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Does unfairness feel different if it can be linked to group membership? Cognitive, affective, behavioral and physiological implications of discrimination and unfairness



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HIGHLIGHTS

- We compared fair/unfair treatment among Whites/Latinos in inter/intragroup contexts.
- Unfair treatment has different implications depending on group context.
- Ethnicity & system-legitimizing beliefs (SJBs) interact to predict responses to discrimination.
- Ethnicity & SJBs do not predict responses to unfair, group-irrelevant treatment.
- Post-discrimination, low-SJBs show cardiovascular challenge; high-SJBs show threat.

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ABSTRACT

We assessed whether unfair treatment leads to different attributional, emotional, behavioral, and cardiovascular responses depending on whether or not the treatment is group-based. Latino and White men (N=209) were treated fairly or unfairly by an ingroup or outgroup member. As expected, attributions to discrimination were the greatest among those treated unfairly in an intergroup context. Moreover, among those treated unfairly in an intergroup context, Latinos who did not endorse the protestant work ethic (PWE) responded with more anger, had higher attributions to discrimination, and punished the offender more, compared to Whites and high-PWE Latinos. Cardiovascular responses to unfair intergroup treatment did not differ by ethnicity: unfair intergroup treatment was less threatening (more challenging) when low (vs. high) in PWE. Results suggest that for low-status group members responding to unfair intergroup treatment (i.e., discrimination), identifying the treatment as discriminatory and becoming angry may be more cardiovascularly-adaptive than not. Implications are discussed.

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Introduction

Both unfairness and discrimination are highly aversive—they lead not only to anger, anxiety, and a sense of injustice, but also to acute stress and poor health outcomes (Jackson, Kubzansky, & Wright, 2006; Lind & Tyler, 1988; Pascoe & Smart Richman, 2009). Yet the phenomenological experience of discrimination may differ substantially from the experience of plain unfairness—even when the outcomes are objectively equivalent. In this study, we compare the psychological, behavioral, and physiological consequences of unambiguously unfair

(vs. fair) treatment that occurs in an *intergroup* context versus an *intragroup* context. We hypothesize that when unfair treatment comes from an outgroup (vs. ingroup) member, it is more likely to be attributed to discrimination, result in anger, lead to punishment of the offender, and prompt a challenge/approach (vs. threat/inhibitory) pattern of cardiovascular reactivity. Additionally, we hypothesize that ethnic group status and beliefs about system fairness further moderate responses to unfair treatment in intergroup (but not intragroup) contexts. Specifically, we expect that unfair intergroup treatment produces the most anger, discrimination attributions, punishment of the offender, and cardiovascular challenge when experienced by a low status group member who believes the status system is unfair.

Perceived unfairness, discrimination and stress

Both unfair treatment and discrimination cause negative emotions and poor health (De Vogli, Ferrie, Chandola, Kivimäki, & Marmot,

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2007; Jackson et al., 2006; Pascoe & Smart Richman, 2009; Schmitt, Branscombe, Postmes, & Garcia, 2014). Yet does unfairness that occurs in intergroup contexts have *different* psychological and physiological effects than unfairness that occurs in intragroup contexts?

Some authors theorize that group-based unfairness may have more deleterious consequences than group-irrelevant unfairness because discrimination has additional implications for one's group and one's sense of rights and opportunities (Jackson et al., 2006; Williams & Mohammed, 2009). Consistent with this idea, research among Black Americans found that exposure to both anger-inducing and racist stimuli resulted in elevated diastolic and systolic blood pressure (relative to exposure to neutral stimuli). Yet only those who faced racist stimuli maintained elevated diastolic blood pressure during recovery (Fang & Myers, 2001). Other theoretical perspectives, however, suggest that when poor outcomes are seen as group-based, individuals may discount their own role in producing those outcomes, thus protecting their selfesteem (Crocker & Major, 1989; Major, Quinton, & Schmader, 2003). As such, group-based unfairness may be less threatening than groupirrelevant unfairness. Consistent with this, research on adolescents found that poor treatment attributed to group membership (race) was unrelated to cardiovascular function, whereas unfairness attributed to non-group factors (physical attractiveness) predicted elevated ambulatory blood pressure (Matthews, Salomon, Kenyon, & Zhou, 2005), Also consistent with this theorizing, Mendes, Major, McCoy, and Blascovich (2008) found that people who were rejected by a different-race peer showed a pattern of cardiovascular reactivity (CVR) characteristic of approach motivation or challenge, whereas those rejected by a same-race peer showed a CVR pattern of characteristic of inhibitional motivation or threat. This work suggests that unfairness may be most threatening when it cannot be attributed to discrimination.

We hypothesize that while unfair treatment in both intragroup and intergroup contexts may have negative emotional and physiological consequences, responses to unfair treatment may vary *phenomenologically* depending on the group context of the treatment. Specifically, we hypothesize that unfair treatment that occurs in an intergroup context is more likely to be attributed to discrimination, more likely to lead to anger, and more likely to cause a challenge CVR pattern than unfair treatment that is not seen as due to group membership. Challenge CVR patterns tend to be associated with approach-oriented behavior and emotions, whereas threat CVR patterns are more likely to be associated with avoidant or inhibitional emotions/behavior (Herrald & Tomaka, 2002). As such, while both group-based and group-irrelevant unfair treatment may be aversive, the emotional, attributional, behavioral, and cardiovascular implications may differ in systematic ways.

Group status and perceived status legitimacy

In addition to exploring whether group context affects responses to unfair treatment, we suggest that two additional factors may moderate responses to unfair intergroup treatment: (1) the relative group status of the person treated unfairly, and (2) the extent to which group status differences are perceived as legitimate (Jost & Hunyady, 2005). Surprisingly little research has compared how members of high- versus low-status groups respond when exposed to the exact same forms of unfair treatment in intergroup contexts. Some researchers argue that the effects of discriminatory treatment will be more negative for low- rather than high-status group members, in part because unfair treatment is more easily legitimized when it occurs from high status groups to low status groups (e.g., Schmitt & Branscombe, 2002). Others posit that the effects of discriminatory treatment will be more negative for high-status groups because it is perceived as a greater threat to status (Jackson et al., 2006).

A third possibility is that the effect of group status on responses to discrimination depends on beliefs about the fairness of the status hierarchy. System-legitimizing beliefs, such as the view that success is due to hard work, have been found to moderate how members of

lower-status groups (women, ethnic minorities) explain and respond to rejection in intergroup contexts. Specifically, the more low-status groups endorse system-legitimizing beliefs, the less likely they are to attribute rejection by a (higher status) outgroup member to discrimination, and the more threatened they are by perceptions of discrimination (Major, Kaiser, O'Brien, & McCoy, 2007; Townsend, Major, Sawyer, & Mendes, 2010). Based on the above research, we hypothesized that when treated unfairly by a higher-status outgroup member, lower-status individuals who believe the system is unfair (vs. fair) would be more likely to attribute their treatment to discrimination, be angry, punish the offender, and show a challenge pattern of CVR. We predicted that those who believe the system is fair would show a threat pattern of CVR in response to unfair treatment by higher-status outgroup members.

We did not make strong predictions for the impact of systemlegitimizing beliefs on responses to group-based unfairness among high status group members. Prior research has found high status groups who endorse (vs. reject) that system-legitimizing beliefs are more likely to attribute rejection by a lower status minority group to discrimination (Major et al., 2002), to derogate ethnic minority discrimination claimants (Kaiser, Dyrenforth, & Hagiwara, 2006), and to perceive high levels of anti-White discrimination (Wilkins & Kaiser, 2014). As such, in unfair, intergroup contexts, high-status group members who endorse systemlegitimizing beliefs may have higher discrimination attributions and more anger than their high-status counterparts who do not endorse those beliefs. However, there is also good evidence that people are threatened by experiences that violate their expectations or worldview and challenged by experiences that confirm them (Mendes et al., 2008; Townsend et al., 2010). From this perspective, high-status individuals who strongly believe the system is fair may be threatened by discriminatory treatment and show a threat pattern of CVR in response.

Overview

The primary question this research addressed was whether unfair treatment that occurs in intergroup contexts—and is thus potentially group-based—is perceived and experienced differently than unfair treatment that occurs in intragroup contexts. We also examined group status and endorsement of system-legitimizing ideologies as moderators of responses to unfair treatment in intergroup contexts. We hypothesized that the less members of low status groups endorse status-legitimizing beliefs, the more likely they would be to label group-based unfairness as discrimination, react with anger, punish the perpetrator of the unfair treatment, and display a challenge/activational pattern of CVR. We did not have strong predictions for high status groups.

Method

Design

The study design was a 2 (Group Context: Intragroup vs. Intergroup) \times 2 (Fairness Condition: Fair vs. Unfair) \times 2 (Group Status: High or Low) \times Continuous (System-Legitimizing Beliefs) between-subject factorial. Group status was operationalized using existing ethnic groups: Latinos (lower-status) and non-Hispanic Whites (higher-status). System-legitimizing beliefs were operationalized with a measure of Protestant Work Ethic (PWE) used in past research (e.g., Dover, Major, & Kaiser, 2014; Levin, Sidanius, Rabinowitz, & Federico, 1998).

Participants

209 male university students ($M_{\rm age} = 19.60$) completed the study in exchange for either course credit or \$25; 90 self-identified as Latino, and 119 self-identified as White. We restricted participation to only one gender in order to minimize variance, given the large number of other

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