Alone, Together:

The Influence of Stigmatization on Cultural Relationality

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ABSTRACT

It is no secret that great disparities in wealth and opportunities pervade our society. Psychological research pertaining to resource inequality attributes these disparities a product of social stigmatization, which is the experience of societal rejection due to the negative stereotypes associated with group membership. Social stigma is correlated with adverse effects; the current research explores the possibility that stigma can alter the extent to which others are included in one's sense of self, also known as cultural relationality. Study 1 investigated this relationship by measuring both stigma and relationality using self-report measures and found relationality to be negatively correlated with stigmatization. In study 2, stigma salience was manipulated and it was found those primed to think about stigma were less relational than those who were in the control condition. Lastly, in study 3 there was an interaction between stigma type and how severe the specific stigmatizing event was perceived to be, such that those who were asked to write about witnessing discrimination were more relational than those who wrote the control essay or wrote about experiencing discrimination personally, and this was only the case for those who wrote about a highly severe event. Taken together, these studies showed evidence for a systematic relationship between stigmatization and relationality, albeit in a different way than was hypothesized. Implications for these findings are discussed.

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Chapter 1. Stigmatization and Relationality

Historically, social psychological research has sought to understand how prejudice comes to be, with a bulk of this inquiry pertaining to how mainstream members become perpetrators of prejudicial thinking and discrimination. However, within the past two decades, research has shifted from investigating the psychological mechanisms that are conducive to prejudicial thinking to the experience of being the target of these same processes. This new perspective, which considers the experience of disenfranchised groups, is what we now refer to as social stigma (Goffman, 1963; Crocker & Major, 1989; Heatherton, 2003).

Stigmatization, or the perceived disapproval of a person or group based upon his or her group membership, causes resource inequalities across different groups (Stangor & Crandall, 2000). Previous research exploring how stigmatization can affect targets of such rejection has established that the experience of stigma is linked to several adverse psychological consequences (Crocker & Major, 1989; Major & Schmader, 1998; Steele, 1997). For instance, stigma has been associated with poor mental and physical health (Leary, Tambor, Terdal & Downs, 1995), increased anxiety (R. Clark et al., 1999), as well as decreases in well-being (Bronscombe, 1998). The current research aims to explore another possible psychological consequence to the experience of social stigma. Specifically, I am interested in understanding how stigmatization can alter to what degree we include others in our sense of self.

Stigma and the Self

The degree to which we include or exclude others in our sense of self can influence how we form and pursue life goals (Markus & Kitayama, 1991), with certain goals leading to better economic outcomes than others. The current research explores the possibility that, for those living in the United States, being interdependent is in part a response to being socially

stigmatized. Such a shift in one's self-view may allow stigmatized individuals to cope in a world where they are often viewed as seriously flawed. For example, a female faced with the fact that society regards her as fragile and emotional may think of how she is important in other relational domains, be it as a daughter, a teammate or a friend. Such a shift in self-concept may allow her to better cope with the negative ramifications of the stereotype with which she is confronted. If a systematic difference in relationality does take place as a function of stigmatization, this could have ramifications for how stigmatized individuals derive self-esteem and form goals. For instance, compared to individuals with an independent self-construal, those who are relationally minded are prone to consider the wants and needs of close others (Markus & Kitayama, 1991), which may also limit resource attainment. Markus & Kitayama (2005) found that for those primed to be independent, personal goals and abilities became the primary sources of motivation, while those who were primed interdependence were motivated by the coordination of the goals and needs of important others. It is not difficult to see how being motivated by the goals of close others rather than personal gain can affect subsequent goal formation and resource acquisition. Said differently, interdependence has the potential to come at a literal cost in a society that values independent ambition.

However, before the posited link between social stigma and cultural relationality can be fully understood, it is important to highlight some important aspects of stigmatization and self-construal. Therefore, the following is a review of the pertinent literature on stigma and self-construal, including how each concept is defined, categorized, and studied, as well as how results have been interpreted and have furthered our understanding of these processes. Investigating social stigmatization through the lens of self-construal is consistent with the current literature on both stigma and self-construal independently, and exploring the relationship between these two

concepts may elucidate yet another way in which stigmatized individuals cope with the experience of societal rejection.

For the remainder of the introduction I will review the pertinent literature on stigmatization, its characteristics, effects, and how targets of discrimination cope with being chronically stigmatized, as well as the research pertaining to self-construal and cultural relationality. Then, I will present the rationale for the stigma-relationality hypothesis. Lastly, I will summarize the methods and results of the three studies conducted to test the stigma-relationality hypothesis.

Stigma

Erving Goffman first defined stigma as "[the] process by which the reaction of others spoils normal identity (Goffman, 1963, p. 7)." Stigmatizing characteristics may vary, but in a very general sense stigmatized groups are viewed as deviating from a social standard or cultural value. If society at large is not comfortable with the trait in question--be it dressing a certain way, speaking a certain way, having a certain skin color, living a certain life style, having a disability, or being overweight--then the potential for stigmatization is present. . Similarly, Dovidio, Major, and Crocker (2000) have described stigma as "…a social construction that involves at least two fundamental components: (1) the recognition of difference based on some distinguishing characteristic, or "mark"; and (2) a consequent devaluation of a person (p.3)." Such social deviations are often met with a wide array of responses, ranging from overt behaviors such as being denied employment or housing, to subtle displays which include poor social interactions with outgroup members (Hebl, Tickle & Heatherton, 2000). Therefore, not only do stigmatized individuals have a "spoiled identity", this affront to their identity bleeds into

countless domains of their lives, which poorly affect interactions with the mainstream as well as important outcomes such as the accruement of capital.

The different types of stigma. While psychological research on prejudice has been ongoing for the last half of century, research regarding the experience of prejudice is fairly recent (Crocker & Major, 1989). Of all of the claims that have been made about stigma in that time, one is especially important: not all stigmatization is created equal. Goffman (1963) identified and discussed three types of stigmatization which include 1) abominations of the body, 2) blemishes of individual character, and 3) tribal stigma. First, bodily abominations are a purely physical type of stigma and can be described as physical ailments such as having a deformity of some sort or suffering from disease (Goffman, 1963). Because such physical deformities are viewed by the mainstream as uncontrollable, those who suffer from this type of stigmatization have been found to elicit pity and help, but not anger (Weiner, Perry & Magnusson, 1988).

In contrast, those who possess blemishes of individual character, which are typically not physical, are perceived as "weak will[ed], domineering of unnatural passions, [having] treacherous and ridged beliefs, and dishonesty, these being inferred from a known record...(Goffman, 1963, p. 9)". Those who are considered to have a blemished character include, but are not limited to, those who have been diagnosed with a mental disorder, have accrued a criminal record, suffer from addiction, or are unemployed. Such stigma is seen as mostly controllable by the mainstream, and have therefore been found to elicit little to no pity by outgroup members and instead incite resentment (Weiner, Perry & Magnusson, 1988) and this lack of empathy has been found to worsen with old age and the decline in executive functioning (Krendl & Wolford, 2013).

Finally, tribal stigma, which is the main focus of the current research, is a type of devaluation towards an innate variable and is often accompanied by group membership (Goffman, 1963). That is, tribal stigma is the contamination of the identity of particular races, nations, religions, etc., and as such tends to affect all members of the stigmatized group. The characteristics of tribal stigma may vary, but one aspect that all forms of this stigma share is the fact that they are endowed onto the individuals who possess them. Additionally, how those who have a stigmatized group trait are viewed and treated is dependent upon context. For instance, attitudes toward Blacks may sometimes involve sympathy when the perceiver is motivated to be fair (Dovidio & Gaertner, 1998), while at other times, especially if the perceiver experiences cognitive load, the same group of people may be seen as threatening and therefore elicit negative affect (Blascovich et al., 2000). This suggests that when studying stigma, the context in which the characteristic is seen should be taken into consideration.

Since Goffman first conceptualized the different types of stigma, empirical data have suggested that stigmatization can be further dissected into more nuanced categories (Towler & Schneider, 2005). Such inquiry is important because knowing how different types of stigma are viewed by the mainstream may lead to the development of more effective interventions to assuage the adverse effects of each. Towler and Schneider (2005) investigated how the mainstream distinguishes between the different types of stigmas by having participants classify 54 different examples of stigmatizing traits. The results suggest that the mainstream views seven distinct types of stigma categories including physically disabled, mentally disabled, physical appearance, sexual identity, racial identity, social deviants and economically disadvantaged. Additionally, each type of stigma is posited to affect social interactions in a distinct way. In example, those who are viewed as social deviants may be harassed or told they are unwelcome in

many areas of society, while those who are physically disabled may not be wholly rejected, but may experience the fact that non-disabled members of society feel a slight discomfort with their presence during social interactions (Jones et al., 1984).

Additionally, stigmatizing traits, no matter how they are categorized, can vary in terms of how visible and controllable they seem to others (Crocker et al., 1998; Dovidio, Major & Crocker, 2000). That is, some stigmatizing characteristics, such as sexual deviancy, suffering from HIV/AIDs or other diseases, have the potential to be hidden from wider society. Goffman (1963) explained that individuals that possess these tainted traits are able to "pass" as a part of the mainstream. However, passing in and of itself has been associated with other issues such as feeling like one is an imposter in society, and experiencing stress caused by the possibility that one will be "found out" (Goffman, 1963; Jones et al., 1984). In the same vein, stigmatizing traits also differ in terms of how controllable they seem. While some stigmatized characteristics seem unavoidable, such as bodily disfigurement or gender, others can be viewed as avoidable, such as suffering from addiction or possessing a criminal record. Research in this domain suggests that how much empathy versus antipathy is elicited depends on where the perceived stigmatized trait falls on each of the visibility and controllability spectrums, such that those with highly controllable and/or visible traits elicit negative affect, while those whose stigma is less visible or controllable are more likely to elicit sympathy (Crocker et al., 1998; Dovidio, Major & Crocker, 2002).

Conversely, many stigmatizing traits are not easily hidden or are impossible to hide when existing in any society. Those who are stigmatized and are unable to hide their stigma are chronically reminded of their tainted identity, and must find ways to cope with this rejection (Jones et al., 1984; Miller & Major, 2000). Despite the fact that the perceived trait may be

unavoidable, such as with ethnicity or gender, stigmatizing characteristics become associated with poor evaluations and stereotypes (Jones et al. 1984) and as such they become a basis for excluding or avoiding members of the stereotyped category.

Such stereotypes and evaluations are widely shared and well known across the society in which the group resides (Crocker et al. 1998; Steele 1997), and as such are difficult, if not impossible, to escape. Notably, the traits that might "taint" the individuals that possess them in one culture may not be of consequence in another (Crocker et al., 1998; Neuberg, Smith & Asher, 2000). For instance, while it is looked down upon in the United States for a person to marry a first or second cousin because such an act is considered sordid, it is of no consequence in countries where arranged nuptials are the norm. In the particular nation of the United States, such groups that are negatively stereotyped include racial minorities, women, members of the LGBTQ community, and individuals with disabilities. The adverse societal effects experienced by the stigmatized are not hard to identify. Recently, the Pew Research Center (2013) explored the experiences of members of the LGBTQ community and reported "… about four-in-ten (39%) say that at some point in their lives they were rejected by a family member or close friend because of their sexual orientation or gender identity; 30% say they have been physically attacked or threatened; 29% say they have been made to feel unwelcome in a place of worship; and 21% say they have been treated unfairly by an employer. About six-in-ten (58%) say they've been the target of slurs or jokes." Further, the Pew (2012) reported "…about a third of all blacks (35%) say they had been discriminated against or treated unfairly because of their race in the past year, as do 20% of Hispanics and 10% of whites." In sum, stigma exists in all cultures, stigmatized characteristics vary in terms of visibility, controllability and heritability, and what is considered deviant is informed by the norms of each particular culture. Further, it is well

documented that members of these groups are relatively disadvantaged in American society, both economically and interpersonally. Therefore, in order to understand stigma holistically and be able to ameliorate these adverse effects that have been shown to be a consequence of stigma (Crocker & Major, 1989), it is important to understand why it has been and remains a ubiquitous part of every culture.

Why stigma exists. Because stigma is a universal component across societies, research has sought to understand why stigma exists, because such inquiry may inform our understanding of how to prevent future stigma (Crocker et al., 1998; Dovidio, Major & Crocker, 2000). Even though each culture has been found to develop a unique set of norms that inform which characteristics are stigmatizing, it remains true that all cultures do stigmatize those who break those norms. This type of universality suggests that, perhaps branding others as unfit may have served a functional purpose. Several explanations have been posited and all suggest a very general answer: stigmatizing others is overall beneficial for perpetrators of that stigma.

Many researchers posit that stigmatizing outgroup members can enhance both individual and collective self-esteem (Wills, 1981; Tajfel & Turner, 1986; Dovidio, Major & Crocker, 2000). Wills (1981) explained that by stigmatizing others, we can engage in downward comparison, which inadvertently improves self-esteem. Downward social comparison is the tendency to look to another individual or group that is believed to be worse off in order to feel better about their self (Wills, 1981). Therefore, stigmatization can be considered a type of downward comparison, and, as such, comparing the self to stigmatized others allows one to feel better about his or her own status or group membership.

Additionally, some have argued that the process of stigmatizing others is evolutionarily based and that we stigmatize certain groups because in our evolutionary past doing so aided in

the survival of our species. Neuberg, Smith & Asher (2000) posit that because we are a social species that depend on belonging to groups in order to attain the resources necessary to live, stigmatization may have worked as a means to determine unfit group members. The fact that universally stigmatized groups exist and across cultures stigmatized groups include criminals, debilitated in some way, or come from different backgrounds lends support for this framework. Similarly, Cottrell and Neuberg (2005), proposed a sociofunctional, threat-based approach to the categorization of stigmatized groups which posits that stigma is applied as a function of the emotions and amount of threat elicited by the stigmatizing characteristic. The more threatening the stigmatizing characteristic is perceived to be (skin color, sexual orientation, religion, or deviant political views), the more stigmatized that trait, and by extension the individuals who possess that trait.

Consequences of stigma. Despite the different theories that have been posited as to why stigma exists, the fact still remains that stigmatization is ever present across societies. As such, it is important to understand the adverse consequences that takes place as a function of the stigmatization process. Therefore, much research has explored how stigmatization affects subsequent resource and opportunity acquisition. Stigmatized groups are considered an unacceptable deviation from mainstream society, and as a result receive, "…disproportionately poor interpersonal or economic outcomes relative to members of society at large…(Crocker & Major, 1989, p. 609)." According to Major (2006), stigma can limit access to a variety of essential societal resources, including quality employment, equal income, housing, and education**.** Scientific inquiry has shown that the experience of stigmatization in and of itself can be harmful for the individual. Thus, it is not simply the fact that stigmatized individuals do not have an equal chance at resources that makes it detrimental; the actual process of being denied

the right to be viewed as a whole, unspoiled person can also be harmful to the self. Research in this domain has found the experience of stigmatization can taint the subsequent emotions, behaviors and cognitions of stigma targets. For instance, stigma has been associated with poor mental and physical health (Leary, Tambor, Terdal & Downs, 1995), increased anxiety (R. Clark et al., 1999), and misinterpretation of evaluative feedback (Crocker et al., 1991). Additionally, stigma has been found to hinder motivation (Crocker et al., 1989) and task performance (Steel, 1997) as well as causes many groups to reject the stigmatized domains of performance, also known psychological disengagement (Major & Schmader, 1998).

Schmader et al. (2001) described psychological disengagement as "a defensive detachment of self-esteem from one's outcomes in a domain such that self-esteem is not contingent upon one's successes or failures in that domain (p. 94)." While this process may work to protect one from having to face stigmatizing situations, it causes certain groups to be virtually nonexistent in more lucrative fields. For instance, black males have been found to devalue academic domains more so than their white counterparts, and therefore have experienced more difficulty advancing in these areas. Previous research exploring the psychological disengagement of black males suggests that this may be due to the chronically available and widely known negative stereotypes that exist about their performance in educational settings (Steele, 1988; Steele, 1997; Strambler & Weinstein, 2010). The same pattern has been shown for other ethnic minorities (Steele, Spencer & Aronson, 2002; Strambler & Weinstein, 2010), as well as women concerning STEM settings and fields (Spencer, Steele & Quinn, 1999). Notably, these trends have been found to start as early as elementary school (Strambler & Weinstein, 2010). Therefore, the experience of stigma hinders task performance and can impede goal development, and as a

result systematically dissuades certain groups from careers in which they would accrue more capital.

Coping with stigma. Further, not only do stigmatized individuals have limited access to opportunities, but because this limitation is based upon a perceived deviation from a culturally prized standard, any interaction with a member of mainstream society could potentially lead to rejection (Crocker & Major, 1989; Major & O'Brien, 2005)**.** The experience of stigma, therefore, is adverse and difficult to avoid. In order to function in society, stigmatized individuals must engage in a variety of coping endeavors in order to protect the self and maintain self-esteem (Miller & Major, 2000; Major & Schamder, 1998). One such strategy is referred to as self-affirmation. In his paper describing self-affirmation, Claude Steele (1988) explained that, because maintaining self-esteem is fundamental for wellbeing, we reflect on values that are personally relevant to us and distance the self from things that are not useful to us in order to evade feelings of distress when threatened by prejudice. For instance, before engaging in a challenging task, such as taking a test or interviewing for a job, one might think about the things in which he or she is proficient, as well as meditate on how the task is not at all representative of who he or she is as a person. Affirming the self has been empirically shown to preserve one's sense of self by buffering against the adverse effects of poor performance. For instance, Cook and his colleagues (2012) found that earning a lower grade did not influence sense of belonging to their school for self-affirmed minority students while it diminished one's sense belongingness among those who did not affirm the self.

Another way in which individuals cope with the experience of stigma is by attributing poor evaluative feedback to prejudice in order to preserve self-esteem. Such ascriptions are likely to take place when victims of stigma experience attributional ambiguity (Crocker & Major, 1989;

Crocker et al., 1991). Attributional Ambiguity is a situation wherein members of negatively stereotyped groups may find feedback or others' behavior towards them difficult to understand. This is caused by the fact that stigmatized individuals can never be completely certain that the content of the feedback reflects actual performance quality, as opposed to the evaluator's prejudice (Crocker et al., 1991). This confusion can lead the stigmatized to feel uncertainty about whether negative outcomes are due to discrimination or their actual performance. One consequence of this process is the fact that stigmatized persons often interpret poor feedback as a form of prejudice, because doing so helps protects one's self-esteem. Additionally, attributional ambiguity might cause individuals to question positive feedback; one may see this as sympathy instead of as the result of their ability. Therefore, because of the ambiguity surrounding the legitimacy of the feedback given, stigmatized individuals often cannot utilize performance evaluations effectively, which has been found to inhibit future improvement.

Previous research on attributional ambiguity has shown that receiving negative feedback from a seemingly prejudiced evaluator produces less negative affect in stigmatized individuals relative to those who received negative feedback from an ostensibly nonprejudiced evaluator (Crocker et al., 1991), suggesting that being able to attribute poor appraisals to prejudicial thinking can preserve self-esteem. However, the same researchers found that black students who received positive feedback from a white student who could see them were more likely to view the feedback as a form of pity relative to those who thought that the evaluator could not see them. This suggests that if an individual thinks that the evaluator knows of his or her stigmatizing trait, the feedback is likely to be interpreted as a result of that trait, be it as a form of prejudice or pity. Further, attributing positive feedback as a form of mercy has been linked to a decrease in one's self-esteem (Crocker et al., 1991). In sum, viewing evaluative information as a

form of prejudice has been shown to work as a double edged sword; attributing negative feedback to discrimination preserves one's sense of self, while inhibiting improvement. Additionally, attributing positive feedback to prejudicial thinking has been found to damage one's sense of self. In either instance, stigmatized individuals are unable to know how to properly attribute feedback and therefore cannot utilized evaluations effectively.

An additional possible coping strategy, and the focus of the current research, may include seeing the self in a different way. Because stigmatized individuals are forced to live in a society where they are dehumanized and rejected, they are also hindered from having the same opportunities as the mainstream. Further, because they have very little power to change this, these individuals may be more likely to align the self with close others. Therefore, stigmatized individuals become more relational as a way to seek social support in order to cope.

Although the proposed relationship is similar to previous research which posits that the process of stigmatization will make it easier for the members of any given negatively stereotyped group to identify with one another (Crocker & Major, 1989), the current idea is distinct. While being able to identify or relate with fellow group members is related to interdependence, doing so does not mean the person in question defines the self in terms of others. That is, just because an individual identifies strongly with his or her stigmatized group does not mean that that person is an overall interdependent person. I posit that stigmatized individuals will not only feel closer to those who share that particular stigma (Crocker & Major, 1989), they will also identify more with the other groups or relationships in which they take part, which include but certainly are not limited to family members, teammates, friends, or roommates (even if those individuals or groups do not experience the same stigma). Therefore, the current research differs in that I am positing that the stigma experience causes the stigmatized individuals to experience a change in

their self-view, such that an individual who is a target of discrimination will also be more inclined to see the self as more connected with close others, who may or may not be a part of that particular stigmatized group.

Cultural Relationality

How we view the self has been found to affect many aspects of our lives, including how we think, how we feel, what motivates us, and what we find important (Markus & Kitayama, 1991). Self-construals differ in terms of how individuals define and make meaning of who they are (Markus & Kitayama, 1991; Cross et al., 2011). Therefore, the way we construe, or view, the self affects subsequent goal formation and acquisition. Previous research exploring self-construals have shown that there are a variety of ways in which one can view the self, with each construct differing both who is included in one's self-view, and to what extent.

Variations in self-construal. In their pivotal paper describing cross cultural differences in defining the self, Markus and Kitayama (1991) explained that the focal difference between the East and the West is the degree in which each culture includes close others in their self-definition. Research in this domain suggests that those in the East are more likely to include others when thinking about the self, while in the West individuals emphasize how they are distinct from others (Markus & Kitayama, 1991). Such construals are referred to as interdependent and independent, respectively. Those who are independent emphasize internal characteristics that demonstrate uniqueness, while those who are more interdependent see the self as fundamentally connected to close others (Markus & Kitayama, 1991; Cross et al., 2011). For instance, those who are primarily independent are likely to use internal traits (e.g. I am smart, honest, funny) and express distinctiveness (e.g. I am a great basketball player) when describing the self. In contrast, those who see the self in terms of others have been found to

describe the self in terms of relationships or group membership (e.g. I am a sister, teammate, roommate) and try to avoid standing out in order to maintain group harmony (Markus & Kitayama, 1991; Sedikides, Gaertner & Toguchi, 2003).

According to another prominent self researcher, Triandis (1989), individuals also have the capacity to see the self as private, public or collective, with each type eliciting different effects on subsequent thought and behavior. The private self, which parallels the independent self-view, is concerned with individual traits, states, or behaviors of the person (e.g., "I am extroverted," "I am smart, honest or funny"), while the public self is more interested in ideas about what the generalized other thinks about our private self. ("People think I am smart," "People think I am funny.") Lastly, Triandis (1989) described the collective self, which is a self-view that is concerned with how those in one's ingroup feels about the private self (e.g., family, coworkers, tribe, scientific society). For instance, some cognitions associated with the collective self include "My family thinks I am smart" or "My classmates believe I am funny (Triandis, 1989)."

Finally, Triandis & Gelfand (1998) posited that both independence and interdependence could both be dichotomized as follows: vertical collectivism, vertical individualism, horizontal collectivism, and horizontal individualism. That is, there is another dimension that can further characterize one's self-view; the vertical self sees power as a hierarchical characteristic while those who are horizontally inclined prefer power to be equal among group members. Therefore, vertical collectivism is defined as seeing the self as a part of a group and as such accepting the subsequent inequalities that come with being a part of that group, while vertical individualism represents those who see themselves as fully autonomous beings as well as recognize and accept the inequality that exists among individuals. Additionally, horizontal collectivism requires that

the individual sees the self as part of the collective and feels that all individuals within the group are equal, while horizontal individualism is defined as seeing the self as fully autonomous, but believing that equality amongst individuals is ideal. In sum, there exists a multitude of ways to view the self, each of which is associated with its own set of functions and outcomes. One such function that I will discuss is how our own self-view affects how we derive our sense of self-esteem.

Self-esteem as a function of self-construal. Because how one sees the self often shapes what is valued in life, these diverging self-views often have important implications for self-esteem (Luhtanen & Crocker, 1992). That is, how one defines the self affects how we maintain a positive image of ourselves. Previous research has demonstrated that, while collective and individual self-esteem are related, these two concepts are only moderately correlated, suggesting that measuring each type of self-esteem will allow for a more holistic profile of what is important to each individual (Luhtanen & Crocker, 1992). For those who are independently oriented, self-worth is likely be derived by standing out (Markus & Kitayama, 1991; Cross et al., 2011). For example, those who are independent are likely to feel an increase in self-esteem if they have done better than classmates on an exam or are praised for doing exceptional work. In contrast, interdependent individuals are likely to focus on maintaining group harmony in order to maintain self- worth; examples include taking a job to help with family expenses, or taking time from studying for one's own exam to help a friend with homework (Sedikides, Gaertner & Toguchi, 2003). Even though these researchers found that helping collective group allowed individuals to enhance their individual sense of self-worth, the point still stands that their self-view predicted how they would augment their self- esteem such that those who were more interdependent choose to help their group as a whole.

Moreover, Gabriel, Gardner and Lee (1999) proposed that interdependence can be dissected further into relational and collective interdependence. For those who are relationally interdependent, one's self-view is defined in terms of close relationships, with self-esteem as being derived from maintaining close relationships with specific others. For instance, someone who is relationally interdependent might feel better about his or herself when helping out a close friend or family member in some way. In contrast, collective interdependence occurs when an individual defines the self in terms of their group memberships. For individuals who are more collectively minded, self-esteem is enhanced when they successfully adhere to the norms of their group, and is derived from the status of the in-group relative to different outgroups, as well as the individual self (Turner et al., 1987; Gaertner et al., 2012).

In sum, psychological research has shown that there are many ways to see the self and with each vantage point informing how one derives his or her sense of self-worth. Further, it is important to note that, while different cultures have propensities to define the self in a particular way (e.g. independent, relational, etc.), this does not mean one's self-view is static. On the contrary, research exploring how to prime the many different types of self-construal suggest that we all have the propensity to include and exclude close others to various degrees, depending on the context of the situation (Oyserman & Lee, 2008). For instance, as an American citizen, Jill might be inclined to view the self as an autonomous, distinctive individual most of the time, but when found in a situation that elicits a more collective sense of self, such as at sports practice, her self-definition may shift accordingly. Therefore, how we see the self is malleable and is often shaped by which self-view is most adaptive in both the immediate and overall social context.

Causes of self-construals. Previous research on the formation of particular self-views has suggested that there are multiple factors that affect how individuals perceive and define the

self. As stated previously, cross-cultural psychology has shown that how we develop, shape and define the self is very much affected by the culture in which we find ourselves (Markus & Kitayama, 1991). An individual living in the West is much more likely to identify as an independent, autonomous agent, because he or she has been shown, either implicitly or explicitly, that the way to see the self is as a unique entity that should put the needs of the self ahead of that of the group. This tendency is especially true in the United States. Equally, an individual from the East will be most likely taught that group harmony is more important than individual ambitions, and will behave accordingly. Therefore, the degree to which we include or exclude others in our self-definition is very much dependent on the norms adapted by the culture we find ourselves in. Stated succinctly: culture shapes self-construal.

Another related factor that has been shown to shape subsequent self-views is one's residential mobility (Oishi, 2010). Work exploring the relationship between self-construal and resident mobility has shown that, as the number of moves from one neighborhood to another increases, so does one's propensity to see the self in terms of the individual, rather than the collective (Oishi, Lun, & Sherman, 2007). Such findings demonstrate how the shift in one's self-construal based upon what the situation dictates can be functional; if an individual is often moving into a new neighborhood quite often, adapting a more individualistic sense of self would be practical in that he or she would not have to continue to redefine the self as a function of the new social circles in which he or she finds his or herself. Taking these findings together, it becomes clear that one's self-definition is a social tool used to aid social interaction, and further, self-construals are formed in order to allow us to better function in our typical and/or immediate social environment. As such, different environments can elicit different construals, and have been found to shape subsequent emotion, cognition, and goal orientation.

Self- construal and outcomes for affect, cognition and motivation. Because self-construal is malleable, this has allowed for researchers to explore the cognitive, emotional and behavioral consequences of each type of construal through the use of various methodologies. Priming manipulations used in the lab have been found to make the many types of self-construals temporarily available in everyone, and are posited to emulate how the situation affects changes in self-view (Cross et al., 2010). Brewer and Gardner (1996) created such a manipulation in which participants read vignettes and were asked to circle either independent terms (I, me, etc.), interdependent terms (we, our, etc.), or neutral terms (they, them); those who were primed with interdependent terms endorsed more group values than those who were primed with independence. Further, Wang and Ross (2005) found that, when European Americans and Asian or Asian Americans were primed with either interdependence or independence and subsequently asked to recall their earliest memories, those primed with independence tended to recall more individual-focused memories, while those primed with interdependence described more group-focused memories. Such findings suggest that while we all have a predominate view of the self that is shaped by the culture in which we live, how we see the self can shift depending on where we are, who we are around, and what the situation dictates.

Self-construal and cognition. Before psychological studies determined that there are many ways to selectively include or exclude others in one's self definition, research concerning the self had theorized that how we process information, think about the world, and feel emotion is very much shaped by who we perceive ourselves to be. In terms of cognition, Markus and Kitayama (1991) posited that individuals who are more interdependent should be prone to listen carefully to close others in order to understand the overall context of the interaction. Therefore, highly interdependent individuals would be expected to have detailed cognitive representations

of others. For instance, people from collectivist countries have been found to report more social, or group-oriented self-descriptions on average than do those from more independent cultures (Cross & Madson, 1997; Cross et al., 2010). Additionally, Shweder and Bourne (1984) asked Indian and American participants to describe several relationships that they had with close others and found that the portrayals provided by the Indians were more holistic and relational relative to those of from the United States (Markus & Kitayama, 1991).

Self-Construal and affect. While research on how one's self-view affects cognition has burgeoned in the past three decades, inquiry into how affect is shaped by self-construal is relatively scarce. The work that has been done has found that independence has been associated with greater happiness (Elliot & Coker, 2008) and decreased social anxiety (Hardin et al., 2006), while interdependence is related to increased social anxiety (Hardin et al., 2006). Theoretically this makes sense; if one's view of the self is inclusive of others and is related to a more holistic view of social interactions, we would expect that such individuals might experience more anxiety relative to those whose sense of self is not as inclusive because having a more comprehensive cerebral map of social interactions is cognitively costly, and may illicit stress. However, some studies show that interdependence might better forecast social anxiety levels than independence specifically for European Americans (Xie et al., 2008), suggesting that culture plays at least some part in how self-construals affect emotion.

Self-Construal and Motivation. Lastly, research on how self- construal shapes motivation and self- control has shown that how you see the self can affect what an individual is willing to do and why. Markus and Kitayama (1991) first hypothesized that those with a more interdependent view of the self would be likely to have more social motives than do those who identify as more independent. Such a position is understandable considering that those who are

more interdependent would have more social connections that implicate the self than do those who are less interdependent. Research in this domain has supported this idea; Van Horen and collegues (2008) primed either independence or interdependence in participants and found that those who had been exposed to interdependence found social goals to be more important than personal goals, while those who were primed with independence found personal goals to be more important. Additionally, in terms of what motivates individuals in each culture to take action has also been found to differ as a function of self-constural. According to Kitayama and Uchida (2005), for those from the West who are predominately independent, personal goals and abilities are what motivates these individuals to take action, whereas those in the East who are predominately interdependent, social goals, desires, and the wants and needs of close others are the main sources of motivation.

In sum, self-construals have been found to affect subsequent thoughts, feelings and goal development. Notably, those who are more interdependent are found to have cognitions and aims that promote the whole, as well as the individual, relative to those who are independent, who are only concerned with the individual self.

Intracultural self-construal. Although self-construals were originally offered to explain cross-cultural differences in cognition, emotion, and motivation (see Markus & Kitayama, 1991), their relevance in revealing differences within our culture has been a central aim behind current studies (see Cross et al., 2011). Taken with the prolific research that has revealed that one's self-view is directly related to the subsequent cognitions, emotions and goals that each individual develops, it is not difficult to see how intracultural differences in self-construal may perpetuate existing inequalities. That is, previous research has shown that those who are highly and chronically interdependent are likely to attend to the wants and need of close others, while those

who are more independent tend to be concerned with personal successes. Therefore, within the highly independent nation of the United States, those who are relationally minded are prone to consider the wants and needs of close others, relative to individuals with an independent self-construal. This difference in goal development may give those who are concerned solely with the independent self an advantage in seizing opportunities and resources, because they are not restrained by the needs of the group.

Previous research has shown that certain relational subpopulations exist within this country. For instance, Gabriel and Gardner (1999) found gender differences in self-construal, such that, after reading the same vignette, women were more likely to recall relational emotional events that took place in the text, while men were more likely to recall collective emotional events. Not only do these results suggest that there is a systematic gender difference in self-construal, they also demonstrate how one's self construal can affect subsequent cognitive biases. For instance, when seeking the same job, a father may not be as concerned about leaving the children to earn money and be motivated by his collective self to provide for the family as a whole, while a mother may be more concerned with the fact that the children might not fare well without her near.

Further, when found in a situation in which they are the only one of their color completing a group task with other white participants, African American men and women were found to be more relationally minded than their white counterparts, and this had negative implications for task performance (Sekaquaptewa, Waldman & Thompson, 2007). It is not difficult to appreciate how one's self-construal can affect subsequent resource and opportunity attainment in the real world. For example, when deciding where to go to college, a black, typically interdependent, male might decide to go to the local community college so he can help

his family earn money while he studies, while a white, independent male, who is not as likely to use the needs of the group to inform his decision, might decide to go to a more competitive school across the country. Therefore, these divergent decisions that are likely to in some way stem from an individual's self-view can affect future opportunities for each individual. Further, because self-construal has been found to vary systematically across different subgroups in the United States, this may be at least one contributor to the inequalities in resource attainment.

Consequences of self-construal. Of particular interest, greater cultural relationality has been found to hinder achievement in contexts where independence is prized, such as universities. Stephens, Waldman, and Thompson (2012) found that, when in a room full of white people, black men and women were more likely view the self in terms of the collective, as well as suspect that their performance would be generalized to their race, and as a result were more likely to experience greater performance apprehension. This is understandably disheartening for three reasons. First, many non-white students learn in classrooms where they are largely outnumbered by their white classmates. By extension, we would expect that these students to experience performance apprehension, thereby negatively affecting their G.P.A. and subsequent opportunity and resources acquisition.

Secondly, especially since our lecture based teaching style in most universities has been developed by mainstream members of society (Steele, 1995), it may work best for individuals who are more independent and less for those who see the self in terms of others. Therefore, this one track teaching system may perpetuate the learning disengagement seen in so many stigmatized groups. For instance, a black student may not do well in standardized testing, because he was not taught in a way that best suits his or her collective sense of self, which may increase the likelihood of disengagement from academia as a whole, thereby systematically

lowering the capital he could potentially accrue. This is especially likely considering that most classrooms are predominately white, and being the only person not sharing in this characteristic seems to amplify one's level of interdependence.

Finally, since the United States is a nation that promotes individualistic thinking, not viewing the self as unique and autonomous may put one at a disadvantage. As stated before, being interdependent often leads to the development of cognitive maps and goals that include others, which can utilizes more cognitive resources than if one was only concerned with the singular self. If being relational in a classroom where individualism reigns supreme leads to poor outcomes, logic dictates that outcomes would be much more deleterious in a nation that thrives on independence. Therefore, being interdependent in a predominately independent society may hinder such individuals from acquiring resources, relative to the more individualistic mainstream. As a result, if the interdependent self becomes salient as a response to experiencing social stigma, understanding this relationship will allow for the development for more effective remediation strategies against societal and resource inequalities.

Relationality as a Response to Stigma

At present, though the literature concerning the intracultural difference in relationality has shown that systematic differences in how we construe the self do exist, to my knowledge there has been no psychological research exploring *why* this might be the case. Previous research in this area has implied that how we see the self is informed by the society that we live as well as factors such as residential mobility. Until now it has been suggested that self-construal is a socio-cultural phenomenon that is learned from close others; if a person who is predominately interdependent has children, it is very likely that the next generation will also learn to include others as a part of the self. However, I propose that the level of one's relational or interdependent

self-view may be, in part, caused by the experience of being socially stigmatized. That is, I expect that it is the strength of one's relational identity is driven by the need to cope in the face of stigmatization.

Stigmatized individuals deprived of material resources and social support from wider society may be forced to seek support through close others, thereby developing a relational identity in the process. Further, possessing a stigmatizing trait can prevent the development of new friendships (Jones et al., 1984), and can lead to social isolation such that the stigmatized individual reduces his or her social network to exclude the mainstream as a way to protect the self from the scrutiny of the mainstream. Though to date, this has only been shown for individuals who suffer from HIV/AIDS and experience stigma as a result (Galvan et al., 2008). As stated previously, there are many ways in which individuals who are negatively stereotyped cope with their situation. Major and Crocker (1989) posited that those who chronically face discrimination don't necessarily experience poor long-term self-esteem because they construe the situation in a way that protects the self. Such strategies discussed include interpreting negative evaluative feedback as a form of discrimination as well as disengaging from domains in which stigmatized groups historically were denied entrance by the mainstream. In the same vein, I argue that shifting the view of the self to become more relational when faced with prejudice could also serve as a buffer against stigma.

Developing a more interdependent identity may assuage the negative effects of stigma in several ways. First, previous research has shown that we are very social beings that depend on others for survival and the quality of relationships are very much connected to our sense of psychological wellbeing. According to sociometer theory, self-esteem works as a psychological meter that monitors the quality of one's relationships with others such that, if we feel accepted

by close others, we experience a boost in our self-esteem whereas rejection leads to a feeling of despair (Leary, 1999). Therefore, those who continually experience rejection from society at large because they are perceived as “less than” may look to close others that will not reject them in order to enhance self-esteem. Second, stigmatized groups may become more relational as a means to acquire resources. Because stigmatized groups often do not have access to the same resources and opportunities as those in the mainstream, viewing the self in terms of close others may allow them to pool their resources which may, in turn, enhance self-esteem.

Previous research regarding stigma and identity suggests that low-status individuals are more likely to identify with their low-status group, relative to high-status individuals (Mullen, Brown & Smith, 1992). Consistent with the stigma-relationality hypothesis posited here, Brewer (1979) found that groups lower in social status were more likely to engage in ingroup bias than higher status group members. According to Mullen, Brown and Smith (1992), this is consistent with social identity theory, which posits that lower status groups have a stronger need to enhance self-esteem, and in order to do so, low status individuals develop a stronger ingroup bias. While past research concerning social identity theory is related to the current research question, my idea differs in that I am interested in exploring whether low-status individuals are more likely to define the self in terms of close others, which is distinct from developing an ingroup bias.

While it has been established that stigmatized individuals identify more with their stigmatized group (Crocker & Major, 1989), the current research seeks to explore the possibility that the experience of stigma might make individuals more likely to define the self in terms of any group with which they identify. If stigmatized groups are more interdependent because they are forced to deal with chronic discrimination and devaluation, past research concerning cultural relationality would suggest that these individuals would be likely cultivate goals that are

inclusive of one's relationships (Markus & Kitayama, 1991). As a result, the aims of stigmatized individuals would be systematically different of those in the mainstream; the goals of those who face prejudice may be more likely to promote the well-being of his or her groups or relationships as a whole. This is especially problematic considering the United States is a place where independence is celebrated. The proposed research seeks to demonstrate that being stigmatized can increase how close to others one feels, which can further affect the resource gap between groups (see figure 1). If stigma did account, even partially, for the emergence of a more interdependent, relational self-view, this can enhance our understanding of why so many subgroups (i.e. African Americans, women, those of low SES) are likely more interdependent relative to members of the mainstream.

Self-View as a Function of Witnessing Stigma. Furthermore, I suspect that those who witness stigma will also experience a shift in self-view. That is, it is possible that those who are not the current target of stigma, but are aware of the stigmatization of others, will experience a change in how interdependent they feel. However, I expect that the shift will depend on the status of the individual who is aware of a stigmatized other such that, if an individual shares that trait, he or she will become more relational, whereas if the stigmatized identity of the targeted other is not shared, I suspect the witness will become less relational. Again, this could work as way to preserve one's sense of self-esteem. It is possible being exposed to the systematic discrimination of others could be threatening to one's sense of self, especially if those stigmatized others are not relatable to us. Therefore, becoming less relational may make it easier to distance the self from the maladaptive effects that comes with prejudice, which may inadvertently preserve one's self-esteem.

While I anticipate a decrease in interdependence for members of the mainstream when witnessing discrimination, I expect the inverse to be true for those who share that devalued trait, but are not the target of the stigma in the moment. For instance, a woman who is not currently experiencing discrimination on the basis of gender, but witnesses another woman being stigmatized for being a woman, may identify with that situation and understand that the similar victim may be in need of support. In this sense, it may not enhance self-esteem to distance the self from that similar other; doing so may actually cause a decrease in self-esteem. That is, if one were to distance the self from a similar, stigmatized other, this may allow the individual to realize that when he or she is eventually found in the same predicament, support will not be available. Therefore, I expect that a stigmatized individual who is witnessing the discrimination of a group member may become more relational as a result as a way to cope with the knowledge that they could easily be that victim as well.

In sum, I posit that a shift in how the self is construed may be another way in which those who face discrimination can protect the self from such experiences. Stigmatized individuals are deprived of material resources and social support from wider society, and therefore seek support through close others, thereby developing a relational identity in the process. Similarly, I would expect that such a change in one's self-definition would not be necessary for those in the mainstream because they do not share these experiences. This is not to say those who are a part of the mainstream would not experience a change in one's self-definition; on the contrary, I expect that these individuals would become less relational when exposed to experiences of stigmatized groups because such a change would also work to protect the self. That is, being made aware that others face discrimination may cause those in the mainstream to not think about themselves in terms of others in order to distance the self from those who are the perpetrators of

the stigma (e.g. other mainstream members) or from those close others that could be victims of stigma (e.g. a mother).

The following studies seek to test the idea that not only does the experience of stigma cause individuals to identify with the group that is the target of stigmatization, but it causes individuals to identify more so with the groups they are a part of in general. That is, because females are often the victims of stigmatization, not only will they feel closer to other women (those who understand the plight of being female) and define the self in terms of their gender, but they will also identify more with the other groups or relationships in which they take part, which include but certainly not limited to family members, teammates, friends, or roommates (even if the members of these groups may not experience the same stigma). *In all, I hypothesize that the experience of stigmatization, or being confronted with the discrimination of another individual who shares that stigmatized status, will increase one's relationality*. *Moreover, I expect that being confronted with the discrimination of nongroup members will cause a decrease in one's relational self.*

Overview of Studies

The aim of the current studies was to examine the influence of stigmatization on cultural relationality. Drawing on the research described above, I predict stigma in and of itself is related to and in fact, causes higher relationality. Said differently, I expect that individuals who identify as stigmatized will also have a high sense of relationality (Studies 1 a and b).

Moreover, I predict that when stigmatization is primed, this will affect one's level of cultural relationality, such that those who are asked to think about the stigma of another individual who does shares the participant's stigmatized status who has been discriminated against (Study 2 and 3) or the participant's own experience with stigma (Study 3) will score

higher on the relationality scales than those who do not. Further, I expect that males who read about women who have been discriminated against on the basis of their gender (Study 2) will score lower on the relationality scales relative to those who did not read about stigmatized females.

Chapter 2. Method

Study 1a

Method

Participants

One hundred forty-two undergraduate students at a large Southeastern university participated in exchange for partial course credit (96 female, 45 male, 1 "other"). The average participant age was 19.03 years (SD = 0.45). Participants reported ethnicity as Caucasian (74.1%), African-American (10.5%), Asian-American (3.5%), Arab/Arab-American (1.4%), Latino/Hispanic (2.8%) and "other" (7.7%).

Materials and Procedure

This study was conducted in an online setting. Within the context of the broader survey, participants completed the following four scales of interest and a demographics questionnaire, all of which were completed on a computer in counterbalanced order. The first three scales assessed self-construal, one of which was the Singelis Self-Construal scale (Singelis, 1994; see appendix F). This scale measured the strength of individuals' self-construals as distinct/independent from others and connected/interdependent with others. Respondents indicated their agreement to each item using a 5-point Likert-style scale from 1 (*strongly disagree*) to 5 (*strongly agree*). Example items include, "I enjoy being unique and different from others in many respects" (independence) and "It is important for me to maintain harmony within groups I belong to" (interdependence). Separate independent and interdependent subscales, which included 12 items each, were created.

Another scale that was used to measure self-construal was the Individualism and Collectivism scale (Triandis & Gelfand, 1998; see appendix E). This scale is a 16-item measure that is comprised of four dimensions of collectivism and individualism which are as follows:

Vertical Collectivism, Vertical Individualism, Horizontal Collectivism, and Horizontal Individualism. Each subscale is comprised of four questions which are answered on a 5-point scale, ranging from 1 (*never or definitely no*) to 5 (*always or definitely yes*). Example items include "I'd rather depend on myself than others" (Horizontal Individualism), "When another person does better than I do, I get tense and aroused." (Vertical Individualism), "To me, pleasure is spending time with others." (Horizontal Collectivism), and "Family members should stick together, no matter what sacrifices are required." (Vertical Collectivism). Furthermore, this scale can also be used to measure individualism and collectivism without the horizontal or vertical dimensions. In order to do so, the eight collectivism and eight individualism items were collapsed to create a collectivism and individualism subscale.

The last scale concerning cultural relationality that was used was the Relational Interdependence Self-Construal Scale (RISC, Cross & Madson, 1997; see appendix G). This 11-item scale was designed to measure how important dyadic relationships are to the responding individual. Participants responded to each item on a using a 5-point Likert-style scale from 1 (*strongly disagree*) to 5 (*strongly agree*). Example items include "My close relationships are an important reflection of who I am" and "Overall, my close relationships have very little to do with how I feel about myself."

The last scale of interest was the Stigmatization Scale (Harvey, 2001; see appendix C) which utilized 18-items to measure how stigmatized the individual felt. More specifically, this scale was designed to see how accepted the participant felt within mainstream society. Participants responded to each item on a using a 5-point Likert-style scale from 1 (*strongly disagree*) to 5 (*strongly agree*). Example items include "I feel that society views me as an inferior being" and "I feel that I have to work harder than members of mainstream society in

order to overcome society's prejudice toward me." After completing the scales of interest, participants then filled out a demographic questionnaire (see appendix I), were debriefed, and were dismissed from the study website. It was expected that one's stigma score would be positively correlated with relationality for females, while the inverse relationship was expected to emerge for males.

Results and Discussion

Descriptive statistics and reliability estimates for the self-construal subscales and the various stigmatization indices are reported in Table 1. Correlation coefficients among all of the measures across genders can be found in tables 2-4. The data does support the idea that stigmatization is related to relationality, although in the opposite of the hypothesized direction. It was expected that those who scored highly on the stigmatization scale would also score highly on the interdependence scales, however it was found that across most of the relationality measures, higher stigma levels were negatively associated with relationality. That is, the higher one's stigma score, the less they reported identifying with others. Because all three of the self-construal scales measure slightly different aspects of self, I decided to create a composite relationality outcome variable using the mean of all of the interdependence items. In order to do so, I took the interdependence subscale means from each questionnaire, then calculated the z-score of each mean. Then I calculated the mean of all three z-scores for the RISC, Singelis and Triandis scales. When using this composite relationality variable, the relationship between relationality and stigmatization was significant, r (140) = -.11, p = .048.

Because there many more female participants relative to males, I tested the relationship between stigmatization, relationality and gender by using linear regression in order to see if gender interacted with stigma in terms of relationality scores. Using a composite relationality

variable as the outcome variable, it was found that gender did not significantly interact with stigma, t (141) = 0.11, p = .914. To see the interaction terms across all individual interdependence scales, please see table 5.

Study 1 provides evidence that social stigma and cultural relationality are related to one another, although the relationship is the opposite of what was initially hypothesized. One possibility for these results is the fact that the stigmatization scale (Harvey, 2001) may not have been measuring social stigmatization, due to the fact that many of the items did not bring to mind how the self is treated as a function of group status. For instance, the third item which states "I feel that society holds a negative attitude toward me," may have been better representative of the stigmatized self if the sentence ended in "…holds a negative attitude toward one of the groups to which I belong." A similar argument could be made for 19 of the 24 items. Therefore, another study was conducted, in which the stigmatization scale was revised to better measure the feeling of being derogated because of group membership, rather than because of individual characteristics.

Study 1b

Method

Participants

One hundred fifty-eight undergraduate students at a large Southern university participated in exchange for partial course credit (82 female, 74 male, 2 other). The average participant age was 19.58 years (SD = 0.42). Participants reported ethnicity as Caucasian (81.6%), African-American (6.3%), Asian-American (5.1%), Latino/Hispanic (1.9%) and "other" (5.1%).

Materials and Procedure

Again, participants completed all of the same measures that were described in study 1a, including the original stigmatization scale. All the reliability coefficients of these scales can be found in Table 1. In addition, I added a new stigmatization scale that was modeled after the original (Harvey, 2001) with the only addition was making each item have the participant respond to how much society may view them as flawed because of their *group membership* (see appendix D). For instance, item one was changed from "I'm viewed negatively by mainstream society," to "[o]ne of the groups that I identify with (race, gender, sexual orientation, etc.) is viewed negatively by mainstream society." Another item which stated "I am generally treated as an object, rather than as a person", was altered to say "[m]embers of my group are generally treated as objects, rather than as people." It was expected that changing the scale to emphasize one's poor treatment by society because of his or her group membership would better capture the construct of social stigma, and therefore allowing for the exploration of whether or not the previous study's results were due to a lack of measure validation.

Results and Discussion

Descriptive statistics and reliability estimates for the self-construal subscales and the various stigmatization indices are reported in Table 1. Correlation coefficients among all of the measures across gender can be found in tables 7-9. Further, the original stigma scale (Harvey, 2001) was highly correlated with the revised scale, $r\ (156) = .60$, $p = .000$, suggesting that the rationale that the original stigmatization scale was not capturing stigma may not have been the case (see table 6).

Again, the results do support the idea that stigmatization is related to relationality, although in the opposite direction of what was hypothesized. I expected that those who scored

highly on the on the new stigmatization scale would also score highly on the interdependence scales. Bivariate correlations replicated the findings from study 1 a; those who scored highly on the original and revised stigmatization scale, scored significantly lower across several of the interdependence measures (see table 6). However, it is worth noting that there was not a significant relationship between the composite relationality variable, which was calculated by finding the mean of the z-scores from all of the interdependence subscales, and the revised stigma scale, r (156) = -.13, p = .112, though the relationship was marginal for the original scale, r (156) = - .14, p = .082.

Further, I tested the relationship between stigmatization, relationality and gender by using linear regression in order to see if gender interacted with stigma in terms of relationality scores. Using the composite relationality variable as the outcome variable, it was found that gender did not significantly interact with stigma, t (157) = 1.19, p = .315. To see the interaction terms across all individual interdependence scales, please see table 10.

The aggregate results of Study 1 suggest that cultural relationality and stigma are related to one another in a systematic way, although in a much different way than was anticipated. More specifically, it was found that the more stigmatized an individual feels, the less they see themselves as being culturally relational. However, while study 1 a did show a significant relationship between stigma and the relationality composite variable, in the follow up study this relationship did not reach significance, making it challenging to have confidence that this effect did not happen by chance. Further, because the first study was strictly correlational, it is difficult to understand what these results mean, beyond simple speculation. Therefore, in the next study, stigmatization was manipulated and subsequent relationality was measured in order to better understand the relationship between stigma and relationality.

Study 2

Method

Participants

One hundred thirty-five undergraduate students at a large Southern university participated in exchange for partial course credit (98 female, 37 male, 2 other). The average participant age was 18.71 years (SD = 0.45). Participants reported ethnicity as Caucasian (86.9%), African-American (6.3%), Asian-American (5.8%), Latino/Hispanic (1.5%) and "other" (1.4%).

Materials and Procedure

This experiment was conducted in an online setting. Once participants were logged on and gave consent, they were brought to a screen in which they read a list of scenarios. We utilized a stigma consciousness prime that has been used previously in other stigma research (Pinel, 1999). In the control condition, participants read a series of five vignettes in which the person they were reading about had a bad experience that could not at all be attributed to their group membership. The participants are then asked to tell us whether or not they have ever been in a similar situation, or have heard about or seen others deal with being in a similar situation. For instance, one scenario read to which we had participants respond says, "Maria goes to a mechanic for a routine oil change for her relatively new vehicle. Upon picking up her keys, she is informed by the clerk that there are multiple problems with the engine that need to be fixed immediately."

This is in comparison to the experimental group, who read a series of five similar stories, but instead of the main character having a random bad experience, the individual in the scenario experiences poor outcomes because of her stigmatized group membership. For instance, the scenario that parallels the one in the previous example, but is designed to evoke the threat of

stigma reads "Maria goes to a mechanic for a routine oil change for her relatively new vehicle. Upon picking up her keys, she is informed by the clerk that there are multiple problems with the engine that need to be fixed immediately. When she voices her suspicion that the issues aren't as dire as suggested, the mechanic replies 'it's up to you whether or not to get the engine fixed, but it kills me to think that a woman might be stranded on the side of the road due to car failure. Talk it over with your husband and get back to me.'" After the participants read through the stigma consciousness manipulation, they filled out all of the measures utilized in Study 1 a. They then filled out a demographic questionnaire, were debriefed, and exited the experiment website.

Results and Discussion

Descriptive statistics and reliability estimates for the self-construal subscales and the various stigmatization indices are reported in Table 11. Additionally, I tested to see if trait stigmatization levels were different across conditions. A between-subjects one-way ANOVA showed there was not a significant difference in stigma across the conditions, F (1, 133) = 1.576, p = .212. While trait stigma did not change as a function of condition, this does not mean that the manipulation did not work; the stigma salience activity was designed to change how much stigma the participant was aware of in the moment, not at a dispositional level. Further, the mean and standard deviation scores for each scale, broken down by gender are reported in Table 12. I hypothesized that those who read the stigma salient scenarios would score higher on the relationality scales, relative to those who read the control scenarios. Additionally, because this was the first attempt to test the current research idea experimentally, I was interested exploring if and how reading about females' experiences with discrimination might affect the self-view of both women and men, separately. While I expected that the hypothesized relationship would be especially strong for females because they were reading about the discrimination someone who

shared that stigmatized trait, for men I hypothesized that reading about the stigmatization of females would cause a decrease in the relational self-view.

Level of Relationality by Condition X Gender

Again, although systematic differences between groups were detected, the results suggest that relationality and stigmatization relate in the opposite way than was hypothesized. I explored a condition X gender interaction, and found that across relationality measures, this interaction was significant such that men's relationality was higher in the control vs. the stigma condition, while females' relationality did not change significantly as a function of condition. For instance, when using the composite relationality scale, which was calculated by using the mean of the z-scores from all of the interdependence subscales, this interaction was significant such that men in the control condition reported being more relational (M = 3.90, SD = .93) than men in the stigma condition (M = 3.47, SD = .98), while women's reports of relationality did not significantly change across conditions, F (1,133) = 5.34, p = .022. See Table 13 for specific, means and statistics across all interdependence scales.

Relationality by Condition: Females

Next, the relationship between stigmatization and relationality as a function of gender was investigated. To begin, I explored how relationality in females was affected by condition type only. A between subjects one-way ANOVA showed that there was difference between groups for females who read the control scenarios. The only interdependence measure which showed even a marginal difference across conditions was the horizontal subscale of the Triandis collectivism questionnaire, such that those females who read the control scenarios reported being more relational (M = 3.90, SD = 0.55) than those who read the stigma scenarios (M = 3.73, SD = 0.40), F (1, 96) = 2.88, p = .093. I repeated this analysis for all subsequent measures of

relationality and found no significant results. See Table 14 for specific mean, standard deviation, *F* and *p* values for these analyses.

Relationality by Condition: Males

Next, I explored how relationality in males was affected by condition type only. A between subjects one-way ANOVA revealed that men who read the control scenarios had higher levels of relationality ($M = 3.76$, $SD = 0.42$) than those in the experimental condition ($M = 3.42$, $SD = 0.54$), $F(1, 35) = 4.80$, $p = .035$, when using the Singelis self-construal scale. I repeated this analysis for all subsequent measures of relationality and this relationship was significant across all measures of relationality, with the exception of horizontal collectivism, which was marginal. See table 15 for specific mean, standard deviation, *F* and *p* values for these analyses. Such results suggest that males might also be threatened by the stigmatization of other groups, and as a result might distance the self from identifying with close others.

Overall, a systematic relationship between stigma and relationality was detected, however this relationship emerged for those who were nonstigmatized. After inspecting this relationship as a function of gender, it seems that the relationship between stigmatization salience and relationality is largely driven by men; this effect emerged for all relationality scales with the exception of horizontal collectivism, while the inverse is true for females (the negative relationship between stigma and relationality was marginally significant for the horizontal collectivism).

From these results, taken together with study one, there are many ways in which the data can be interpreted, of which I will discuss the two I feel are the most likely. First, perhaps social stigmatization causes lower relationality, at least immediately after someone thinks about or experiences societal devaluation. However, after separating these analyses by gender, it

becomes clear that it is men that are driving this negative relationship between the stigmatization and relationality, suggesting that being confronted with the experience of stigmatized groups might cause a shift in self-view for the members of the mainstream. That is, reading about women experiencing discrimination might have affected men differently than women, causing them to become less relational, possibly as a way of distancing the self from those that are stigmatized.

In the same vein it is also possible that those who thought about stigma became less relational because they were asked to read about how others have experienced discrimination, and therefore were thinking about the stigmatization of *others.* It is worth noting that the negative relationship between stigma and cultural relationality only emerged for males. It is possible that, because participants were made aware of the stigmatization of others, they became motivated to think of the self in terms of distinctiveness. That is, if an outgroup member is being treated poorly because of a characteristic that is shared by his or her group, perhaps distancing the self in terms of how relational one feels in general may help preserve and protect self-esteem. Therefore, in the next study a third condition was added in which participants recounted their own experience with stigma, in order to better understand under what circumstances does stigmatization affect relationality.

Study 3

Method

Participants

For this study, only females were recruited. One hundred forty- two undergraduate students at a large Southern university participated in exchange for partial course credit. The average participant age was 20.08 years (SD = 0.42). Participants reported ethnicity as

Caucasian (86.9%), African-American (6.3%), Asian-American (5.8%), Latino/Hispanic (1.5%) and “other” (1.4%).

Materials and Procedure

The methodology used for this study parallels that of study 2, with the exception of instead of using a stigma consciousness prime (Pinel, 1999), a reliving task was used instead (Pickett, Gardner & Knowles, 2004). Reliving tasks have been previously used throughout the psychology of rejection literature in order to induce a state of rejection salience by having the participant write about a time they once experienced rejection first hand. In the same way, this manipulation was utilized in order to induce stigma salience in a way where participants recounted a time they were discriminated against. For this particular study, participants were asked to write about one of three topics for two minutes and thirty seconds. Depending on the condition, participants wrote about a time they themselves were discriminated against because of their gender, a time they have witnessed another woman being discriminated against because of her gender, or a time the participant had a bad day, which served as the control condition. After the participant was finished writing the essay, she was prompted to rate how severe the described event felt to her. For instance, if a participant was assigned to the self-stigma condition (condition 2) then she would have been provided the prompt: please write for two and a half minutes about a time that you have felt discriminated against in your life because you were a woman (please see appendix I to view the prompts for all of the conditions). It should be noted that condition 2 mirrors that of condition 2 in the previous study. I felt it necessary to change the manipulation in the current study for two reasons. One, it allowed me to tease how interdependence can be affected by self-stigma versus the stigma of another person. Additionally, having participants write down their own experiences can allow for a stronger

manipulation of a stigmatized mindset. That is, it is possible that study 2 did not provide a good stigma manipulation for females, because none of the scenarios had personal relevance. Therefore, both of the experimental conditions in the current study are stronger manipulation of stigma. After writing the short essay, the participants were then asked to fill out all of the interdependence and stigmatization scales that were discussed in the previous studies. After filling out these measures, participants then filled out a demographic questionnaire were debriefed and dismissed from the experiment.

Results and Discussion

Descriptive statistics and reliability estimates for the self-construal subscales and the various stigmatization indices are reported in Table 16. Additionally, I tested to see if trait stigmatization levels were different across conditions. A between-subjects one-way ANOVA showed there was not a significant difference in stigma across the conditions for either the revised stigma scale, F (2, 139) = .715, p = .490, or the original stigma scale, F (2, 139) = 1.11, p = .333. Again, while trait stigma did not change as a function of condition, I argue that this does not mean that the manipulation did not work; the stigma salience activity was designed to change how much stigma the participant was aware of in the moment, not at a dispositional level. I suspected that those who relived a time they were discriminated against on the basis of gender would score higher on the relationality scales, relative to those who relived a time they had a bad day. I also hypothesized that those who wrote about a time they saw another woman experience discrimination would report being more relational than those who wrote about a bad day; even though this result was null in the previous study, I expected that because the manipulation used in the current study should elicit a stronger sense of stigma salience that this relationship would be more likely to emerge. Further, because each participant was given the opportunity to write

freely about their respective experiences, they were asked to rate how severe the scenario they recounted felt to them in order to see if the severity of the discrimination affected the change in reported relationality. Therefore, in all, I expected that those who wrote either of the stigmatizing essays would be more relational than those who wrote about the control essay, and that relationships will emerge only when experiences were rated as highly severe.

First, the condition variable was regressed on to each relationality measure to determine whether the type of stigma written about significantly predicted subsequent relationality levels. Without including how severe each scenario felt to the participant, the relationship between stigmatization and the relationality composite variable, which was calculated by finding the mean of the z-scores from all of the interdependence subscales, was not significant across the different measures of relationality, F (2, 139) = .78, p = .459 (for statistics across all relationality measures see table 17). Then, relationality scores were regressed on the dummy coded predictors for the condition variable, ratings of the severity of the experience they wrote about, and the set of predictors that were expected to carry the stigmatization x severity interaction. Severity was centered prior to forming the product terms of the interaction before the regression was ran to reduce the multicollinearity among the predictors (Aiken & West, 1992). The Condition x Severity interaction approached, but fell short of significance across all interdependence measures except for the RISC scale, which was significant, such that those who wrote about self-stigma had higher relationality scores relative to those who wrote either the control or the other-stigma essay, but this was only true for highly severe events, F (2,139) = 3.19, p = .044 (see table 18 for all measures; Fig 18 for RISC).

The interaction was decomposed by testing the dummy coded predictors and generating predicted means at high and low levels of severity (i.e., 1 SD above and below the mean of

severity; the standard deviation from the mean of severity was 1.171). When using the composite interdependence variable as the outcome variable there was a significant effect of condition, F (2, 139) = 3.36, p = .030, such that students who wrote the control essay reported being less interdependent (M = 3.79) than did participants who wrote about witnessing the discrimination of others (M = 4.13), t (139) = - 2.59 p = .011. However this relationship only emerged when the reported situation was perceived as highly severe. Further, those who wrote the control essay did not differ in relationality when compared to those who wrote about their own experience with discrimination (M =3.93), t(139) = 1.10, p = .272, which did not change across levels of severity (Table 21, Fig 15). Lastly, those in the self-stigma condition (M =3.93) did not report being more interdependent than those in the other stigma condition (M = 4.13), t (139) = 1.30, p = .189, which also did not change across levels of severity.

Moreover, it is only the "other" condition in which relationality increased significantly across levels of severity, β = .202, p = .036, while the slope did not change significantly for either the self condition, β = .049, p = .507, or the control condition, β = .088, p = .191. Please refer to Figures 8- 13 to view the regression lines for each condition across the levels of severity for each outcome measure. I repeated this analysis for each scale and subscale for the different types of interdependence individually (see Table 19 and 20). I also decomposed this interaction at low levels of severity. When using the composite interdependence variable as the outcome variable, at one standard deviation below the mean of severity, there was not a significant effect of condition, F(2, 139) = 1.85, p = .140. I repeated this analysis for each scale and subscale for the different types of interdependence individually (see Table 21 and 22).

It is worth noting that levels of severity did differ significantly across condition, such that those in the control group reported feeling the event was more severe (M = 3.28, SD = 1.15),

than those who either wrote about experiencing stigma first hand (M = 2.45, SD = 1.25) or witnessed another person experience stigma (M = 2.65, SD = .95), F (2, 139) = 6.96, p = .001. Planned comparison showed that there was no difference in severity between those who reported self-stigma (M = 2.45, SD = 1.25), versus other stigma (M = 2.65, SD = .95), t (162) = -.36, p = .722. Therefore, because perceived severity levels were significantly higher in the control condition, this should be taken into consideration when interpreting the results.

Taken together, these results suggest that even though there seems to be a difference between conditions in terms of relationality at high levels of severity, such that female reported being more relational when thinking about a time another individual faced discrimination. My full hypothesis, that participants would become more relational when writing either of the stigmatization salience essays relative to the control, was supported only when using the RISC measure. Such a finding suggests that there may be something special about dyadic relationality, relative to general interdependence, that allows stigmatized individuals to cope with discrimination. Future studies should explore this possibility. Furthermore, differences between conditions emerged when participants recounted witnessing a highly severe event, suggesting that the more the individual needed to cope with the stigmatizing event, the more relational he or she became. Therefore, it seems that severe stigmatization is partially responsible for a change in self-view, such that those who were asked to think about the stigmatization of similarly stigmatized others became more relational relative to those who were not asked to think about stigma at all or asked to think about being stigmatized personally. Other possible interpretations or reservations about these results and their interpretation will be discussed in the general discussion.

Chapter 3. General Discussion

It was the aim of these studies to investigate the possibility that the experience of stigmatization may cause an increase in one's cultural relationality. Studies 1a and 1b provided correlational evidence that stigmatization and interdependence are systematically related to one another, albeit in the opposite of the hypothesized direction: those who reported being highly stigmatized reported being less relational. In study 2, participants were randomly assigned to read scenarios about females who either experienced a bad day or gender discrimination. It was found those who read the stigmatizing scenarios were significantly lower in relationality compared to those in the control group. Specifically, this relationship was driven by men such that when they were asked to read about females incurring discrimination, they reported to be less interdependent than those who did not. However, in study two, the relationship between stigma and interdependence was insignificant for females. Lastly, in study 3, stigma salience was manipulated using a recall essay and a third condition was added: Female participants were asked to either write an essay about a time they had a bad day, a time they had been discriminated on the basis of being a woman, or a time they witnessed another woman experiencing discrimination. Partially consistent with hypotheses, it was found that those who wrote about witnessing highly severe discrimination reported higher levels of interdependence relative to the control group. However, this was not the case for the RISC scale; those who wrote either stigma essay were more relational relative to those who wrote the control essay. Further, the abovementioned patterns only emerged those who had recounted a highly severe event.

The results from the current studies suggest that the experience of stigma can affect how we see the self, and by extension, view the world, view others, process information, derive self-esteem, and formulate goals (Markus & Kitayama, 1991). Interestingly, the direction of this

relationship seems to be dependent on the status of the individual confronted with the stigmatizing event. That is, those who are a part of the mainstream and do not share the stigmatizing characteristic with the target of discrimination are likely to distance the self from close others. In contrast, those who share the stigmatized trait in question who witness the victimization of an ingroup member are likely in increase their level of overall interdependence.

Therefore, being confronted by another's stigma might cause a shift in self-view for the both mainstream and stigmatized individuals. Having to face the fact that women are often targeted unfairly may cause men to become less relational, which could have consequences for subsequent cognitions experienced by the bystander. For instance, if a man sees a woman being told that she's too emotional or unintelligent to take part in careers that are stereotypically filled by men, and is aware that this is a form of discrimination, he might not think of close others when he is making decisions, thereby affecting his subsequent social interactions or relationships. Future studies should explore the emotional, cognitive and behavioral consequences of witnessing stigmatization as a function of the shift in one's self-view for members of the mainstream.

Further, in study 3, the full set of hypotheses was supported, such that females became more relational when recounting a highly severe time they were either personally stigmatized or witnessed the stigmatization of another female; however, this was only true when using the RISC measure. The fact that this pattern only emerged for this particular scale may be an indication that coping with self-stigma may cause one to think about dyadic relationships, specifically. As stated before, while general interdependence (either collective or dyadic) may help one cope with witnessing similar other incur stigmatization, it may be the case that personal victimization may

cause one to think about especially close individuals. Future studies should explore this possibility.

Overall the results of the current research support the idea that stigmatized individuals are likely to experience a change in one's self-view when confronted with stigma; however, the direction of such a shift is dependent on multiple factors. While males became less relational when confronted with the fact that women are often negatively stereotyped and treated poorly as a result, females' shift in interdependence was much more intricate. That is, for females, being aware of the stigmatization of similar others caused an increase in overall interdependence, while recounting a time one was personally a target of gender discrimination caused an increase in dyadic relationality only.

Based upon previous self-construal research, if stigma can affect one's self-view, this may allow us to potentially understand how subsequent thoughts, feelings, actions and goals can be altered as a function of this stigmatized identity. For instance, if Sam is treated poorly on the basis of her gender, she is likely to think about close individuals, whereas when faced with the fact a similar other is incurring gender discrimination, she is likely to identify with close individuals as well as important groups. As a result, she is likely to form cognitions and goals that are tied to these close others, which may benefit the individual less than if she were not as interdependently minded. Further, perhaps when one is faced with their own tainted identity, thinking about specific, close others help assuage this vulnerability, while thinking of overall groups may not be helpful. Again, this could have important repercussions for subsequent cognitions and motivation. Future research should explore the consequences of the change in one's self-construal that takes place as a function of stigma.

While a systematic relationship between stigmatization and cultural interdependence emerged across the current studies, the expected pattern between self-stigma and interdependence were not as robust as anticipated. Such results suggest that there may be a more complex relationship between these factors, of which I posit three. What follows is a discussion of possible explanations that should be explored in order to further understand how stigmatization can affect subsequent relationality. In the subsequent section, I will discuss the idea that it is possible that the current findings were largely influenced by the fact that the stigmatized trait explored, specifically the female gender, is often stereotyped as being highly relational, affecting the subsequent coping strategy.

Relationality as a stereotypically feminine trait. Just as it is possible that stigmatized individuals may become more relational when threatened with discrimination because of the cultural norm that rejects relationality, it is also possible that the widely available stereotypes that exist about women may also be responsible for this trend. Therefore, one explanation for the presented results could be the fact that the relationality is a stereotypically feminine trait, and this might have affected how the females in the study reacted when reliving or reading about gender discrimination. That is, when a woman is being stigmatized, in order to try to preserve self-esteem, she might become more relational, because that is how society has taught her to be.. Therefore, it is possible that the reported increase in relationality may not be driven by the experience of stigmatization in general, but as a way to cope with gender discrimination, specifically. Future studies should try to test this possibility by exploring the direction of the shift in self-view non-female stigmatized groups.

Limitations and Future Directions

Like all other research, the preceding studies are not perfect and have limitations that may affect the interpretation of the results. For instance, the participants used in these studies are from a university research pool and therefore may not be the ideal group to use when studying the effects of stigmatization. It is possible that if the hypothesis was tested using participants who truly do have a lack of resources, rather than students who could afford to go to a state university, our results may look different. However, I would like to argue that using the current subject pool allows for a more conservative test of the research question. Since the proposed effect seems to exist even when using participants who may not have much experience with a dire lack of resources or severe discrimination, logic would suggest that for those who have experienced these adversities, the relationship should be stronger. Of course, this is speculation and future research should investigate the relationship between stigma and relationality on populations who do not have the resources of a college student.

Similarly, another limitation of this research is the fact that it is limited to exploring stigma and relationality in one specific stigmatized population: women. Although I chose this population because it was the most convenient stigmatized group to recruit, this selection limits the current study in two ways. First, not all stigma is created equal; that is to say, just because the hypothesized pattern appeared to emerge for females, this does not mean we can assume that it would appear for other stigmatized groups such as those who experience stigma due to their race or ethnicity, weight, sexual orientation, class, etc. Secondly, because stigma specifically had to do with the discrimination of women, and relationality is related to femininity, being made aware of their stigmatized self may have altered participants' self-view because they wanted to act less

"girly." If this is the case, then the reported effects would only be true for females. Future research should investigate these possibilities.

Furthermore, the current studies are limited by the fact that they rely heavily on self-report questionnaires. Self-report results are often ambiguous because it is possible that the way the participant reported they would act for each item may not be accurate. While I thought it was necessary to begin the testing our hypotheses these measures, in the future, research should test these ideas using behavioral or implicit manipulations and measures of stigma and relationality to ensure our results are not simply representative of what stigmatized individuals *think* they would act rather than what they *actually* would act, when the stigmatized self becomes salient.

Finally, there is a caveat with the manipulation of stigma in study 3. It is possible that those who were asked to write about another's stigma may have reported being higher on interdependence than those in the other conditions, simply because they were asked to think about another individual. That is, the increase interdependence may not have been caused by stigmatization, but instead was driven by the fact that they were asked to think about another individual in general. This may be especially true because if you are witnessing a person that you know is being discriminated against, it is likely you know that person, and therefore will become more interdependent. The fact that those in the self-stigma condition had the same level of dyadic-interdependence specifically relative to those who wrote about witnessing stigma does suggest that the relationship between stigma and relationality was not completely artificial in study 3; at the very least it is possible that interdependence scores were inflated in the other-stigma condition due to the methodology used. Therefore, future studies should explore this possibility by adding a control-other condition where participants write about another individual having a bad day.

Conclusion

In sum, stigmatization is in and of itself a detrimental process that threatens the efficacy of individuals who possess one or more traits that have been rejected by society at large. Previous research has sought to understand how this process affects the lives of stigmatized individuals, both at the psychological and physiological level. The current studies add to this literature by demonstrating that the threat of stigmatization affects how others are included in one's self-view, such that stigmatized individuals identify more with close individuals when confronted with the fact that they, or others in there ingroup, face discrimination.

Further, those who are not a part of the stigmatized group were shown to become less relational when confronted with the fact that outgroup members are treated unfairly due to their group membership. Such a shift in self-construal may work as a defense mechanism to protect the self against stigmatization, for both the stigmatized and mainstream individuals; stigmatized individuals may find being more relational when facing discrimination in the moment may allow them to feel more efficacious in a world that shuns them, while those in the mainstream may do so to distance the self from tainted others.

In either instance, becoming less or more relational may serve a functional purpose in the moment, but may have repercussions that may affect subsequent affect, cognition, and goal formation. Whether or not relationality levels rebound for stigmatized individuals after the threat of stigma has diminished, the fact remains that the current research has shown that how one views the self systematically varies as a function of stigma and not for negative experiences in general. Therefore, future research should explore the trajectory of this shift in relationality, and how this translates into different emotional and social outcomes.

References

Aiken, L. S., West, S. G., Woodward, C. K., & Reno, R. R. (1994). Health beliefs and compliance with mammography-screening recommendations in asymptomatic women. *Health Psychology*, *13*(2), 122.

Biernat, M., & Dovidio, J. F. (2000). Stigma and stereotypes. *The social psychology of stigma*, 88-125.

Blascovich, J., Mendes, W. B., Hunter, S. B., & Lickel, B. (2000). Stigma, threat, and social interactions. *The social psychology of stigma*, 307-333

Branscombe, N. R., & Ellemers, N. (1998). Coping with group-based discrimination: Individualistic versus group-level strategies.

Clark, R., Anderson, N. B., Clark, V. R., & Williams, D. R. (1999). Racism as a stressor for African Americans: A biopsychosocial model. *American psychologist*, *54*(10), 805.

Crocker, J., & Major, B. (1989). Social stigma and self-esteem: The self-protective properties of stigma. *Psychological review*, *96*(4), 608.

Crocker, J., Major, B., & Steele, C. (1998). Social stigma. InD. T. Gilbert, ST Fiske, & G. Lindzey (Eds.), Handbook of social psychology (Vol. 2, pp. 504-553).

Crocker, J., Voelkl, K., Testa, M., & Major, B. (1991). Social stigma: The affective consequences of attributional ambiguity. *Journal of Personality and Social Psychology*, *60*(2), 218.

Cross, S. E., Hardin, E. E., & Gercek-Swing, B. (2010). The what, how, why, and where of self-construal. *Personality and Social Psychology Review*.

Dovidio, J. F., Major, B., & Crocker, J. (2000). Stigma: Introduction and overview.

Gabriel, S., & Gardner, W. L. (1999). Are there" his" and" hers" types of interdependence? The implications of gender differences in collective versus relational interdependence for affect, behavior, and cognition. *JPSP*, *77*(3), 642.

Galvan, F. H., Davis, E. M., Banks, D., & Bing, E. G. (2008). HIV stigma and social support among African Americans. *AIDS patient care and STDs*, *22*(5), 423-436.

Goffman, E. (2009). *Stigma: Notes on the management of spoiled identity*. Simon and Schuster.

Harvey, R. D. (2001). Individual differences in the phenomenological impact of social stigma. *The Journal of social psychology*, *141*(2), 174-189.

Hebl, M. R., Tickle, J., & Heatherton, T. F. (2000). Awkward moments in interactions between nonstigmatized and stigmatized individuals. *The social psychology of stigma*, 275-306.

Imamoĝklu, E. O., & Karakitapoĝklu-Aygüun, Z. (2004). Self-construals and values in different cultural and socioeconomic contexts. *Genetic, social, and general psychology monographs*, *130*(4), 277-306.

Jones, E., Scott, R. Social stigma: The psychology of marked relationships. WH Freeman, 1984.

Krendl, A. C., & Wolford, G. (2013). Cognitive decline and older adults' perception of stigma controllability. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, *68*(3), 333-336.

Kitayama, S., & Uchida, Y. (2005, March). Interdependent agency: An alternative system for action. In *Cultural and social behavior: The Ontario symposium* (Vol. 10, pp. 137-164). Lawrence KaErlbaum Mahwah, NJ.

Leary, M. R., Tambor, E. S., Terdal, S. K., & Downs, D. L. (1995). Self-esteem as an interpersonal monitor: The sociometer hypothesis. *Journal of personality and social psychology*, *68*(3), 518.

Major, B., & O'Brien, L. T. (2005). The social psychology of stigma. *Annu. Rev. Psychol.*, *56*, 393-421.

Major, B. (2006). New Perspectives on Stigma and Psychological Well-Being. In *Stigma and Group Inequality* (1st ed., Vol. 1, pp. 463-497). Mahwah, NJ: Lawrence Erlbaum Associates.

Major, B., & Schmader, T. (1998). Coping with stigma through psychological disengagement.

Markus, H. R., & Kitayama, S. (1991). Culture and the self: Implications for cognition, emotion, and motivation. *Psychological review*, *98*(2), 224.

Miller, C. T., & Major, B. (2000). Coping with stigma and prejudice. *The social psychology of stigma*, 243-272.

Mullen, B., Brown, R., & Smith, C. (1992). Ingroup bias as a function of salience, relevance, and status: An integration. *European Journal of Social Psychology*, *22*(2), 103-122.

Neuberg, S. L., Smith, D. M., & Asher, T. (2000). Why people stigmatize: Toward a biocultural framework. *The social psychology of stigma*, 31-61.

Oishi, S. (2010). The psychology of residential mobility implications for the self, social relationships, and well-being. *Perspectives on Psychological Science*, *5*(1), 5-21.

Oishi, S., Lun, J., & Sherman, G. D. (2007). Residential mobility, self-concept, and positive affect in social interactions. *Journal of personality and social psychology*, *93*(1), 131.

Pickett, C. L., Gardner, W. L., & Knowles, M. (2004). Getting a cue: The need to belong and enhanced sensitivity to social cues. *Personality and Social Psychology Bulletin*, *30*(9), 1095-1107.

Pinel, E. C. (1999). Stigma consciousness: the psychological legacy of social stereotypes. *Journal of personality and social psychology*, *76*(1), 114.

Sekaquaptewa, D., Waldman, A., & Thompson, M. (2007). Solo status and self-construal: Being distinctive influences racial self-construal and performance apprehension in African American women. *Cultural Diversity and Ethnic Minority Psychology*, *13*(4), 321.

Schmader, T., Major, B., Eccleston, C. P., & McCoy, S. K. (2001). Devaluing domains in response to threatening intergroup comparisons: perceived legitimacy and the status value asymmetry. *Journal of Personality and Social Psychology*, *80*(5), 782.

Sedikides, C., Gaertner, L., & Toguchi, Y. (2003). Pancultural self-enhancement. *Journal of personality and social psychology*, *84*(1), 60.

Spencer, S. J., Steele, C. M., & Quinn, D. M. (1999). Stereotype threat and women's math performance. *Journal of experimental social psychology*,*35*(1), 4-28.

Strambler, M. J., & Weinstein, R. S. (2010). Psychological disengagement in elementary school among ethnic minority students. *Journal of Applied Developmental Psychology*, *31*(2), 155-165.

Steele, C. M., Spencer, S. J., & Aronson, J. (2002). Contending with group image: The psychology of stereotype and social identity threat. *Advances in experimental social psychology*, *34*, 379-440.

Stangor, C., & Crandall, C. S. (2000). Threat and the social construction of stigma. *The social psychology of stigma*, 62-87.

Steele, C. M. (1997). A threat in the air: how stereotypes shape intellectual identity and performance. *American psychologist*, *52*(6), 613.

Steele, C. M. (1988). The psychology of self-affirmation: Sustaining the integrity of the self. *Advances in experimental social psychology*, *21*(2), 261-302.

Stephens, N. M., Fryberg, S. A., Markus, H. R., Johnson, C. S., & Covarrubias, R. (2012). Unseen disadvantage: How American universities' focus on independence undermines the academic performance of first-generation college students. *JPSP*, *102*(6), 1178.

Singelis, T. M. (1994). The measurement of independent and interdependent self-construals. *Personality and Social Psychology Bulletin*,*20*(5), 580-591.

Tajfel, H. T. JC (1986). The social identity theory of intergroup behavior. *Psychology of Intergroup Relations. Nelson-Hall, Chicago. Págs*, 7-24.

Towler, A. J., & Schneider, D. J. (2005). Distinctions Among Stigmatized Groups1. *Journal of Applied Social Psychology*, *35*(1), 1-14

Triandis, H. C., & Gelfand, M. J. (1998). Converging measurement of horizontal and vertical individualism and collectivism. *Journal of personality and social psychology*, *74*(1), 118.

Weiner, B., Perry, R. P., & Magnusson, J. (1988). An attributional analysis of reactions to stigmas. *Journal of personality and social psychology*, *55*(5), 738.

Wills, T. A. (1981). Downward comparison principles in social psychology. *Psychological bulletin*, *90*(2), 245.

Appendices

Appendix A: Tables

Table 1.
Descriptive Statistics and Reliabilities for Self-Construal and Stigma Indices in Studies 1a and1b.

	Study 1a			Study 1b		
	M	*SD*	*α*	*M*	*SD*	*α*
RISC	3.74	.64	.90	3.74	.55	.74
Singelis Interdependence	3.55	.46	.72	3.52	.45	.72
Singelis Independence	3.56	.48	.72	3.54	.49	.70
Triandis Interdependence	3.76	.50	.76	3.73	.46	.72
Triandis Independence	3.50	.60	.76	3.58	.54	.70
Triandis Horizontal Collectivism	3.79	.54	.67	3.73	.54	.69
Triandis Horizontal Individualism	3.81	.66	.73	3.95	.61	.72
Triandis Vertical Collectivism	3.72	.65	.74	3.72	.59	.67
Triandis Vertical Individualism	3.19	.86	.80	3.21	.76	.73
Stigma Scale (Harvey, 2001)	2.21	.63	.93	2.16	.64	.94
Stigma Scale (Revised)	---	---	---	2.46	.76	.93

Notes: For all self-construal and stigma indices N = 143 (Study 1a) and N = 158 (Study 1b). The revised stigma scale was only used in study 1b.

Table 2.
Study 1a Correlations between Measures for all Participants

	1	2	3	4	5	6	7
1. Stigma	--						
2. RISC	-.07	--					
3. Singelis	-.20*	.49**	--				
4. Triandis	-.23*	.61**	.62**	--			
5. Horizontal	-.20*	.55**	.53**	.82**	--		
6. Vertical	-.13	.49**	.53**	.88**	.43**	--	
7. Relationality (All)	-.11*	.86**	.80**	.87**	.74**	.73**	--

Notes: *p <.05 ** p <.01. N=142.

Table 3.
Study 1a Correlations between Measures for Males

	1	2	3	4	5	6	7
1. Stigma	--						
2. RISC	-.05	--					
3. Singelis	-.01	.55**	--				
4. Triandis	-.05	.71**	.66**	--			
5. Horizontal	-.09	.61**	.65**	.91**	--		
6. Vertical	-.07	.71**	.58**	.95**	.91**	--	
7. Relationality (All)	-.05	.88**	.82**	.90*	.82**	.86**	--

Notes: * p <.05 ** p < .01. N = 46.

Table 4.
Study 1a Correlations between Measures for Females

	1	2	3	4	5	6	7
1. Stigma	--						
2. RISC	-.07	--					
3. Singelis	-.20*	.44**	--				
4. Triandis	-.24*	.56**	.59**	--			
5. Horizontal	-.15*	.53**	.44**	.75**	--		
6. Vertical	-.05	.33**	.47**	.81**	.22**	--	
7. Relationality (All)	-.11	.85**	.78**	.84**	.69**	.63**	--

Notes: * p <.05 ** p < .01. N = 98.

Table 5.
Study 1 a Moderated Linear Regression Testing the Stigma X Gender Interaction

	Effect		
	Stigma[a]	Gender[b]	Stigma X Gender [c] Interaction
Interdependent Measure	*t* (*p*)	*t* (*p*)	*t* (*p*)
RISC	-0.33 (.744)	1.15 (.250)	0.29 (.771)
Singelis Interdependence	-1.19 (.237)	0.76 (.449)	0.92 (.357)
Triandis Interdependence	0.10 (.922)	0.26 (.799)	-0.96 (.338)
Horizontal Collectivism	0.18 (.858)	0.47 (.641)	-0.79 (.428)
Vertical Collectivism	-0.01 (.994)	-0.02 (.984)	-0.78 (.440)
Relationality (ALL)	-0.59 (.558)	0.88 (.382)	0.11 (.914)

Notes: N=142. * p <.05 ** p <.01 ^ p <.10

Table 6.
Study 1b Comparison of Correlation Coefficients between the Original Stigma Scale (Harvey, 2001), Self-Construal Measures, the Revised Stigma Scale and Self-Construal Measures

	Stigma Scale (Harvey, 2001)		Revised Stigma Scale	
Interdependent Measure	*r*	*p*	*r*	*p*
RISC	-.08	.291	-.04	.623
Singelis Interdependence	-.16*	.047	-.17*	.036
Triandis Interdependence	-.27**	.001	-.26**	.001
Horizontal Collectivism	-.28**	.000	-.22**	.005
Vertical Collectivism	-.16*	.042	-.21*	.010

Notes: For all self-construal and stigma indices *N* = 142 (Study 1a) and *N* = 158 (Study 1b). The revised stigma scale was only used in study 1b.

Table 7.
Study 1 b Correlations between Measures for all Participants

	1	2	3	4	5	6	7	8
1. Stigma	--							
2.Revised Stigma	.60**	--						
3. RISC	-.09	.01	--					
4. Singelis	-.08*	-.09	.46**	--				
5. Triandis	-.21*	-.23*	.38**	.45**	--			
6. Horizontal	-.18*	-.16*	.32**	.37**	.79**	--		
7. Vertical	-.17*	-.21*	.31**	.84**	.83**	.32**	--	
8. Relationality (All)	-.14	-.13	.81**	.78**	.77**	.62**	.63**	--

Notes: * p <.05 ** p < .01. N = 156

Table 8.
Study 1 b Correlations between Measures for Males

	1	2	3	4	5	6	7	8
1. Stigma	--							
2.Revised Stigma	.60**	--						
3. RISC	-.11	-.04	--					
4. Singelis	-.12	-.16	.64**	--				
5. Triandis	-.08	-.11	.42**	.47**	--			
6. Horizontal	-.11	-.06	.34**	.42**	.81**	--		
7. Vertical	-.02	-.11	.36**	.36**	.82**	.33**	--	
8. Relationality (All)	-.12	-.12	.86**	.84**	.77**	.63**	.62**	--

Notes: * p <.05 ** p < .01. N = 73

Table 9.
Study 1 b Correlations between Measures for Females

	1	2	3	4	5	6	7	8
1. Stigma	--							
2.Revised Stigma	.60**	--						
3. RISC	-.10	-.01	--					
4. Singelis	-.01	-.04	.29**	--				
5. Triandis	-.33**	-.34**	.38**	.44**	--			
6. Horizontal	-.27*	-.28*	.36**	.34**	.78**	--		
7. Vertical	-.28*	-.29**	.28**	.39**	.88**	.38**	--	
8. Relationality (All)	-.18	.16	.76**	.73**	.79**	.65**	.67**	--

Notes: * p <.05 ** p <.01. N = 79

Table 10.
Study 1 b Moderated Linear Regression Testing the Stigma X Gender Interaction

	Effect		
	Stigma[a]	Gender[b]	Stigma X Gender [c] Interaction
Interdependent Measure	*t* (*p*)	*t* (*p*)	*t* (*p*)
RISC	-0.16 (.873)	2.44 (.016)*	-0.27 (.979)
Singelis Interdependence	-0.14 (.887)	0.19 (.852)	0.21 (.837)
Triandis Interdependence	-0.31 (.758)	0.18(.860)	0.01(.990)
Horizontal Collectivism	-0.23 (.816)	0.01 (.993)	0.10(.922)
Vertical Collectivism	-0.30 (.768)	0.32 (.750)	-0.10 (.925)
Relationality (ALL)	-0.24 (.811)	1.09 (.279)	0.08 (.940)

Notes: N=142. * p <.05 ** p <.01 ^ p <.10

Table 11.
Descriptive Statistics and Reliabilities for Self-Construal and Stigma Indices in Study 2.

	Study 2		
	M	*SD*	*α*
RISC	3.74	.64	.90
Singelis Interdependence	3.55	.46	.72
Singelis Independence	3.56	.48	.72
Triandis Interdependence	3.76	.50	.76
Triandis Independence	3.50	.60	.76
Triandis Horizontal Collectivism	3.79	.54	.67
Triandis Horizontal Individualism	3.81	.66	.73
Triandis Vertical Collectivism	3.72	.65	.74
Triandis Vertical Individualism	3.19	.86	.80
Stigma Scale (Harvey, 2001)	2.21	.63	.93

Notes: For all self-construal and stigma indices $N = 135$

Table 12.
Descriptive Statistics for Self-Construal and Stigma Indices by Gender in Study 2.

	Men (n = 37)		Women (n = 98)	
	M	*SD*	*M*	*SD*
RISC	3.65	.68	3.89	.45
Singelis Interdependence	3.60	.50	3.51	.39
Singelis Independence	3.63	.55	3.44	.47
Triandis Interdependence	3.70	.64	3.77	.46
Triandis Independence	3.73	.45	3.52	.52
Triandis Horizontal Collectivism	3.74	.65	3.80	.48
Triandis Horizontal Individualism	3.87	.55	3.84	.62
Triandis Vertical Collectivism	3.66	.75	3.74	.56
Triandis Vertical Individualism	3.37	.60	2.97	.74
Stigma Scale (Harvey, 2001)	2.24	.62	2.26	.64

Notes: For all self-construal and stigma indices *N* = 37 (Males) and *N* = 98 (Females)

Table 13.
Study 2 Gender X Condition Interaction for Each Measure of Interdependence

	Males		Females		Condition X Gender Interaction	
	Control	Stigma	Control	Stigma		
Interdependent Measure	M (SD) (SD)	M	M (SD)	M (SD)	*F*	*p*
RISC	3.87 (.59)	3.40 (.72)	3.92 (.47)	3.86 (.44)	4.54	.005**
Singelis Interdependence	3.76 (.42)	3.41 (.54)	3.58 (.36)	3.46 (.43)	3.02	.030*
Triandis Interdependence	3.90 (.52)	3.46 (.69)	3.38 (47)	3.73 (.42)	3.07	.030*
Horizontal Collectivism	3.88 (.55)	3.56 (.74)	3.90 (.55)	3.73 (40)	2.14	.100
Vertical Collectivism	3.91 (.61)	3.35 (.79)	3.77 (.58)	3.73 (.55)	2.87	.039*
Relationality (ALL)	3.90 (.93)	3.47 (.98)	3.83 (.66)	3.75 (.61)	5.34	.022*
Stigma (Harvey, 2001)	2.44 (.14)	2.39 (.15)	2.35 (.09)	2.02 (.08)	0.14	.709

Notes: For all self-construal and stigma indices N = 37 (Males) and N = 98 (Females).* p <.05 ** p <.01

Table 14.
Study 2 One Way ANOVA Between Control and Experimental Conditions for Women

	Control	Experimental		
Interdependent Measure	M (SD)	M (SD)	*F*	*p*
RISC	3.92 (.47)	3.86 (.44)	0.41	.523
Singelis Interdependence	3.58 (.35)	3.46 (.42)	1.82	.181
Triandis Interdependence	3.83 (.47)	3.73 (.42)	1.27	.263
Horizontal Collectivism	3.90 (.55)	3.73 (.40)	2.88	.093
Vertical Collectivism	3.77 (.58)	3.73 (.54)	0.12	.727
Relationality (ALL)	3.83 (.66)	3.75 (.61)	2.14	.147
Stigma (Harvey, 2001)	2.35 (.70)	2.20 (.52)	1.36	.247

Note: N=98. * $p < .05$ ** $p < .01$

Table 15.
Study 2 One Way ANOVA Between Control and Experimental Conditions for Men

	Control	Experimental		
Interdependent Measure	M (SD)	M (SD)	*F*	*p*
RISC	3.86 (.59)	3.40 (.72)	4.89	.035*
Singelis Interdependence	3.76 (.42)	3.42 (.54)	4.80	.035*
Triandis Interdependence	3.90 (.52)	3.46 (.69)	4.99	.032*
Horizontal Collectivism	3.88 (.55)	3.56 (.74)	2.41	.129
Vertical Collectivism	3.91 (.61)	3.35 (.79)	5.86	.021*
Relationality (ALL)	3.90 (.92)	3.47 (.98)	6.93	.013*
Stigma (Harvey, 2001)	2.44 (.68)	2.38 (.56)	0.07	.791

Notes: N = 37.* p <.05 ** p <.01.

Table 16.
Study 3 Descriptive Statistics for Interdependence and Stigma Indices

	M	*SD*	*α*
RISC	3.90	.62	.89
Singelis Interdependence	3.61	.51	.77
Triandis Interdependence	3.84	.55	.79
Triandis Horizontal Collectivism	3.85	.63	.77
Triandis Vertical Collectivism	3.83	.65	.70
Stigma Scale (Harvey, 2001)	2.80	.75	.91
Revised Stigma Scale	2.42	.70	.92

Notes: N = 142

Table 17.
Study 3 One Way ANOVA between Conditions

	Control	Self Stigma	Other Stigma		
Interdependent Measure	M (SD)	M (SD)	M (SD)	*F*	*p*
RISC	3.90 (.57)	4.06 (.55)	3.88 (.66)	1.13	.324
Singelis Interdependence	3.57 (.51)	3.73 (.48)	3.70 (.44)	1.60	.205
Triandis Interdependence	3.34 (.46)	3.85 (.62)	3.88 (.57)	.09	.914
Horizontal Collectivism	3.83 (.56)	3.89 (.69)	3.97 (.61)	.62	.538
Vertical Collectivism	3.85 (.57)	3.80 (.73)	3.80 (.69)	.08	.920
Relationality (ALL)	3.83 (.75)	3.94 (.73)	3.88 (.84)	.78	.459
Stigma Scale (Harvey, 2001)	2.75 (.09)	2.88 (.12)	2.79 (.11)	.46	.629
Revised Stigma Scale	2.39 (.08)	2.56 (.11)	2.37 (.10)	.99	.372

Notes: N= 142

Table 18.
Study 3 One Way ANOVA Exploring the Condition X Severity Interaction

	Effect		
	Condition[a]	Severity[b]	Condition X Severity[c] Interaction
Interdependent Measure	*F* (*p*)	*F* (*p*)	*F* (*p*)
RISC	2.85 (.061)^	1.39 (.241)	3.19 (.044)*
Singelis Interdependence	1.68 (.190)	1.96 (.760)	2.25 (.107)
Triandis Interdependence	1.86 (.160)	2.31 (.131)	2.48 (.087)^
Horizontal Collectivism	1.26 (.286)	1.27 (.263)	2.24 (.109)
Vertical Collectivism	2.04 (.134)	2.17 (.143)	2.32 (.102)
Relationality (ALL)	0.29 (.753)*	0.83 (.509)	1.55 (.156)
Stigma Scale (Harvey, 2001)	1.53 (.219)	0.01 (.936)	1.09 (.338)
Revised Stigma Scale	0.59 (.554)	1.18 (.280)	0.11 (.896)

Notes: N=142. [a]DF = 2 and 10, [b]DF = 1 and 10, [c]DF = 2 and 10. * *p* <.05 ** *p* <.01 ^ *p* <.10

Table 19.
Study 3 One Way ANOVA between Conditions at High Severity

	Control	Self Stigma	Other Stigma		
Interdependent Measure	M (SE)	M (SE)	M (SE)	*F*	*p*
RISC	3.83 (.09)	4.13 (.15)	4.16 (.16)	2.54	.080^
Singelis Interdependence	3.52 (.08)	3.67 (.12)	3.88 (.13)	3.04	.050*
Triandis Interdependence	3.89 (.09)	3.82 (.14)	4.18 (.15)	2.21	.110
Horizontal Collectivism	3.78 (.10)	3.93 (.15)	4.24 (.17)	2.93	.060^
Vertical Collectivism	3.90 (.10)	3.71 (.16)	4.12 (.18)	1.43	.240
Relationality (ALL)	3.79 (.12)	3.93 (.19)	4.13 (.20)	3.36	.030*
Stigma Scale (Harvey, 2001)	2.44 (.10)	2.59 (.18)	2.47 (.18)	.57	.570
Revised Stigma Scale	2.81 (.11)	2.73 (.19)	2.87 (.19)	.14	.870

Notes: N= 142. * p <.05 ** p <.01.

Table 20.
Study 3 Comparisons between Conditions at High Severity

Measure	β	Comparison Group	*t*	*p*
RISC				
Control	-.088 (.191)	Self	1.75	.082^
Other	.202 (.036)*	Control	-1.83	.070^
Self	.049 (.057)	Other	0.15	.883
Singelis Interdependence				
Control	-.062 (.257)	Self	1.07	.285
Other	.134 (.087)^	Control	-2.40	.018*
Self	-.037 (.541)	Other	1.19	.238
Triandis Interdependence				
Control	.001 (.985)	Self	-0.14	.893
Other	.212 (.017)*	Control	-1.99	.049*
Self	-.019 (.779)	Other	1.80	.074^
Horizontal Collectivism				
Control	-.059 (.398)	Self	0.80	.427
Other	.198 (.480)*	Control	-2.39	.018*
Self	.023 (.764)	Other	1.39	.167
Vertical Collectivism				
Control	.062 (.410)	Self	-0.97	.332
Other	.226 (.034)*	Control	-1.08	.284
Self	-.062 (.454)	Other	1.69	.093
Relationality (ALL)				
Control	.249 (.226)	Self	1.10	.272
Other	.621 (.240)*	Control	-2.59	.011*
Self	.372 (.282)	Other	1.30	.189

Notes: N=142. * p <.05 ** p <.01 ^ <.10.

Table 21.
Study 3 One Way ANOVA between Conditions at Low Severity

	Control	Self Stigma	Other Stigma		
Interdependent Measure	M (SE)	M (SE)	M(SE)	*F*	*p*
RISC	4.03 (.13)	4.02 (.11)	3.69 (.13)	2.42	.090^
Singelis Interdependence	3.67 (.11)	3.76 (.09)	3.57 (.10)	1.01	.370
Triandis Interdependence	3.84 (.12)	3.86 (.10)	3.68 (.12)	0.79	.460
Horizontal Collectivism	3.91 (.14)	3.87 (.11)	3.78 (.13)	0.35	.710
Vertical Collectivism	3.75 (.15)	3.85 (.12)	3.59 (.14)	1.07	.350
Relationality (ALL)	3.90 (.17)	3.94 (.14)	3.72(.17)	1.85	.140
Stigma Scale (Harvey, 2001)	2.63 (.15)	2.97 (.13)	2.75 (.13)	1.28	.280
Revised Stigma Scale	2.27 (.16)	2.54 (.14)	2.31 (.14)	1.07	.350

Notes: N= 142. * p <.05 ** p <.01 ^<.10.

Table 22.
Study 3 Comparisons between Conditions at Low Severity

Measure	β	Comparison Group	*t*	*p*
RISC				
Control	-.088 (.191)	Self	-0.11	.916
Other	.202 (.036)*	Control	1.88	.063^
Self	.049 (.507)	Other	-1.94	.054^
Singelis Interdependence				
Control	-.062 (.257)	Self	0.67	.506
Other	.134 (.087)^	Control	0.66	.510
Self	-.037 (.541)	Other	-1.40	.164
Triandis Interdependence				
Control	.001 (.985)	Self	0.17	.868
Other	.212 (.017)*	Control	0.92	.361
Self	-.019 (.779)	Other	-1.17	.243
Horizontal Collectivism				
Control	-.059 (.398)	Self	-0.28	.781
Other	.198 (.480)*	Control	0.76	.448
Self	.023 (.764)	Other	-0.55	.585
Vertical Collectivism				
Control	.062 (.410)	Self	0.54	.590
Other	.226 (.034)*	Control	0.81	.418
Self	-.062 (.454)	Other	-1.44	.153
Relationality (ALL)				
Control	-.066 (.221)	Self	-0.30	.767
Other	-.343 (.237)	Control	-1.50	.150
Self	-.409 (.217)	Other	-1.88	.062^

Notes: N=142. * *p* <.05 ** *p* <.01^<.10

Appendix B: Figures

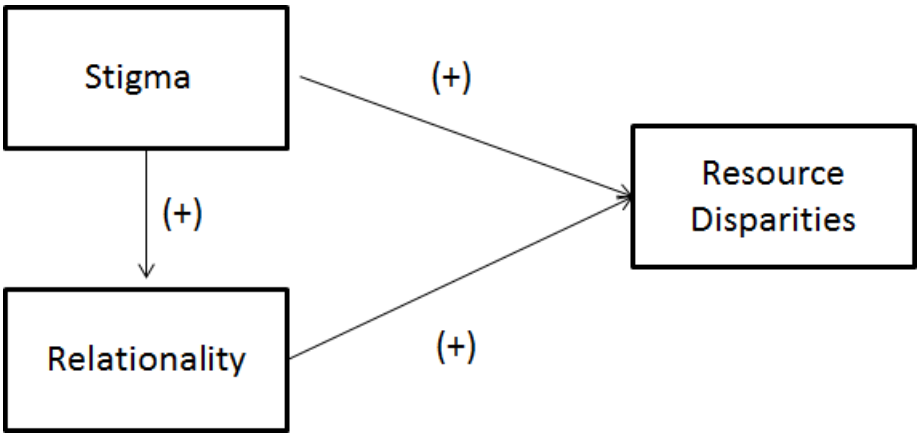

Figure 1. Proposed Relationship between Stigma, Relationality and Resource Disparities

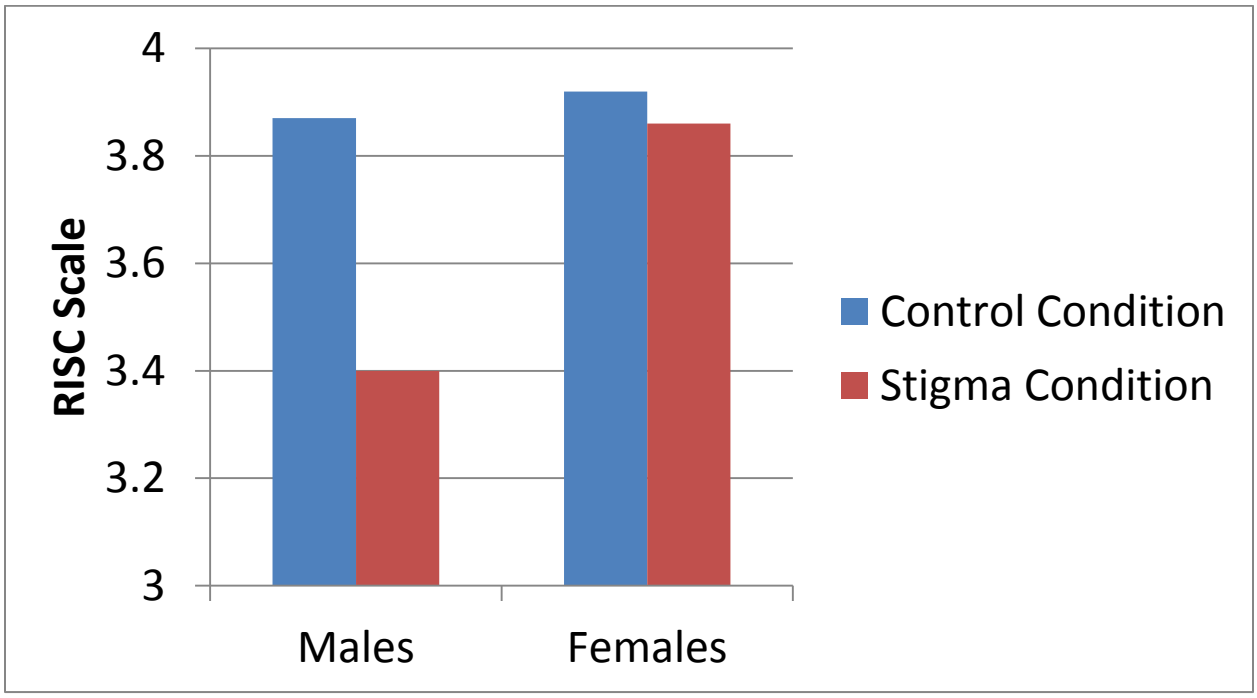

Figure 2: Difference in RISC Scores between Conditions in Study 2

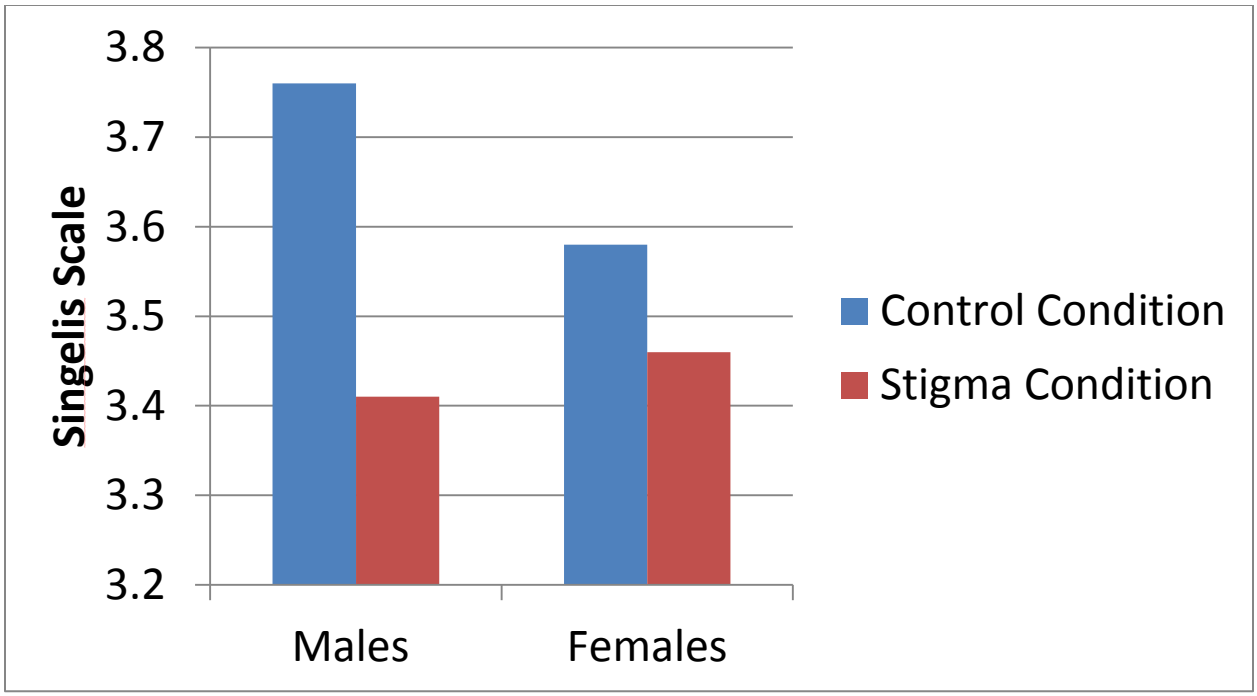

Figure 3: Difference in Interdependence Scores between Conditions in Study 2 using the Singelis Self-Construal Scale

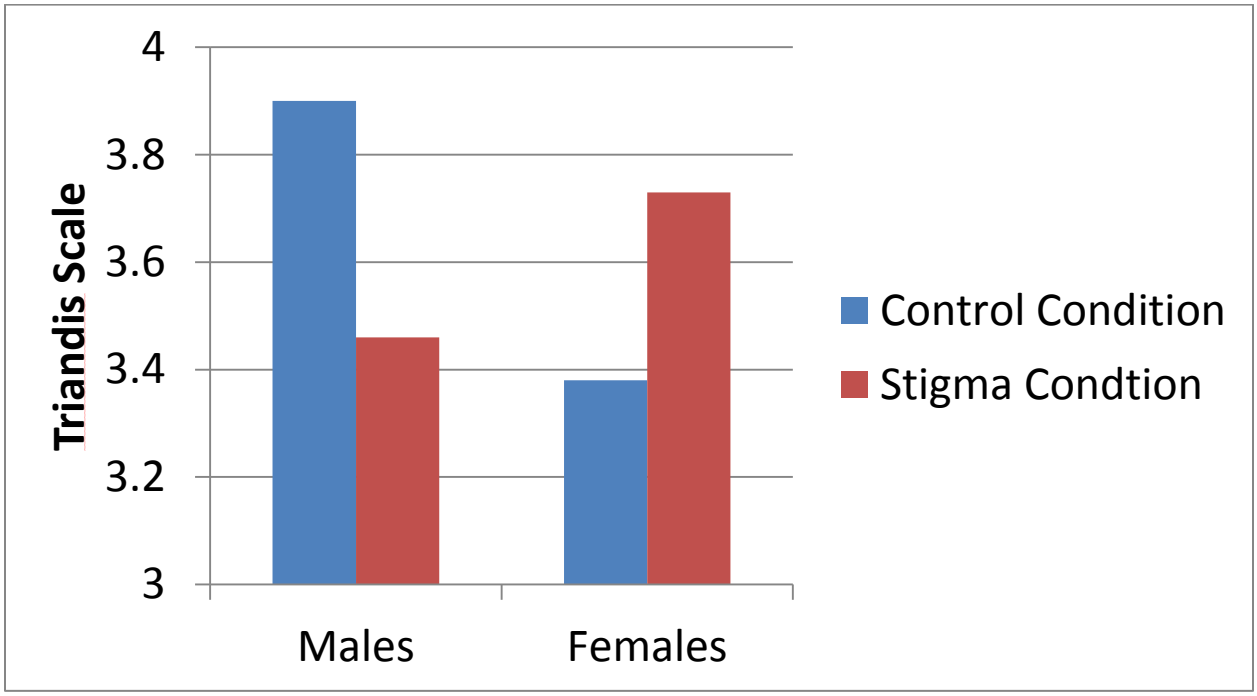

Figure 4: Difference in Interdependence Scores between Conditions in Study 2 using the Triandis Collectivism Scale

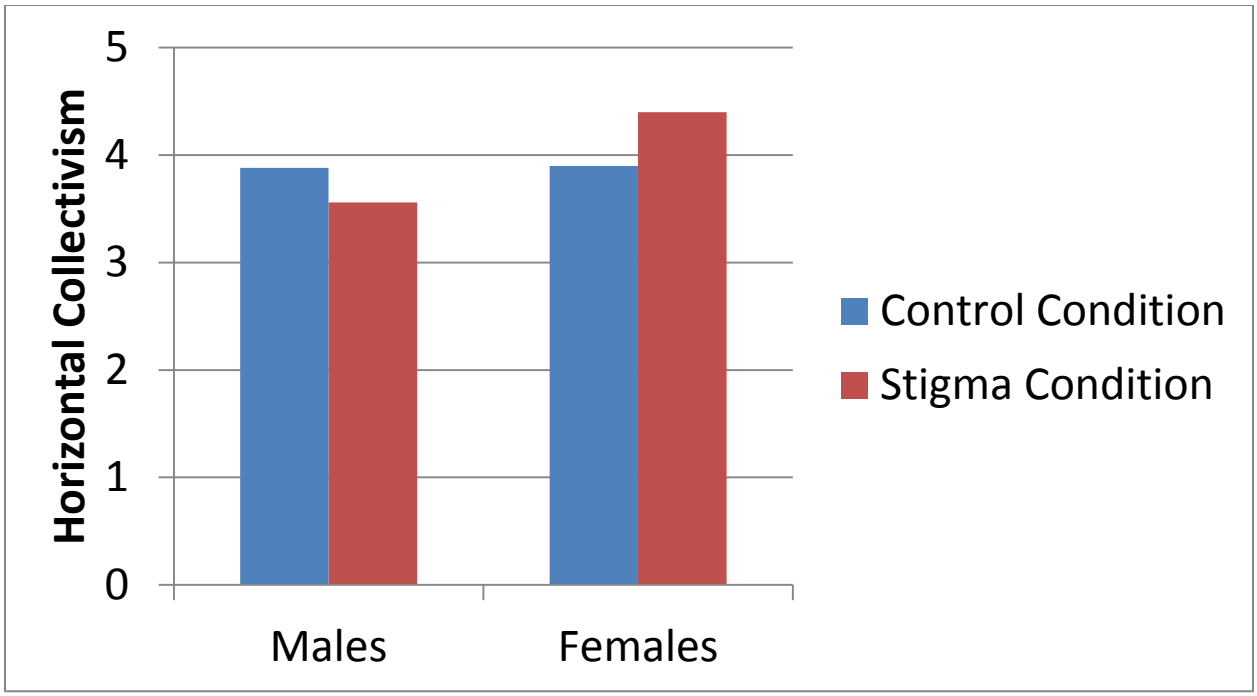

Figure 5: Difference in Interdependence Scores between Conditions in Study 2 using the Horizontal Triandis Collectivism Scale

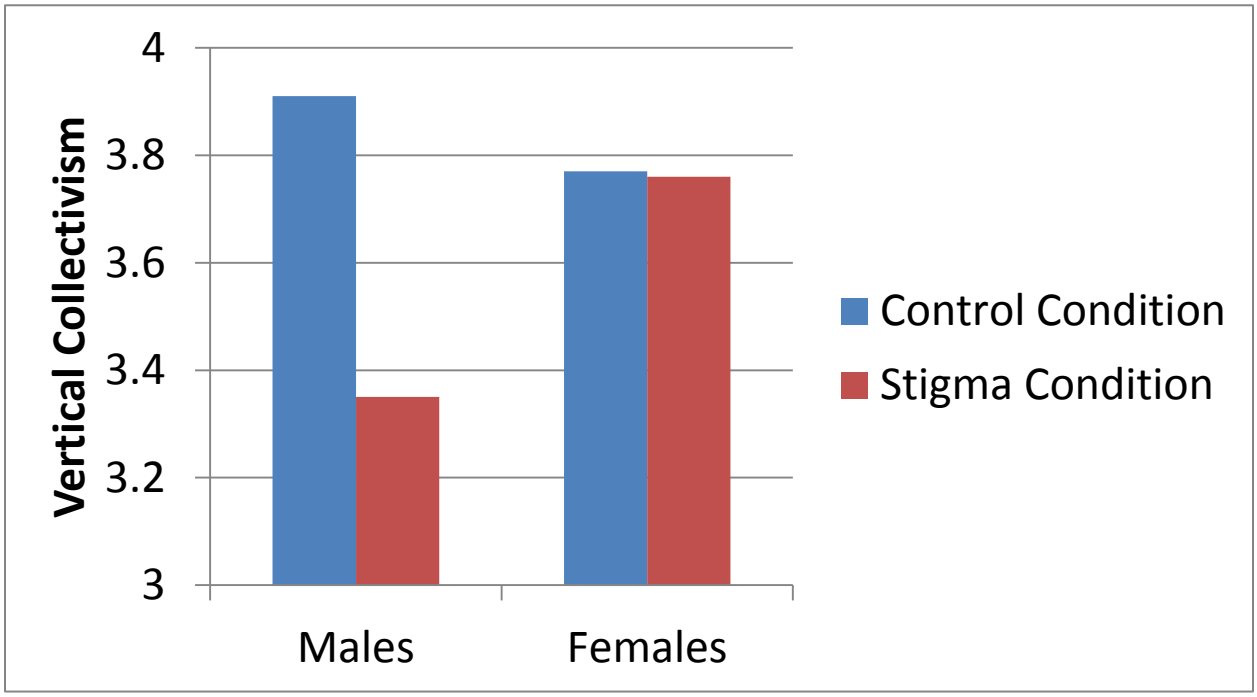

Figure 6: Difference in Interdependence Scores between Conditions in Study 2 using the Vertical Triandis Collectivism Scale

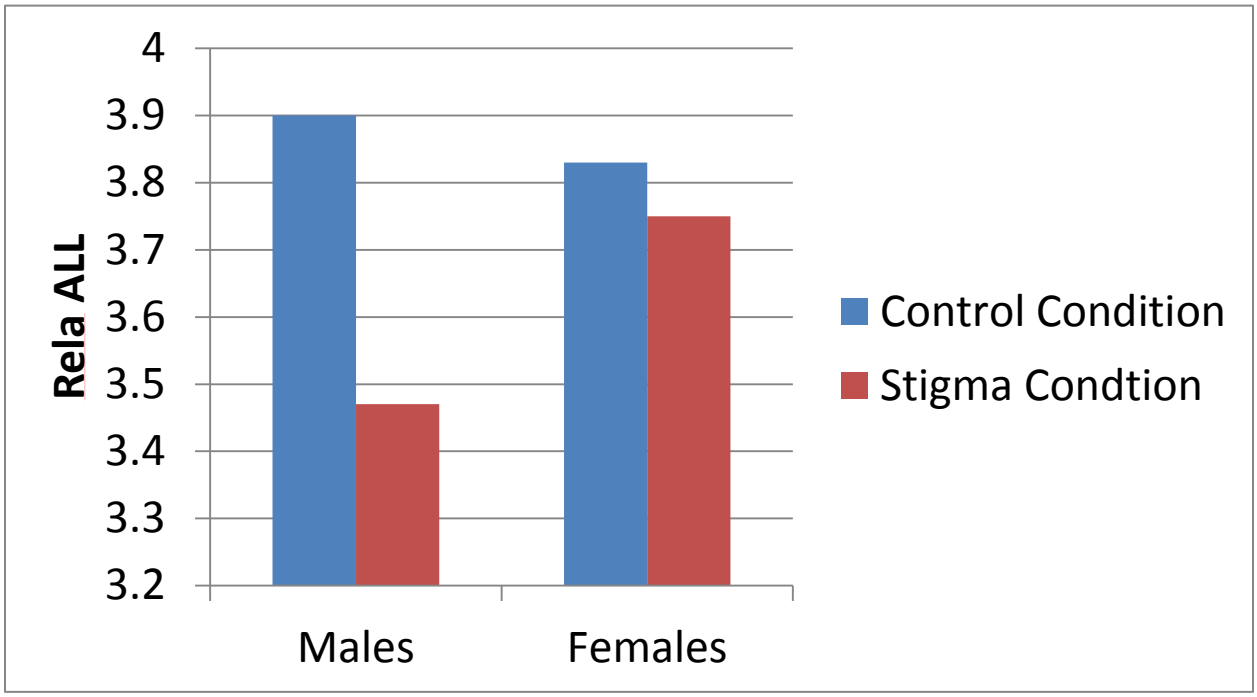

Figure 7: Difference in Interdependence Scores between Conditions in Study 2 using the Composite Relationality Score

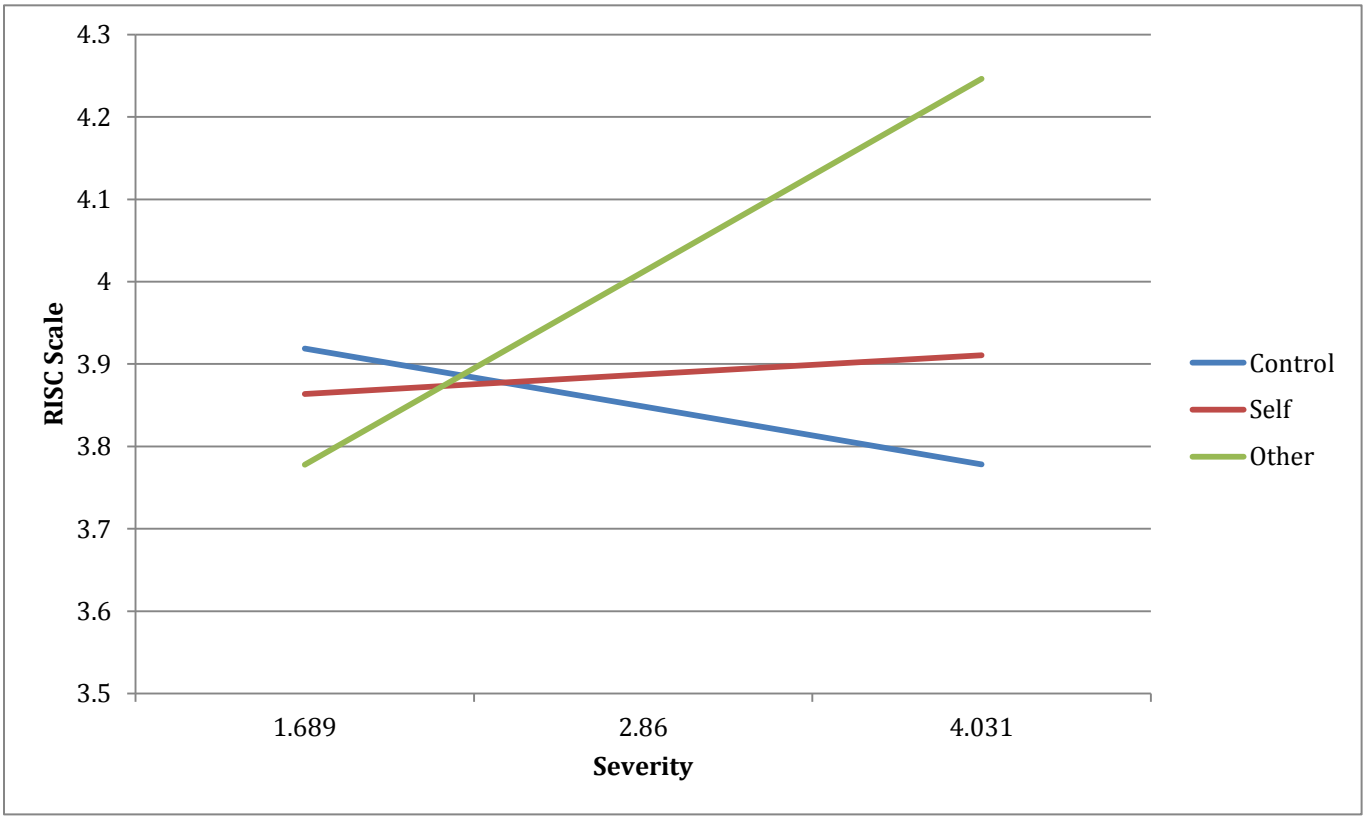

Figure 8: Study 3 Regression Slopes using the using the RISC Scale

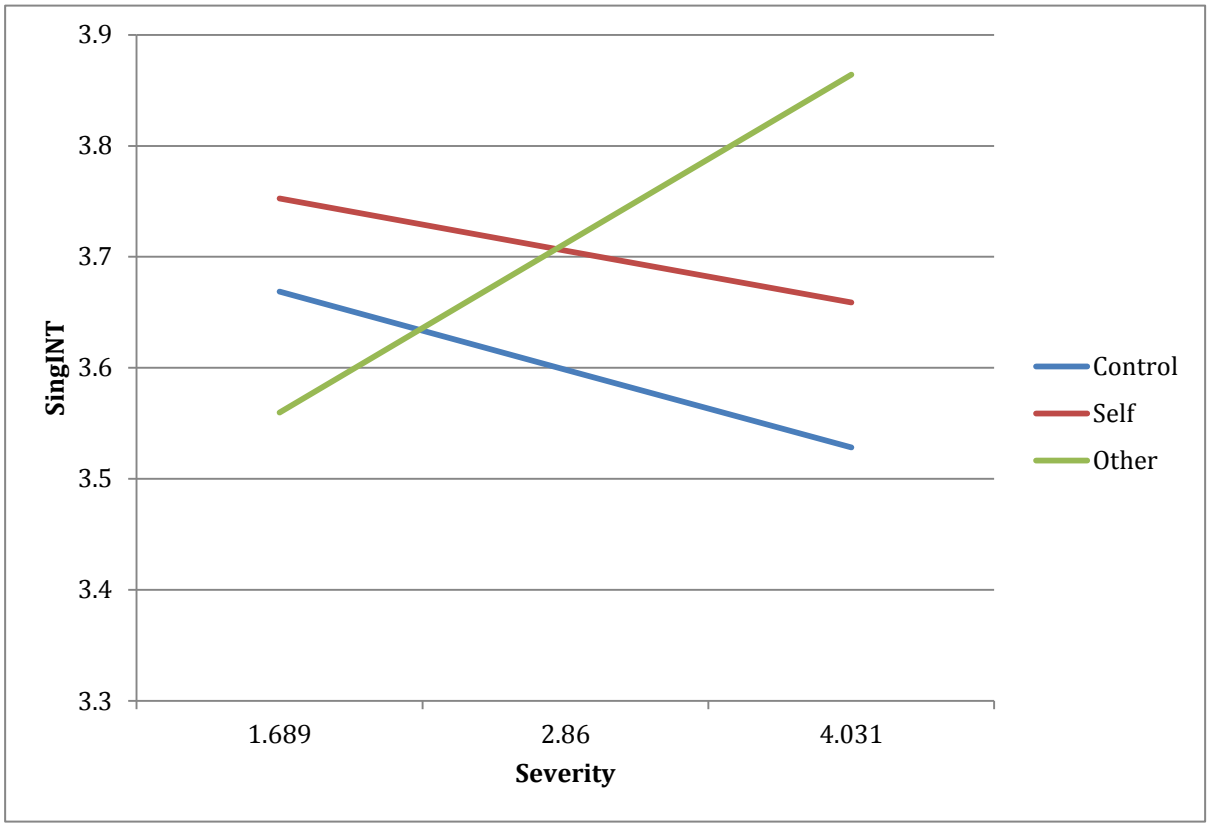

Figure 9: Study 3 Regression Slopes using the using the Singelis Self-Construal Scale

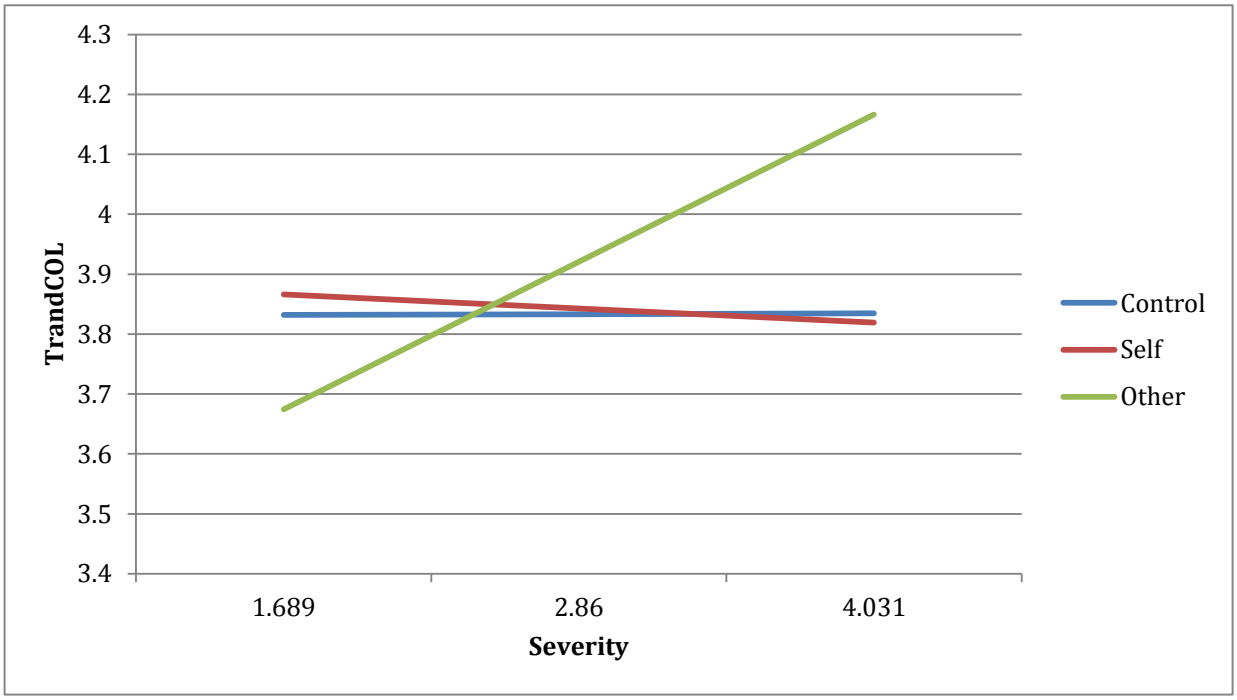

Figure 10: Study 3 Regression Slopes using the using the Triandis Collectivism Scale

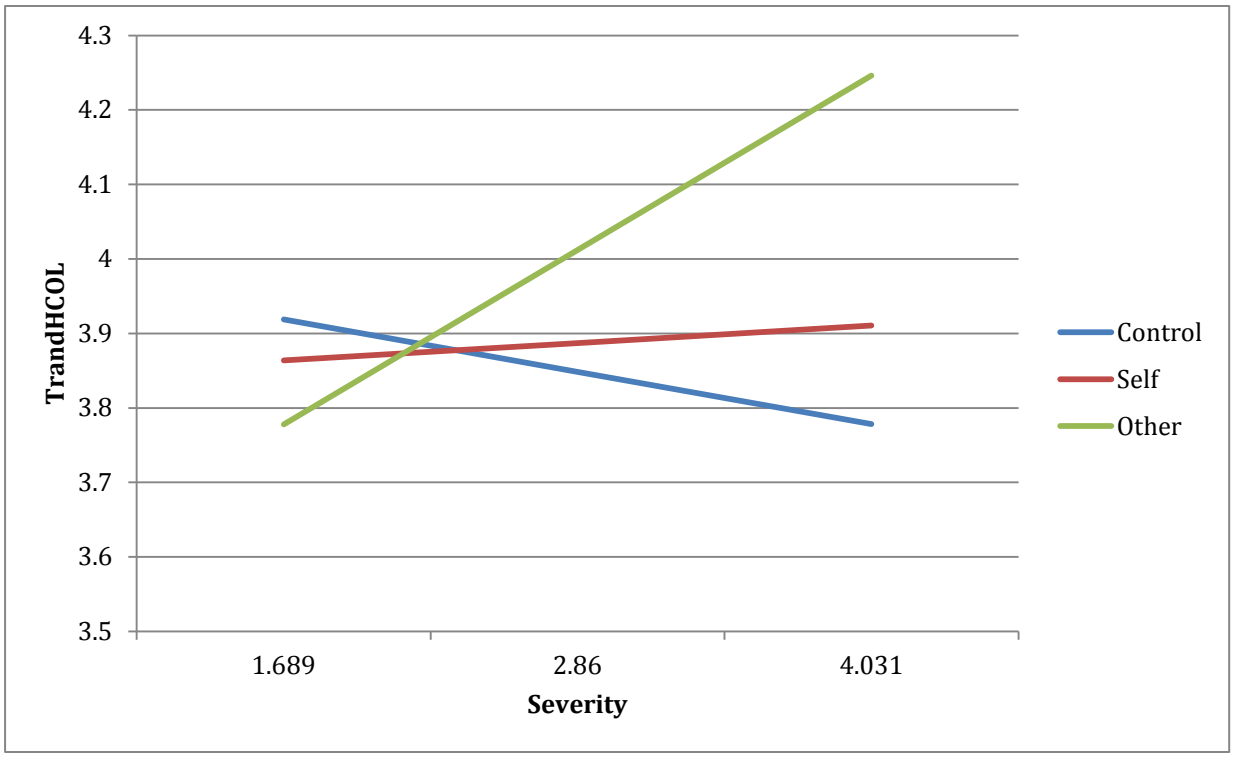

Figure 11: Study 3 Regression Slopes using the using the Triandis Horizontal Collectivism Scale

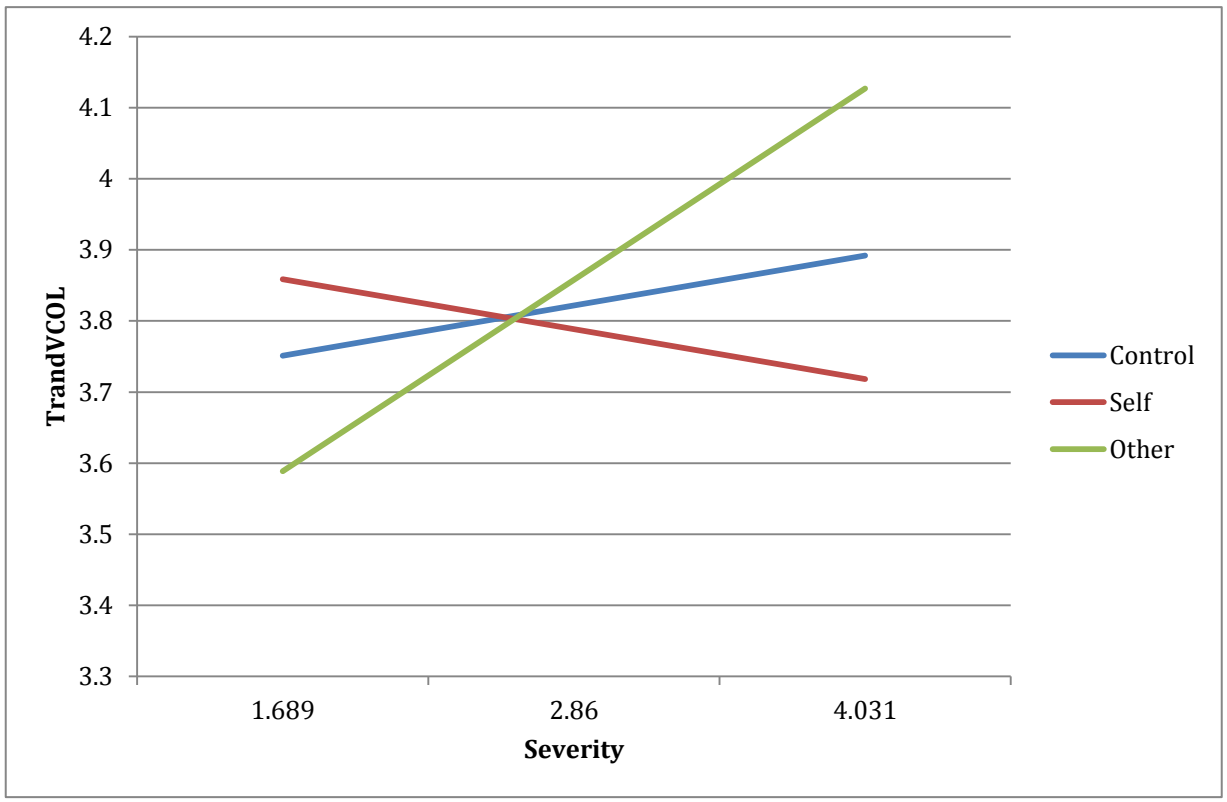

Figure 12: Study 3 Regression Slopes using the Triandis Vertical Collectivism Scale

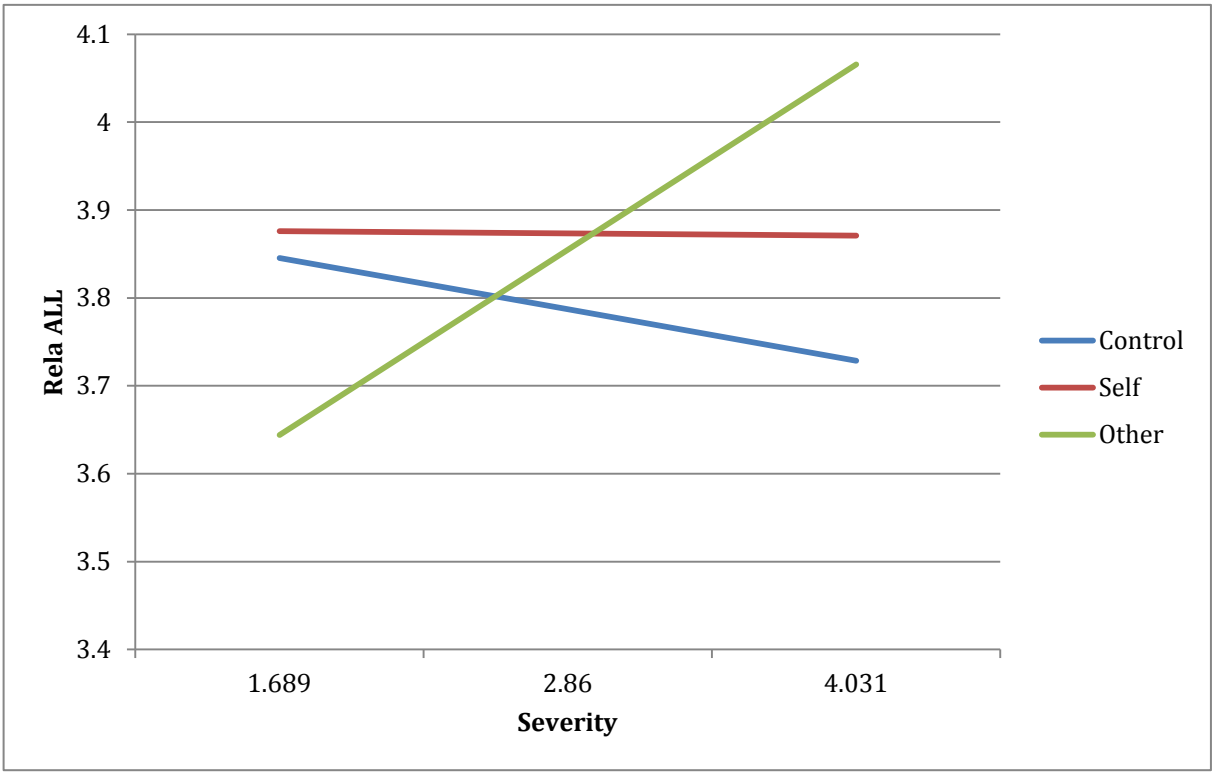

Figure 13: Regression Slopes Conditions in Study3 using the Composite Relationality Score

Appendix C: Stigma Scale (Harvey, 2001)

1) I am viewed negatively by mainstream society.

1	2	3	4	5
Strongly Agree				Strongly Disagree

2) I feel that society views me as an inferior being.

1	2	3	4	5
Strongly Agree				Strongly Disagree

3) I feel that society holds a negative attitude toward me.

1	2	3	4	5
Strongly Agree				Strongly Disagree

4) Society discriminates against me.

1	2	3	4	5
Strongly Agree				Strongly Disagree

5) I feel I am often treated differently during social interactions with members of mainstream society.

1	2	3	4	5
Strongly Agree				Strongly Disagree

6) I feel as though society sees me as something less than a human.

1	2	3	4	5
Strongly Agree				Strongly Disagree

7) I feel that I am consistently judged by society on the basis of things other than my abilities or personality.

1	2	3	4	5
Strongly Agree				Strongly Disagree

8) I feel that I have to work harder than members of mainstream society in order to overcome society's prejudice toward us.

1	2	3	4	5
Strongly Agree				Strongly Disagree

9) Members of mainstream society do not think that I am very capable.

1	2	3	4	5
Strongly Agree				Strongly Disagree

10) Members of mainstream society seem to trust me.

1	2	3	4	5
Strongly Agree				Strongly Disagree

11) I feel as though mainstream society views me as having a shortcoming.

1	2	3	4	5
Strongly Agree				Strongly Disagree

12) I am generally treated as an object, rather than as a person.

1	2	3	4	5
Strongly Agree				Strongly Disagree

13) Members of mainstream society are afraid me.

1	2	3	4	5
Strongly Agree				Strongly Disagree

14) Members of one of the groups I am affiliated with feel "at home" in society.

1	2	3	4	5
Strongly Agree				Strongly Disagree

15) I do not feel victimized by society.

1	2	3	4	5
Strongly Agree				Strongly Disagree

16) Society me according to a stereotype.

1	2	3	4	5
Strongly Agree				Strongly Disagree

17) Members of mainstream society want to be friends with me.

1	2	3	4	5
Strongly Agree				Strongly Disagree

18) I feel that I am often deprived of opportunities that are generally available to the mainstream.

1	2	3	4	5
Strongly Agree				Strongly Disagree

<u>Fillers</u>

Society's negative attitudes toward me have lowered my pride.

Society's negative attitudes have disrupted my relationship with my family.

The negative attitudes that society has toward me have caused me to believe that those negative attitudes are justified.

Appendix D: Revised Stigma Scale (Modeled after Harvey, 2001)

1) One of the groups that I identify with (race, gender, sexual orientation, ect.) is viewed negatively by mainstream society.

1	2	3	4	5
Strongly Agree				Strongly Disagree

2) I feel that society views me as an inferior being because I am a member of a particular group.

1	2	3	4	5
Strongly Agree				Strongly Disagree

3) I feel that society holds a negative attitude toward me because of one of my group affiliations.

1	2	3	4	5
Strongly Agree				Strongly Disagree

4) Society discriminates against the group that I am a part of.

1	2	3	4	5
Strongly Agree				Strongly Disagree

5) I feel that members of one of the groups I am affiliated with are often treated differently during social interactions with members of mainstream society.

1	2	3	4	5
Strongly Agree				Strongly Disagree

6) I feel as though society sees members of one of the groups I am affiliated with as something less than a human.

1	2	3	4	5
Strongly Agree				Strongly Disagree

7) I feel that members of one of the groups I am affiliated with are consistently judged by society on the basis of things other than my abilities or personality.

1	2	3	4	5
Strongly Agree				Strongly Disagree

8) I feel that members of one of the groups I am affiliated with have to work harder than

members of mainstream society in order to overcome society's prejudice toward us.

1	2	3	4	5
Strongly Agree				Strongly Disagree

9) Members of mainstream society do not think that members of one of the groups I am affiliated with are very capable.

1	2	3	4	5
Strongly Agree				Strongly Disagree

10) Members of mainstream society seem to trust members of my particular group (gender, race, sexual orientation, ect).

1	2	3	4	5
Strongly Agree				Strongly Disagree

11) I feel as though mainstream society views me as having a shortcoming because I am a part of a particular group that isn’t viewed as mainstream.

1	2	3	4	5
Strongly Agree				Strongly Disagree

12) Members of my group are generally treated as objects, rather than as a person.

1	2	3	4	5
Strongly Agree				Strongly Disagree

13) Members of mainstream society are afraid of members of one of the groups with which I am affiliated.

1	2	3	4	5
Strongly Agree				Strongly Disagree

14) Members of one of the groups I am affiliated with feel "at home" in society.

1	2	3	4	5
Strongly Agree				Strongly Disagree

15) Members of the group I am affiliated with do not feel victimized by society.

1	2	3	4	5
Strongly Agree				Strongly Disagree

16) Society treats members of one of the groups I am affiliated with according to a stereotype.

1	2	3	4	5
Strongly Agree				Strongly Disagree

17) Members of mainstream society want to be friends with members of the group with which I most identify.

1	2	3	4	5
Strongly Agree				Strongly Disagree

18) I feel that the group I am a part of is often deprived of opportunities that are generally available to the mainstream.

1	2	3	4	5
Strongly Agree				Strongly Disagree

Appendix E:
Horizontal and Vertical Individualism and Collectivism (Triandis & Gelfand, 1998)

Horizontal Individualism

1. I'd rather depend on myself than others.

1	2	3	4	5
Strongly Agree				Strongly Disagree

2. I rely on myself most of the time; I rarely rely on others.

1	2	3	4	5
Strongly Agree				Strongly Disagree

3. I often do "my own thing."

1	2	3	4	5
Strongly Agree				Strongly Disagree

4. My personal identity, independent of others, is very important to me.

1	2	3	4	5
Strongly Agree				Strongly Disagree

Vertical Individualism

5. It is important that I do my job better than others.

1	2	3	4	5
Strongly Agree				Strongly Disagree

6. Winning is everything.

1	2	3	4	5
Strongly Agree				Strongly Disagree

7. Competition is the law of nature.

1	2	3	4	5
Strongly Agree				Strongly Disagree

8. When another person does better than I do, I get tense and aroused.

1	2	3	4	5
Strongly Agree				Strongly Disagree

Horizontal Collectivism

9. If a coworker gets a prize, I would feel proud.

1	2	3	4	5
Strongly Agree				Strongly Disagree

10. The well-being of my coworkers is important to me.

1	2	3	4	5
Strongly Agree				Strongly Disagree

11. To me, pleasure is spending time with others.

1	2	3	4	5
Strongly Agree				Strongly Disagree

12. I feel good when I cooperate with others.

1	2	3	4	5
Strongly Agree				Strongly Disagree

Vertical Collectivism

13. Parents and children must stay together as much as possible.

1	2	3	4	5
Strongly Agree				Strongly Disagree

14. It is my duty to take care of my family, even when 1 have to sacrifice what I want.

1	2	3	4	5
Strongly Agree				Strongly Disagree

15. Family members should stick together, no matter what sacrifices are required.

1	2	3	4	5
Strongly Agree				Strongly Disagree

16. It is important to me that I respect the decisions made by my groups.

1	2	3	4	5
Strongly Agree				Strongly Disagree

Appendix F: Singelis Self-Construal Scale (Singelis, 1994)

Please indicate the extent of your agreement with the following items by answering with a number from 1 to 7.

1	2	3	4	5
Strongly Agree				Strongly Disagree

___ 1. My personal identity independent of others is very important to me.
___ 2. I value being in good health above all else.
___ 3. I have respect for the authority figures with whom I interact.
___ 4. It is important for me to maintain harmony within groups I belong to.
___ 5. Having a lively imagination is important to me.
___ 6. I am comfortable with being singled out for praise or rewards.
___ 7. My happiness depends on the happiness of those around me.
___ 8. I would offer my seat in a bus to my professor.
___ 9. I respect people who are modest about themselves.
___ 10. I am the same person at home that I am at school.
___ 11. I will sacrifice my self-interest for the benefit of the group I am in.
___ 12. I often have the feeling that my relationships with others are more important than my own accomplishments.
___ 13. I'd rather say "No" directly, than risk being misunderstood.
___ 14. Speaking up during a class is not a problem for me.
___ 15. I should take into consideration my parents' advice when making education/career plans.
___ 16. It is important to me to respect decisions made by the group.
___ 17. I will stay in a group if they need me, even when I'm not happy with the group.
___ 18. If my brother or sister fails, I feel responsible.
___ 19. Even when I strongly disagree with group members, I avoid an argument.
___ 20. Being able to take care of myself is a primary concern for me.
___ 21. I act the same way no matter who I am with.
___ 22. I feel comfortable using someone’s first name soon after I meet them, even when they are much older than I am.
___ 23. I prefer to be direct and forthright when dealing with people I’ve just met.
___ 24. I enjoy being unique and different from others in many respects.

Appendix G:
Relational Interdependence Self Construal Scale (RISC; Cross & Madson, 1997)

Please read the following statements carefully and circle to what extent you agree or disagree with each item.

1. My close relationships are an important reflection of who I am.

1	2	3	4	5
Strongly Agree				Strongly Disagree

2. When I feel very close to someone, it often feels to me like that person is an important part of who I am.

1	2	3	4	5
Strongly Agree				Strongly Disagree

3. I usually feel a strong sense of pride when someone close to me has an important accomplishment.

1	2	3	4	5
Strongly Agree				Strongly Disagree

4. I think one of the most important parts of who I am can be captured by looking at my close friends and understanding who they are.

1	2	3	4	5
Strongly Agree				Strongly Disagree

5. When I think of myself, I often think of my close friends or family also.

1	2	3	4	5
Strongly Agree				Strongly Disagree

6. If a person hurts someone close to me, I feel personally hurt as well.

1	2	3	4	5
Strongly Agree				Strongly Disagree

7. In general, my close relationships are an important part of my self-image.

1	2	3	4	5
Strongly Agree				Strongly Disagree

8. Overall, my close relationships have very little to do with how I feel about myself.

1	2	3	4	5
Strongly Agree				Strongly Disagree

9. My close relationships are unimportant to my sense of what kind of person I am.

1	2	3	4	5
Strongly Agree				Strongly Disagree

10. My sense of pride comes from knowing who I have as close friends.

1	2	3	4	5
Strongly Agree				Strongly Disagree

11. When I establish a close friendship with someone, I usually develop a strong sense of identification with that person.

1	2	3	4	5
Strongly Agree				Strongly Disagree

Appendix H: Stigma Salience Manipulation (Pinel, 1999)

Below you will find a list of examples of times when men have stereotyped women. After reading each example, please indicate whether you have ever seen or heard of a similar example. Circle a ‘‘yes’’ if you have, a ‘‘no’’ if you have not. Note that, if you encountered an example on television, in the movies, or in a book, etc., you should respond ‘‘yes’’, even if you or no one you know has had a similar experience.

Women

1) Maria goes to a mechanic for a routine oil change for her relatively new vehicle. Upon picking up her keys, she is informed by the clerk that there are multiple problems with the engine that need to be fixed immediately. When the client voices her suspicion that the issues aren’t as dire as suggested, the mechanic replies “it’s up to you whether or not to get the engine fixed, but it kills me to think that a woman might be stranded on the side of the road due to car failure. Talk it over with your husband and get back to me.”
2) Meghan is about to leave to go to a car lot to inquire about a Toyota Camry that she is interest in buying. Before she leaves she tells her friend, Ben, that she is excited about the prospect of buying a new car, to which he replies “would you like me to tag along? It’s always a good idea to bring a guy with you to places like these.”
3) After getting her score back for a math test her class took last week, Mikisha is made aware that her score was at least a full letter grade worse than the boys that sit around her. Upon finding this out, Brad, who is seated next to her, says “Don’t worry, girls are generally worse at math than boys. You are probably super good at English.”
4) At her job working as a department supervisor, Alicia is made aware of the possibility of being promoted to assistant manager is posted, which calls for all interested employees to apply. After interviewing for the position, she is informed that she is highly qualified, but because she is the primary caregiver in her household, her capability to be available to work at anytime was called into question. The position was given to a male employee instead.
5) When having a discussion about politics in the break room, Allison is told by her coworker, Dave, that “no woman should ever be elected president, simply because they are too emotionally volatile to handle all the stress that such a job entailed.”

Control condition

Below you will find a list of examples of times have received bad news. After reading each example, please indicate whether you have ever seen or heard of a similar example. Circle a ‘‘yes’’ if you have, a ‘‘no’’ if you have not. Note that, if you encountered an example on television, in the movies, or in a book, etc., you should respond ‘‘yes’’, even if you or no one you know has had a similar experience.

1) Maria goes to a mechanic for a routine oil change for her relatively new vehicle. Upon picking up her keys, she is informed by the clerk that there are multiple problems with the engine that need to be fixed immediately.
2) Spencer is driving to work one afternoon, going 5 miles above the speed limit on the highway. Just as he was approaching his exit, he was pulled over by a police officer for speeding.
3) After getting her score back for a test her class took last week, Mikisha is made aware that her score was at least a full letter grade worse than the students that sit around her.
4) At her job working as a department supervisor, Alicia is made aware of the possibility of being promoted to assistant manager is posted, which calls for all interested employees to apply. After interviewing for the position, she is informed that she is highly qualified, but the position was given to another employee instead.
5) When having a discussion about music in the break room, Clayton is told by his coworker, Dave, “I just don’t understand the music you kids listen to these days. How is that music?

Appendix I: Stigma Reliving Task

Control Condition: Please write for two and a half minutes about a time that you have had a really bad day. The time will start automatically. Please don't worry too much about grammar; the survey will automatically continue after two and a half minutes have passed.

Self- Stigma Condition: Please write for two and a half minutes about a time that you have felt discriminated against in your life because you were a woman. The time will start automatically. Please don't worry too much about grammar; the survey will automatically continue after two and a half minutes have passed.

Other- Stigma Condition: Please write for two and a half minutes about a time that you have felt discriminated against in your life because you were a woman. The time will start automatically. Please don't worry too much about grammar; the survey will automatically continue after two and a half minutes have passed.

Appendix J: Demographic Questionnaire

What is your age? _____

What is your gender? (circle one) Female Male

What is your ethnicity? (put an "X" next to your response…specify if necessary)
_____African/African-American/Black
_____Arab/Arab-American/Middle Eastern
_____Asian/Asian-American/Pacific Islander/Indian
_____Caucasian/European-American/White
_____Latino/Hispanic/Chicano
_____Native American
_____Multiethnic or "Other", please specify _____

Please indicate your approximate academic standing:
_____1st year undergraduate (freshman)
_____2nd year undergraduate (sophomore)
_____3rd year undergraduate (junior)
_____4th year undergraduate (senior)
_____5th year + undergraduate (senior)

What was your total family income last year (from all sources, before taxes)? This refers to the summed incomes of all individuals living in your home:

_____less than $15,999
_____$16,000 to $19,999
_____$20,000 to $29,999
_____$30,000 to $39,999
_____$40,000 to $49,999
_____$50,000 to $59,999
_____$60,000 to $69,999
_____$70,000 to $79,999
_____$80,000 to $89,999
_____$90,000 or more

Please identify the HIGHEST level of education attained by your mother:
_____Some high school education
_____Earned a high school degree
_____Some college education
_____Earned a college graduate degree
_____Some post-graduate education
_____Earned a post-graduate degree

Please circle your HIGHEST level of education attained by your father:
_____Some high school education
_____Earned a high school degree
_____Some college education
_____Earned a college graduate degree
_____Some post-graduate education
_____Earned a post-graduate degree

Please indicate your relationship/marital status:

_____Single
_____In a relationship
_____Married
_____Separated
_____Divorced
_____Other: _____

Please respond to the following four questions in the space provided.

What was the purpose of the study?

Was there anything odd or confusing about the study? If so, what?

Do you think there was more to the study than what you were told? If so, what?

Do you think anything influenced or biased your responses during the course of the study?

Vita

Elizabeth Helen Fles was born in Muskegon, Mi. She graduated from Orchard View High School in her hometown and went on to complete a Bachelor's of the Arts in psychology with a minor in applied statistics at Grand Valley State University in Allendale, Mi. While completing her undergraduate degree, Elizabeth was able to able to attend the Universidad de las Americas in Puebla, Mexico for a semester, where she studied Mesoamerican culture, Mexican literature, and Mexican anthropology. She went on to attend the University of Tennessee, Knoxville, where she studies experimental psychology with an emphasis in social psychological research. Elizabeth graduated with a Master's of the Arts in experimental psychology in May of 2016. She is continuing her education by pursuing her Ph.D. in the same area.