

# The Relationship Between Imposter Phenomenon, Racial-Ethnic Identity, and Resilience

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**Abstract:** Imposter phenomenon (IP), imposter feelings (IF), or imposter syndrome (IS) is a common occurrence in which an individual fails to internalize success and fears the discovery of their self-perceived lack of intelligence or competence (Clance & Imes, 1978). Because of the history of discrimination towards racial/ethnic minorities in the United States, imposter feelings may be more prevalent or severe among such vulnerable populations. Research has also revealed that those who have experienced adverse life conditions may be more resilient. People of color and other minorities have demonstrated a tendency to be more resilient to adversity due to exposure to discrimination and other identity/race-related difficulties. This study sought to investigate incidences of imposter feelings in college student minorities with racial/ethnic identity as a variable: do racial/ethnic minorities react to imposter feelings differently due to resilience built up from their status in society? Resilience of minority college students as compared to their white peers was measured, as there appears to be a lack of research on the effect of resilience on imposter feelings. Results indicated that there were no significant differences between the resilience and CIS scores of the two groups. This is likely due to the small number of participants as well as circumstances preventing recruitment from a larger population.

## **Introduction**

Imposter phenomenon, colloquially known as “imposter syndrome”, is a pattern of behavior in which people doubt the legitimacy of their successes and have persistent fears of being discovered as a “fraud”, or imposter (Clance & Imes, 1978). The term “imposter phenomenon” was coined by Clance and Imes (1978) in their article “The Imposter Phenomenon in

High-Achieving Women: Dynamics and Therapeutic Intervention”, which summarized the findings of Clance and Imes’ investigation into the experiences of a sample of 178 high-achieving women: undergraduate and graduate students, medical students, PhD candidates, and professionals. Despite these women having been formally recognized for their achievements and consistently demonstrating that their success was the result of their own hard work, they maintained a strong belief that they had gotten to where they were through manipulation, luck, or through some kind of error in the selection process (Clance & Imes, 1978). Clance and Imes posited that this inability to recognize one’s own success may be shaped by several things: attribution theory (some findings suggest that women may have lower expectations of their own abilities than men; (Deaux, 1976) , gender stereotypes/societal expectations, and family environment. The participants of the study appeared to fall into either one of two distinct groups: women that had been designated the “sensitive/socially adept” child in the family (thereby wanting to prove family members wrong through academic achievement, but worrying that their family members may be right and that their “achievements” were gained through nothing more than feminine charm or social skills), or women who had been told they were “gifted” from an early age (causing distress once these “geniuses” find that they are unable to do everything perfectly, and concluding that their inability to meet their family’s high expectations must be due to the fact that they are an intellectual imposter). Furthermore, societal expectations and fear of social rejection affirm and fuel imposter phenomenon in women as well as the behaviors that maintain these feelings (Clance & Imes, 1978). Women who are successful are feared and rejected in our society (perhaps to a lesser extent today, but still to a certain point). Clance and Imes hypothesized that imposter phenomenon may have been a way for successful women to reconcile their achievements with their identities as women.

Although Clance and Imes (1978) only focused on the prevalence of imposter feelings among high-achieving women, more recent studies have found that imposter feelings can be observed in many other types of people. Imposter phenomenon has been observed to affect both men and women (imposter feelings in gender non-conforming/other gendered people seem to not yet have been considered) of a variety of occupations and across cultures; an estimated 70% of people will experience at least one episode of imposter phenomenon in their lifetime (Sakulku & Alexander, 2011). Imposter feelings also appear to be episodic rather than a stable personality trait; research suggests that imposter feelings come and go and can vary in intensity depending on the situation and the people involved (McElwee & Yurak, 2010). Those with imposter feelings experience significant psychological distress in the form of anxiety, depressive feelings, and neuroticism (Clance and Imes, 1978; Sakulku & Alexander, 2011; Cokley et al., 2017). Despite the prevalence and importance of understanding the imposter phenomenon, less work has examined imposter feelings in racial/ethnic minorities. This is an important group to study, given that they may also experience distress as a result of discrimination.

Imposter feelings can cause quite a bit of distress; experiencing them constantly may create adverse conditions. This brings into question: do those who identify as a racial/ethnic minority react to imposter feelings differently than those who do not due to their experience with adversity? There has been extensive research on resilience (operationally defined as the ability to bounce back from adversity; Vaishnavi, Connor & Davidson; 2003) and how it is developed. Generally, it appears that those who have experienced more adversity bounce back faster from future difficulties. This could be explained by the fact that those with more experience with difficulty have developed more coping mechanisms to deal with it than those with less or no

experience. Racial and ethnic minorities historically and currently face a number of economic and social adversities (Bernard, Hoggard, & Neblett; 2018) that may perhaps give them an edge over their white peers in terms of being less vulnerable to the effects of stress. Previous studies on resilience found that individual, family, and environmental/social protective factors are the main players in the development of resilience (Fleming, 2008). Those with a positive temperament and supportive family, friends, and community are likely to be more resistant to risk experiences (Fleming, 2008).

A recent study by Karairmak & Figley (2017) found results that were consistent with trait hypothesis – the idea that resilience is a personality trait that helps individuals manage stress (Bartelt, 1994). Resilience was strongly correlated with positive affect, and scores remained consistent over time despite variations in adversity. There were also no gender or ethnic differences in resilience, though Black/African Americans reported “significantly less negative affect” and more positive affect than their Caucasian counterparts (Karairmak & Figley, 2017).

This positive affect may stem from a cultural difference. Many racial/ethnic minorities are surrounded by tight-knit and supportive communities. Social support is an enormous help in overcoming stress and adversity. Does coming from a background of support buffer the negative effects of imposter syndrome on mental health? My hypothesis is that racial/ethnic minorities may report less symptoms correlated with imposter syndrome as a result of increased resilience.

## **Methods**

We recruited nine students (six students identified as white, two identified as black, and one identified as Asian) ranging in age from 21 to 26 from the psychology department at a large northeastern university. These students were given a link to our 62-item survey through email. The survey required approximately twenty minutes to complete, and no incentive was given. The survey contained several instruments (of which only four were utilized for this specific study).

*Ego-Resiliency Scale (J. Block & Kremen, 1996)*

The Ego-Resilience Scale was developed by to assess trait variation in psychological resilience. Block's conceptualization of ego-resiliency was the ability to adapt one's level of emotional control up or down appropriate to the circumstances presented. The scale contains fourteen items to be rated with a four-point Likert scale from 1 (does not apply at all) to 4 (applies very strongly).

*Adverse Childhood Experience Questionnaire (ACE-Q) (Felitti et al., 1998)*

The Adverse Childhood Experience Questionnaire is a 10-item questionnaire that checks for the subject's recall of pre-age 19 exposure to psychological, physical, and sexual abuse as well as household dysfunction including domestic violence, substance use, and incarceration.

Participants were asked to respond yes or no to each question; the option not to answer was also available.

*Clance Imposter Syndrome Self-Assessment Tool (Clance, 1985)*

This version of the CIS is shortened and has been adapted from Clance's 1985 book, *The Imposter Phenomenon*. Participants indicated how well statements applied to them on a five-point Likert scale from 1 = not true at all to 5 = very true.

### *Brief Resilience Scale (Smith et al., 2008)*

This scale was created to assess the ability to bounce back from stressful events. It contains 6 items which participants rated with a five-point Likert scale from 1 (strongly disagree) to 5 (strongly agree).

## **Results**

Because of the small number of participants, all nonwhite identifying participants ( $N = 3$ ) were put into one group to compare to white participants ( $N = 6$ ).

The average resilience score for nonwhite participants was 3.55 ( $SD = 0.535$ ), and the average score for white participants was 3.75 ( $SD = 0.456$ ). Paired samples correlations revealed a very strong positive correlation between the nonwhite variable and resilience ( $r = .988$ ,  $p = .099$ ).

The average ego-resiliency score for nonwhite participants was 40.33 ( $SD = 4.16$ ) while the average score for white participants was 43.5 ( $SD = 6.44$ ). Paired samples correlations revealed a strong negative correlation between the nonwhite variable and ego-resilience ( $r = -.693$ ,  $p = .512$ ).

The average CIS score for nonwhite participants was 37.0 ( $SD = 6.24$ ) while the average score for white participants was 36.33 ( $SD = 9.44$ ). Paired samples correlations revealed a very strong positive correlation between the nonwhite variable and CIS scores ( $r = .971$ ,  $p = .154$ ).

The average ACE score for nonwhite participants was more difficult to calculate due to the option “prefer not to answer” being available. Each nonwhite participant scored a zero, but one’s

score was due to choosing not to respond to the item. The average ACE score for white participants was 2.66 (SD = 1.86).

## **Discussion**

Existing literature and previous studies indicate that those who have experienced adversity tend to be more resilient. Generally, it is agreed that resilience stems from individual, family, and environmental/social factors (Fleming, 2008). The goal of this study was to examine imposter feelings in young adults while considering whether racial identity plays a role in how these imposter feelings are dealt with. We hypothesized that racial/ethnic minorities would be more resilient due to experience with discrimination, and that this would be reflected in the Brief Resilience Scale (BRS) scores. We also believed that minorities would score lower on the Clance Imposter Syndrome Self-Assessment tool (CIS) as a result of this resilience – more resilient people may experience imposter feelings just as intensely as those less resilient, but perhaps may not report as many instances during which imposter feelings arose. Our study did not produce any significant results, and the results we did obtain contradict our hypotheses. The “white” identifying participants in our study scored higher on both the BRE and ERS than our “nonwhite” group. The average white CIS score was also lower than the average nonwhite CIS score. However, as none of these results were significant, this does not mean anything about the groups of interest. Furthermore, due to the abnormally small sample size, these results are not valid and cannot be generalized to the larger population. There were several issues that contributed to this. This study was conducted during extraordinary circumstances; the outbreak of COVID-19 severely impacted our inability to recruit participants. As a result, all our participants came from a very small and specific group of students within the school (every participant was a psychology student). Our demographics were also severely skewed due to this

extremely small sample. Two-thirds of our entire sample identified as white. Two participants identified as black, and one identified as Asian. This hardly reflects real world demographics. The stress and anxiety caused by the COVID-19 pandemic may have also affected participant responses. It is likely that the baseline level of stress for all participants is different than it would have been during a normal semester. Future studies may find more meaningful results by using a longitudinal research design to establish a baseline.

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