.1353/hpu.2015.0059

Yamashiro, G. and Matsuoka, J. (1997) Help-Seeking among Asian and Pacific Americans: A Multiperspective Analysis. *Social Work*, 42, 176-186. http://dx.doi.org/10.1093/sw/42.2.176

Yeh, C. J., Borrero, N. E., Suda, J. F., & Cruz, C. I. (2021). Place matters: Exploring Native Hawaiian youths' cultural selves, pride, and generativity. Asian American Journal of Psychology, 12(1), 76–86. https://doi.org/10.1037/aap0000226

Yip, T. (2018). Ethnic/Racial Identity—A Double-Edged Sword? Associations With Discrimination and Psychological Outcomes. *Current Directions in Psychological Science*, 27(3), 170-175. https://doi.org/10.1177/0963721417739348

Zelaya, C. E., Galinsky, A. M., Simile, C., & Barnes, P. M. (2017). Health Care Access and Utilization Among Native Hawaiian and Pacific Islander Persons in the United States, 2014. *Vital & health statistics. Series 3, Analytical and epidemiological studies*, (41), 1–79

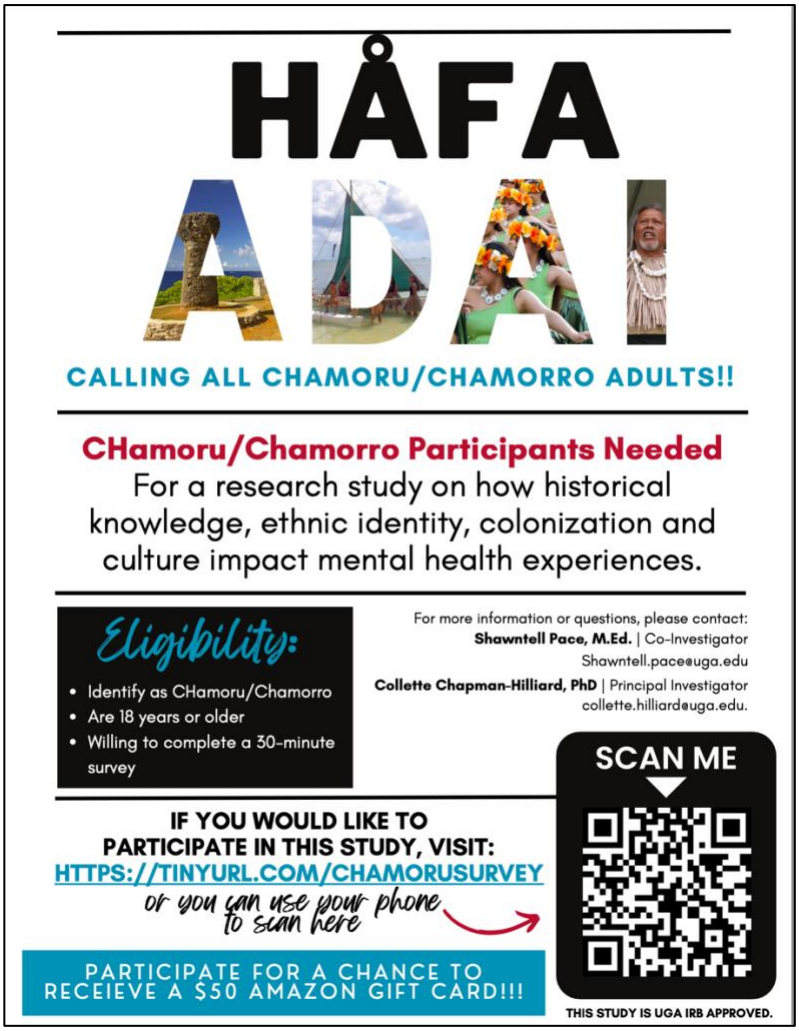
Appendix A

Semi-structured Interview Questions:

1. Can you tell me what it means to be CHamoru?
2. Can you tell me about your journey in understanding what it means to be CHamoru?
3. How did you learn about your CHamoru identity and culture?
    a. As you learned about your CHamoru identity and culture, how did that information impact you?
    b. What keeps you connected to your CHamoru culture?
    c. How does this connection impact you?
4. Has your view on being CHamoru changed over time? Why or why not?
5. What factors impact mental health among the CHamoru community?
6. How do you think the history of colonization impacted the mental health of the CHamoru community?
7. How do you think the CHamoru culture impacts the mental health of the CHamoru community?
8. Is there anything that you would like to bring up that we did not get a chance to talk about today?

Appendix B

Recruitment Flyer



Appendix C

Qualitative Consent Form

Dear Participant,

Thank you for completing the quantitative portion of my study! My name is Shawntell Pace, and I am a doctoral candidate in the Counseling Psychology program in the Counseling and Human Development Services Department at the University of Georgia under the supervision of Dr. Collette Chapman-Hilliard. I am inviting you to take part in my dissertation research study. My dissertation study is a mixed methods study, and this is the consent form to participate in the qualitative phase of my dissertation study.

Purpose: I am conducting research to understand how ethnic identity, consciousness, and historical knowledge impact the mental health experiences of adults of Chamoru descent. The results of this study may be valuable to individuals interested in studying and treating people of Chamorro/Chamoru descent.

Eligibility: To be eligible for the study, participants must 18 years old or older, and self-identify as a person of Chamoru descent.

What will you do? Participants will participate in a brief 2-minute online survey and one 60-minute interview conducted via Zoom. During the interview, you will be asked questions about your experience regarding your ethnic identity, historical knowledge, culture, and mental health. Once the participants have participated in the individual interview, no other time is required of the participants. However, all participants will be invited to participant in one optional "member check-in" follow up meeting which will last for 60 minutes. These check in meetings are part of the data analysis process. During these check-in meetings the researcher will review the research findings with participants to help verify if the themes identified seem accurate, fair, and representative. These small group (3-4 people) will be held via Zoom. The full-time commitment for this study is 62 minutes without participating in the check in meeting and 2 hours and 2 minutes if participants decide on participating in the check in meeting.

Participation is voluntary. Your involvement in the study is voluntary and you may choose not to participate or to stop at any time without penalty or loss of benefits and services to which you are otherwise entitled. The decision to take part or not to take part in the research will not impact anything.

Risks: The risk associated with this study is minimal. It is possible that answering questions about mental health may be upsetting. Additionally, there is potential for loss of confidentiality and privacy due to participants being interviewed and recorded via audio on Zoom and due to the optional member check in follow up meetings which will consist of 3-4 participants in a group. Additionally, during the optional "member check in" follow up meeting, participants identity may be revealed due to their participation.

To minimize risk, participants will be provided with contact information for counseling support as well as the PI's contact information. Participants are able to skip interview questions if they do not want to respond to them. Additionally, the participant may discontinue the study at any time which will also help to minimize potential risk, though minimal in the current study.

All interviews will be conducted via Zoom. An audio recording of the Zoom call will be conducted. All audio recordings will be kept on an encrypted, password-protected hard drive and will be immediately transcribed. Once the transcription is complete, all audio will be destroyed. All information about the participants will be de-identified. Pseudonyms and codes will be utilized to maintain the confidentiality of participants.

All participants will be invited to participate in one optional "member check in/follow up" meeting. Participants will be notified of the risks involved with the "member check in/follow up" meeting regarding confidentiality. Additionally, participants will be provided the option to utilize their pseudonyms during this meeting and will be explained the possible risks during the completion of their interviews.

Check-in meetings will be conducted via Zoom and recorded. The audio recordings will be destroyed upon the completion of the transcriptions while transcriptions will be archived and destroyed after five years. Recording interviews and check-in meetings also minimizes the bias that results from relying on memory and written notes from these meetings. Recording is required for participation.

Meeting recording: All interviews will be conducted via Zoom. An audio recording of the Zoom call will be conducted. Interviews conducted via phone will be recorded using a phone call recording application called NoNotes. As noted above, all participants will be invited to participate in one optional "member check-in" meeting. Check-in meetings will be conducted via Zoom and recorded. The recordings will be transcribed. Once the recordings are transcribed, they will be destroyed. Recording interviews and check-in meetings also minimizes the bias that results from relying on memory and written notes from these meetings. Recording is required for participation.

Benefits: As a participant in this study, you will receive no direct benefits for participating. However, your responses will help further the understanding of mental health experiences of people of Chamoru descent and could inform the development of treatment for people of Chamoru descent and contribute to the lack of research that examines the mental health of Pacific Islanders. It is possible, however, that through answering some of the interview questions they will develop increased sense of self-awareness.

Incentives: Participants in the 60-minute interview will receive a $10 gift certificate to Amazon that will be sent via email upon the completion of the study for their participation. To enter the drawing, participants will be asked to complete a survey via email confirming participation and providing full name and email address to send the digital certificate to. Participants will not receive any pro-rated compensation.

Privacy/Confidentiality: Your name will be de-identified by assigning you a unique study ID number and pseudonym. Research records will be labeled with study IDs that are linked to you by a separate list that includes your name. This list will be destroyed once we have finished collecting information from all participants. Researchers will not release identifiable results of the study or audio recordings to anyone other than individuals working on the project without your written consent unless required by law. After identifiers have been removed, the data from this study may be used for future studies without additional consent. Upon completion of the interview, your name and e-mail address will be collected separately in order to process compensation payments. Only the primary investigators will have this information. Once the compensation payment has been process, your information (e.g., name and email address) will be destroyed.

Internet data collection: This research involves the transmission of data over the internet. Every reasonable effort has been taken to ensure the effective use of available technology; however, confidentiality during online communication cannot be guaranteed.

Data analysis: As part of the data analysis process the research will invite small groups of participants to review the preliminary results of the study and provide feedback. Even though the investigator will emphasize to all participants that comments made during the small group session should be kept confidential, it is possible that participants may repeat comments outside of the group at some time in the future.

If you have questions: The Principal Investigator overseeing this study is Collette Chapman-Hilliard, PhD, a professor at the University of Georgia. Please ask any questions you have during the interview. If you have questions later, you may contact Dr. Collette Chapman-Hilliard at collette.hilliard@uga.edu. If you have any questions or concerns regarding your rights as a research participant in this study, you may contact the UGA Institutional Review Board at 706-542-3199 or irb@uga.edu.

Please keep this letter for your records.

Sincerely,

Shawntell N. Pace, M.Ed.
Ph.D. Candidate, Counseling Psychology
Department of Counseling & Human Development Services
University of Georgia
Shawntell.pace@uga.edu

Collette Chapman-Hilliard, PhD
Associate Professor, Counseling Psychology
Department of Counseling & Human Development Services
University of Georgia
Collette.hilliard@uga.edu

Appendix D

Quatitative Consent Form

Dear Participant,

My name is Shawntell Pace, and I am a doctoral candidate in the Counseling Psychology program in the Counseling and Human Development Services Department at the University of Georgia under the supervision of Dr. Collette Chapman-Hilliard. I am inviting you to take part in my dissertation research study. My dissertation study is a mixed methods study, and this is the consent form to participate in the quantitative phase of my dissertation study.

Purpose: I am conducting research to understand how ethnic identity, consciousness, and historical knowledge impact the mental health experiences of adults of Chamoru descent. The results of this study may be valuable to individuals interested in studying and treating people of Chamorro/Chamoru descent.

Eligibility: To be eligible for the study, participants must 18 years old or older, and self-identify as a person of Chamoru descent.

What will you do? After completing this consent form, you will be asked to complete a web-based research survey. The research survey will include demographic items and multiple individual scales measuring the variables of interest described previously. Your participation in the study is voluntary and you may choose not to participate or to stop at any time without penalty or loss of benefits and services to which you are otherwise entitled. The decision to take part or not to take part in the research will not impact anything. Upon completion of the survey, you will be invited to participate in the qualitative portion of this study which entails a 60-minute interview. Your involvement in the qualitative portion of this study is completely voluntary.

Risks: The risk associated with this study is minimal. It is possible that answering questions about mental health, ethnic identity, culture, historical knowledge, and consciousness may be upsetting. To minimize risk, participants will be provided with contact information for counseling support as well as the PI's contact information. Participants may discontinue the study at any time which will also help to minimize potential risk, though minimal in the current study. The research team will secure the study data. As with any use of electronic means to store data, there is a risk of breach of data security.

Benefits: As a participant in this study, you will receive no direct benefits for participating. However, your responses will help further the understanding of mental health experiences of people of Chamoru descent and could inform the development of treatment for people of Chamoru descent and contribute to the lack of research that examines the mental health of Pacific Islanders. It is possible, however, that through answering some of the interview questions they will develop increased sense of self-awareness.

Incentives: Participants who participate in the 35-45 survey will have the option to enter a raffle for one of two $50 gift certificates to Amazon that will be sent via email upon the completion of the study. To enter the drawing, participants will be asked to complete a survey via email confirming participation and providing full name and email address to send the digital certificate to. You do not have to participate in the study to enter the drawing. Those who want to participate in the drawing will need to complete a

survey via Qualtrics that asks them their name, email address, and secondary email address (if applicable). Contact Shawntell.pace@uga.edu for the link to enter the drawing.

Privacy/Confidentiality: Participation in the survey involves the potential for the loss of confidentiality similar to a person's everyday use of the internet. The results of this study may be published and/or presented without naming you as a participant. The data collected about you for this study may be used for future research studies that are not described in this consent form. If that occurs, an IRB will first evaluate the use of any information that is identifiable to you, and confidentiality protection would be maintained.

This research uses a third-party software called Qualtrics and is subject to the privacy policies of this software noted here: https://www.qualtrics.com/privacy-statement/

Internet data collection: This research involves the transmission of data over the internet. Every reasonable effort has been taken to ensure the effective use of available technology; however, confidentiality during online communication cannot be guaranteed.

Data analysis: As part of the data analysis process the research will invite small groups of participants to review the preliminary results of the study and provide feedback. Even though the investigator will emphasize to all participants that comments made during the small group session should be kept confidential, it is possible that participants may repeat comments outside of the group at some time in the future.

If you have questions: The Principal Investigator overseeing this study is Collette Chapman-Hilliard, PhD, a professor at the University of Georgia. Please ask any questions you have during the interview. If you have questions later, you may contact Dr. Collette Chapman-Hilliard at collette.hilliard@uga.edu. If you have any questions or concerns regarding your rights as a research participant in this study, you may contact the UGA Institutional Review Board at 706-542-3199 or irb@uga.edu.

Please keep this letter for your records.

Sincerely,

Shawntell N. Pace, M.Ed.
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Appendix E

Quantitative Phase Measures

Demographic Questionnaire

1. Which of the following best describes your racial/ ethnic background?
   a. Chamorro
   b. Chamorru
   c. Biracial (please specify) _____
   d. Multiracial (please specify) _____
   e. Other race/ ethnicity (please specify) _____

2. With which gender identity do you identify?
   a. Male
   b. Female
   c. Transgender Male
   d. Transgender Female
   e. Gender variant/Non-Binary
   f. A gender not listed (please specify) _____
   g. Prefer not to answer

3. What is your age?

4. How would you describe **your** socioeconomic background?
   a. Working class
   b. Middle class
   c. Upper middle class
   d. Upper class

5. What is the highest level of education you have completed?
   a. Middle school
   b. High school
   c. Vocational/ Technical school
   d. Community College/ Associate Degree
   e. College/ Bachelor's Degree

f. Advanced Degree (e.g., MA, MD, JD, PhD)

6. What is your highest education level?
   a. Some High School
   b. High School Diploma
   c. Vocational/ Technical School
   d. Community College/ Associate Degree
   e. College/ Bachelor's Degree
   f. Advanced Degree (e.g., MA, MD, JD, PhD)

7. On what island in the Northern Marian Islands are you and/or your family from?
   a. Saipan
   b. Tinian
   c. Rota
   d. Guam
   e. Pagan
   f. Other island (please specify) _____

8. How many generations has your family been on the island? Select the option that best describes your family.
   a. One or both parents were born on the island
   b. At least one grandparent was born on the island
   c. Older generations (e.g., beyond at least one grandparent) were born on the island
   d. You were <u>not</u> born on the island
   e. Both your parents were <u>not</u> born in the island but you were

9. Do you speak Chamorro?
   a. Yes
   b. No
   c. Some

10. If you speak Chamorro, what age did you learn how to speak Chamorro? _____

11. Can you read Chamorro?
   d. Yes
   e. No
   f. Some

12. If you can read Chamorro, what age did you learn how to read Chamorro? _____

13. Can you write in Chamorro?
   g. Yes
   h. No

i. Some

14. If you write in Chamorro, what age did you learn how to write in Chamorro? _____

15. Estimate your **family's annual income** (include all sources of income available to you)?
    a. $0 - $15,000
    b. $15,001 - $25,000
    c. $25,001 - $50,000
    d. $50,001 - $75,000
    e. $75,001 - $100, 000
    f. $100, 001 - $125, 000
    g. $125, 001 - $200,000
    h. $200,001 – above

16. What is your current occupation? _____ (open text)

17. Please indicate below which parent(s) identifies as Chamoru?

A. Mother

B. Father

C. Maternal Grandmother

D. Maternal Grandfather

E. Paternal Grandmother

F. Paternal Grandfather

Colonial Mentality Scale – 36

(David & Okazaki, 2006b; Fair Use Doctrine)

Table 1
Five-Factor Correlated Model of the Colonial Mentality Scale for Filipino Americans

Subscale and item	Factor Loadings				
	1	2	3	4	5
Factor 1 (Within-Group Discrimination; eigenvalue = 14.48)					
7. I tend to divide Filipinos in America into two types: the FOBs (fresh-off-the-boat/newly arrived immigrants) and the Filipino Americans.	.69	.04	−.08	−.19	.00
8. In general, I do not associate with newly-arrived (FOBs) Filipino immigrants.	.74	−.16	−.15	.09	.11
9. I generally do not like newly-arrived (FOBs) Filipino immigrants.	.72	−.09	−.05	.09	.12
10. I think newly-arrived immigrant Filipinos (FOBs) are backwards, have accents, and act weird.	.67	.09	.07	−.02	.07
11. I think newly arrived immigrants (FOBs) should become as Americanized as quickly as possible.	.49	−.05	.30	.08	.09
14. In general, I make fun of, tease, or badmouth Filipinos who are not very Americanized in their behaviors.	.52	.28	.09	.15	−.05
15. I make fun of, tease, or badmouth Filipinos who speak English with strong accents.	.42	.27	.11	.16	−.06
32. I believe that Filipino Americans are superior, more admirable, and more civilized than Filipinos in the Philippines.	.43	.15	.26	.13	−.09
39. I tend to pay more attention to the opinions of Filipinos who are very Americanized than to the opinions of FOBs/newly-arrived immigrants.	.52	.06	.26	.04	.03
46. In general, I am ashamed of newly-arrived Filipino immigrants because of their inability to speak fluent, accent-free English.	.52	.08	.14	.21	.00
47. In general, I am ashamed of newly arrived Filipino immigrants because of the way they dress and act.	.62	.06	.11	.13	.08
Factor 2 (Physical Characteristics; eigenvalue = 3.75)					
21. I find persons who have bridged noses (like Whites) as more attractive than persons with Filipino (flat) noses.	.14	.71	−.01	.00	.01
22. I would like to have a nose that is more bridged (like Whites) than the nose I have.	−.04	.68	.08	−.05	.06
23. I do not want my children to have Filipino (flat) noses.	.08	.75	.01	−.03	−.01
24. I find persons with lighter skin-tones to be more attractive than persons with dark skin-tones.	−.02	.71	−.01	.09	.03
25. I would like to have a skin-tone that is lighter than the skin-tone I have.	−.24	.71	.06	.12	.07
26. I would like to have children with light skin-tones.	−.08	.81	.04	.05	.05
27. I do not want my children to be dark-skinned.	−.04	.73	.05	.05	.11
30. I generally think that a person that is part white and part Filipino is more attractive than a full-blooded Filipino.	.24	.53	.11	−.05	−.03
Factor 3 (Colonial Debt; eigenvalue = 3.00)					
43. Spain and the United States are highly responsible for civilizing Filipinos and improving their ways of life.	−.01	.06	.74	−.02	.02
44. Filipinos should be thankful to Spain and the United States for transforming the Filipino ways of life into a White/European American way of life.	.03	.07	.79	−.06	−.04
45. Filipinos should feel privileged and honored that Spain and the United States had contact with them.	−.03	.00	.84	−.05	−.01
49. In general, Filipino Americans should be thankful and feel fortunate for being in the United States.	−.03	.09	.68	−.04	−.07
50. In general, Filipino Americans do not have anything to complain about because they are lucky to be in the United States.	.03	.01	.69	−.07	−.01
51. The colonization of the Philippines by Spain and the United States produced very little damage to the Filipino culture.	−.13	.03	.78	−.04	−.04
52. The American ways of living or the American culture is generally more admirable, desirable, or better than the Filipino culture.	.21	.04	.52	.02	.02
Factor 4 (Cultural Shame and Embarrassment; eigenvalue = 2.60)					
33. In general, I am embarrassed of the Filipino culture and traditions.	.09	.17	−.08	.77	−.16
34. In general, I feel ashamed of the Filipino culture and traditions.	.07	.24	−.15	.76	−.12
36. I feel that there are very few things about the Filipino culture that I can be proud of.	.13	.08	.02	.57	−.04
41. There are moments when I wish I was a member of a cultural group that is different from my own.	−.19	−.07	.20	.60	.38
48. In general, I feel that being a Filipino/a is a curse.	−.02	−.12	−.09	.63	.16
Factor 5 (Internalized Cultural/Ethnic Inferiority; eigenvalue = 2.28)					
1. There are situations where I feel that it is more advantageous or necessary to deny my ethnic/cultural heritage.	.08	−.08	−.03	.13	.63
2. There are situations where I feel inferior because of my ethnic/cultural background.	.12	.08	−.13	−.08	.64
3. There are situations where I feel ashamed of my ethnic/cultural background.	.11	.08	−.15	.09	.59
4. In general, I feel that being a person of my ethnic/cultural background is not as good as being White.	.04	.12	.09	−.17	.78
6. In general, I feel that being a person of my ethnic/cultural heritage is not as good as being White/European American.	.08	.13	.08	−.13	.74

Note. These 36 items are rated on a 6-point scale (1 = *strongly disagree* to 6 = *strongly agree*) and compose the Colonial Mentality Scale for Filipino Americans.

Critical Consciousness Scale (22 Items)

Instructions: Please respond to the following statements by circling how much you agree or disagree with each statement. For each statement, choose "Strongly Disagree," "Mostly Disagree," "Slightly Disagree," "Slightly Agree," "Mostly Agree," or "Strongly Agree."

Strongly Disagree	Mostly Disagree	Slightly Disagree	Slightly Agree	Mostly Agree	Strongly Agree
1	2	3	4	5	6

1. Certain racial or ethnic groups have fewer chances to get a good high school education
2. Poor children have fewer chances to get a good high school education
3. Certain racial or ethnic groups have fewer chances to get good jobs
4. Women have fewer chances to get good jobs
5. Poor people have fewer chances to get good jobs
6. Certain racial or ethnic groups have fewer chances to get ahead
7. Women have fewer chances to get ahead
8. Poor people have fewer chances to get ahead
9. It is a good thing that certain groups are at the top and other groups are at the bottom
10. It would be good if groups could be equal
11. Group equality should be our ideal
12. All groups should be given an equal chance in life

13. We would have fewer problems if we treated people more equally

Instructions: Please respond to the following statements by circling how often you were involved in each activity in the last year. For each statement, choose "Never did this," "Once or twice last year," "Once every few months," "At least once a month," or "At least once a week."

Never did this	Once or twice last year	Once every few months	At least once a month	At least once a week
1	2	3	4	5

14. Participated in a civil rights group or organization
15. Participated in a political party, club, or organization
16. Wrote a letter to a school or community newspaper or publication about a social or political issue
17. Contacted a public official by phone, mail, or email to tell him/her how you felt about a particular social or political issue
18. Joined in a protest march, political demonstration, or political meeting
19. Worked on a political campaign
20. Participated in a discussion about a social or political issue
21. Signed an email or written petition about a social or political issue
22. Participated in a human rights, gay rights, or women's rights organization or group

Scale of Black Consciousness (16 Items)

Instructions: Read each statement below carefully and indicate the degree to which you agree or disagree with the statement.

Item	SD	D	SWD	SWA	A	SA
1. Ancient Africans were responsible for building great civilizations.	1	2	3	4	5	6
2. Awareness of African/ African American history is central to examining contemporary systemic oppression.	1	2	3	4	5	6
3. Knowledge of Black history is necessary to promote the enhancement of the African American community.	1	2	3	4	5	6
4. Because of my understanding of African Americans' historical experiences, I am more inclined to speak out against injustice.	1	2	3	4	5	6
5. Learning about Black history helps me counter negative stereotypes about African Americans.	1	2	3	4	5	6
6. Contemporary struggles of African Americans are best understood with a strong knowledge of Black history.	1	2	3	4	5	6
7. I think critically (e.g., carefully analyze) about the plight of African Americans.	1	2	3	4	5	6
8. My awareness of African and African American historical legacy keeps me from allowing people to treat me unfairly.	1	2	3	4	5	6
9. Learning about ancient African civilizations in important to me.	1	2	3	4	5	6
10. I feel compelled to share Black history knowledge with other members of the African descent community.	1	2	3	4	5	6
11. African Americans should be taught about their history at an early age.	1	2	3	4	5	6
12. Knowledge of Black history is important for African Americans today.	1	2	3	4	5	6
13. It is important for African Americans to organize and rally together to fight oppression.	1	2	3	4	5	6
14. Black history knowledge is key to understanding the impact of oppression on Black life.	1	2	3	4	5	6
15. Teaching African American children about their history is central to child-rearing.	1	2	3	4	5	6
16. My knowledge of Black history inspires me to work with others to better the African American community.	1	2	3	4	5	6

Ethnic Identity Scale (17 items)

(Umana-Taylor et al., 2004)

Instructions: Read each statement below carefully and indicate the degree to which you agree or disagree with the statement.

(1) Does not describe me at all

(2) Describes me a little

(3) Describes me well

(4) Describes me very well

1. My feelings about my ethnicity are mostly negative (–A).
2. I have not participated in any activites that would teach me about my ethnicity (–E).
3. I am clear about what my ethnicity means to me (+R).
4. I have experienced things that reflect my ethnicity, such as eating food, listening to music, and watching movies (+E).
5. I have attended events that have helped me learn more about my ethnicity (+E).
6. I have read books/magazines/newspapers or other materials that have taught me about my ethnicity (+E).
7. I feel negatively about my ethnicity (-A).
8. I have participated in activities that have exposed me to my ethnicity (+E).
9. I wish I were of a different ethnicity (–A).
10. I am not happy with my ethnicity (–A).
11. I have learned about my ethnicity by doing things such as reading (books, magazines, newspapers), searching the internet, or keeping up with current events (+E).
12. I understand how I feel about my ethnicity (+R).
13. If I could choose, I would prefer to be of a different ethnicity (–A).
14. I know what my ethnicity means to me (+R).
15. I have participated in activities that have taught me about my ethnicity (+E).
16. I dislike my ethnicity (–A).
17. I have a clear sense of what my ethnicity means to me (+R).

The Pacific Identity and Well Being Scale (PIWBS)

(Manuela & Sibley, 2013)

Directions: This survey contains a list of statements about how satisfied you are with aspects of your life, and what you think being a person of Pacific descent means to you personally. It is only relevant to people who answered 'Yes' to the above questions.

All of the statements are opinions. The scale has been designed in a way that you will most likely agree with some statements but disagree with others to varying degrees. This is because we want to measure a wide range of different opinions and views on peoples' satisfaction with their lives and what it means to be a Pacific person. There are no right or wrong answers. Please try to answer the questions as honestly as you can. The best answer is your own opinion, whatever that may be. The survey is in two sections. In the first section, if you feel completely satisfied in that area of your life you would select a number close to 7. If you feel neutral about that area of your life, you would select a number close to 4. If you are completely dissatisfied with that area of your life, you would select a number close to 1.

First Section:

	Completely dissatisfied		Neutral				Completely satisfied
1. Support provided to you by the New Zealand government to you as a Pacific Islander.	1	2	3	4	5	6	7
2. Your relationship with your parents.	1	2	3	4	5	6	7
3. Your position in New Zealand as a Pacific person.	1	2	3	4	5	6	7
4. Your family's security.	1	2	3	4	5	6	7
5. Your personal needs being met by New Zealand.	1	2	3	4	5	6	7
6. The respect you give for your parents.	1	2	3	4	5	6	7
7. The support your receive as a Pacific Islander in the community you live in.	1	2	3	4	5	6	7
8. The respect you receive from your family.	1	2	3	4	5	6	7
9. Your relationship with New Zealand society.	1	2	3	4	5	6	7
10. Your position in your family.	1	2	3	4	5	6	7
11. The support you receive in the community you live in.	1	2	3	4	5	6	7
12. Your family's happiness.	1	2	3	4	5	6	7
13. The support you receive as a Pacific Islander in New Zealand.	1	2	3	4	5	6	7
14. Communication with your family.	1	2	3	4	5	6	7

Second Section:

In this second section, please rate how you agree strongly you agree with the following statements. If you strongly agree with a statement, then you would select a number close to 7. If you feel neutral about a statement, then you would select a number close to 4. If you strongly disagree with a statement, then you would select a number close to 1.

	Strongly disagree		Neutral				Strongly agree
15. I feel at home around other Islanders, even if they are not from my island	1	2	3	4	5	6	7
16. Going to church is part of my culture and religion	1	2	3	4	5	6	7
17. The fact that I am an Islander is an important part of my identity	1	2	3	4	5	6	7
18. I feel comfortable in places with lots of other Pacific peoples	1	2	3	4	5	6	7
19. God has a strong connection to my culture.	1	2	3	4	5	6	7
20. Being and Islander is an important part of how I see myself	1	2	3	4	5	6	7
21. I don't get along with other island groups	1	2	3	4	5	6	7
22. Religion is not important for my culture	1	2	3	4	5	6	7
23. I feel connected to other Pacific peoples in general	1	2	3	4	5	6	7
24. I am glad to be a Pacific Islander	1	2	3	4	5	6	7
25. Part of being a Pacific Islander is having a connection with god	1	2	3	4	5	6	7
26. I feel connected to people from a different Pacific island to myself	1	2	3	4	5	6	7
27. I am proud to be a Pacific Islander	1	2	3	4	5	6	7
28. Religion is the root of our Pasifika culture	1	2	3	4	5	6	7
29. Our religion is the centre of our culture as Pacific Islanders	1	2	3	4	5	6	7
30. Being a Pacific Islander gives me a good feeling	1	2	3	4	5	6	7
31. I feel most comfortable in Pacific communities	1	2	3	4	5	6	7

Mental Health Inventory- 18

(Veit & Ware, 1983; Fair Use Doctrine)

This set of questions is about how you feel and how things have been for you during the past 4 weeks. Please answer every question. If you are not sure which answer to select, please choose the one answer that comes closest to describing you.
6 = All of the time (AT), 5 = Most of the time (MT), 4 = A good bit of the time (GT), 3 = Some of the time (ST), 2 = A little bit of the time (LT), 1 = None of the time (NT).

During the past 4 weeks, how much of the time…

Item	AT	MT	GT	ST	LT	NT
Has your daily life been full of things that were interesting to you?	6	5	4	3	2	1
Did you feel depressed?	6	5	4	3	2	1
Have you felt loved and wanted?	6	5	4	3	2	1
Have you been a very nervous person?	6	5	4	3	2	1
Have you been in firm control of your behavior, thoughts, emotions, feelings?	6	5	4	3	2	1
Have you felt tense or high strung?	6	5	4	3	2	1
Have you felt calm or peaceful?	6	5	4	3	2	1
Have you felt emotionally stable?	6	5	4	3	2	1
Have you felt downhearted or blue?	6	5	4	3	2	1
Were you able to relax without difficulty?	6	5	4	3	2	1
Have you felt restless, fidgety, or impatient?	6	5	4	3	2	1
Have you been moody or brooded about things?	6	5	4	3	2	1
Have you felt cheerful, light-hearted?	6	5	4	3	2	1

Have you been in low or very low spirits?	6	5	4	3	2	1
Were you a happy person?	6	5	4	3	2	1
Did you feel you had nothing to look forward to?	6	5	4	3	2	1
Have you felt so down in the dumps that nothing could cheer you up?	6	5	4	3	2	1
Have you been anxious or worried?	6	5	4	3	2	1