Heightened Cognitive Empathy through Ethnic Identity and Intercultural Competence for Individuals with Historically Marginalized Identities

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Article Info	Abstract
	This study examines, using structural equation modeling, the mediating effects of ethnic identity and intercultural competence on historically marginalized identities (HMIs) and cognitive empathy. Participants received an Identity Scale score summing each identity marker for groups that have experienced systemic, historic marginalization (i.e., domestic/international student status, race/ethnicity, gender identity, income, and sexual orientation), with an individual being able to attain a score ranging from 0 (no HMI) to 5 (all HMIs present). Information about participants' ethnic identity, cognitive empathy, and intercultural competence was also collected. The sample included a diverse, representative sample of 623 participants from three higher education institutions in the United States. Our tested model showed significant direct and indirect effects among all the variables with the exception of one relationship. The paper discusses the model results and the implications of our findings for inclusive education.

Introduction

Individuals from historically marginalized identities (HMIs)—including immigrants, racial and ethnic minorities, women, those from low socioeconomic backgrounds, and LGBTQ+ individuals—contend with higher rates of discrimination (Campbell, Mitchelle & Brauer, 2021; Seng, Lopez, Sperlich, Hamama, & Meldrum, 2012). Those with HMIs encounter systemic prejudices including xenophobia, racism, sexism, classism, and trans- and homophobia. These systemic prejudices are well-documented in healthcare, education, the workforce, and justice system. To give two stark examples, people of color experience discrimination in healthcare and subsequently have poorer physical and mental health outcomes compared to their white peers (Sperlich & Gabriel, 2022; Williams, Neighbors, & Jackson, 2008). LGBTQ+ individuals experience higher rates of social victimization, bullying, and suicidal ideation (Angoff & Barnhart, 2022; Robinson & Espelage, 2012). Moreover, various identity markers intersect with one another and can contribute to differential and amplified psychosocial outcomes for individuals. For example, mental and physical health outcomes are worse for minority women (Budhwani & De, 2019; Lehavot & Simoni, 2011), even more so for those who are from lower socioeconomic and educational statuses (Assari, 2017), and even more significantly for LGBTQ+ individuals (Cyrus, 2017).

Undoubtedly, prejudice remains as a horrific social ill worth eradicating in all of its forms. At the same time, individuals from HMIs often demonstrate tremendous resilience--and brilliance--while flourishing in various

academic, professional, and social milieus. Social movements such as *Black Girl Magic* and the *Women's March* have reframed and recentered the dialogue on belonging to HMIs. Such movements have foregrounded how possessing multiple HMIs informs and shapes the way people navigate quotidian challenges as well as more significant institutional and systemic obstacles. As scholars, we must take an intersectional and interactional approach to studying people with HMIs by broadly considering their assets, struggles, and unique concerns. By examining their strengths and specific skills in a culturally-informed way, we can better understand how these layered life experiences related to identity may interact and contribute to positive, prosocial outcomes for individuals and society more broadly.

An Intersectional and Interactional Approach to Studying HMIs

Intersectionality (Crenshaw, 1991) examines how interconnected identities related to systems of historic oppression (e.g., family education history, gender, race, socioeconomic status, sexual orientation) interact in important ways and shape individuals' identities and experiences. With the increasingly widespread acceptance of the concept that individuals' identities exist at the convergence of various aspects of self, scholarly inquiries must acknowledge and deaggregate groups that were formerly treated as monolith (e.g., researching women's health without centering the lens of socioeconomic or racial identities; McCall, 2005).

Kimberlé Crenshaw's (1989) theory of intersectionality emerged from critical race theory-informed legal debates on the persistence of discrimination in the justice system. Crenshaw's theory argued against focusing on issues-- such as race or gender--as if they were or ever could be separate considerations. She noted that historic marginalization often intersected and resulted in vastly different life experiences and incidences of prejudice. To continue this important conversation about the entanglement and intersection identities that inform psychological phenomena and functioning, the current paper explores an asset-based approach to intersectionality. It examines the pathways connecting historical marginalization, intercultural competence, ethnic identity, and cognitive empathy. Minority stress models in the literature explore the micro- and macro-impact of contending with complex, ongoing, and historically-rooted systems of oppression on a daily basis. These explore how repeated experiences of bias negatively impact mental, physical, and social health for historically-marginalized communities (Brach & Fraserirector, 2000). Moreover, those who exist at the intersection of multiple HMIs may experience compounded, complex inequalities that can take an even more significant toll.

Present Study

In the present study, we examine how belonging to HMIs is linked to positive outcomes such as cognitive empathy and intercultural competence. This study is unique in studying assets, rather than deficits, associated with having a HMI. Furthermore, this study contributes to the field's understanding of the pathways that connect these intra and interpersonal variables by evaluating the links between these four variables together. Moreover, we contribute a new model that evaluates the mediating effects of ethnic identity and intercultural competency from HMIs to cognitive empathy. Building from the research and theoretical evidence of associations between one's own awareness of their cultural identity/self-knowledge and more empathic and effective interactions with others, we

chose to create a model that examined the pathways between ethnic identity, intercultural competence, and cognitive empathy. The results of the study have real-world implications. For example, if possessing HMIs relates to greater levels of cognitive empathy and intercultural competence, this provides preliminary empirical evidence that underscores the importance of diverse representation in educational, governmental, corporate, and other systems. In the sections to follow, we review the research on ethnic identity, intercultural competence, and cognitive empathy.

Cognitive Empathy

One such positive outcome of interest includes cognitive empathy: the ability to take and empathically engage in a concerned, active way with the experience and perspectives of others (Martingano, Hererra, & Konrath, 2021; Walter, 2012). For our study, the construct of cognitive empathy includes both cognitive/mentalizing components as well as affective/emotional characteristics (Davis, 1983). Research on cognitive empathy has underscored its neurofunctional underpinnings. A resting-state fMRI study by Cox and Colleagues (2012) found that dominance of cognitive empathy was linked with areas of the brain often related to interception, autonomic monitoring, and social-cognitive processing and affective empathy was associated with stronger connectivity in socioemotional neuroanatomical regions. Another fMRI study by Schnell, Bluschke, Konradt, and Walter (2011) explored the distinction between participants' ability to infer another's affective state and visuospatial perspective. They highlighted that affective stimuli activated the amygdala and mentalizing network in a manner that suggested that cognitive empathy involved referencing one's own affective state.

Taken together, these studies suggest that cognitive empathy may involve the ability to reference one's own experiences as it relates to others and social contexts. Considering that, it stands to reason that individuals who have experienced a breadth of social and personal experiences and challenges related to their social identities may have more socially–informed events from which to draw empathic parallels. These individuals with HMIs may have a greater ability to consider the experiences—particularly the suffering—of others and draw from their own emotional experiences and backgrounds to empathize.

Mark H. Davis, a prominent scholar in the study of empathy, developed the Interpersonal Reactivity Index (IRI) as a measure of dispositional and cognitive empathy (Davis, 1983). This widely–utilized, multidimensional tool operationalizes empathy as a series of separate but related constructs: 1) perspective taking, or the tendency to adopt the psychological point of view of others in daily life, 2) empathic concern, or the tendency to experience affective compassion and sympathy for others, 3) personal distress, the tendency to feel discomfort or distress when others experience extreme suffering, and 4) fantasy, or the tendency to imagine and transpose oneself into fictional scenarios. The first two scales—perspective taking and empathic concern—highlight key aspects of empathy as it is often conceptualized as a socio-emotional phenomenon.

Beyond its conceptual and theoretical utility, cognitive empathy has been found to impact the actions individuals take, including altruistic helping and investment in others. Experimentally, Oswald (1996) induced participants in a way that bolstered cognitive and affective perspective taking and empathic concern. These participants had

higher levels of altruistic helping (i.e., the number of hours a participant volunteered to help counsel and support other students) compared to those who were not empathically activated. More broadly speaking, empathy has been found to play a key role in the provision of effective healthcare (Nam et al., 2021), educational (Alzayed et al. 2021; Cooper, 2011), and law enforcement (Bloksgaard & Prieur, 2021) services. Empathy matters: it shapes how people engage as individuals within wide social structures. Empathy can shape key human experiences ranging from emotional engagement and responsiveness in romantic relationships to broad geopolitical policy decisions. Relatedly, intercultural competence also informs the way people engage with culturally–different others.

Intercultural Competence

Intercultural competence has been defined differently by scholars through the years and remains an amorphous term in scholarly and applied settings (Achieng, 2021; Baxter & Magolda, 2000; Bultseva & Lebedeva, 2021; Wiseman, 2001). Deardorff (2006) sought to operationalize intercultural competence. Deardorff used a Delphi methodology to develop a definition and assessment strategies for intercultural competence querying administrators in the field of international education in the United States. The most agreed upon definition of intercultural competence was Byram's (1997) summary of intercultural competence as: "Knowledge of others; knowledge of self; skills to interpret and relate; skills to discover and/or to interact; valuing others' values, belief and behaviors; and relativizing one's self. Linguistic competence plays a big role" (Byram, 1997, p. 34).

This multidimensional conceptualization of intercultural competence highlights the interrelated thoughts, feelings, and behaviors that contribute to intercultural competence. Thus, intercultural competence includes the knowledge, self–awareness, and skills to engage with culturally different others in a thoughtful way. Individual levels of self–reflection and self-awareness have been associated with intercultural competence–related outcomes (Andenoro, Popa, Bletscher, Albert, 2012). One's experiences of and knowledge of his or her own cultural and individual identity shape how he or she engages with others (Kheir, 2021; Peifer & Yangchen, 2017).

Moreover, culturally–informed attitudes and beliefs (Garmon, 2005) and sociocultural exposure experiences (Henderson-King & Kaleta, 2000) can shape the development and expression of intercultural competence. Thus, understanding the outcome of intercultural competence requires a multidimensional approach that highlights cognitive, emotional, and behavioral inter and intra–personal aspects of cultural fluency. Moreover, intercultural competence may relate to and differ based on the identity of subjects. For example, intercultural competency may look different for different cultural or identity groups and based on individual characteristics of the subject (Hu & Dai, 2021). Thus, we must examine key psychosocial outcomes of interest—including cognitive empathy and intercultural competence—with a cultural intersectional and identity–informed lens.

Ethnic Identity

Ethnic identity formation has been conceptualized as a major developmental task or "one aspect of acculturation by which the concern is with an individual's personal relation to his or her own group as a subgroup of the larger

society" (Phinney, 1989, p. 500). As measured by Phinney's Multigroup Ethnic Identity Measure (MEIM; Phinney, 1992), ethnic identity has been found to have a strong impact on positive outcomes. Rivas-Drake and colleagues (2014) collated 46 studies in a meta-analysis establishing a link between ethnic identity and adaptive psychosocial, academic, and health outcomes, particularly for youth of color. Ethnic identity has also been found to buffer against the negative effects of discrimination (Greene, Way, & Pahl, 2006; Williams, Aiyer, Durkee & Tolan, 2013). Moreover, research examining the relationship between ethnic identity and ethnocultural empathy (empathic feelings towards culturally out-group members) for college student mentors working with middle school girls, established a link between ethnic identity and ethnocultural empathy (Peier, Lawrence, Williams, & Leyton-Armakan, 2016). With this in mind, it is vital to examine the pathways and mechanisms of action linking ethnic identity with historical marginalized identities, cognitive empathy, and intercultural competence.

Intersectional Research

McCall (2005) highlights some of the methodological challenges of conducting intersectional research and describes three existing methodological approaches. The first, anticategorical complexity suggests the deconstruction and/or removal of identity categories in analysis given the infinite complexity of participants' identities, making it impossible to incorporate every relevant identity marker (rejects categories). The second approach, intercategorical complexity, uses identity categories strategically by "provisionally adopt[ing] existing analytical categories to document relationships of inequality among social groups and changing configuration of inequality along multiple and conflicting dimensions" (McCall, 2005, p. 3). The third and final approach, intracategorical complexity, retains a critique of categorization and focuses on particular social groups at the intersection of oft–neglected and under-researched social categories. The current study takes an intercategorically complex approach in order to aggregate multiple identities to examine if possessing multiple, historically–marginalized identity markers plays a role in the cognitive empathy and intercultural competence of participants. While some studies have incorporated cultural considerations into the exploration of empathy and intercultural competence (Burkard & Knowx, 2004; Constantine, 2000; Suk, Oh, & Im, 2018), much work remains to better understand the relationship between HMIs, empathy, and intercultural competence in an intersectional way.

Terminology and the Current Study

It is worth noting that while the term HMI seeks to acknowledge and foreground the long history and established social structures of inequity; it does not suggest that these experiences are in the past. Rather, the term historically–marginalized identities refers to a dynamic, ongoing system of inequality and marginalization that has historically existed and persists in various forms. The current study seeks to continue to extend the theoretical work of intersectionality to examine it in a strength-based way. The study will also test a methodological approach to conceptualizing and aggregating historically-marginalized identities and create and test a structural equation model to better understand the pathways linking HMIs, cognitive empathy, intercultural competence, and ethnic identity.

Specifically, the study responds to three key, connected research questions:

1) Does having a higher number of historically marginalized identities directly predict higher levels of ethnic identity, cognitive empathy and intercultural competence?

2) Is the effect of HMIs on cognitive empathy direct and/or mediated by intercultural competence, and

3) Is the effect of HMIs on intercultural competence and cognitive empathy direct and/or mediated by ethnic identity?

The theoretical model that tests these research questions is presented in Figure 1. We hypothesize that levels of ethnic identity, cognitive empathy, and intercultural competence will differ based on HMI levels and that the impact of HMIs on intercultural competence and cognitive empathy will be mediated by ethnic identity and cognitive empathy. To our knowledge, this study is the first to examine these related variables together in a single study and to empirically test the direct and mediating effects among these variables. The model also allows us to test the theoretical relevance of an asset-based approach to intersectionality.
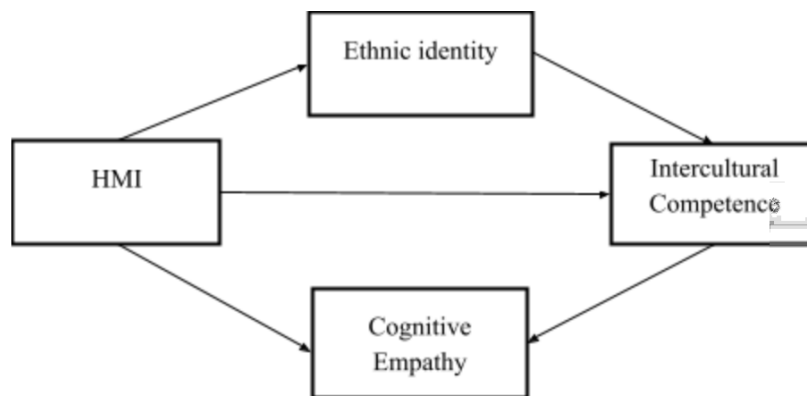

Figure 1. Theoretical Model

Methodology

Participants

The sample included 623 undergraduate students from three private institutions in the United States: a small liberal arts college for women in the Atlanta metropolitan area, a small Catholic college for women in Indiana, and a small university in Southern California. All students were incoming first years to their institutions. Regarding historically marginalized identities, the racial/ethnic composition of the sample, 40% self-identified as White only, 15% as Black, 16% identified as Latino/a, 7% as Asian, 22% as multiracial or as another racial/ethnic group. Ninety-seven percent of the college students in this sample identified as domestic students, while 3% identified as international students.

Regarding gender identity, 76% self–identified as women, 21% identified as men, 3% identified as transgender or gender-fluid or chose not to disclose or identified as another gender identity. Seventy-one percent self–identified as heterosexual, while 5% identified as homosexual and 24% identified with another sexual identity (bisexual, pansexual, prefer not to say, don't know/unsure, not listed here). Socioeconomically, 18% percent of

the population identified as low–income (as defined as family income less than $30,000), 15% had combined family income above $150,000, and 67% had families with a different income makeup.

Procedures

This study aggregates baseline data collected as part of a larger study: the Global Pathways Study (GPS). The GPS is a multi–institutional, longitudinal study examining college student development with an intercultural competence focus and this paper utilizes baseline data from two collection points: early August 2017 and late July 2018/August 2018 before students arrived on campus or very early in their first semesters. Students were contacted with a link to complete the survey using Qualtrics online survey software. Initial recruitment and reminder messages were sent via electronic mail to the students' college-affiliated addresses. The survey questionnaire took an average of 15 minutes to complete. Informed consent was collected from participants and the study was conducted in compliance with the first author's Institutional Review Board.

Measures

HMI. An overall HMI identity scale was calculated in which a participant received one point for each self-reported historically-marginalized identity (HMI). This scale included items related to domestic/international student status, race, gender, sexual orientation and income, with an individual being able to attain a score ranging from 0 (no HMI) to 5 (all included HMIs present). For the sample, the scores ranged from 0 to 5, with a mean of 2.09 ($SD = 1.12$). *Domestic/International Student Status.* Domestic/international student status was assessed via a single self–reported item, "Are you a domestic or international student?" Students who were international were categorized as belonging to an HMI. *Race.* Participants self–reported race via checkbox. Participants could choose more than one race/ethnicity (e.g., black and white). People of color (non-white participants) were categorized as having an HMI.

Gender. Participants responded to the query "right now, what is your gender identity?" selecting a single choice form options including: female, transgender female, transgender male, gender queer/fluid, male, don't know/unsure, prefer not to say, and not listed here with a free response text box. Individuals who did not identify as male were identified as having an HMI related to gender. *Sexual Orientation.* Students reported sexual identity in response to the item "right now do you think of yourself as" with response options including: lesbian/gay/homosexual, straight/heterosexual, bisexual, queer, pansexual, asexual, prefer not to say, don't know/unsure, not listed here with a free response text box. Those who did not identify as straight/heterosexual were classified as meeting the criteria of having an HMI related to sexual identity. *Income.* Participants reported total combined family income to the best of their knowledge. Those who reported combined family income as less than $30,000 were classified as low-income, considering the 2019 federal poverty level cut–off of $26,500 for a family of four. Participants with incomes in the low-income range were classified as having an HMI.

Cognitive Empathy. Cognitive empathy was assessed using two subscales (perspective taking and empathic concern) from Davis' (1980) Interpersonal Reactivity Index (IRI). The 28–item measure assesses an individual's

self-reported empathy to the observed experience of another (Davis, 1983) on a 5–point Likert scale where participants rate their agreement with how statements describe them ranging from "does not describe me well" to "describes me very well." The 7–item perspective taking subscale examines one's tendency to take the psychological viewpoint and perspective of others. It includes items such as "I try to look at everybody's side of a disagreement before I make a decision," and "I believe that there are two sides to every question and try to look at them both." The 7–item empathic concern subscale assesses how participants feel sympathy and concern for others. Sample items such as "I often have tender, concerned feelings for people less fortunate than me," and "I am often quite touched by things that I see happen" seek to capture the empathetic, emotional reaction of an individual to another's subjective experience. Both subscales were combined, and composite scores were used to assess cognitive empathy. The overall cognitive empathy reliability was good with a Cronbach's alpha of .85 for the sample (Nunnally & Bernstein, 1994).

Intercultural Competence. Intercultural competence was measured using the New Student Form version of the Global Perspectives Inventory (GPI) (Braskamp, Braskamp, and Engberg, 2014). This scale assesses the holistic development of a global perspective with three dimensions (each with two subscales) that assess different facets of intercultural competence: 1) cognitive (knowing and knowledge subscales), 2) intrapersonal (identity and affect subscales), and 3) interpersonal (social responsibility and social interactions subscales).

Within the cognitive dimension, the knowing subscale assesses the "degree of complexity of one's view of the importance of cultural context in judging what is important to know and value," while the knowledge subscale explores the "degree of understanding and awareness of various cultures and their impact on our global society and level of proficiency in more than one language." In the intrapersonal dimension, the identity subscales assess "level of awareness of one's unique identity, sense of purpose, and degree of acceptance of one's identity," and the affect subscale explores "level of respect for and acceptance of cultural perspectives different from one's own and degree of emotional confidence when living in complex situations." For the interpersonal dimension, the social responsibility subscale examines the "level of interdependence and social concern for others," and the social interactions subscale captures the "degree of engagement with others who are different from oneself and degree of cultural sensitivity in living in pluralistic settings" ("GPI Dimensions," 2015).

The New Student form is utilized to collect baseline information from incoming first year students and includes items related to students' academic and co-curricular high school experiences. Students responded to 35 items using a 5–point Likert scale (1 = strongly disagree, 2 = disagree, 3 = neutral, 4 = agree, and 5 = strongly agree) on questions related to their own cultural identity and feelings towards those who are culturally different. Sample items included "Some people have a culture and others do not," "I see myself as a global citizen," and "I frequently interact with people from a different race/ethnic group than my own." The overall scale had good reliability for this sample (α = .86) (Nunnally & Bernstein, 1994).

Ethnic Identity. Ethnic identity was assessed using Brown et al.'s (2014) Multigroup Ethnic Identity Measure-Revised (MEIM-R; Brown et al., 2014)). The MEIM-R measures participants' self-reported affiliation with one's ethnic group across two dimensions: 1) commitment (three items): one's sense of belonging to an identity, and 2)

exploration (three items): exploring the meaning of one's identity. The items are on a five-point Likert scale ranging from (1) Strongly Disagree to (5) Strongly Agree. For this sample, internal consistency was .79.

***Replicability and Transparency*.** Data, methods used in the analysis, and materials used to conduct the research will be made available to any researcher for purposes of reproducing the results or replicating the procedure. To do so, submit a request to the author by e-mail.

Results

Structural equation modeling was used to test the relationship among the variables depicted in Figure 1. LISREL 10.10 was used to test the model and all descriptive and correlational statistics were obtained using SAS 9. Prior to model testing, the data were evaluated for univariate and multivariate normality. Based on adequate skewness and kurtosis statistics (Table 1) and Maria's coefficient of .976, the data met the assumptions of normality and maximum likelihood estimation was used to test the model.

Table 1. Correlation Matrix, Means, Standard Deviations, Skewness, and Kurtosis

Variable	1	2	3	4
1. HMI	--			
2. Ethnic Identity	0.16*	--		
3. Intercul. Comp.	0.20*	0.21*	--	
4. Cognitive Emp.	0.09	0.09	0.45*	--
M	2.10	2.85	3.79	3.87
SD	1.12	0.57	0.36	0.58
Skewness	0.21	0.04	0.06	-0.14
Kurtosis	-0.22	-0.06	-0.27	-0.53

*$p < .0001$.

Several fit indices were selected to assess model fit: The chi-square statistic was $\chi2(1) = .02$, p = .90. The Root Mean Square Error of Approximation (RMSEA) was 0. The standardized root-mean-square residual (SRMR) was 0. Finally, the Bentler Comparative Fit Index (CFI) was 1.00 and the Incremental Fit Index (IFI) was 1.00. These fit indices all met recommended cutoff values (e.g., Bentler, 1990; Browne & Cudeck, 1993; Hoyle & Panter, 2005; Hu & Bentler, 1999), indicating that the model had excellent fit.

The standardized path values for the model and the associated t-values and R^2 values are reported in Table 2. A cutoff value of t = 1.96 for a two-tailed test was used to determine statistical significance of the path values. Figure 2 shows the results of the tested model. In terms of the relative size and influence of the standardized path coefficients, paths ranging from .05 to .10 are considered small in size and influence. Paths ranging from .11 to .25 are moderate in size and influence, and paths above .25 may be considered large in size and influence (Keith, 1993).

Results of the model point to several important direct relationships: the path coefficients from HMI to ethnic identity and HMI to intercultural competence were .16 and .18, respectively. Both were significant and of moderate size and influence. Ethnic identity had a significant and moderate influence (.19) on intercultural competence. The largest direct path, however, was from intercultural competence to cognitive empathy (.45). The direct path from HMI to cognitive empathy was 0.
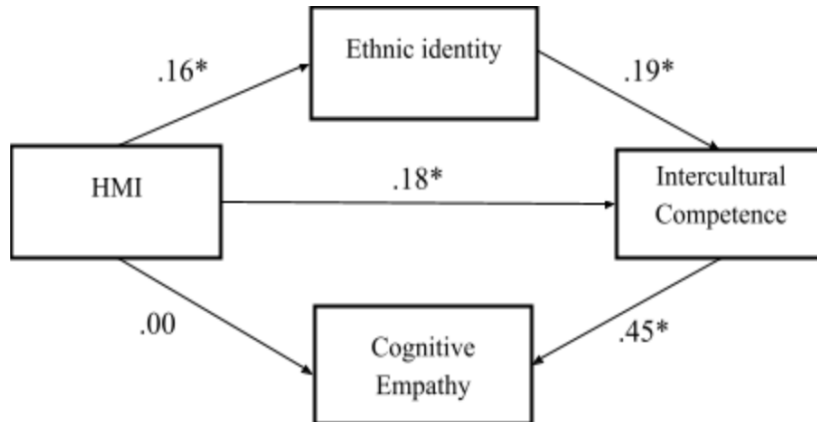

Figure 2. Tested Model

Table 2. Decomposition of Effects in the Model

	Direct Effects		Indirect Effects	
Predictor and Criterion	PC	*t*	PC	*t*
HMI				
Ethnic Identity ($R^2 = .03$)	.16	4.09		
Intercultural Competence ($R^2 = .07$)	.18	4.36	.03	3.10
Cognitive Empathy ($R^2 = .20$)	.00	-.02	.09	4.72
Ethnic Identity				
Intercultural Competence	.19	4.74		
Cognitive Empathy			.08	4.43
Intercultural Competence				
Cognitive Empathy	.45	12.23		

Note. A cutoff value of *t* = 1.96 was used to determine whether paths were statistically significant. In terms of the relative size and influence of the standardized path coefficients, paths ranging from .05 to .10 are considered small in size and influence. Paths ranging from .11 to .25 are moderate in size and influence, and paths above .25 may be considered large in size and influence (Keith, 1993). PC = standardized path coefficient.

In addition to these direct effects, three indirect effects emerged as significant. Although the direct relationship between HMIs and cognitive empathy was not significant, HMI indirectly impacted cognitive empathy through ethnic identity and intercultural competence (path was small in size .09, but significant). In addition to the direct

effect of HMI on intercultural competence, this relationship was significantly mediated by ethnic identity (HMI-> ethnic identity->intercultural competence, .03 is small in size). Finally, ethnic identity had a small (.08), but significant effect on cognitive empathy through intercultural competence.

Discussion

The findings from this study highlight the resilience, strengths, and abilities associated with the possession of historically marginalized identities (HMIs). This study provides new perspectives evaluating the association among these four positive-valence variables together in a single study. While more work must be done to disentangle and more fully understand these interactions, these results suggest that individuals with a greater number of HMIs also have heightened ethnic identity and intercultural competence and, indirectly, cognitive empathy. Put plainly, belonging to an identity group that has experienced discrimination, prejudice, and marginalization may enhance one's ability to take other's perspectives and engage in an empathic way, particularly for culturally-different others. Moreover, identifying with HMIs may play a role in the affective, cognitive, and interpersonal engagement with cultural differences (intercultural competence). Those with a greater number of HMIs also have higher levels of ethnic identity, suggesting a stronger commitment to and understanding of one's own cultural and racial/ethnic background.

Our model findings pointed to several significant indirect effects. Although having more HMIs was not directly linked with having greater cognitive empathy, HMIs indirectly impacted cognitive empathy through ethnic identity and intercultural competence. In addition, those with greater ethnic identity had higher levels of intercultural competence and this translated to higher levels of cognitive empathy. The largest effect in the model was the link between intercultural competence and cognitive empathy. There are several possible explanations for this finding. For one, minority and marginalized groups must have heightened awareness of others to survive and thrive in dominant cultural milieus (Brownstone et al., 2021). Secondly, those with HMIs may experience discrimination and acquire a more extensive affective "library" to pull from as they relate to others' experiences, especially their struggles. Regarding the first, research on code-switching and social negotiations underscores the cognitive, socioemotional processes that minority groups experience as they navigate in and out of majority-centric spaces (Myers-Sotton, 2003). Research has found that historically marginalized individuals, including racial/ethnic (Brownstone et al., 2022; Preuss et al., 2021), sexual (Kaiser et al., 2021), and gender (Sue, 2010) minorities report heightened awareness, emotional attunement, vigilance, and attentiveness in their daily experiences. The necessity of code–switching and careful observation to successfully navigate cross-cultural situations may shape the very neuro–structure of those with HMIs. The experience of constantly observing and seeking to understand these social variables may result in the greater cognitive empathy we found in our study.

Moreover, those with HMIs may have a heightened ability to draw affective parallels with the experience of suffering related to oppression of others. While they may not know or understand the specific content of the lived experience of another historically–marginalized group, they likely have a personal framework (i.e., knowing what it feels like to navigate dominant spaces as someone with an HMI) from which to empathize. For example, research suggests that people of color, particularly those in multiracial relationships, are more likely to support

marriage equality for LGBTQ+ individuals (Perry, 2013). Qualitative interviews suggest that these people have drawn direct parallels between their current and historic experience of prejudice and discrimination as multiracial couples and the current and historic oppression of those from sexual identity minority groups. While qualitative work unpacking this finding is sparse, it may be that these HMI individuals draw affective parallels between their experience and the experience of marginalized others. These findings suggest that those with HMIs draw from their personal experiences, stored in their "affective library," to imagine how others may feel while facing personal struggles or systematic oppression. They may more readily see themselves in others' lives and empathize with their experience. The breadth of personal affective data related to identity (i.e., having more of these experiences to draw from) may increase the level of cognitive empathy skills an individual possesses.

Past research has well-established that people of color and other people with HMIs also have higher levels of intercultural competence when compared with peers from privileged identity backgrounds. In many ways, this finding has been taken for granted in the field. Yet, future work must focus on the drivers and implications of these differences. Those with HMIs may have higher levels of intercultural competence because they consistently engage in cross-cultural experiences as they engage within mainstream cultural contexts. Thus, they may be less likely to grapple with the anxiety or gap in skills that those with privileged identities are more likely to have while engaging with culturally-different others.

Those with greater HMIs had higher levels of ethnic identity. Past research has established that people of color tend to have heightened ethnic identities compared to their white counterparts (Phinney, 1989). Phinney (1989) hypothesized that minority status sparks greaters awareness of an interrogation of one's cultural identity, leading to more identification, commitment, and belonging to one's cultural group. Ethnic identity is also related to increased intercultural competence, which is then connected with cognitive empathy. This model suggests that ethnic identity not only serves the purpose of introspective self-awareness, but also shapes the way one connects with others. This finding runs counter to some beliefs that supporting HMIs exploration and celebration of their identities may heightened separation and prejudice between those with and without historically marginalized identity. Rather, the findings suggest that attending to and supporting ethnic identity development may also play a role in increasing intercultural relationships and overall empathy. Findings attest to the importance of taking a holistic approach to understanding the connections between possessing a historically marginalized identity, ethnic identity, intercultural competence and cognitive empathy. Results from this pilot study emphasize the important role of intercultural competence as a pathway to increased, general cognitive empathy.

Conclusion

While the literature has documented the long-term physical, emotional, and social toll of this heightened awareness and hypervigilance with good reason, those from HMIs may possess unique strengths and abilities that distinguish and help them thrive in their personal, social, and professional lives. This has significant implications across various settings. The findings from this study provide support for the importance and strategic necessity of diversity and inclusivity everywhere from boardrooms to Capitol Hill. Moreover, the findings highlight the importance of supporting ethnic identity and how it impacts the way that one understands engages with themselves

and others in an empathetic, culturally-attuned way. Contrary to beliefs that encouraging ethnic identification and celebration creates prejudice, our results highlight that, for those with historically marginalized identity, a strong sense of ethnic identity links with care and empathy towards others. Intercultural competence and empathy, particularly the ability to take others' perspective and forecast how decisions, marketing, laws, programs, or initiatives may impact others is vital for ethical leaders who serve diverse constituencies. From a purely pragmatic perspective, higher levels of empathy and intercultural competence can increase desired outcomes such as workplace productivity, team cohesiveness, and profit. As an example, in business negotiations chances of coming to a consensus are increased if one or more individuals with an open mindscape type are included in discussions.

These preliminary findings suggest that those with HMIs can continue to contribute to their organizations and communities in increasingly necessary and impactful ways. Results from this study suggest that those with HMIs have valuable and specific traits, skills, and abilities that distinguish them. Future research must seek to better understand how those from historically marginalized identities can leverage their experience and lens in beneficial ways to contribute to positive individual (e.g., relational satisfaction, self-esteem) and broader societal outcomes (e.g., heightened equity).

Recommendations

Conclusions drawn from this study must take into account its limitations. Our model is the first to examine the relationship among these variables, but it is a model that can be expanded to include additional variables, including other identity, psychosocial, and personality variables, that may contribute to a fuller understanding of differences in cognitive empathy and intercultural competence. While this model takes a preliminary step towards an intersectional theoretical approach to understanding ethnic identity, intercultural competence, and cognitive empathy, much more can be done to contribute to critical race and intergroup relations theoretical frameworks.

Additionally, the research did not capture all of the identity domains that have experienced historic oppression and marginalization. Future research will seek to examine the existing domains in more detail and add additional variables into the HMI index (e.g., ability status, first generation student status). Qualitative inquiry can contribute more full and detailed narrative data on how participants describe the association between their identity and their cognitive empathy and intercultural competence towards others. Finally, longitudinal research can examine how identities shift and change over time and how various experiences may shape the development and maintenance of empathy and intercultural competence. Moderating variables can help explain how variables increase or attenuate the effects of one variable on another. Nested data can help explain how individuals nested in different communities have different perspectives and outcomes.

Finally, we aim to increase the breadth of institutional and community contexts from which we draw sample data. While the findings point to a particular phenomenon worthy of further inquiry, the context of higher education, particularly small institutions, may limit the generalizability of these findings to community–based and broader samples. Future work should strive to incorporate different institution types and community samples.

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