

The Effects of Racism on Perceptions of Non-Prescribed Stimulant Use

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Abstract

This study investigates the potential impact of racism on ethical perceptions of non-prescribed stimulant use across two distinct situations. 98 participants read two different scenarios in which we varied the race of the target: one in which a man (Black or White) used non-prescribed stimulants to enhance a partying experience, and one in which a man (Black or White) used non-prescribed stimulants to improve his academic performance. Participants then reported their ethical perceptions of the non-prescribed use. The results indicated that the scenarios containing the White man's non-prescribed stimulant use were approved of significantly more than the scenarios containing the Black man's non-prescribed stimulants use overall; the race of the man did not significantly affect approval in the social scenario specifically; and when participants received the academic situation, they approved of the Black man's non-prescribed stimulant use significantly less than they approved of the White man's non-prescribed stimulant use.

Keywords: non-prescribed stimulant use, race, racism, drug use, perceptions of ethicality

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For Black people in the U.S. today, racism continues to pervade and plague much of their daily lives. One of the most specific yet predominant examples of racism appearing historically and presently is in the concern of drug criminality. Studies assert that though people of color do not engage in drug use significantly more than White people do, they are 6 to 10 times more likely to be incarcerated for a drug offense (Hagle et al., 2021). Another instance of racial prejudice when considering drug criminality can be seen in the impact of the 1980s phenomenon “the war on drugs,” in which the political system, intending to dismantle the apparent drug problem in America, disproportionately targeted and vilified the Black populace (Fellner, 2009). Evidently, Black Americans are linked stereotypically with criminal acts, specifically excess drug use.

In addition to the concern of racism within drug criminality, the usage of stimulants such as Adderall and Ritalin by those who do not have a prescription for them has increased considerably over the years, especially on college campuses (Pfund et al., 2018). The rise of illicit stimulant engagement among college-aged persons has led to an increased empirical interest in the layperson’s perceptions of the ethicality of non-prescribed stimulant use. For example, Lookatch et al. (2014) found that those who used non-prescribed stimulants for improved academic performance were perceived significantly less negatively than those who used non-prescribed stimulants to lose weight or experience a high. This presents an important question: does the racism that exists around drug criminality extend to perceptions of ethicality of non-prescribed stimulant use in particular? We intend for the present research to address this question.

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Racism and the Use of Drugs

Multiple analyses and studies have reported the drastic difference in treatment of a White person's drug use and offense to a Black person's drug use and offense. One of these studies compared the media coverage of a White person's illicit use of opioids to the media coverage of a person of color's illicit use of opioids, finding that while a White person's usage of opioids was portrayed as significantly shocking, rare, easy to explain, and understandable, a person of color's opioid use was skimmed over or explained as simply natural criminal behavior (Netherland & Hansen, 2017). Similarly, the disproportionate number of Black people incarcerated for drug offenses compared to the number of White people illustrates racist disparity regarding reactions to drug use (Beckett et al., 2006; Fellner, 2009; Hagle et al., 2021). For instance, Beckett et al. (2006) drew attention to the discriminatory overrepresentation of Black people arrested in Seattle for drug offenses, given that the large majority of those actually committing the drug offenses in Seattle were White. According to Beckett et al. (2006), no other reason existed for the intense concentration on Black drug offenders compared to White drug offenders than the Seattle police officers' racial bias. Clearly, whether through the media or within the criminal justice system, research illustrates a stereotype-driven association between people of color and illicit drug use.

Not only has there remained a long-standing association between people of color and drug use at an individual level, political systems arguably endure as one of the roots of these biases. Several research reports on "the war on drugs" that occurred during the 1980s have concluded that this political movement unjustly labeled Black people as the main contributors to the drug problem, leading to widespread racist attitudes (Fellner, 2009; Hagle et al., 2021). Tonry (1994) noted that "the war on drugs" systematically discriminated against Black people from the beginning, primarily working to incarcerate and obliterate the Black populace. The prejudice

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against Black people that culminated during “the war on drugs” contributes to racist stereotypes surrounding drug use that persist to this day.

Fueled by the prejudice within the media, criminal justice system, and political system, the assumption persists that drug use is more common among people of color than White people, though the statistics actually say otherwise. White people partake in substance abuse, including alcohol, tobacco, marijuana, prescription stimulants, and opioids, significantly more frequently when compared to any other race, including Black people (McCabe et al., 2004; Conn & Marks, 2014; Pilkinton & Cannatella, 2012; Sumstine et al., 2017). Current research on the discriminatory effect of prejudice on perceptions of drug use demonstrates a substantial issue: people are more likely to believe Black people engage in illicit drug use more than White people, though the reality is the opposite, making this a discriminatory conclusion that causes great harm and warrants further examination.

Non-Prescribed Stimulant Use

Research on non-prescribed stimulant use has burgeoned over the past few decades. Most studies agree that the misuse of prescription stimulants is becoming increasingly more prevalent, especially among the college-aged population, with one study in particular finding that between 8% and 43% of college students report having misused prescription stimulants at least once (Benson et al., 2015). A fair amount of researchers have investigated the possible motivations behind the increased use of non-prescription stimulants on college campuses. Most research on the motivations behind non-prescription stimulant use indicated improved academic performance as one of the most prevalent among college students. For example, Benson et al. (2015), Carroll et al. (2006), and Garnier-Dykstra et al. (2012) discovered that college students misuse prescription stimulants generally for academic benefits- not to lose weight, stay awake, or

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experience a high. Understanding the incentives behind the growing matter of non-prescribed stimulant use on college campuses is essential for potentially overcoming this issue, though any given motivation may come with serious implications.

Using non-prescription stimulants for better academic performance could be considered academic dishonesty, possibly existing as a form of cheating (Pfund et al., 2018). Bearing this in mind, one study analyzed participants' perceptions of the ethicality of prescription stimulant misuse, concluding that those who used non-prescribed stimulants for improved academic performance were perceived significantly less negatively than those who used non-prescribed stimulants to lose weight or experience a high (Lookatch et al., 2014). The motivations behind non-prescribed stimulant use evidently play a part in this topic's perceived ethical nature, yet few studies have been performed on the practical effects of this finding.

Additionally, the majority of research also concurs on the main demographics of non-prescribed stimulant use, finding that males engage in the use of non-prescribed stimulants significantly more than females (Pilkinton & Cannatella, 2012). On top of this, research suggests racial differences in the demographics of non-prescribed stimulant use. Across numerous studies, White people were found to engage in the use of non-prescribed stimulants more than any other race, including Black people (Conn & Marks, 2014; McCabe et al., 2005; Oluwoye et al., 2016; Pilkinton & Cannatella, 2012; Sumstine et al., 2018). The data on non-prescription stimulant use across various races mirrors the data on drug use in general, in which White people comprise the majority of actual users, while Black people encompass the majority of perceived users.

Though extensive research has been done on racism within drug criminality and the various motivations behind non-prescribed stimulant use, research up to this point has failed to examine the potential impact of the layperson's racist tendencies on perceptions and reactions to

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non-prescribed stimulant use in particular. It is unknown whether their perceptions and reactions to non-prescribed stimulant use may change depending upon the stimulant user's ethnicity, or what effect different motivations for usage may have either; more specifically, no research has been done on whether the layperson will react significantly more negatively to a Black person's socially motivated use of non-prescribed stimulants compared to a White person's, or respond more positively to a White person's academically motivated use of non-prescribed stimulants compared to a Black person's academically-motivated usage.

In the present study, we attempted to bridge this gap in research by examining people's perceptions of the ethicality of non-prescribed stimulant use across two different situations. We presented all of our participants with two scenarios depicting two distinct motivations for non-prescribed stimulant use: improving academic performance and enhancing a social experience. For one group of participants, the non-prescribed stimulant user of both scenarios was Black; for the other group of participants, the non-prescribed stimulant user of both scenarios was White. Finally, we measured their ethical perceptions of each scenario. In accordance with past literature on the prejudiced attitudes towards drug use and the more positive perceptions of those who use non-prescribed stimulants for academic performance versus any other common motivation, this study tested the following hypotheses:

1. Participants who read the scenarios depicting a Black user approved of their usage of non-prescribed stimulants significantly less overall than participants who read the scenarios depicting a White user.
2. Participants approved of the non-prescribed stimulant use in the scenario containing the motivation of enhancing a social experience significantly less overall than they

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- approved of the non-prescribed stimulant use in the scenario containing the motivation of increasing academic performance.
3. When the participants read the academic scenario, their approval ratings of the non-prescribed stimulant use would be significantly higher when presented with a White user versus a Black user. In the same way, when the participants read the social scenario, their approval ratings of the non-prescribed stimulant use would be significantly higher if the user was White versus if the user was Black.

Method

Participants

Participants for this study were a mix of undergraduate students and volunteers recruited from Prolific, who completed this study for either course credit at their small liberal arts college if they were students or monetary compensation if they were from Prolific ($N = 98$). Of these participants, the minimum and maximum age ranged from 18 to 36 ($M = 20.47$), with 36.7% identifying as male, 58.2% identifying as female, and 5.1% identifying as transgender or non-binary (67.3% White; 11.2% Asian; 10.2% Black; 6.1% Biracial; 2% Native American or Alaskan Native; 2% Other; 1% Not Disclosed). Participants were also asked about how often they have consumed non-prescribed stimulants in the past year (85.6% never; 9.3% once; 2.1% monthly; 1% every two weeks; 1% weekly; 1% daily) and if they maintained a prescription for a stimulant due to a diagnosed condition (79.6% No; 19.4% Yes; 1% Not Sure).

To confirm that the participants associated the stereotypical names used in the study with the intended race, we included a manipulation check. After answering the dependent variable questions, participants in both the White and Black conditions were asked to indicate what race they thought the individual in the scenarios was. Due to the nature of our study, we could only

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include the data of the 98 participants who passed the manipulation check. Consequently, the data of 9 participants was removed because they reported that the stereotypical names used in the study did not match the race we intended.

Materials and Procedure

Each participant completed the study with an electronic device using a link provided by the researchers. After giving official consent, every participant was told they would be reading the same two scenarios and answering a series of questions after each one. One of the scenarios described a male college student engaging in non-prescribed stimulant use to improve his academic performance. The other depicted a male college student engaging in non-prescribed stimulant use to enhance a social partying experience (see Appendix for full descriptions of each scenario). Before reading, the participants were randomly assigned to two different conditions: one in which the male in the two scenarios had a stereotypical White name (“Cody”), or one in which the male in the two scenarios had a stereotypical Black name (“Deshawn”). The names were selected from research that established the stereotypical connotation of each name (Barlow & Lahey, 2018). Then, regardless of the condition, every participant reported their level of approval of the male’s non-prescribed stimulant use by answering the same 4 questions in an identical order following each scenario, scoring their responses on a scale of 0 (*strongly disagree*) to 7 (*strongly agree*). Each participant specified how wrong he or she thought the non-prescribed stimulant use was, how much he or she approved of the man’s non-prescribed stimulant use, if he or she would engage in the same behavior as the male in the situation, and if he or she believed that the male’s non-prescribed stimulant use was unfair to others. After answering these four questions once for each scenario, participants completed a manipulation check intended to confirm their perception of the race of the individual within the scenarios.

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Subsequently, participants were asked a series of demographic questions, how often they have consumed non-prescribed stimulants in the past year, and if they maintained a prescription for a stimulant due to a diagnosed condition. They were then debriefed with the purpose of this study.

Results

Each participant's responses to the four dependent variable questions were arranged so that higher values indicated higher approval of the non-prescribed stimulant use in each scenario, with two items being reverse coded (wrong variable and unfair variable). To ensure that the four questions asked about the participants' approval of non-prescribed stimulant use all measure the desired idea for each situation, a reliability analysis was conducted. Cronbach's alpha indicated that both the academic scenario and the social scenario questions conveyed high internal reliability, Cronbach's $\alpha = .852$ and Cronbach's $\alpha = .783$ respectively. These results allowed us to maintain all 4 questions as consistent measurements of approval of non-prescribed stimulant use across both situation types.

To determine the effects of race and type of situation on approval of non-prescribed stimulant use, we ran a 2 x 2 mixed ANOVA, with type of scenario (social, academic) as a within-subjects variable and race (White, Black) as a between-subjects variable. We found that there was a significant main effect of race on approval ratings of non-prescribed stimulant use, matching our first hypothesis. The scenarios containing the stereotypically-named White man's use of non-prescribed stimulant use ($M = 2.80$, $SD = .167$), 95% CI [2.47, 3.13] were approved of significantly more than the scenarios containing the stereotypically-named Black man's use of non-prescribed stimulants ($M = 2.28$, $SD = 1.81$), 95% CI [1.92, 2.64], $F(1, 96) = 4.45$, $p = .038$, Cohen's $d = .40$. However, there was not a significant main effect of the type of situation on approval ratings of non-prescribed stimulant use, refuting our second hypothesis, $F(1, 96) =$

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.213, $p = .645$. In addition, a significant interaction between race and the type of situation qualified the effects, $F(1, 96) = 7.07, p = .009, \eta^2 = .069$ (see Figure 1). This finding confirms only part of our third hypothesis, which stated that the participants' approval ratings of the academic scenario would be significantly higher if the user was White versus Black, and the participants' approval ratings of the social scenario would be significantly higher if the user was White versus Black. Simple effects analyses revealed that when given the academic situation, participants approved of the Black man's non-prescribed stimulant use significantly less ($M = 2.11, SD = .23, 95\% \text{ CI } [1.66, 2.56]$) than they approved of the White man's non-prescribed stimulant use ($M = 3.04, SD = .21, 95\% \text{ CI } [2.62, 3.45]$), $p = .023$. However, when given the social situation, the race of the man in each situation did not have a significant effect on the participant's approval of non-prescribed stimulant use, $p = .139$.

Discussion

As first hypothesized, a White target's use of non-prescribed stimulant use garnered more approval than that of a Black user. However, our second hypothesis was not supported; the data did not indicate that the type of situation had a significant effect on the approval ratings of non-prescribed stimulant use. Yet, our results did display that when given the academic situation, participants approved of the Black man's non-prescribed stimulant use significantly less than they approved of the White man's non-prescribed stimulant use. When given the social situation, the race of the man in each situation did not have a significant effect on the participant's approval of non-prescribed stimulant use. This interaction, though statistically significant, only matches part of our third hypothesis, which said that the participants' approval ratings of the academic scenario would be significantly higher if the user was White versus Black, and the participants' approval ratings of the social scenario would be significantly higher if the user was White versus

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Black. Therefore, the findings of our study do seem to suggest that racist attitudes play a part in the layperson's approval of the ethicality of non-prescribed stimulant use across different situations. We will spend the remainder of this discussion connecting and contrasting our findings to past literature and examining the various limitations our study maintains.

The results of our study reinforce previous research by establishing how the individual's racism affects perceptions of ethicality of non-prescribed stimulant use in particular, extending our understanding of the various ways prejudice against Black people can manifest. Past research has shown that a racist association clearly exists in the matter of drug criminality, encouraged by such organizations as the criminal justice system, the media, and the political system (Beckett et al., 2006; Fellner, 2009; Hagle et al., 2021; Netherland & Hansen, 2017). Although White people engage in substance misuse (for the majority of substances) significantly more than any other race, Black people are 6 to 10 times more likely to be incarcerated for a drug offense (Conn & Marks, 2014; Hagle et al., 2017; McCabe et al., 2004; Pilkinton & Cannatella, 2012; Sumstine et al., 2017). The results of our study supplement these findings, further illustrating the racist link people maintain between people of color and non-prescribed stimulant use specifically.

However, the outcome of our experiment does slightly diverge from the existing research on the individual's ethical approval of non-prescribed stimulant use across different situations. Research has already discovered that most college-aged students use non-prescribed stimulants generally for academic benefits- not to lose weight, stay awake, or experience a high (Benson et al., 2015; Carroll et al., 2006; Garnier-Dykstra et al., 2012). Accordingly, Lookatch et al. (2014) found that those who used non-prescribed stimulants for improved academic performance were perceived significantly less negatively than those who used non-prescribed stimulants to lose weight or experience a high. Because of the lack of significant differences when considering the

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social scenario, the results of our study do not fully corroborate the findings of Lookatch et al. (2014).

Tajfel and Turner (1979) first outlined the social identity theory, referring to one's desire to belong to a positive, distinctive group of people. Because of this desire, we are more prone to intergroup bias, which tends to lead to favoring our in-group members and degrading out-group members. Moreover, some research on this theory suggests thinking in terms of in-groups and out-groups leads to competitive thinking, further producing potential in-group favoritism. This theory could be the reasoning behind acts of prejudice against those perceived as different, or outside one's group, holding considerable consequences for past and present societal discrimination.

Although our study did not take this theory into account initially, the social identity theory could help to explain our findings. Given that most of our participants were not Black, they may have viewed the Black non-prescribed stimulant user as a member of an out-group, and approved of their usage less as a result; accordingly, they approved of the White non-prescribed stimulant user more as a member of their in-group. Furthermore, if thinking in terms of in-groups and out-groups leads to competitiveness, the non-Black participants may have wanted their fellow group member to perform better academically, which could have contributed to the participants' higher approval of the White person's non-prescribed stimulant use in the academic scenario specifically.

In addition, the findings of our study may hold considerable implications in the practical world. Given the prevalence of non-prescribed stimulant use on college campuses, it may be important to keep in mind that Black people's usage is approved of significantly less than White people's. This phenomenon, discovered in our study, could shed light on potential future

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situations in which a Black person's misuse of prescribed stimulants is treated significantly more harshly than their White counterparts. Even past this, the discriminatory nature of the participants' responses highlights the extent to which racist attitudes affect our every day life. Black people face prejudice at every turn; the usage of non-prescribed stimulants by college students, it turns out, is no exception.

Nonetheless, our study does contain a number of limitations. Our participants were mostly White, meaning we cannot say that these results would occur again if the sample was more diverse. We also had considerably more females participate than males, with most being around the same age. Taking into account participant factors like race, age, and gender, the lack of diversity in our sample restricts its ability to be representative of a larger population. Ideally, if studying a similar phenomenon, future research should obtain a more diverse sample.

Another limitation of our study could be the fact that both stereotypical names used in the scenarios indicate a male gender. We cannot conclude if the gender of these names had an effect on the outcome of this study; more specifically, we cannot say what would happen if both names were female or gender neutral instead. The same can be said about the fact that our study only analyzed the role of non-prescribed stimulants, not any other drug classes. Would the same results occur if the drugs were more illicit and damaging to people's health, like, for example, opioids? Future research could possibly rectify these limitations by replicating our study with other drug classes in mind, or changing the gender of the names used in the scenarios.

This study adds to our understanding of the various ways prejudice against Black people can manifest and the ramifications of non-prescribed stimulant use among college students. Participants approved of the scenarios containing a White person's use of non-prescribed stimulants significantly more than they approved of scenarios containing a Black person's usage.

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Although the type of scenario did not have a significant effect on approval ratings of non-prescribed stimulant use overall, when participants were given the academic scenario, they approved of the Black man's non-prescribed stimulant use significantly less than they approved of the White man's non-prescribed stimulant use. Future research could remedy the limitations of this study by using a sample more varied in age, gender, and race. Future research could also expand upon these findings by changing the gender of the user in the scenarios or focusing on a different drug class than non-prescribed stimulants.

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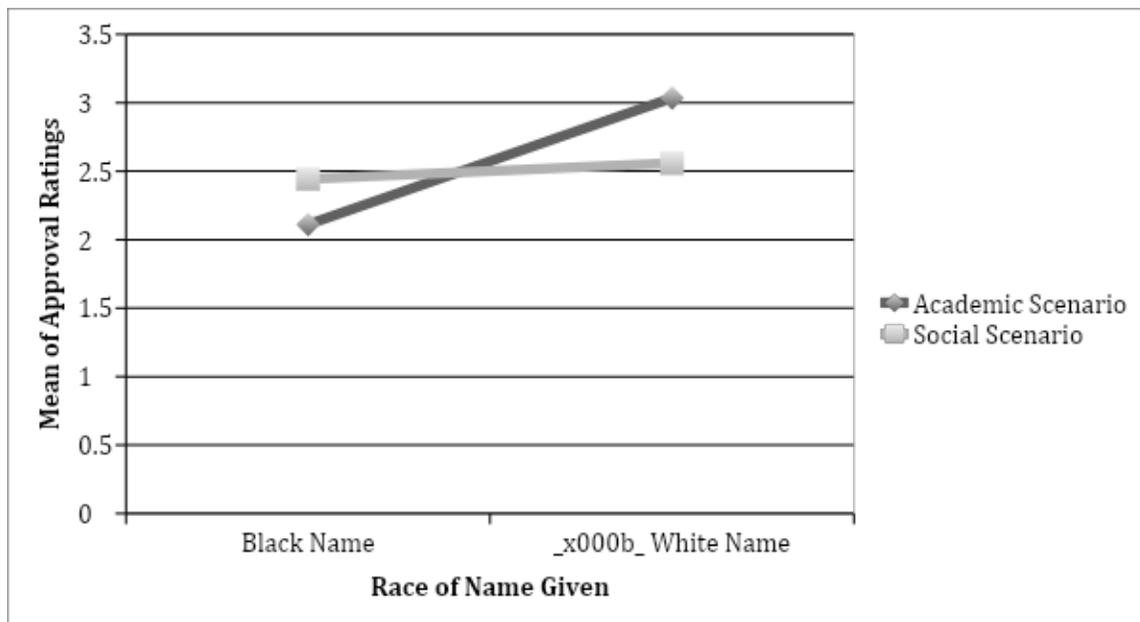


Figure 1. Significant interaction between race and the type of situation.

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Appendix**Full Descriptions of the Scenarios**

Social scenario as seen by the participants: DeShawn[Cody] is out partying with his friends, ready to have some fun on a Saturday night. He feels that after experiencing an especially challenging week of school, he deserves to let loose. So, DeShawn[Cody] decides to consume Adderall (a well-known stimulant) that has not been prescribed to him, hoping it will enhance his partying experience.

Academic scenario as seen by the participants: DeShawn[Cody] has been really struggling in his Biology 101 class this semester. His grades have been steadily dropping, and he has a particularly difficult lab assignment due soon that is worth 25% of his lab grade. So, DeShawn[Cody] decides to consume Adderall (a well-known stimulant) that has not been prescribed to him before starting the lab assignment, hoping it will enhance his endurance and focus while he works.