



Contents lists available at ScienceDirect

## International Journal of Intercultural Relations

journal homepage: [www.elsevier.com/locate/ijintrel](http://www.elsevier.com/locate/ijintrel)

# “Heroes of adjustment”: Immigrant’s stigma and identity management<sup>☆</sup>



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## ARTICLE INFO

### Article history:

Received 18 July 2012  
Received in revised form 1 April 2014  
Accepted 21 April 2014

### Keywords:

Coping  
Immigrant  
Identity management  
Psychological well-being  
Social well-being

## ABSTRACT

The objective of the present work was to investigate individual and collective identity management strategies in relationship with well-being, based on a probability sampling with stratification by age and sex ( $N = 1250$ ) of immigrants living in Spain. An exploratory factor analysis provided evidence for a five-factor model of coping with negative social identity, with two individual (individual mobility and self-regulation and temporal and intragroup comparisons) and three collective strategies (intergroup social comparisons, making attributions to prejudice, and social competition). The study also showed that individual and collective identity management strategies are related to both psychological and social well-being. Temporal and intragroup comparisons and social competition were found to be adaptive coping resources for both psychological and social well-being. Individual mobility and self-regulation together with intergroup social comparisons and making attributions to prejudice strategies were costly for immigrants' well-being. These findings are discussed in the framework of social identity and social stigma models as well as positive psychology perspective.

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## 1. Introduction

Stigmatized individuals are not passive victims of prejudice and discrimination, but rather act to deal with their negative identity in order to preserve their well-being. They can apply a wide range of coping strategies, from individual efforts to deal with the stressor to group responses targeted at improving the group's situation. Research on coping with stigma is still limited (Miller & Kaiser, 2001), and is a long way short of integrating the strategies derived from stigma (Crocker, Major, & Steele, 1998; Major & O'Brien, 2005) and prejudice models such as social identity theory (SIT, Tajfel & Turner, 1979), usually examined as independent social constructions (see Stuber, Meyer, & Link, 2008).

This study sets out to demonstrate that social identity theory and the social stigma model in conjunction can provide a good explanation for the mechanisms of coping with threat to group identity as well as its consequences for well-being among members of groups with a disadvantaged status. Both social identity theory and the social stigma model are probably the two most known frameworks which describe the ways coping responses may help protect the vulnerable self-concept of a member of low status group. Social identity theory (SIT, Tajfel & Turner, 1979) explains how social identities can be associated with the well-being of social groups, and has been widely applied to investigate the coping strategies of devalued groups

<sup>☆</sup> The expression “heroes of adjustment” was adapted from Goffman (p. 36, 1963).

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(e.g., Blanz, Mummendey, Mielke, & Klink, 1998; Mummendey, Kessler, Klink, & Mielke, 1999). In turn, social stigma scholars propose a model in which an attribute which is given a negative social identity, and hence results in the stigmatization of certain social groups, can be confronted with by means of individual coping resources in order to preserve one's self-esteem (Crocker et al., 1998). These two models together may provide a comprehensive ground for the understanding the way devalued identity is dealt with and stigmatized individuals' well-being protected.

Neither in the framework of social identity or that of social stigma has there been much research focusing on the way immigrants cope with stigma. In contrast to other studies focused on native-born ethnic minorities (e.g. Wei, Alvarez, Ku, Russell, & Bonett, 2010), the present research puts its attention on foreign-born immigrants. Numerous scholars have emphasized the importance of taking into account the variety of stressors an individual can be confronted with and the problems experienced by large groups within a society, such as racial tension and discrimination (Wong, 1993). A comprehensive understanding of coping with chronic stress such as a pervasive experience of stigmatization will be impossible if we look only at the classic coping responses to acute stressful events (Gottlieb, 1997).

Being an immigrant frequently involves being marked with a social stigma and experiencing discrimination. In the European Union, and in other regions or countries with intensive growth of minority populations, as is the case of Spain, attitudes toward immigration have become more restrictive (Meuleman, Davidov, & Billiet, 2009). Recent surveys carried out in all 27 European Union Member States confirmed that immigrant and ethnic minorities feel stigmatized, including Sub-Saharan (41%) and North African (36%) (European Agency for Fundamental Rights, 2010). Research has shown that ethnic or racial discrimination has negative consequences for the well-being, health, and self-esteem of devalued group members (e.g. Branscombe, Schmitt, & Harvey, 1999; Finch, Kolody, & Vega, 2000). To reach or maintain high levels of well-being, members of ethnic minority groups need to be empowered with sufficient resources for confronting the difficulties they face in a dominant culture (Noh & Kaspar, 2003). If the optimal coping resources are accessible, migration can lead to positive outcomes.

### 1.1. Individual and collective identity management strategies as serving personal and group-related aspects of well-being

Social identity theory (SIT; Tajfel & Turner, 1979) is one of the most known frameworks which offer explanations for how members of disadvantaged groups may make use of identity management strategies to achieve a positive personal and/or group identity. SIT describes three basic strategies: individual mobility, social creativity, and social competition, chosen depending on how people respond to the social-structural conditions or status differences. The three strategies can be placed on a continuum extending from individual-level to group- or collective-level strategies: whereas individual mobility and social competition are clearly conceptualized as responses serving personal or group goals respectively, social creativity may be an expression of either type of tendency (Branscombe & Ellemers, 1998). Social stigma scholars place a special emphasis on engagement versus disengagement responses as the two intersecting dimensions (Major & O'Brien, 2005; Miller & Kaiser, 2001). Among the three classic responses in the social stigma model are passive responses such as psychological disengagement, and responses requiring stronger identity involvement in the processes related to stigmatization, such as making attributions for negative outcomes to prejudice or diverse types of social comparisons.

The present research compares the way identity management strategies are associated with psychological (a personal facet) and social well-being (a public facet). According to SIT, individualistic identity management strategies involve improving one's own situation and achieving positive *personal* identity whereas the status of the ingroup remains the same. Collectivistic strategies are in turn attempts to achieve a positive *collective* identity (Branscombe & Ellemers, 1998). We extend this hypothesis on the social stigma model as well. The individual strategies such as individual mobility, emotional disengagement, and personal social comparisons are expected to serve mostly personal purposes, whereas the collective strategies would serve more group-related purposes.

The inclusion of psychological well-being as an indicator of a personal aspect of well-being and social well-being as an indicator of a public facet of individual's well-being is especially relevant in the study of immigrants because so far only few studies have focused on these dimensions of well-being in similar populations (Keyes, 2006). The current investigation therefore goes beyond the operationalization of well-being in terms of commonly known indicators. We aim to stress the relevance of the link between the social identity perspective and the actual psychological functioning of real-life stigmatized groups from the positive psychology approach. Positive psychology suggests that people not only constantly seek to rectify deficiencies of pleasure and comfort (hedonic approach), but also try to "spread their wings" so as to live a fuller life (eudaimonic approach) (e.g., Ryan & Deci, 2001; Ryff & Singer, 2008).

Such nuances in the levels of functioning of immigrants may be especially evident in relation to their psychological well-being (Ryff, 1989; Ryff & Keyes, 1995), which would include such concepts as self-esteem and self-acceptance, a perception of life with meaning and purpose, a sense of control over the environment (mastery), autonomy and personal fulfillment, sustaining positive relationships with others and a satisfactory level of integration and social support. Such aspects of well-being as perceived control over one's own life, satisfaction with the relationships with the members of the mainstream society, or a feeling of personal advancement are substantial elements in a successful migratory process. Social well-being is in turn the appraisal of one's circumstances and functioning in the society (Keyes, 1998), and also needs special attention in studying individuals in the process of adaptation to new societal conditions. Social well-being embraces five domains: social integration (feeling of belongingness and being accepted); social contribution (a belief in having something to contribute to society); social actualization (a belief in society's potential and growth); social acceptance (trust in others and the belief in

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