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Abstract

A growing body of literature on classism suggests that negative attitudes and treatment based on one's social class may have wide-ranging impacts on one's sense of self, behaviors, and well-being. Scholars have theorized that internalized classism may be eroding dignity and contributing to observed health disparities between those of higher and lower social classes, but little quantitative research has explored the subject. The present study attempted to address this gap in the literature by applying the regressive model of self-stigma, a model originally developed for internalized mental health stigma, to internalized classism to better understand how to define and measure internalized classism and explore whether it accounts for decrements in well-being. Participants who rated themselves as possessing a lower current or childhood subjective social status completed a survey on M-Turk answering questions about classist beliefs, negative and positive class-based stereotypes, self-esteem, self-efficacy, class-based shame, and quality of life. Results for the model were mixed. Classist beliefs did not significantly predict applying negative class-based stereotypes to oneself as hypothesized. However, positive and negative stereotype application did have significant effects on self-efficacy, self-esteem, and class-based shame, the latter two of which also directly impacted quality of life. Furthermore, differences in social class groups were observed with the model, suggesting that these variables differentially affect one's sense of self and well-being depending on social class. Future research should continue to explore how to define internalized classism and its impacts with a specific measure of internalized classism being most needed and recommended.

Keywords: internalized classism, regressive model of self-stigma, social class

Exploring Internalized Classism Using the Regressive Model of Self-Stigma

An American cultural myth exists that when European colonists landed on American soil they left the class boundaries of the old world behind them and entered into a blithe meritocracy. In fact, many of the British elite viewed the American colonies as places where they could get rid of the "waste," meaning the lower castes of society and those without redeeming qualities (Isenberg, 2016). The colonies also had their own elite, and the expansion of male suffrage and extension of political rights during the American Revolution brought with it fears of social "leveling" and redistribution of wealth (Ingersoll, 1999). Class issues took a new turn in the late 19th century as the industrial economy started growing exponentially and with it the rise of the labor movement and depictions of the working class as "rabble" and "mobs" (Zinn, 2001). During the eugenics movement of the early 20th century, poverty was seen as a symptom of being "unfit" and regarded as a piece of supposed evidence in favor of sterilization to prevent the spread of "inferior" traits (Katz, 1996). Issues of hierarchy and class thus have a long history in the United States and with it condemnation of those who are considered the "dregs of society" and threats to the social system (Isenberg, 2016).

Today, negative views of individuals of lower social class status continue to abound, despite assertions that the United States is a "classless" society (Zweig, 2012). However, as stories continue to appear in the media about rising levels of inequality in the United States, as well as the class issues inherent in the most recent presidential campaign, more Americans are beginning to pay attention to social class, psychologists included (APA Task Force on Socioeconomic Status, 2007). Still, little is known about the intrapsychic effects of social class, particularly the harm generated by class-based prejudice and discrimination. To help understand those suggested effects, the current paper presents a study of internalized classism – the

acceptance by those of lower class status of the dominant ideology behind classist prejudice, stereotyping, and discrimination (Abrams & Ceballos, 2012; Russell, 1996). Given the paucity of research and theory related to internalized classism, first, general forms of internalized oppression and internalized stigma are discussed. Then issues of downward classism, the foundation of internalized classism, are briefly reviewed. Next, a conceptualization of internalized classism is proposed using a model of mental illness internalized stigma as a guide. Finally, results are discussed of a study that uses this model to better understand the potential effects of internalized classism on well-being.

Internalized Oppression and Internalized Stigma

Internalized oppression is one of the indirect means by which members of a dominant group assert their power over a subordinate group. It occurs when subordinate group members internalize messages from the dominant group that they are inferior, unpleasant, and/or flawed (David & Derthick, 2014). As a result, those who engage in internalized oppression reject their own group and/or culture and embrace the culture and attitudes of the oppressor, wanting to emulate them (Bailey, Chung, Williams, Singh, & Terrell, 2011; David & Okazaki, 2006; Padilla, 2001). Because of the prevalence of negative messages about subordinate groups, oppression often results in an almost unconscious tendency for members of subordinate groups to engage in internalized oppression (David & Derthick, 2014). Internalized oppression, then, is a learned process that serves to perpetuate the social hierarchy. Turning to a more individual psychological perspective using a Cognitive Behavioral Therapy framework, internalized oppression may be understood as "a set of self-defeating cognitions, attitudes, and behaviors that were developed as one consistently experiences an oppressive environment" due to one's subordinate status (David & Derthick, 2014, p. 14).

Internalized stigma, also known as self-stigma, is quite similar to internalized oppression and is derived from work on social stigma. Goffman's (1963) work on stigma served as the progenitor of most current stigma theory. He described experiencing stigma as possessing a "spoiled identity" whereby one has been assigned undesirable or unpleasant attributes based on group membership that differentiate oneself from society. To be stigmatized is to be marked as undesirable and different from the norm of society; it is to be assigned a devalued social identity (O'Brien & Major, 2005). The concept of stigma has been redefined since Goffman with internalized stigma being added to the stigma literature more recently. Today, internalized stigma is defined "as a subjective process, embedded within a socio-cultural context, which may be characterized by negative feelings (about self), maladaptive behavior, identity transformation, or stereotype endorsement resulting from an individual's experiences, perceptions, or anticipation of negative social reactions on the basis" (Livingston & Boyd, p. 2151) of one's stigmatized status. This broad definition takes into account affective, cognitive, and behavioral processes involved in internalized stigma.

Internalized stigma research has explored stigma on the basis of race, sexuality, gender, mental illness, HIV/AIDS status, disability, and weight, to name a few domains of study (David & Derthick, 2014; Livingston & Boyd, 2010). Herek, Gillis, and Cogan (2009) described a system of sexual stigma with internalized sexual stigma, or internalized homophobia, as "personal acceptance of sexual stigma as part of [a person's] own value system" (p. 33). For example, internalized homophobia may result in the wish that an individual was attracted to the opposite sex or actively trying to change one's sexual orientation. Bailey et al. (2011) developed a measure of internalized racism that operationalizes the construct as self-destructive behaviors, internalization of stereotypes, acceptance of cultural myths about African-Americans, and

making efforts to change oneself to be more like Whites. According to their conceptualization, internalized racism may result in believing that African-Americans are dangerous or believing lighter skin is more attractive. With internalized stigma, individuals turn away from their group and towards the dominant group.

Great overlap exists in the concepts associated with the terms internalized oppression and internalized stigma, and practically separating out the two is difficult. Phelan, Link, and Dovidio (2008) make a compelling argument for the conceptual overlap of prejudice and stigma outlining how both function as exploitation and domination (keeping people down), norm enforcement (keeping people in), and disease avoidance (keeping people away). Some scholars argue that the term stigma should be phased out in favor of focusing on oppression and structural means of the reproduction of inequality, prejudice, discrimination, and stereotyping (Holley, Stromwall, & Bashor, 2012) and others for maintaining stigma as a more encompassing concept (Hatzenbuehler, Phelan, & Link, 2013). Solving this debate is beyond scope of this paper. For all intents and purposes of this paper, internalized stigma and internalized oppression may be viewed as the same. Moving forward, this paper will retain the term used by the author(s) in question and otherwise use internalized stigma.

Classism

Like race and sexuality, class is but another identity marker with associated societal measures of worth. Just as internalized racism is rooted in racism, internalized classism is rooted in classism. Classism is class-based oppression in the form of stereotyping, prejudice, and

discrimination directed toward those of low class status (Bullock, 1995).[1] Social class is at the root of classism and is a notoriously difficult concept to define (Diemer, Mistry, Wadsworth, López, & Reimers, 2013; Liu, Soleck, Hopps, Dunston, & Pickett, 2004). In a broad sense, social class is a "higher order construct representing an individual or group's relative position in an economic-social-cultural hierarchy" and "[denotes] power, prestige, and control over resources" (Diemer et al., 2013, p. 79). That hierarchy breeds classism, which is rooted in American cultural values, particularly the belief in the United States having a true meritocracy. This belief professes that all start on equal levels and all have equal access and opportunity to rise in class status. This belief means that class is earned not ascribed and one's inability to rise can be attributed to lack of effort, character, and/or ability (Weber, 1998). Most Americans, therefore, consider social class standing natural and to be expected (Kluegel & Smith, 1986). A perception exists in the United States of all individuals being able to "pull themselves up by their bootstraps," so the poor are often blamed for not working hard enough to achieve the American dream and rising up (Lott & Bullock, 2007; Smith & Redington, 2010). The rich and middle classes are then "more respected" and considered "diffusely more competent" than the working class and poor and are afforded greater status (Ridgeway & Fisk, 2012, p. 136). Jensen (2012) neatly sums up classism as "the set of myths and beliefs that keep . . . class divisions intact, that is, the belief that working class cultures and people are inherently inferior and that class itself demonstrates who the hardest workers and the rightful winners are" (p. 31).

[1] This paper will use the term "classism" to refer to downward classism, focusing on prejudice and discrimination directed towards individuals who are below oneself on the social class hierarchy. See Liu's Modern Classism Theory (2004, 2011) for a description of upward classism (prejudice and discrimination directed towards individuals who are above oneself on the social class hierarchy) and lateral classism (comparing oneself with those of a similar class status and behaviors meant to reinforce one's class status).

The concept of classism is relatively new in the field of psychology, and its literature base is accordingly small. This deficit is likely due to the observation that the field of psychology has accorded much less attention to social class compared to other fields of social science such as sociology, political science, public health, and economics (APA Task Force on Socioeconomic Status, 2007; Diemer et al., 2013; Lott & Bullock, 2007). Perhaps reflecting the incipient nature of classism research, early reviews of the classism literature by psychologists (see Bullock, 1995; Lott, 2002; Smith & Redington, 2010) have been more oriented toward proving the existence of classism by citing related research rather than providing a critical analysis of said research. To support the claim that classism exists, these reviews include research from a variety of disciplines and methodologies including psychology, counseling, education, economics, public health, sociology, anthropology, and media studies, reflecting the complexity and multi-disciplinary nature of social class and classism.

Anthropologists, sociologists, journalists and a few psychologists have produced many excellent qualitative ethnographies and interviews that have explored the daily experiences of individuals from poor and/or working class backgrounds. These works address the felt stigma associated with poverty, particularly those on welfare (e.g. Connolly, 2000; Liebow, 1993; Seccombe, 2011; Zucchino, 1997). They describe rude, demeaning treatment from a wide variety of people including social workers (Fine &Weis, 1999) and cashiers when using food stamps (Rank, 1994). Quantitative, empirical research also provides rich evidence for the existence of classism and is more common in the field of psychology. Quantitative studies of classism employ mostly self-report measures, asking individuals to make judgments about those of low class status and have found that those of low status are often associated with poor behavior

(Smith, Allen, & Bowen, 2010) and low competence and warmth (Fiske, Xu, Cuddy, & Glick, 1999). These studies, however, have been less common than qualitative studies.

Internalized Classism

Internalized classism, then, is internalizing the negative class-based messages present in classism. Russell (1996), one of the first to propose the concept of internalized classism, described it as the internalization of attitudes that imply one's class deserves poor treatment or is lesser than other classes. Cultural messages and resulting feelings of personal inferiority create "self-blame, shame, low expectations, discouragement and self-doubt, particularly about one's intelligence" (Yeskel, 2007, p. 14). In his Modern Classism Theory which describes classism as a system of class-based judgment that is used to achieve class-related goals and negotiate class boundaries, Liu (2004, 2011) emphasizes the affective components of internalized classism, namely frustration and dysphoria related to feelings of inadequacy regarding one's social class standing. Feelings of anxiety about one's worth or one's abilities appear to be prominent in descriptions of the effects of classism.

While class researchers take the existence of internalized classism for granted, little research explicitly names internalized classism or attempts to provide a larger theoretical or conceptual underpinning apart from basic definitions. This is likely a part of the observed gap in the research literature on the intrapsychic experience of social class (Ostrove & Cole, 2003). Some information can be surmised from studies of classism or other bodies of related research in sociology and social psychology. For example, a significant body of work on classism focuses on academics who come from poor, working class, or lower-middle class backgrounds. These individuals report strong feelings of cultural alienation in their new settings which affects their sense of self, particularly their sense of competence (e.g. Granfield, 1991; Jensen, 2012; Nelson,

Englar-Carlson, Tierney, & Hau, 2006). Most of these works are qualitative. To the author's knowledge, no quantitative measure of internalized classism existed at the time of writing.

The Regressive Model of Self Stigma

Given the lack of theoretical work on internalized classism, it may be helpful to look to research on other forms of internalized stigma to better understand how internalized classism may be measured and modeled. The regressive (or "why try") model of self-stigma developed by Corrigan seeks to explain harm incurred by internalized mental illness stigma (Corrigan, Bink, Schmidt, Jones, & Rüsch, 2016; Corrigan, Watson, & Barr, 2006). This model draws from Link's (1987) modified labeling theory which describes the process of internalizing cultural conceptions of mental illness, developing expectations for how one may be rejected and perceived accordingly, and fear of devaluation once one is then labeled mentally ill (Link & Phelan, 2001). Corrigan's regressive model has five components: awareness, agreement, application, diminished self-respect, and the why try effect (see Figure 1). In the first stage of the original model, *awareness*, one is aware of culturally constructed stigmatizing beliefs/stereotypes about one's group. For some individuals, this awareness may then result in *agreement* with some or all of these stigmatizing beliefs, the second stage. Agreement may then lead individuals to *apply* the stigmatizing beliefs to oneself, the third stage. Applying such negative beliefs to oneself then creates psychological *harm*, particularly in the form of *decreased self-respect*, the fourth stage. Decreased self-respect is defined as decreased self-esteem and self-efficacy, which

Figure 1. Regressive Model of Self Stigma

leads to the *"why try" effect* or behavioral futility, the fifth stage and ultimate outcome. For example, with mental illness stigma, a person may think "why try to get a job if I'm unstable and lack discipline?" The stigma target feels unable to work towards important life goals or unworthy of them. The model has also recently been applied to internalized stigma based on alcohol use disorders (Schomerus et al., 2011) and tobacco use (Evans-Polce, Castaldelli-Maia, Schomerus, & Evans-Lacko, 2015), providing some insight into difficulties related to changing health behaviors.

The regressive model of self-stigma provides a straightforward, flexible framework that may be useful for the study of a number of internalized stigmas, including internalized classism. Regarding the *awareness* stage, classism research provides good evidence for the prevalence of classist microaggressions in American society (Smith & Redington, 2010). Even if Americans are uncomfortable discussing class (hooks, 2000), most all are likely at least implicitly aware of the associated cultural beliefs and stereotypes, providing the foundation for the model. The following paragraphs will outline how the regressive model of self-stigma may be relevant and applicable to internalized classism. Given the relative dearth of research on classism and the felt experience of class compared to other stigmatized social categories, related work from other types of internalized stigma and system justification theory will be presented along with related class research. System justification theory is a social psychological theory that describes how and why individuals uphold existing social and economic systems (Jost & Banaji, 1994). Also, recent research did not support the first *awareness* stage of the model, perhaps because much larger numbers of people are aware of stereotypes than endorse them (Corrigan et al., 2016). Awareness must be present in order for agreement to occur, making it somewhat redundant to

measure. As such, it will be excluded from this study, which will start with the hypothesized *agree* stage.

The agree stage. To agree with negative stereotypes about those of lower social class status is to agree with widely held classist beliefs such as the poor being largely to blame for their financial status (Bullock, Williams, & Limbert, 2003). When individuals agree with the tenets of the current socioeconomic system, or the status quo, this is to engage in a form of system justification. System justification is "the set of social psychological processes by which the status quo is defended and upheld simply because it exists" (Jost, Pietrzak, Liviatan, Mandisodza, & Napier, 2008, p. 592). Jost & Banaji (1994) introduced system justification theory to explain why people accept the status quo even when it does not help or actually harms them. While system justification is rarely connected to the term internalized stigma, significant overlap between the two concepts exists. Internalized stigma is a process of believing in the ideology and mainstream messages about one's group that are upheld by the dominant group. This is the essence system justification. When those of lower social class status defend or accept current social, economic, and political systems, they are agreeing with a system that legitimizes their current status and level of resources. System justification theory says that all humans are motivated to uphold the status quo and that individuals, those of devalued groups included, may adhere to their own stereotypes or system justifying beliefs as a way to self-soothe (Jost & Banaji, 1994; Jost & Hunyady, 2003; Kay et al., 2009). Some individuals of lower social class status may find it too stressful to admit that they live in a sometimes unjust or unfair system that is often difficult to change. System justification then may help some of these individuals reduce anxiety but also leaves them in a situation where they may endorse personally harmful stereotypes (Jost et al., 2008). Many individuals of lower social class status have faith in the

American Dream (Hancock, 2002; Shulman, 2003), which may also leave them with the belief that their personal deficits are the reason for their social status.

The major system justifying beliefs in the United States are belief in meritocracy, the Protestant work ethic, and belief in a just world (Godfrey & Wolf, 2016). Belief in meritocracy suggests that the system rewards individuals based on motivation and ability, and the related Protestant work ethic views hard work as rewarding and moral. Belief in a just world is the belief that the world is a fair place where individuals get what they deserve (Lerner, 1980). These ideologies all suggest that those of higher social class status warrant their privilege and, conversely, those of lower social class status their relative disadvantage. Middle class privilege, then, is the assumption that one has and deserves financial stability; leisure time; access to clean, safe neighborhoods; a government structure that suits one's interests; the ability to influence the sociopolitical system to one's advantage; and respectful treatment from others (Liu, Pickett, & Ivey, 2007). An individual from a lower social class who agrees with classist and system justifying beliefs and stereotypes may accept that he or she does not deserve those things.

The apply stage. With the *apply* stage of the model, an individual who agrees with harmful stereotypical beliefs about one's group (Jost & Kay, 2005; Kay & Jost, 2003) is more likely to apply those beliefs to oneself (Laurin, Kay, & Shepherd, 2011). This stage of the model is upheld by research on other forms of internalized stigma besides that of mental illness. For example, belief in color-blind racial ideology, which is to agree that Black Americans have a fair chance in life and thus are to blame for their social status, is associated with higher levels of internalized racism (Neville, Coleman, Falconer, & Holmes, 2005). Classism research provides fruitful information regarding the types of beliefs that individuals of lower social class status may apply to themselves. In a widely cited survey, undergraduates rated poor people on both

positive and negative attributes (Cozzarelli Wilkinson, & Tagler, 2001). However, subjects were more likely to rate the poor higher than the middle class on specific negative characteristics and more likely to rate the middle class higher than the poor on positive characteristics. Poor people were described as crude, irresponsible, lazy, stupid, dirty, and immoral more often than were wealthy or middle-class individuals.

To apply these characteristics to oneself is to believe you are not as good as those who are above you, you are not like them nor up to their standards. Another, more insidious, form of classist prejudice results when the attributes, norms, and cultures associated with the poor and working class are considered inherently flawed or inferior. Words like "classy" and "high-class" versus "low-class," "low-rent," "trashy," and "ghetto" are acceptable in polite conversation and used to connote good versus bad (Smith & Redington, 2010). Bourdieu (1984, 1985, 1991, 2005) argued that social class is created and reinforced by social networks, class-specific patterns of comportment, and aesthetic preferences. He would contend that the middle and upper classes have non-economic assets such as speech, dress, manners, education, knowledge, and social skills that grant them higher status. Describing an individual as having "good taste" or "bad taste" is a way of asserting and reinforcing class and cultural status (Bourdieu, 1984; Saatcioglu & Ozanne, 2013). Better "taste" means keener adherence to middle and upper class values and aesthetic preferences. Those of lower social class status are generally seen as lacking in taste, manners, and "culture" and may internalize those beliefs.

The decreased self-respect and/or harm stage. In the next stage of the model, application of negative stereotypical beliefs then causes decreased self-respect and/or other harm. Indeed, in their study of poverty stigma and depression, Mickelson and Williams (2008) define

internalized stigma as feelings of responsibility for and shame about one's class status. Corrigan focuses on decreased self-respect operationalized as self-esteem and self-efficacy.

Self-esteem. Self-esteem has been tied to internalized mental illness stigma (Livingston & Boyd, 2010) and ethnicity-based internalized oppression (David, 2008). In terms of class-specific findings regarding self-esteem, a meta-analysis demonstrated that social class had a small but significant effect on self-esteem such that those of higher social class reported higher self-esteem though the effect varied by race/ethnicity, age, and gender, suggesting moderators may be at work (Twenge & Campbell, 2002). Turning to system justification research, for those in advantaged, dominant groups, system justification typically has a positive relationship with self-esteem and psychological well-being whereas for disadvantaged, non-dominant groups, it has negative relationship with these variables (Jost & van der Toorn, 2012). African-Americans who were more opposed to equality in social structure had lower self-esteem than did European-Americans and more neuroticism (Jost & Thompson, 2000). Though some studies suggest that system justification has a short-term palliative function in that it can reduce feelings of distress associated with social inequalities, the disadvantaged likely experience long-term harm in terms of well-being, specifically self-esteem, neuroticism, depression, and anxiety (Jost & van der Toorn, 2012). System justification research thus supports the regressive model's *agree* to *decreased self-respect* stages, but these relationships may be better expounded with the addition of the *apply* stage, a more complex cause and effect explanation.

Self-efficacy. Individuals with serious mental illness who reported higher levels of internalized stigma also acknowledged negative effects on self-efficacy (Drapalski et al., 2013). A similar effect was seen in individuals with gambling problems when using the regressive model (Hing, Nuske, Gainsbury, & Russell, 2016). Likewise, individuals with chronic pain who

reported higher levels of internalized pain-based stigma conceded lower pain self-efficacy (Waugh, Byrne, & Nicholas, 2014). In a unique study where overweight and non-overweight individuals watched stigmatizing or non-stigmatizing videos on obesity, overweight individuals who saw the stigmatizing video consumed significantly more calories than in any condition suggesting that shame and stigma are not motivating for many individuals and instead decrease self-efficacy (Schvey, Puhl, & Brownell, 2011). Internalized stigma erodes feelings of empowerment for a number of groups (Corrigan, Larson, & Rusch, 2009) and may do so for individuals of low social class status as well.

The behavioral futility or "why try" effect. The final stage of the model posits that decreased self-respect leads to behavioral futility or the *"why try"* effect. Individuals may feel that it is futile to engage in behaviors that help them meet life goals because they may feel unable or unworthy of doing so. Feelings of worthlessness then create interference with life goal achievement in categories such as education, employment, physical health, and social engagement. This stage of the model comes from mental illness stigma findings that demonstrate the negative effects of internalized stigma on recovery.

Internalized stigma inhibited treatment adherence for individuals with schizophrenia (Fung, Tsang, & Corrigan, 2008) and help-seeking for individuals with gambling problems (Hing et al., 2016). Internalized stigma also predicted attitudes toward and intent to seek psychological help for a more general population experiencing mental illness (Drapalski et al., 2013; Vogel, Wade, & Haake, 2006). Supporting the regressive model, self-esteem has been demonstrated to mediate the relationship between internalized mental illness stigma and quality of life (Oliveira, Carvalho, & Esteves, 2016), the latter of which is often used as a proxy for goal achievement in conjunction with the *why try* outcome (Corrigan et al., 2009).

The *why try* stage may be relevant for findings regarding social class, hopelessness, and locus of control. Individuals of lower social class status generally perceive that they have less control over their lives and environments (Kraus, Piff, & Keltner, 2009), which is then associated with poorer health, less life satisfaction, and greater symptoms of depression (Lachman & Weaver, 1998). That sense of lack of control is often attributed to environmental and economic barriers, but it may also be related to stigma and social comparison, which is then internalized (Sapolsky, 2005). Stigma-related stressors may lead to hopelessness as well as rumination and negative self-schemas (Hatzenbuehler, 2009). Evidence suggests that internalized classism can lead to hopelessness and despair, which sometimes results in self-destructive behavior such as substance use or homicide (Liu, 2002). Other support for the theory that internalized class-based stigma interferes with goal-orientation comes from a study in which individuals who reported more individualistic attributions, meaning characterological reasons, for their poverty also endorsed more negative views about upward socioeconomic mobility (Mickelson & Hazlett, 2014) . Believing that one is lesser than those higher on the social class ladder could sap motivation and intent to work towards life goals resulting in lower life satisfaction.

Background Summary

The field of (clinical) psychology has largely neglected the quantitative study of social class and stigma compared to other types of stigma (Williams, 2009). Little research on the felt experience of class compared to other identity markers such as race and gender exists despite the call for such investigation from scholars (Ostrove & Cole, 2003). Some ethnographies and other qualitative work provide fruitful insight into the personal experience of social class, but quantitative research is particularly sparse. Given lack of psychological research on the intrapsychic experience of social class, unsurprisingly, a large gap in the literature exists on

internalized class-based stigma. While some scholars have offered definitions of internalized classism with brief supporting research (e.g. Liu, 2011; Russell, 1996), little substantial work has attempted to explore a broader, in depth conceptualization of internalized classism. However, social class identity management strategies may have significant effects on behavior (Johnson, Richeson, & Finkel, 2011). For example, internalized stigma may keep individuals who are in need from seeking social services like welfare (Stuber & Schlesinger, 2006). The regressive model of self-stigma is a relatively new model but shows promising evidence for other forms of internalized stigma. As the research related to internalized classism is sparse, the regressive model provides a good starting point from which to explore what internalized classism may look like, how it may be measured, and how it affects individuals.

Additionally, like other internalized stigmas, internalized classism likely has negative effects on health and mental health. In fact, the research literature clearly documents poor physical and mental health outcomes for those of lower class status compared to those of higher status (Eaton, Muntaner, & Sapag, 2010; Fryers, Melzer, & Jenkins, 2003; Muntaner, Eaton, Miech, & O'Campo, 2004; Saraceno & Barbui, 1997; Sapolsky, 2005). Many mechanisms have been proposed to explain these disparities with a recent interest in social comparison or feeling lesser than those higher in status as one potential explanation (Adler, 2009; Sapolsky, 2005). Internalized classism, then, may help to explain a piece of these disparities and the negative effects of social class stigma on well-being.

Further exploring internalized classism may also add to the system justification literature. System justification significantly overlaps with the concept of internalized classism as agreeing with the current sociopolitical and economic system often means agreeing with negative stereotypes of individuals of lower social class status. System justification and classism studies

demonstrate what the *agree* stage of the regressive model may look like, and system justification also provides evidence for potential *harm* that is incurred in reaction to that agreement. However, system justification literature has largely left out potential intermediate psychological stages or processes between *agree* and *harm*. Some studies exist on system justification and self-stereotyping (e.g. Laurin et al., 2011), but at the time of writing there did not appear to be any studies specifically focused on class and self-stereotyping in this literature. The regressive model of self-stigma helps to round out system justification research related to class and may help to better explain and connect pieces of the theory as they pertain to individual well-being.

The Present Study

The current study aimed to establish a broader conceptualization of internalized classism by measuring it quantitatively using the regressive model of self-stigma. In doing so, the study sought to help explain common well-being outcomes already tied to social class and address gaps in related system justification literature regarding how engaging in system justification affects the self (see Figure 2 for study model with proposed measures). Specifically, hypotheses were as follows:

1) Regarding the regressive model of self-stigma
    a) When individuals of lower social class status endorse greater of classist/system justifying beliefs, they will be more likely to apply negative stereotypes about those of low social class status to themselves than those who do not endorse those beliefs.
    b) Greater application of negative stereotypes will lead to decreased self-respect in the form of lowered self-esteem and self-efficacy and greater shame and embarrassment about one's social class standing.

c) Decreased self-respect will then lead to decreased belief in one's ability to meet life goals and decreased life satisfaction (as measured by quality of life).

2) Application of negative class-based stereotypes to oneself will help explain the relationship between endorsement of system justifying beliefs (classist beliefs) and poorer well-being (lowered self-esteem and quality of life).

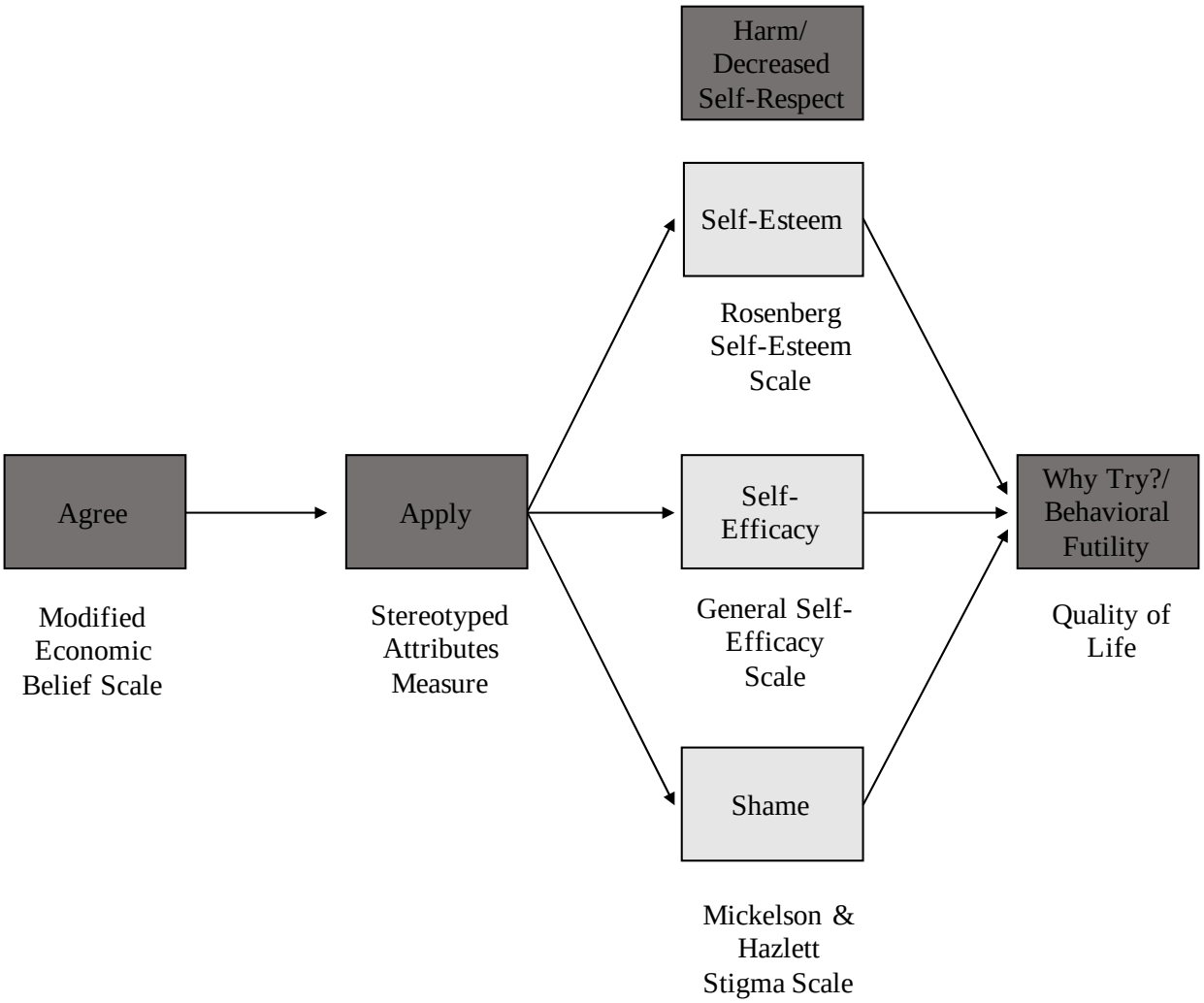

Figure 2: Regressive Model of Self Stigma for Internalized Classism with Measures

Method

Participants. Participants were recruited from a crowdsourcing internet marketplace, Mechanical Turk (MTurk), hosted by Amazon. On MTurk individuals or businesses (known as

"requesters") are able to post tasks or jobs that can be accomplished remotely via the internet by the pool of workers that use MTurk. Workers scan or search through tasks that requesters post and choose which tasks they would like to complete according to the task description. Some tasks are not shown or available to workers depending on the task criteria outlined by requesters (i.e., accuracy of past tasks completed, age, country of residence). Once workers complete the task, requesters review the work for accuracy/level of completion and approve the pre-specified amount of compensation. MTurk is often used to solicit participants for social science research, and research suggests that MTurk samples are at least as representative of the general population as traditional subject pools (Paolacci, Chandler, Wilson, Ipeirotis, & Stern, 2010).

In this study, all interested workers first completed a subjective measure of social class, the MacArthur Scale of Subjective Social Status (SSS) to screen for and measure social class (Goodman et al., 2001). This is a visual measure whereby individuals are asked to rank their perception of their social status compared to others in the United States with respect to education, income, and occupational prestige using the ten rungs of a ladder with the first rung (rating = 1) representing the lowest social status and the tenth rung (rating = 10) representing the highest social status. This technique is a good predictor of physical and mental health even after controlling for objective indicators of social status with which it is moderately correlated (Adler, Epel, Castellazzo, & Ickovics, 2000; Scott et al., 2014; Singh-Manoux, Marmot, & Adler, 2005). See Table 8 for correlations with objective indicators from this study. While negative affect is related to these outcomes, it does not appear to confound the relationship, and the measure also demonstrates adequate test-retest reliability (Spearman's rank order correlation = .62, $p < .01$; Operario, Adler, & Williams, 2004). See Appendix A.

Workers completed this measure for both current and childhood status, and to qualify for the study, they had to report a status of 4 or lower (with 10 the highest ranking) for current or childhood status. Five-hundred and four American adults, aged 18 and older passed the initial screening measure and completed the full study. For participants who completed the full study, reported current SSS (M = 3.70, SD = 1.43) was slightly lower than reported childhood SSS (M = 4.13, SD = 1.83) with participants decreasing in status on average by 0.42 units on the scale (SD = 2.44). Regarding objective measures of social class, 47 % of participants had at least partial college education with the median level of education a college degree. Participants reported a median maternal education of partial college education and median paternal education of a high school degree. Reported current median household income was $35,000, lower than the national median of $55,775 (Guzman, 2017). Most participants were employed full-time (56.2 %) followed by unemployed (19.1 %) and part-time employed (18.9 %) with less than 6 % reporting that they were a full-time student only, part-time student/part-time employed, and retired. See Table 1 for social class demographics.

Participants ranged from 18 to 77 years of age (M = 36.34, SD = 10.93). Females slightly outnumbered males (50.7 % to 47.6 %), and less than 2 % of participants identified as transgender or non-binary/gender fluid/gender queer. The majority identified as White (81.3 %), followed by Black (5.9 %), with less than 5 % each identifying as either multiracial or another singular racial category. A plurality of participants identified as Christian (36.2 %), followed by Agnostic (27.8 %) and Atheist (21.7 %). Finally, participants lived in all states except Alaska, Hawaii, and Nebraska. See Table 2 for general demographics.

Measures. ***Modified Economic Beliefs Scale (MEBS).*** For the *agree* stage in the regressive model, the MEBS (Aosved & Long, 2006) was used to measure classism. The MEBS

consists of 15 items rated on a five-point Likert scale (1 = strongly disagree, 5 = strongly agree) that assess classist beliefs. Example items include, "People who stay on welfare have no desire to work" and "Equal educational opportunities exist for all people in our society." Items were averaged with higher scores reflecting greater endorsement of classist beliefs and ranged from 1.0 to 4.8 for participants. See Appendix B.

Internalized classist stereotypes and attributes. The *apply* stage was assessed with a measure compiled from Cozzarelli et al.'s (2001) often-cited study on attitudes toward the poor. In this study, participants rated both the poor and the middle class on a list of 38 attributes commonly cited in the poverty literature as potentially relating to class. Ratings were significantly different for all attributes except one ("humble") and loaded onto two factors representing positive and negative attributes. In the current study, participants rated themselves on these characteristics on a six-point Likert scale (1 = Not at all like me, 6 = Very much like me). Example characteristics include "hardworking," "moral," and "violent." In addition to the characteristics drawn from Cozzarelli et al.'s (2001) study, participants rated themselves on attributes related to Bourdieu's (1984, 1986) theory on social class. According to Bourdieu and theorists drawing from his work (e.g., Liu, 2004, 2011), concepts of taste and manners create class divisions and are a means to assert status. Example characteristics include "well-mannered," "tacky," and "rude." A mean score was calculated for positive and negative items separately. Positive scores for participants ranged from 1.31 to 6.00 and negative scores from 1.00 to 3.64. See Appendix C.

Decreased self-respect. The *decreased self-respect* or *harm* stage of the model was assessed using the constructs of self-esteem and self-efficacy outlined by Corrigan, as well as shame and embarrassment specifically focused on one's social class.

Self-esteem. Self-esteem was measured with the widely used Rosenberg Self-esteem Scale (Rosenberg, 1965). The scale consists of 10 items assessed on a four-point Likert scale (1 = Strongly disagree, 4 = Strongly agree). Example items include, "On the whole I am satisfied with myself" and "I feel that I have a number of good qualities. Items were averaged with higher scores representing higher self-esteem, and participant scores ranged from 1.0 to 4.0. See Appendix D.

Self-efficacy. Self-efficacy was measured with the General Self-efficacy Scale (Schwarzer & Jerusalem, 1995). The scale was originally developed in Germany but has since been adapted to 28 languages and used cross-culturally (Luszczynska, Scholz, & Schwarzer, 2005). The scale consists of 10 items assessed on a four-point Likert scale (1 = Not true at all, 4 = Exactly true). Examples items include, "I can always manage to solve difficult problems if I try hard enough" and "If someone opposes me, I can find the means and ways to get what I want." Items were averaged for a total score with higher scores representing higher self-efficacy beliefs, and participant scores ranged from 1.0 to 4.0. See Appendix E.

Class-based shame. Harm in the form of class-based shame was measured using Mickelson and Williams' (2008) internalized stigma subscale of the Poverty Perceived Stigma Scale. Four items measure shame and embarrassment based on one's financial status. Example items include, "I feel that I am odd or abnormal because of my financial situation" and "I never feel self-conscious when I am in public." Two items are reverse scored and a mean score for the items was calculated. Higher scores indicate higher class-based shame, and participant scores ranged from 1.00 to 5.00. See Appendix F.

Quality of life. Behavioral futility or the *why try* effect was assessed with an adapted quality of life (QOL) measure as QOL has been used as a proxy for goal attainment and

associated well-being in self-stigma research (Corrigan et al., 2009). Participants reported their satisfaction with goal areas outlined by Corrigan et al. (2016) for a total of 10 questions. Items were assessed using the seven-point Likert scale (1 = Couldn't be worse, 7 = Couldn't be better) from the Lancashire Quality of Life Profile and Manchester Short Assessment of Quality of Life scale (Oliver, Huxley, Priebe, & Kaiser, 1997; Priebe, Huxley, Knight, & Evans, 1999). Example items include, "How satisfied are you with your health?" and "How satisfied are you with your finances?" A mean score was generated from items. Higher scores indicate higher satisfaction and quality of life, and participant scores ranged from 1.40 to 7.00. See Appendix G.

Procedure. Participants learned of the study through the MTurk website's listings. They were asked to read an informed consent statement and indicate whether they agreed to participate before initiating study measures. Consenting participants were directed to an online two item survey screen using the MacArthur Scale of Subjective Social Status (Appendix A). Those who reported a current or childhood status of four or lower on the MacArthur Scale were asked to complete the full survey, which was confidential. Median completion time was approximately 10 minutes. Participants completed an assessment of internalized classist stereotypes and attributes (Appendix C), the Modified Economic Beliefs Scale (Appendix B), the Rosenberg Self-Esteem Scale (Appendix D), the General Self-Efficacy Scale (Appendix E), the Mickelson and Hazlett scale (Appendix F), the adapted quality of life measure (Appendix G), and a series of demographic questions. Attention check questions were used to ensure that participants were appropriately attending to the survey, and participants were automatically directed away from the survey if they failed any of the attention check questions. Participants were compensated using MTurk's payment system. All participants, regardless of whether they met criteria to complete

the full study, were reimbursed ($0.10) for the screening questions, and those who completed the full survey were reimburse an additional amount ($1.40, for a total of $1.50).

Results

Preliminary Analyses

Kline (1998) suggests that it is necessary to have 10 cases for every parameter in a path analysis model for accurate estimation of the model and ideal to have 20 cases for every parameter. Thus, ideal desired sample size for this study was 360 participants (18 parameters x 20 cases). Five-hundred and four participants completed the survey, and the final, main analysis included 492 participants, adequately meeting this requirement.

Testing Normality of Primary Variables of Study

All statistics were calculated using IBM SPSS 23 except the path analyses which employed IBM SPSS Amos 23. Mahalanobis distance was calculated to examine potential multivariate outliers with a cut-off score of 26.13 (p = .001, df = 8). Two cases were removed with Mahalanobis distance scores of 45.78 and 33.24. The next largest score was 27.84, and scores steadily decreased from this score. Thus, this case was retained as it did not appear to be a true outlier. Three cases were removed for individuals who were univariate outliers (z score < -2.5 or > +2.5) and who also completed the survey in less than four minutes, which likely indicated lack of adequate attention as median completion time was 10 minutes. One additional case was removed who also completed the survey in less than four minutes but was not a univariate outlier. After removing these outliers, examination of skewness and kurtosis statistics on main variables for the path analysis indicated that all variables were within the acceptable range of normality. See Table 3.

Missing Data

Sixty-three participants (12.5 %) had at least one missing data point (one or more items on measures of main variables in the path analysis). Six cases were removed from the main analysis who had two or more missing data points on the same measure (i.e., two items left blank on a single measure). No one item had greater than 1 % of overall data missing. Little's MCAR test was conducted and non-significant (p = .385), suggesting data were Missing Completely at Random. As such, for cases who had only one item missing on a measure, mean scores on the measure were calculated without the missing item. See Table 4 for a summary of removed cases.

Descriptives

Table 5 presents the ranges, means, standard deviations, and Cronbach's α for all measures utilized in these analyses. Generally, measures demonstrated excellent-to-good reliability. Table 6 presents correlations for the main variables in the path analysis. Table 7 presents the correlations between current and childhood subjective social status and the main variables in the path analysis. All variables demonstrated significant correlations with current subjective social status with the general trend suggesting a positive relationship between current social class and well-being. Childhood subjective social status was only significantly correlated with class-based shame and quality of life, and the correlations were small with values of .129 and -.097, respectively.

Original Path Analysis

A path analysis with bootstrapping was conducted via IBM SPSS Amos 23 with paths specified in Figure 3. Due to preliminary analyses suggesting that several of the main variables

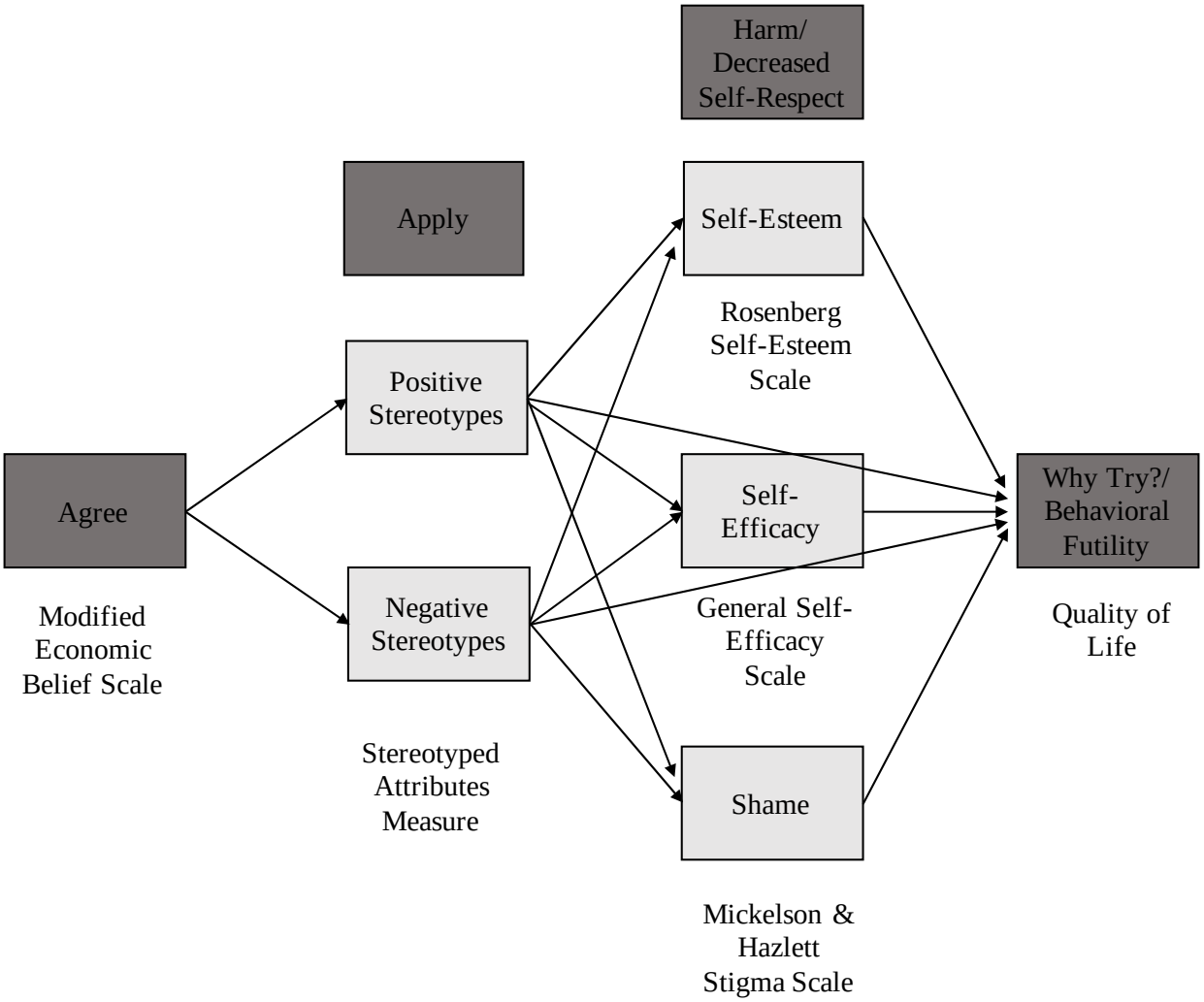

Figure 3: Path Analysis with Stages, Measures, and Paths

had significant associations with participant age and gender, variables not of particular focus in this study, these latter two demographic variables were used as controls but are not included in the path figure for clarity of the figure. Regarding gender, a series of t-tests were conducted on males and females[2] with the main variables, showing that females reported higher positive self stereotypes (M = 4.33) than males (M = 4.00), $t(482) = -4.32$, $p < .001$, and males reported higher classist beliefs (M = 11.36) than females (M = 10.72), $t(482) = 3.22$, $p = .001$. Regarding

[2] Individuals reporting another gender were dropped from the analyses given their low number (n = 8).

age, a series of Pearson correlations were run on age and the main variables, showing that older age was associated with higher positive stereotypes (r = .174, p < .001), self-esteem (r = .161, p < .001), self-efficacy (r = .101, p = .026), and quality of life (r = .161, p < .001) and associated with lower negative stereotypes (r = -.153, p = .001) and lower class-based shame (r = -.163, p < .001). Participant race was examined as well but nonsignificant. Controls were added in Amos by making them exogenous variables and then drawing paths from the controls to the endogenous variables of interest (Arbuckle, 2014). Controls were also covaried with each other and the other exogenous variable (classist beliefs) in the model.

All model fit indices for the initial analysis suggested a poor model fit, with an overall chi-square value of 382.95 (8, N = 492), p < .001. The goodness-of-fit index (GFI), the normed fit index (NFI), and the comparative fit index (CFI) yielded values of .86, .77, and .77, respectively, and the obtained RMSEA value was .309 with a 90 % confidence interval of .283 and .336. PCLOSE suggested the data was not a close fit with a value of <.001.

Examination of modification indices suggested that the variables within the *apply* stage (positive and negative stereotypes) and the variables within the *harm* stage (self-esteem, self-efficacy, and shame) demonstrated close relationships that were diminishing the originally proposed model fit. Thus, to obtain a respecified model, the error terms were covaried within the stages, and nonsignificant paths for controls (p > .05) were deleted to increase degrees of freedom and further improve model fit. Analyses were then rerun. For this respecified model, the chi-square value of 12.83 (10, N = 492), p =.283, was not significant suggesting that the model appeared to be a good fit for the data. The GFI, NFI, and CFI yielded values of .995, .993, and .999 respectively suggesting excellent model fit, as did the obtained RMSEA value of .020 with a 90 % confidence interval of .000 and .055. PCLOSE suggested the data passed the close fit test

with a value of .909. The path coefficients are summarized in Table 9 under Direct Effects. The main variables in the final path analysis, along with path coefficients and variance explained for each endogenous variable, are depicted in Figure 4.

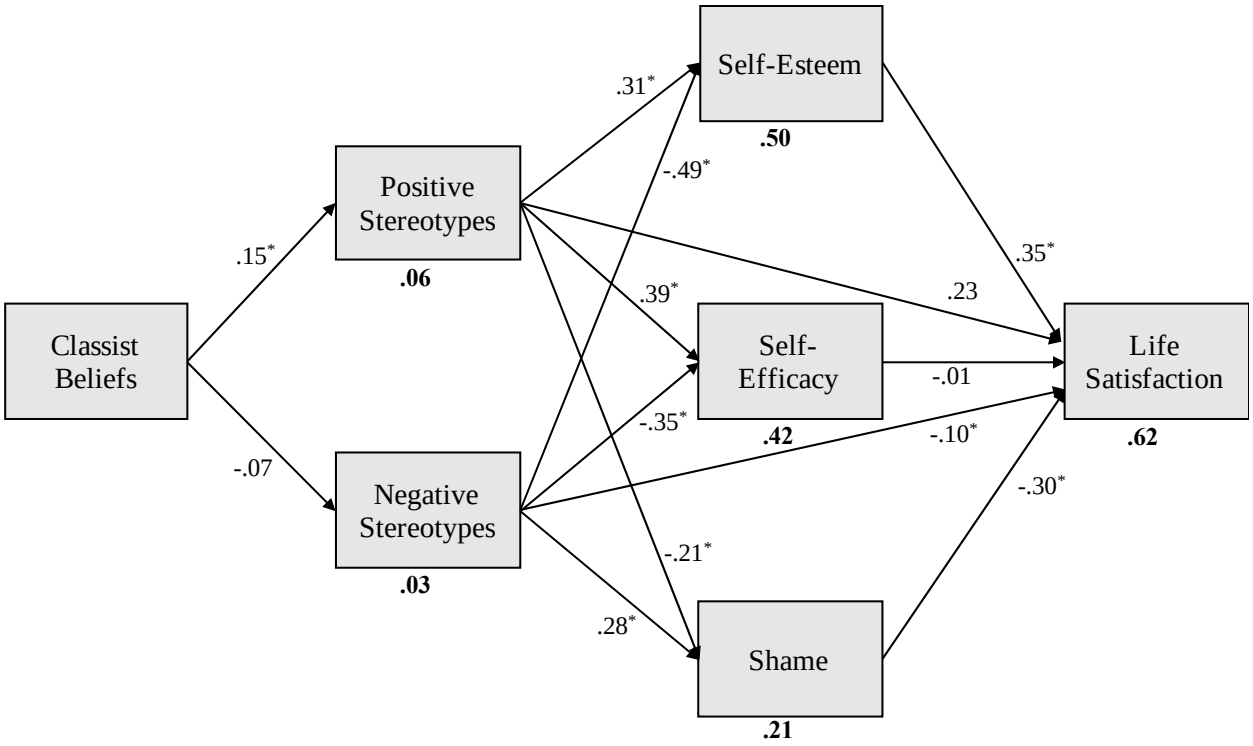

Figure 4: Final Path Analysis with Path Coefficients ($^{*}p < .05$) and Endogenous Variables' R^2 (bold)

Hypothesis 1a.

The direct effects of classist beliefs on negative stereotypes was not significant. Thus, hypothesis 1a, that when individuals of lower social class status endorse greater of classist/system justifying beliefs, they will be more likely to apply negative stereotypes about those of low social class status to themselves than those who do not endorse those beliefs, was not supported. Interestingly, the path from classist beliefs to positive stereotypes was significant, ($\beta = .149$, $p < .001$) but in the opposite direction, i.e. individuals who endorsed greater classist beliefs were more likely to apply positive stereotypes/traits to themselves.

Hypothesis 1b.

All paths associated with hypothesis 1b, that greater application of negative stereotypes will lead to decreased self-respect in the form of lowered self-esteem and self-efficacy and greater shame and embarrassment about one's social class standing, were significant ($p < .001$), and thus this hypothesis was supported. Specifically, significant paths included those from positive stereotypes to self-esteem ($\beta = .307$), negative stereotypes to self-esteem ($\beta = -.489$), positive stereotypes to self-efficacy ($\beta = .393$), negative stereotypes to self-efficacy ($\beta = -.346$), positive stereotypes to class-based shame ($\beta = -.214$), and negative stereotypes to class-based shame ($\beta = .278$).

Hypothesis 1c.

Paths from self-esteem ($\beta = .348$) and class-based shame ($\beta = -.300$) in the self-respect stage to quality of life were significant ($p < .001$), but paths from self-efficacy in the self-respect stage to quality of life were nonsignificant. Thus, hypothesis 1c, that decreased self-respect will lead to decreased belief in one's ability to meet life goals and decreased life satisfaction (as measured by quality of life), was partially supported.

While most paths in the model were statistically significant, few achieved practical significance with a coefficient of equal to or larger than .30. Those that achieved statistical and practical significance include the direct effects of positive and negative stereotype endorsement on self-esteem and self-efficacy and self-esteem and shame on quality of life.

The model was able to explain 62 % of the variance in quality of life, most of which appears to be due to the direct and/or indirect effects of positive and negative stereotypes, self-esteem, and shame. Little of the variance in positive and negative stereotype endorsement, 6 % and 3 % respectively, was explained by classist beliefs. Given the nonsignificant paths from

negative stereotype endorsement to classist beliefs, hypothesis 2 that application of negative class-based stereotypes to oneself will help explain the relationship between endorsement of system justifying beliefs (classist beliefs) and poorer well-being (lowered self-esteem and quality of life), was not directly supported.

Post-hoc Power Analyses

Post-hoc power analyses were conducted to examine the power to detect effects on nonsignificant paths. The path from classist beliefs to negative stereotypes demonstrated power of .975 with an alpha level of .05. The path from self-efficacy to quality of life demonstrated power of 1.0 with an alpha level of .05.

Exploratory Class-based Shame Analysis

In order to better focus on class-specific measures and determine whether class-based shame may impact facets of quality of life differently, a simple path analysis was run with classist beliefs predicting class-based shame which in turn was regressed onto all 10 life satisfaction variables separately (see Figure 5). Model fit indices for this analysis were mixed. The chi-square value of 29.02 (10, N = 492), p =.001 was significant suggesting that the model appeared to be a poor fit for the data. However, with a large sample size (over 200), chi-square values are often significant, so other indices may be examined as well (Kenny, 2015). The NFI and CFI yielded values of .989 and .993, respectively suggesting excellent model fit. The obtained RMSEA value of .062 with a 90 % confidence interval of .037 and .089 suggested a moderate fit. PCLOSE suggested the data passed the close fit test with a value of .197. Given the exploratory nature of the analysis, model fit was deemed good enough to continue with examination of individual predictors. All paths were significant (p < .001), though the path from classist beliefs to class-based shame was again weak as in the main analysis with a value of

-.154. Path coefficients are summarized in Table 10 and depicted in Figure 5. Shame most strongly predicted satisfaction with finances (β = -.621) and life as a whole (β = -.560).

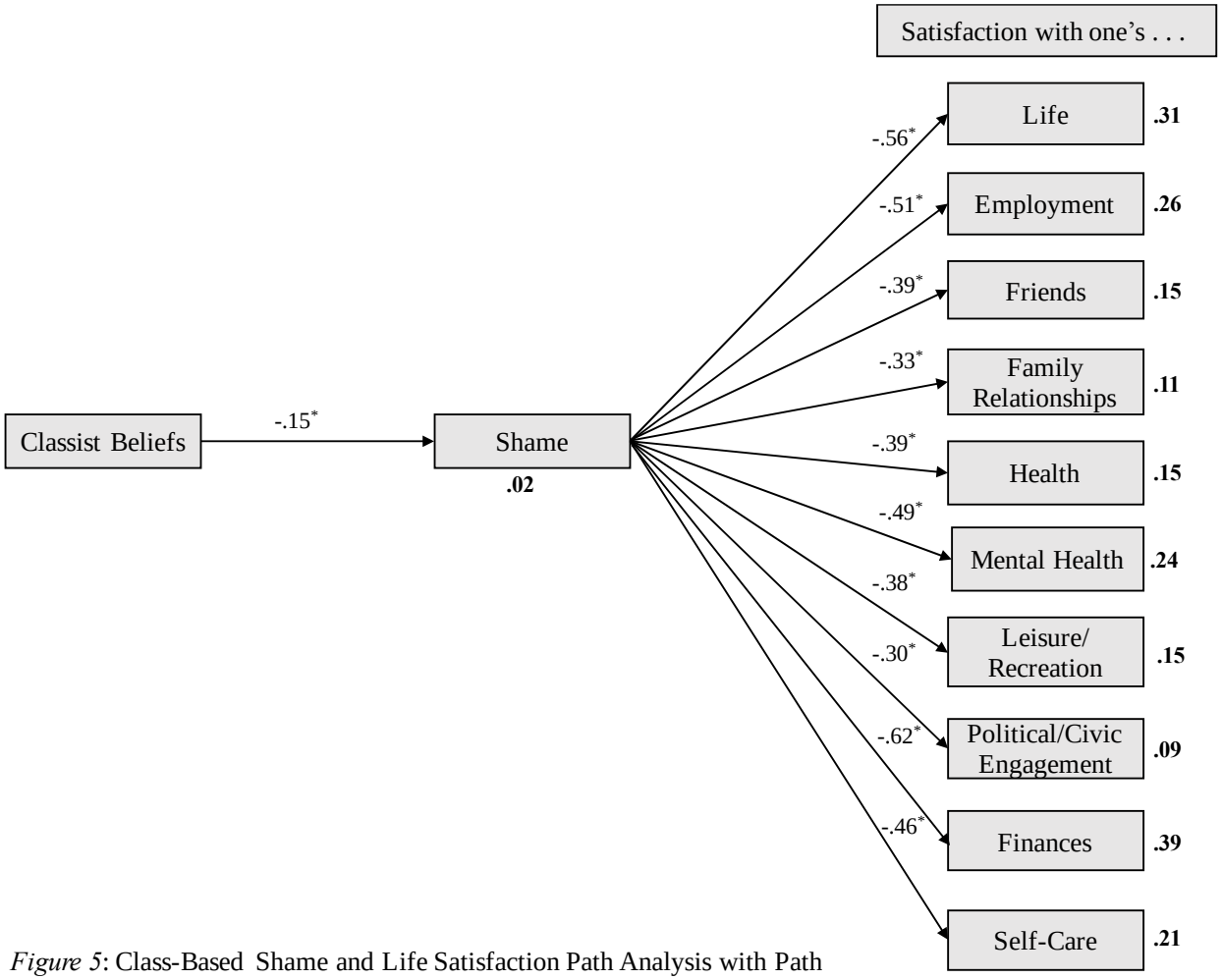

Figure 5: Class-Based Shame and Life Satisfaction Path Analysis with Path Coefficients (*$p < .001$) and Endogenous Variables' R^2 (bold)

Exploratory Multigroup Analyses

A series of multigroup analyses via a path invariance design were conducted to compare the model for sets of groups according to current social class, childhood social class, and change in childhood to current social class as outlined below. All multigroup analyses were conducted using the same technique and evaluated the difference between an unconstrained model, which assumes that the groups are yielding different values of the parameters when the model is applied to the data, and a constrained model, which assumes that the groups are yielding equivalent

values of the parameters when the model is applied to the data. Path coefficients were compared by conducting a chi-square difference test freely estimating the models, except constraining the one path to be equal across groups.

Current subjective social status.

A multigroup analysis via a path invariance design was conducted to compare the model for individuals reporting a current subjective social status (SSS) in the lower third (rating of 1 to 3; low SSS; $n = 243$) of Americans, thought to represent those who consider themselves lower class, and those reporting a status in the middle third (rating of 4 to 6; middle SSS; $n = 227$) of Americans, thought to represent those who consider themselves middle class. The sample size ($n = 22$) for the upper third (rating of 7 to 9) was too small for comparison and thus excluded from this analysis.

A comparison of path coefficients, $\chi^2 (19, N = 470) = 33.74$, $p = 0.02$, yielded significant results. Group differences were observed for the path from classist beliefs to positive stereotypes, $\chi^2 (1, N = 470) = 4.789$, $p = 0.029$, with the coefficient being larger for the low SSS group ($\beta = .202$) than the middle SSS group ($\beta = .025$). Group differences were also observed for the path from negative stereotypes to self-efficacy, $\chi^2 (1, N = 470) = 11.395$, $p = 0.001$, with the coefficient also being stronger for the low SSS group ($\beta = -.433$) than the middle SSS group ($\beta = -.127$). No other group differences in paths were significant.

Childhood subjective social status.

Multigroup analyses via a path invariance design were conducted to compare the model for individuals reporting a childhood subjective social status (SSS) in the lower third (rating of 1 to 3; low childhood SSS; $n = 188$), those reporting a status in the middle third (rating of 4 to 6;

middle childhood SSS; n = 240), and those reporting a status in the upper third (rating of 7-9; high childhood SSS; n = 64) of Americans.

Low childhood SSS and middle childhood SSS.

A comparisons of path coefficients, χ^2 (19, N = 428) = 22.893, p = 0.242, suggested that there are no group differences between those reporting low and middle childhood SSS ratings.

Low childhood SSS and high childhood SSS.

A comparisons of path coefficients, χ^2 (19, N = 252) = 17.346, p = 0.566, suggested that there are no group differences between those reporting low and high childhood SSS ratings.

Middle childhood SSS and high childhood SSS.

A comparisons of path coefficients, χ^2 (19, N = 304) = 13.047, p = 0.836, suggested that there are no group differences between those reporting middle and high childhood SSS ratings.

Group comparisons by change in subjective social status.

Multigroup analyses via a path invariance design were conducted to compare the model for individuals reporting a decrease in at least two points of subjective social status (SSS) from childhood to adulthood (SSS decrease; n = 168), those reporting one point or no change (SSS static; n = 219), and those reporting an increase in at least two points (SSS increase; n = 105).

SSS decrease and SSS static.

A comparison of path coefficients, χ^2 (19, N = 387) = 17.804, p = 0.536, suggested that there are no group differences between those reporting a decrease in SSS ratings and those reporting static SSS ratings.

SSS decrease and SSS increase.

A comparison of path coefficients, χ^2 (19, N = 273) = 31.303, p = 0.037, yielded significant results. Group differences were observed for the path from positive stereotypes to

self-esteem, χ^2 (1, N = 273) = 6.295, p = 0.012, with the coefficient being stronger for the SSS increase group (β = .482) than the SSS decrease group (β = .185). Group differences were observed for the path from positive stereotypes to shame, χ^2 (1, N = 273) = 4.714, p = 0.03, with the coefficient also being stronger for the SSS increase group (β = -.317) than the SSS decrease group (β = -.031). Group differences were observed for the path from negative stereotypes to self-esteem, χ^2 (1, N = 273) = 5.917, p = 0.015, with the coefficient being stronger for the SSS decrease group (β = -.552) than the SSS increase group (β = -.306). Finally, group differences were observed for the path from self-esteem to life satisfaction, χ^2 (1, N = 273) = 5.383, p = 0.02, with the coefficient being stronger for the SSS increase group (β = .560) than the SSS decrease group (β = .347).

SSS static and SSS increase.

Comparisons of path coefficients, χ^2 (19, N = 324) = 27.639, p = 0.091, suggested that there are no group differences between those reporting static SSS ratings and those reporting an increase in SSS ratings.

Exploratory Analyses of Stereotypes

Due to the poor predictive ability of classist beliefs to positive and negative stereotypes (β = .149, p < .001and β = -.071, p = .111, respectively), further analyses were conducted to determine whether classist beliefs may predict smaller subsets of stereotypes. First, an exploratory factor analysis was conducted on all individual stereotype attributes. The Kaiser-Meyer-Olkin measure of sampling adequacy was .90, indicating that the data were suitable for principle components analysis. Similarly, Bartlett's test of sphericity was significant (p < .001), indicating sufficient correlation between the variables to proceed with the analysis. An oblique factor rotation (direct oblimin) method was used. A total of eight factors had eigenvalues greater

than 1.00, cumulatively accounting for 51.81 % of the total variance. Items associated with each factor are presented in Table 11. Factor 1 was associated with stereotypes like "friendly" and "well-mannered" and appears to reflect concepts of Warmth and Decency. Factor 2 was associated with stereotypes like "refined" and "classy" and appears to reflect the concept of Classiness. Factor 3 was associated with stereotypes like "depressed" and "mentally ill" and appears to reflect the concept of Mental Illness. Factor 4 was associated with stereotypes like "criminal" and "alcoholic" and appears to reflect the concept of Antisocial Behavior. Factor 5 was associated with stereotypes like "stupid" and "unpleasant" and appears to reflect the concept of Buffoonery. Factor 6 was associated with stereotypes like "hardworking" and "responsible" and appears to reflect the concept of Responsibility. Factor 8 was associated with stereotypes like "healthy" and "proud" and appears to reflect the concepts of Strength and Pride. Factor 7 appeared to have only one stereotype associated with it, "Too many children," and was accordingly dropped from further analysis, for a total of seven factors. Factor scores (weighted composites) were computed according to pattern coefficients. After selecting individuals who rated their current subjective social status (SSS) as a 3 or below to focus on individuals currently in the lower third of the social class ladder, a series of simple regressions were conducted, regressing classist beliefs onto all factors. Classist beliefs significantly predicted Classiness [$F(1,231) = 8.41$, $p = .004$, $R^2 = .035$], Responsibility [$F(1,231) = 5.59$, $p = .019$, $R^2 = .019$], and Strength/Pride [$F(1,231) = 12.76$, $p < .001$, $R^2 = .048$].

Classiness, Responsibility, and Strength/Pride were then entered into the path analysis model in lieu of positive and negative stereotype means. To again focus specifically on individuals who currently report low SSS, the model was run on individuals reporting a current SSS of 3 and below (low SSS). All model fit indices suggested a good model fit, with an overall

chi-square value of 1.903 (4, N = 233), p = .754. The normed fit index (NFI) and the comparative fit index (CFI) yielded values of .997 and 1.00 respectively, and the obtained RMSEA value was .000 with a 90 % confidence interval of .000 and .069. PCLOSE suggested the data was a close fit with a value of .893.

The path coefficients are summarized in Table 12 under Direct Effects and depicted in Figure 6. Most coefficients for non-control paths were statistically significant at $p < .05$ with the exception of the direct effects of Classiness on self-esteem, self-efficacy, shame, and quality of life and the direct effects of self-efficacy on quality of life. However, few achieved practical significance with a coefficient of equal to or larger than .30 with the exception of the direct effects of Strength/Pride on self-esteem, self-efficacy, shame, and life satisfaction and the direct effects of Responsibility on self-esteem and self-efficacy. The model was able to explain 61 % of the variance in quality of life, though again little of the variance in endorsement of Classiness, Responsibility, and Strength/Pride stereotypes, 4, 10, and 8 % respectively, was explained by the model.

A comparative group analysis was also conducted on individuals rating themselves as a 3 or below on current SSS (n = 243; low SSS) and individuals rating themselves as a 5 and above on current SSS (n = 112; middle/high SSS). Individuals rating themselves as a 4 on current SSS were not included in this group analysis in order to better simulate a high/low difference while maintaining adequate sample size for comparison of groups. A comparison of path coefficients, χ^2 (14, N = 355) = 35.448, p = 0.001, yielded significant results. Group differences were observed for the path from classist beliefs to Classiness, χ^2 (1, N = 355) = 8.022, p = 0.005, with the coefficient being more strongly positive for the low SSS group (β = .19) than the middle/high SSS group (β = -.11). Group differences were observed for the path from self-esteem to quality

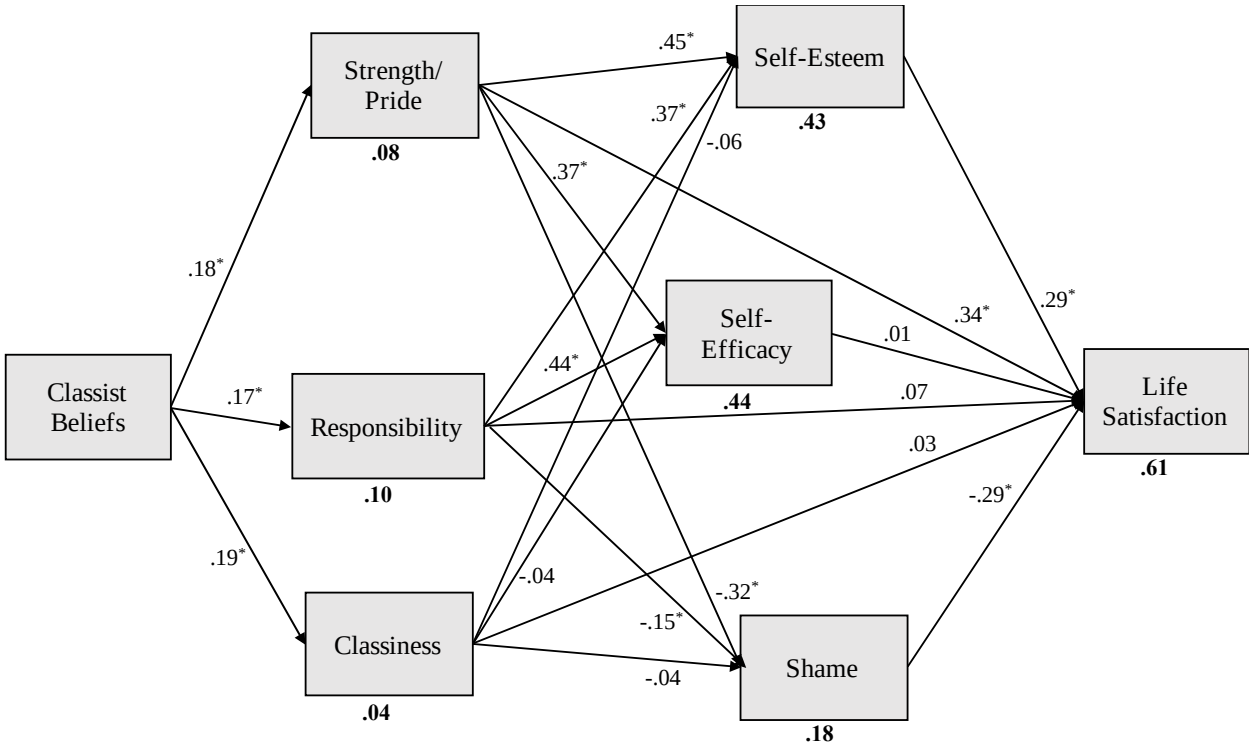

Figure 6: EFA Stereotypes Path Analysis with Path Coefficients ($^*p < .05$) and Endogenous Variables' R^2 (bold)

of life, χ^2 (1, N = 355) = 10.307, p = 0.001, with the coefficient being stronger for the middle/high SSS group (β = .61) than the low SSS group (β = .30). Finally, group differences were observed for the path from shame to quality of life, χ^2 (1, N = 355) = 10.483, p = 0.001, with the coefficient being more strongly negative for the low SSS group (β = -.30) than the middle/high SSS group (β = -.03).

Discussion

Summary of Results

This study aimed to establish a broader conceptualization of internalized classism by measuring it quantitatively using the regressive model of self-stigma. In doing so, the study sought to help explain common well-being outcomes already tied to social class and address gaps in related system justification literature regarding how engaging in system justification affects the self. Overall results found mixed support for the model and its stages. The *apply* stage was

not supported as classist beliefs did not predict negative stereotype application. The *harm* stage was supported with positive and negative stereotype application predicting self-esteem, self-efficacy, and shame. The *why try* effect was partially supported with self-esteem and shame, but not self-efficacy, predicting quality of life. Paths from negative stereotype endorsement to classist beliefs were non-significant. Thus, hypothesis 2 that application of negative class-based stereotypes to oneself will help explain the relationship between endorsement of system justifying beliefs (classist beliefs) and poorer well-being (lowered self-esteem and quality of life) was not directly supported. While most paths in the model were statistically significant, few achieved practical significance with a coefficient of equal to or larger than .30. Those that achieved statistical and practical significance include the direct effects of 1) positive and negative stereotype endorsement on self-esteem and self-efficacy, and 2) self-esteem and shame on quality of life.

Results of several exploratory analyses demonstrated some group differences in the model between individuals who are low subjective social status (SSS) and middle/high SSS and between individuals who decreased in SSS from childhood to present and individuals who increased in SSS from childhood to present. Classist beliefs lead to more positive evaluations of the self for those of lower SSS than for those who are higher in SSS. Negative stereotype application is more likely to lead to decrements in self-efficacy for those who are of lower SSS than those who are higher in SSS. Positive stereotype application is more likely to lead to enhanced self-esteem for individuals who have increased in SSS than for those who have decreased, and individuals with positive stereotype application who have increased in status are less likely to rate themselves as possessing class-based shame than those who have decreased in status. Individuals who endorse negative class-based stereotypes in themselves and who have

decreased in SSS are more likely to report decrements in self-esteem than those who have increased in SSS. Finally, self-esteem and shame have stronger impacts on quality of life for individuals who have increased in SSS than for those who have remained in a lower status or decreased in status.

These points are considered below in detail, and the study is reviewed for limitations and future directions.

Discussion of Hypotheses

Hypothesis 1a – the agree to apply stages.

Hypothesis 1a predicted that when individuals of lower social class status endorse greater classist/system justifying beliefs, they will be more likely to apply negative stereotypes about those of low social class status to themselves than those who do not endorse those beliefs. On the whole, this hypothesis was not supported as classist beliefs did not predict negative stereotype application. Classist beliefs may not be associated with negative stereotype application for lower social status Americans in contrast to other internalized stigma findings (i.e., Laurin, Kay, & Shepherd, 2011; Neville, Coleman, Falconer, & Holmes, 2005). Classist beliefs suggest that low status individuals, such as those in this study, occupy their current status because of traits they possess or actions they take or fail to take; participants in this study may have found ways to separate themselves from this logical conclusion using coping tools such as social distancing. Many of the lower status individuals in this study could likely be considered poor or to have come from a poor background, but they may reject that label and its associations. The United States has a long history of discriminating against the poor and viewing them as significant threats to society (Ingersoll, 1999; Isenberg, 2016). Even low status Americans may tend to automatically "other" individuals who are described as poor, creating cognitive distance from a

class of people who are viewed with disdain. The poor and low status individuals are dehumanized when compared to higher SES individuals, which leads to contempt and social rejection (Haslam & Loughnan, 2014; Loughnan et al., 2014). Even if participants were poor or close to it themselves, they may not have felt the psychological burden typically put upon this marginalized group because the poor may seem like a separate class of people.

Lack of support for the hypothesis may also be due to errors in measurement related to a reluctance to evaluate oneself too critically. The measure of stereotype application was novel and largely taken from a study that examined how one stereotypes others (Cozzarelli et al., 2001), which may be different than how one applies stereotypes to oneself. The negative stereotypes variable was on border of being skewed with participants being less likely to endorse negative stereotypes for themselves than positive stereotypes. Also, the range for negative stereotypes was more restricted than for positive stereotypes with positive scores for participants ranging from 1.31 to 6.00 and negative scores from 1.00 to 3.64. Most humans are motivated to engage in positive self-evaluation and self-enhancement (Alicke & Sedikides, 2011), and participants may simply have been unwilling to assign these harsh negative stereotypes to themselves.

This is in contrast to the findings related to classist beliefs and positive stereotypes. While the effect was small, greater endorsement of classist beliefs did lead to more positive evaluations of the self for all individuals with the effect being stronger for those of lower SSS than for those who are higher SSS. Also, small but significant correlations between classist beliefs and all main variables in the analysis were observed except with negative stereotypes, such that classist beliefs were associated with enhanced self-esteem and self-efficacy and decreased class-based shame. These findings support the short-term palliative and protective effects of engaging in system-justifying beliefs (Furnham, 2003; Harding & Sibley, 2013; Jost &

Hunyady, 2005). Classist beliefs may sometimes bolster one's sense of self, particularly for those of lower SSS, perhaps due to a boost that occurs from comparing oneself to "lesser" individuals, namely the poor who may be considered a very different kind of person as described above.

Results with the EFA-derived internalized classist stereotypes were similar to the general positive and negative stereotype findings. While the effects were small, individuals with greater classist beliefs saw themselves as more classy, responsible, and strong/proud, which for the latter two endorsements translated into increased self-esteem and self-efficacy beliefs. Social comparison theory has found that making downward comparisons may lead to self-enhancement (Suls & Wheeler, 2000). When thinking about the blameworthy poor (Lott, 2002), one may feel classy, responsible, and strong/proud by comparison. Notable class-based group differences were also observed as classist beliefs led to greater endorsement of "classiness" stereotype attributes for individuals who reported lower SSS, while for individuals who reported higher SSS, classist beliefs led to less endorsement of these attributes, again suggesting a palliative function of system-justifying beliefs and the benefits of downward social comparison (Harding & Sibley, 2013; Jost & Hunyady, 2005; Suls & Wheeler, 2000). For individuals who reported lower SSS, their need to feel classy when reminded about stereotypical beliefs about the poor may be greater than those of higher SSS. Lower SSS individuals may feel the threat more acutely of being close in status to the much maligned poor and desire to assert their difference. Thus, lower SSS individuals may feel more motivated to determine how they are dissimilar from the poor resulting in more contrasting evaluations from the poor than higher SSS individuals make (Mussweiler, 2003). Individuals could have rated themselves as being classy and having good taste in a blatant attempt to align themselves with the middle and upper classes (Bourdieu, 1984; Saatcioglu & Ozanne, 2013).

Still, independent of other variables, individuals in this study appeared to endorse less classist/system-justifying beliefs than other groups. So internalized stigma in the form of classists beliefs was generally low in this study. The mean score for classist beliefs was significantly lower (M = 2.62) for this study than the study (M = 3.05) in which the measure was originally developed, $t(1479) = 11.88$, where participants were largely young, middle class students (Aosved & Long, 2006). Thus, in this study, participants who either reported a childhood or current lower SSS endorsed less system-justifying beliefs. Also, a small, but statistically significant, correlation was detected between classist beliefs and current SSS (r = .167). Both of these observations are in line with other system-justification literature which suggests that individuals from lower status backgrounds, on average, report less system-justifying beliefs that those from similar higher status backgrounds (Jost & Thompson, 2000; Jost & van der Toorn, 2012; Sidanius & Prato, 1999). So, while endorsement was lower overall for lower SSS individuals, those who did endorse those beliefs reported more positive attributes for themselves.

Hypothesis 1b – the apply to harm stages.

Hypothesis 1b, that greater application of negative stereotypes will lead to decreased self-respect in the form of lowered self-esteem and self-efficacy and greater shame and embarrassment about one's social class standing, was supported. The regressive model's prediction that stereotype application leads to psychological harm appears true for social class as well as mental illness (Corrigan, Bink, Schmidt, Jones, & Rüsch, 2016; Corrigan, Watson, & Barr, 2006). Regarding group differences, higher endorsement of negative classist stereotypes was more strongly associated with decreased self-esteem for individuals who indicated that they declined in SSS since childhood than for individuals who indicated that they increased in SSS

since childhood. Similarly, higher endorsement of positive stereotypes was more strongly associated with increased self-esteem for individuals who indicated that they increased in SSS since childhood than those who indicated that they declined in SSS since childhood.

Little research has examined the intrapsychic experience of class identity in general, let alone how change in status affects one's sense of self (Lott & Bullock, 2007). However, in asking about both childhood and current social class in the beginning of the survey, participants were forced to think about how their status has changed over time; when lower status is made salient, emotional reactions likewise are affected (Johnson, Richeson, & Finkel, 2011; Kraus, Horberg, Goetz, & Keltner, 2011; Kraus & Mendes, 2014). Negative classist stereotypes may feel more meaningful and salient for individuals who have decreased in SSS, tapping into the feelings of personal inferiority that low class status can induce (Yeskel, 2007). Individuals who have decreased in SSS may feel the threat of these stereotypes more acutely which in turn impacts their sense of self more strongly. Negative attributes, then, have a greater impact than positive attributes for these individuals. In contrast, individuals who have increased in SSS have fulfilled the American Dream, playing by the rules and being rewarded for their efforts and attributes (Godfrey & Wolf, 2016). They are likely more able to focus on positive attributes when evaluating their worth because it is assumed they have many positive traits that have enabled their rise such as hard working, intelligent, resilient, and disciplined.

Regarding self-efficacy, higher endorsement of negative classist stereotypes was also more strongly associated with decreased self-efficacy for individuals who rated themselves as possessing current lower SSS than for those who rated themselves as higher SSS. The threat of negative stereotypes appears to more directly threaten one's sense of being able to accomplish one's goals and make changes in one's life for those lower in current SSS. Negative stereotype

application seems to erode a sense of empowerment (Corrigan, Larson, & Rusch 2009), which aligns with other research tying lower social class to greater hopelessness and a sense of lack of control (Kraus, Piff, & Keltner, 2009; Lachman & Weaver, 1998). The threat and uncertainty associated with low resources that leads low ranking individuals to feel less able to influence their environment may be exacerbated by internalizing negative stereotypes (Chen & Matthews, 2001; Miller, Chen, & Cole, 2009; Sapolsky, 2005). Feelings of powerlessness likely result if one sees oneself as possessing traits that will keep them low ranking and justify their current status. In contrast, for individuals higher in SSS, negative stereotypes do not affect how they view their control over the lives and their personal abilities as these stereotypes are less relevant to them.

While the direct effects of positive and negative stereotypes on shame were statistically significant, they fell below the level of substantial practical significance. Stereotype application may have a significant, but slight impact on class-based shame. Still, higher endorsement of positive stereotypes was more strongly associated with decreased reports of class-based shame for individuals who indicated that they increased in SSS since childhood than those who indicated that they declined in SSS since childhood. So, individuals who have risen in status and think they possess a number of positive attributes are less likely to feel anxiety and embarrassment about their class standing than those who think they possess those attributes but have declined in status. Again, like with positive stereotypes and self-esteem above, positive stereotype application appears protective for those who have risen in status while not so for those who have declined in status. Shame may be more pressing and powerful for individuals who have declined in status, tapping into deeply held cultural biases against individuals of lower social class status (Lott, 2002; Smith & Redington, 2010). Even if they do hold a positive picture

of themselves, class-based shame may overwhelm their self-characterization. A qualitative study in seven countries found that shame was a universal experience of poverty: shame at not living up to social expectations, being able to provide for one's family, and being able to live out one's aspirations (Walker et al., 2013). Shame appears to decrease as one rises in status and with it a more positive sense of self appears. Pride, an emotion shown to be associated with high status, likely takes its place (Tracy, Weidman, Cheng, & Martens, 2014).

Hypothesis 1c – the harm to why try stages.

Paths from self-esteem and class-based shame in the *harm* stage to quality of life were significant, but paths from self-efficacy in the *harm* stage to quality of life were non-significant. Thus, hypothesis 1c, that decreased self-respect will then lead to decreased belief in one's ability to meet life goals and decreased life satisfaction (as measured by quality of life), was partially supported. For individuals with past and/or current low SSS backgrounds, self-esteem and class-based shame directly impact quality of life, while self-efficacy is not tied to quality of life. While internalized stigma was associated with decreased self-efficacy for individuals with mental illness (Livingston & Boyd, 2010), self-efficacy may not translate into quality of life for class-based stigma. Past research on locus of control and hopelessness has demonstrated ties to life satisfaction (Kraus, Piff, & Keltner, 2009; Lachman & Weaver, 1998), but self-efficacy appears to be a distinct concept and play a different role for individuals of lower social class status. Perhaps for individuals of lower SSS, how strongly they believe they can meet their goals has less bearing on their actual ability to do so, the actual outcome. A feeling of overall control might be distinct from feelings about one's abilities regardless of the circumstances. In general, lower social rank individuals tend to see themselves as having less direct influence on outcomes in their life and provide more contextual explanations (Kraus, Piff, & Keltner, 2009). This may

be at work with participants in this study who do not see their abilities translating into life outcomes.

Regarding self-esteem, overall self-esteem predicted quality of life, in alignment with past research using the regressive model on other populations (Corrigan et al., 2009; Oliveira, Carvalho, & Esteves, 2016). For individuals higher in SSS, higher levels of self-esteem were more strongly associated with higher reported quality of life than for individuals lower in SSS. This same stronger association of self-esteem with quality of life was observed for individuals who had increased in SSS since childhood than those who decreased in SSS. Self-esteem more directly translates into quality of life for individuals higher on the class ladder, while for those lower on the ladder, other factors have a stronger impact on quality of life. Perhaps the concrete stressors associated with lower social class standing weigh more heavily on individuals' quality of life for those lower in status, while the financial and social security of higher status means that internal factors such as self-esteem have a greater impact on one's overall life satisfaction (Smith, 2010). Indeed, likely due to real or perceived control over their environment and event outcomes, upper rank individuals tend to be able to focus more on internal emotions, goals, and motivations than do lower rank individuals (Grossmann & Varnum, 2011; Kraus et al., 2012; Varnum, Na, Murata, & Kitayama, 2012). This internal focus may translate into a greater ability to connect a positive sense of self with their quality of life.

The class-based shame measure was this study's most direct measure of how participants felt about their social class standing. However, this measure is short (four questions) and relatively novel as few studies have employed it (i.e. Mickelson & Hazlett, 2014; Mickelson & Williams, 2008). Shame was tied to quality of life; it most strongly predicted satisfaction with finances and life as a whole and had the weakest association with political/civic engagement and

family relationships. The wording of the measure is linked to one's financial situation which makes its ties to satisfaction with one's finances clearest. Shame about one's financial situation is important because it may inhibit one's ability to rise out of poverty due to its effects on social service seeking behaviors (i.e., Horan & Austin, 1974; Jarrett, 1996; Kerbo, 1976; Stuber & Kronebusch, 2004). That its next strongest association was with life as a whole is notable suggesting class-based shame touches how happy one is with life overall. Indeed, shame and embarrassment are common emotions experienced by low social status individuals (Gruenewald, Kemeny, Aziz, & Fahey, 2004; Keltner, 1995). For individuals lower in SSS, higher levels of shame were more strongly associated with lower reported quality of life than for individuals higher in SSS. One's evaluation of their financial situation, particularly compared to others, has a stronger impact on quality of life for lower status individuals than high status individuals.

Hypothesis 2 – explaining poor well-being.

The path from classist beliefs to negative stereotype endorsement was nonsignificant. Thus, hypothesis 2, that application of negative class-based stereotypes to oneself will help explain the relationship between endorsement of system justifying beliefs (classist beliefs) and poorer well-being (lowered self-esteem and quality of life), was not directly supported. Classist beliefs were not tied to negative stereotype endorsement according this study's results, potential reasons for which are outlined above. However, results from other stages of the model demonstrated links between class-based evaluations/attitudes and well-being. The path in the model between classist beliefs to positive class-based stereotype application was significant, though small. Also, paths from both positive and negative class-based stereotype application to poorer well-being markers were significant. Thus, class-based stereotype application appeared to play a larger role in well-being outcomes in this study than did classist beliefs.

Other studies have found significant ties between economic system justifying beliefs, a version of classist beliefs, and well-being outcomes (Harding & Sibley, 2013; Jost & Thompson, 2000; Rankin, Jost, & Wakslak, 2009), while there was largely no predictive connection in this study. Past studies have used measures of system justification that focus more on the system as a whole and less about evaluations of the poor individuals in the system; the MEBS measure of classism in this study contains more questions related to direct evaluations of poor people, which may account for the difference in findings. Perhaps answering questions about the system broadly more directly ties to the self because the system as a whole is more relevant to how one might fit into society, whereas answering questions about the poor serves to distance participants from thinking about themselves, as the poor may be considered "others" or an out-group; few individuals consider themselves poor (Williams, 2009).

Social distancing and social comparison.

This idea of distancing hints at another potential reason for why classist beliefs were not strongly tied to well-being. The discrepancy could be attributable in part to the classist beliefs measure which asked about the reasons/character traits that make others poor as opposed to beliefs about one's own social class standing. Attribution for one's own social class standing (i.e., due to individual, structural, and/or fatalistic reasons) was not assessed in this study, and how one justifies or understands one's own social class versus that of others may be discrepant. While little research exists on how attributions for one's own social class compare to those made for the social class of others (see Mickelson & Hazlett, 2014), in one of the few relevant studies, Seccombe, James, & Walters (1998) found that low income women on public assistance tend to make individualistic attributions for others and more structural attributions for themselves. Another more recent qualitative study of immigrant and racial/ethnic minority low income

women likewise found participants all endorsed individual attributions for others' poverty and rarely structural ones, which impeded their ability to develop a critical consciousness about the sociopolitical system and their position in it (Godfrey & Wolf, 2016). This research suggests that even many low income individuals do not see their particular social status as tied to the broader workings of the system, instead seeing their situation as unique to that of others in the same low class. Even though they likely experience similar circumstances, they may make the fundamental attribution error, attributing the circumstances of others to individual factors and the circumstances of themselves to situational factors (Weary & Reich, 2000). Thus, asking directly about participants' explanations for their current social class standing as opposed to that of others may have produced results more specific to the self and rendered a stronger model.

Social class identity is complex, and the present study suggests that evaluations of similar others' social class status may not translate into personal evaluations. Williams (2009) identified three main points that complicate potential research on social class and stigma: 1) the achieved/ascribed nature of social class makes it different than other stigmatized identities, 2) most individuals do not identify with their social class, and 3) social class definitions are often problematic. The first two points may be particularly relevant for this study's results. Regarding the first point, social class is often seen as flexible as opposed to innate. For those of lower class status, their social class may be viewed as a temporary set-back with the expectation that they will move up (Bullock & Limbert, 2003), which may explain why attributions for one's own poverty can differ from attributions made for others. The perception of social mobility is associated with support for the economic system (Day & Fiske, 2017). Individuals may be motivated to uphold the status quo system if one believes the system to be mutable in the long-term, which would allow them the opportunity to change their status (Owuamalam et al, 2017).

Changing their status would also allow those of lower social class status to differentiate themselves from others in their group and potentially feel a sense of superiority, which may be at work with the findings that classist beliefs led to slightly higher positive evaluations of the self.

Despite data trends that suggest declining social mobility (Mitnik & Grusky, 2015) many low status individuals may see themselves as exceptions in their social class group; they may believe that they have hit a rough spot but they have the potential to rise and prove themselves as worthy citizens. Supporting this assertion, a qualitative sociology study found that residents of trailer parks/mobile homes primarily dealt with their stigmatized status by distancing themselves from others in their community, meaning asserting difference from other community members and their own decency (Kusenbach, 2009). Finding differences as opposed to communalities is problematic in that it can obscure the reality of the social class structure in the United States and demotivate individuals from working for social justice. Still, it can be protective. Barusch (1997) found that for low income women, their self-concept is not negatively impacted by their poverty if they are able to engage in downward comparison, view themselves as outside of poverty, or see their poverty as temporary.

Another factor to consider for this study is that most participants in this study were White, and White individuals tend to engage in more system justification than do ethnic minorities (Jost & van der Toorn, 2012). Even though these White individuals were of current or past lower social class status, as the dominant racial group in the United States they may have an easier time distancing themselves mentally from "the poor," anticipating they can rise in status as they have observed it happen more often in their communities than have racial or ethnic minorities. Group dynamics and identification may be at work. Individuals who have system justifying beliefs and are highly identified with their in-group report psychological harm, but less

so for those who are less identified with their in-group (O'Brien & Major, 2005). Perhaps individuals in this study did not feel particularly connected to their social class as White people, most of whom possessed more education than the average American.

Related to social class identification is the role of social comparison. In Sapolsky's (2005) review of SES-related health disparities, he argues that there is notable evidence that "feeling" poor (i.e., the perceptual analysis of social positioning) compared to others explains a large portion of health disparities. Feeling poor by comparison lowers sense of control, enhances feelings that one's life is worsening, and decreases feelings of social trust and support, all of which then aggravate the effects of stress (Sapolsky, 2005). Liu (2011) concurs that evidence has accumulated that "it is the feeling of not being valued and not having much agency over one's environment that may be related to poorer health," both mental and physical (p. 31). These observations concur with findings regarding subjective social status and health which demonstrate the importance of relative social class, not just objective social class (Adler & Stewart, 2010). Social comparison also impacts general life satisfaction as individuals of higher social rank routinely report greater life satisfaction (Diener & Diener, 1995; Diener & Lucas, 1999; Diener, Sandvik, Seidlitz, & Diener, 1993; Howell & Howell, 2008), while individuals who feel lower in social rank in comparison to their neighbors (Luttmer, 2005) and colleagues (Brown, Gardner, Oswald, & Qian, 2008) report less life satisfaction even when accounting for raw income (Boyce et al., 2010).

Results from this study also suggest a stronger relationship between well-being variables and relative social class (a form of social comparison) than between well-being and classist beliefs. As previously discussed, classist beliefs did not demonstrate a strong predictive relationship with other variables in the study, though a slight palliative/protective function of

system justifying beliefs was at work. However, all main variables in the path analysis were more powerfully correlated with current SSS than with classist beliefs (see Tables 6 & 7). Subjective social status involves direct social comparison and perceived barriers imposed by one's social status. These phenomena seem to explain well-being disparities more so than beliefs about the economic system and poor people in this study. What's notable also is that current but not childhood SSS was associated with well-being. While little research exists on how changes in social class rank impacts the self, some studies suggest that when perception of rank is manipulated in the lab, shifts in behavior, perception, and emotion quickly occur (Kraus & Mendes, 2013; Kraus, Tan, & Tannenbaum, 2013). Thus, while there are long term impacts of childhood social class on well-being (Evans, 2004), scholars may want to devote more attention to current social status when attempting to understand how social comparison and attitudes affect well-being.

Social comparison, then, directly influence one's sense of self and quality of life (Adler & Stewart, 2010; Boyce et al., 2010; Sapolsky, 2005). Classism is a type of social comparison, but little research has examined how it may impact the self. In a recent attempt to fill this gap, one study developed a measure of classism and found downward classism (negative evaluations of individuals of low social class) to be more closely related to one's SSS and attitudes about the Protestant work ethic, materialism, racism, and sexism, but not well-being outcomes (Colbow et al., 2016). It was upward classism, negative evaluations of those in a higher social class, that was more closely related to life satisfaction. In the present study, the class-based shame measure most directly assessed participants' feelings about their social class standing and found a negative association with quality of life. Shame suggests feeling bad about oneself by thinking about where one should be, in this case, higher in social class standing. Results of the Colbow et al.

study combined with those of the present study suggest that quality of life may be more impacted by looking up than looking down. As economic inequality rises in the United States and wealth becomes increasingly concentrated in the hands of a small percentage of individuals, more individuals may be looking up and feeling resulting decrements to their overall life satisfaction (Collins & Yeskel, 2005).

Limitations and Future Directions

Overall, the regressive model of self-stigma as conceptualized and measured in this study was partially supported. There is a dearth of research and theorizing about internalized classism, so this study was rather exploratory in nature and provides information regarding how to study internalized classism moving forward. Measures developed specifically for social class using this model would be beneficial.

Regarding the *agree* stage, classist beliefs as measured by the Modified Economic Belief Scale do not appear to map strongly onto stereotype endorsement and/or sense of self. Since this study was designed and implemented, a new measure of downward and upward classism was developed using Liu's Social Class Worldview Model – Revised (SCWM-R), the Classism Attitudinal Profile (CAP; Colbow et al., 2016). The CAP was developed from a well-known and respected counseling psychology theory of social class and is designed to measure personal beliefs related to social class and how they may impact identity; as such, it may be more relevant for internalized classism and the regressive model of self-stigma and could be used in future research. Example items from the downward classism subscale include, "People who are poor let their kids run around without supervision" and "People who are blue collar are less refined compared to most other groups." Example items from the upward classism subscale include, "In

most difficult situations, wealthy people take the easy way out" and "More often than not, wealthy people are selfish."

Given the lack of measures for and theorizing on internalized classism, measures used for this study were either novel/adapted (in the case of the stereotype measure), possessing a relatively small research base (in the case of the class-based shame measure), or general as opposed to class-specific (in the case of self-esteem, self-efficacy, and quality of life). Other studies assessing internalized stigma have used a more direct approach and wording related to one's stigmatized status. For example, the Self-Stigma of Mental Illness Scale (SSMIS; Corrigan, Watson, & Barr, 2006), contains direct questions such as "because I have a mental illness, I am dangerous" (the *apply* stage) and "I respect myself less because I am dangerous" (the *harm* stage). The Weight Bias Internalization Scale – Modified contains questions such as "I hate myself because of my weight" (Pearl & Puhl, 2014). Regarding the *"why try"* effect or behavioral futility stage, again, while quality of life has been used in other studies to assess this stage, more direct measures of the "why try" effect have been also used (see Corrigan et al, 2016). An example item is "I am not capable of working a good job because I have a mental illness." This present study asked for general evaluations of the self without specifically asking a preamble stem such as "because of my social class." Future research could use a similar stem or structure so that participants have a more direct social class frame of reference when evaluating themselves; alternatively, a more efficient method would be to develop a measure such as the SSMIS for social class.

Another potential limitation of the study was sample characteristics. The sample was largely White, so how these results may generalize to individuals of other racial and ethnic groups is questionable. The experience of being a White person of lower social status and a

racial/ethnic minority of lower social status is often very different (hooks, 2000). Participants were also more educated than the general population and had access to a computer and the internet in order to use MTurk, both of which characteristics may suggest a higher level of resources not possessed by others of lower SSS. A "digital divide" often separates those with and without adequate resources in the United States, and over half of households earning less than $20,000 have broadband connection (Vick, 2017). Thus, these MTurk users may have a degree of knowledge and familiarity with the internet, that other more disadvantaged individuals may not.

Furthermore, the class backgrounds of participants may have been too diverse. Participants were screened into the study if they reported a lower childhood *or* current SSS. However, evidence is accumulating that significant differences in behavioral and attitudinal differences exist between individuals from different current social classes, such as differences in levels of self-esteem and self-efficacy; in values such as interdependence, interpersonal relationships, and resilience; and prejudice towards outgroups when threatened (Markus, 2017). During early data collection for this study, preliminary analyses were conducted to determine whether individuals reporting low childhood versus low current SSS looked different across the main variables in the regressive model, and results suggested they were not significantly different. However, correlations run with the final data suggested significant relationships between current SSS and main variables in the regressive model and weak relationships between childhood SSS and these variables. These findings suggest that current SSS may play a stronger role in sense of self and internalized classism than childhood SSS. Thus, the diverse class backgrounds of participants may have weakened power for the study and made it more difficult to draw conclusions about the data. Future research could focus on a narrower subset of

individuals to draw firmer conclusions, for example those who only report a current SSS of three or less. This study likely drew disproportionately from lower middle class individuals by setting the screening criteria to a current or childhood SSS of four or less.

Finally, a more fruitful direction for further study may wish to take into account recent research on perceived classism. A study from the Netherlands found that perceived classism was associated with poor health and feelings of inferiority/shame (Simons et al., 2017). In the United States, perceived classism demonstrated negative impacts on college students' career decision making and self-efficacy (Shin & Lee, 2017), as well as life and academic satisfaction (Allan, Garriott, & Keene, 2016). Using a broadly worded measure of perceived discrimination based on one's background on a sample of rural, mostly White American adolescents, researchers concluded that perceived social class discrimination mediates the relationship between poverty and poor health as measured by allostatic load (Fuller-Rowell, Evans, & Ong, 2012). Thus, internalized classism in the form of personal beliefs alone may not be enough to cause significant decrements in well-being. Lower status individuals may need to experience discrimination in addition to their beliefs because then they are faced with the discrepancy between their beliefs and the treatment they receive as a member of a stigmatized group (Foster, Sloto, & Ruby, 2006; Foster & Tsarfati, 2005; Major, Kaiser, O'Brien, & McCoy, 2007).

Conclusion

The use of the regressive model of self-stigma for internalized classism was a starting point for the subject's study given the lack of relevant theorizing and/or measures. Mixed results were observed for the regressive model of self-stigma with internalized classism. Overall, participants endorsed less classist beliefs than in prior research, and relative social status had a stronger impact on well-being than did classist beliefs. Regarding the *agree* stage, classist beliefs

and their related downward comparison engendered a slight palliative effect for participants. Individuals with greater classist beliefs endorsed a more positive sense of self with that effect amplified for individuals of a lower social class status compared to those of a higher social class status. Individuals from a lower social class status may receive a boost in their well-being from downward comparison that higher status individuals do not need. Low status individuals who endorse classist beliefs may see themselves as different from other low status people and exceptions in their social class, which may make them feel special and protect their sense of self. This comparison may also lead them to see their current class situation as temporary because they possess qualities different from other low status individuals, which makes their rise in status possible. Generally, participants endorsed less negative class-based stereotypes than positive stereotypes.

For the *apply* to *harm* stages, class-based stereotype endorsement led to decrements in self-esteem and self-efficacy and increased class-based shame. The effect was stronger for individuals with current low SSS and those who declined in SSS since childhood, suggesting these stereotypes are more threatening to the well-being and sense of self for low status individuals than high status individuals. For the *harm* to *why try* stages, decreased self-esteem and increased class-based shame translated into lower quality of life. Self-esteem was a stronger predictor for quality of life for individuals of higher SSS suggesting that when free of the stressors imposed by lower SSS, overall satisfaction with one's life is more tied to an internal sense of self. Similarly, class-based shame demonstrated greater harm on quality of life for individuals of lower SSS than those of higher SSS.

Overall, given the lack of strong connection between classist beliefs and negative class-based stereotype application combined with the counter-hypothesized findings that those of

lower status who endorse classist beliefs are actually more likely to view themselves favorably, the regressive model of self-stigma may not be the most appropriate model for internalized classism. Class status is generally viewed as more mutable and under the control of individuals than is mental illness, which has increasingly been viewed as a product of biology (Pescosolido et al., 2010). The complexities of class politics and class identity may be more difficult to translate into a stepped model such as that of the regressive model. Endorsing classist beliefs may trigger a downward social comparison that is actually helpful to lower status individuals that is not seen in the regressive model. However, to better parallel the regressive model in research before deeming it unfit for social class, internalized classism research could benefit from the development of specific measures for testing this model such as one directly modeled after the measure of mental illness self-stigma that originally tested this model with a mentally ill population. This measure had parallel language for each step of the model (i.e., "I think most persons with a mental illness cannot be trusted" in the agree stage parallels "Because I have a mental illness I cannot be trusted"). The present study did not use such parallel language which may mean that it produced a social comparison phenomenon not found in the original regressive model research. The use of the recently developed classism measure inspired by Liu's model could also prove to be a fruitful addition to internalized classism research. Researchers may also want to use a narrower subset of participants in order to draw firmer, if more limited, conclusions about how internalized classism may apply to specific groups of people. Finally, group differences observed in this study suggest that attention should be paid not just to current social class but how one has changed in status over time and how that may impact sense of self.

Internalized classism was described by Russell (1996) as the internalization of attitudes that imply one's class deserves poor treatment or is lesser than other classes and by Liu (2004,

2011) as frustration and dysphoria related to feelings of inadequacy regarding one's social class standing. In the present study Russell's definition may be at play in an unexpected way: individuals may believe one's class deserves poor treatment but see oneself as an exception to that rule. Regarding Liu's definition, class-based shame did play a role in quality of life and have a stronger impact on those of lower social status. The above conceptualizations of internalized classism are loose definitions that have not been entirely operationalized, and future study of internalized classism should develop a more encompassing understanding of internalized classism. Internalized classism may be a variable set of beliefs and look different for various groups of individuals. Recent definitions of internalized stigma include the affective, cognitive, and behavioral difficulties experienced on account of one's stigmatized identity, which suggests internalized stigma manifests in diverse ways (Livingston & Boyd, 2010). Results for this model were mixed but promising for future research. In particular, observed class-based group differences in the various stages of the model suggest something is at work with this model and class-related attitudes/stereotypes. Internalized classism remains unclear in its conceptualization, but its potential impacts on sense of self and social justice efforts suggest we should keep searching for answers.

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Table 1

Social Class Demographics, N = 504

	M	***SD***
Household Income	$43,285	$32,967
Median	$35,000	
Household Members	2.59	2.54
	N	***%***
Current Subjective Social Status		
1	22	4.2
2	68	13.1
3	162	32.1
4	140	27.9
5	55	10.7
6	38	7.5
7	15	2.8
8	8	1.6
9	0	0.0
10	0	0.0
Childhood Subjective Social Status		
1	30	5.9
2	79	15.6
3	84	16.6
4	122	23.8
5	72	14.3
6	54	10.7
7	50	9.9
8	13	2.6
9	3	0.6
10	0	0.0
Participant Education		
Less than 7th grade	1	0.2
Junior high/middle school (9th grade)	1	0.2
Partial high school (10th or 11th grade)	5	1.0
High school graduate	76	15.4
Partial college (at least one year)	154	31.2
College education	208	42.1
Graduate degree	49	9.9
Missing	4	
Spouse/Partner Education		
Less than 7th grade	3	0.8

Junior high/middle school (9th grade)	2	0.6
Partial high school (10th or 11th grade)	14	3.9
High school graduate	94	25.8
Partial college (at least one year)	100	27.5
College education	109	30.1
Graduate degree	40	11.2
Missing	142	
Mother/Parent 1 Education		
Less than 7th grade	11	2.2
Junior high/middle school (9th grade)	16	3.2
Partial high school (10th or 11th grade)	30	6.1
High school graduate	170	34.0
Partial college (at least one year)	104	20.6
College education	122	24.3
Graduate degree	47	9.5
Missing	4	
Father/Parent 2 Education		
Less than 7th grade	9	1.9
Junior high/middle school (9th grade)	21	4.5
Partial high school (10th or 11th grade)	36	7.7
High school graduate	177	37.1
Partial college (at least one year)	79	16.6
College education	100	20.9
Graduate degree	53	11.3
Missing	29	
Employment		
Full-time employment	283	56.2
Part-time employment	94	18.7
Full-time student	10	2.0
Part-time student and part-time employment	6	1.2
Unemployed	98	19.3
Retired	13	2.6

Table 2

General Demographics, *N* = 504

	M	***SD***
Age (18 – 77)	36.34	10.93
	N	***%***
Gender		
Male	238	47.3
Female	255	50.5
Transgender/Non-binary/Gender queer	8	1.6
Missing	3	
Race		
Black	30	5.9
White	411	81.4
East Asian	16	3.2
Pacific Islander	1	0.2
Hispanic	17	3.4
Middle Eastern	2	0.4
South Asian	3	0.6
Multiracial	24	4.8
Religion		
Christian	182	36.3
Jewish	8	1.6
Muslim	2	0.4
Hindu	3	0.6
Buddhist	9	1.8
Atheist	109	21.8
Agnostic	140	27.9
Spiritual, non-religious	36	6.9
Other	14	2.6
Missing	1	

Table 3

Testing Normality of Path Analysis Variables

	Skewness*	**Kurtosis***
Classist Beliefs	.456	-.517
Positive Stereotypes	-.256	-.040
Negative Stereotypes	.979	.850
Self-esteem	-.493	-.431
Self-efficacy	-.478	.555
Shame	-.461	-.532
Quality of Life	-.173	-.539

*Values between +1 and -1 are considered acceptable

Table 4

Summary of Removed Cases

	N
Original Participants	504
Removed Participants	
2 or more data points on same measure missing	6
Multivariate outliers	2
Quick completer & univariate outliers	3
Quick completer alone	1
Final Participants for Analysis	492

Table 5

Measure Statistics

Measure	**Range**[1]	***M***	***SD***	**α**[2]
Classist Beliefs	1 to 5	2.62	0.74	0.89
Positive Stereotypes	1 to 6	4.15	0.84	0.91
Negative Stereotypes	1 to 6	1.65	0.53	0.88
Self-esteem	1 to 4	2.93	0.76	0.94
Self-efficacy	1 to 4	3.00	0.51	0.94
Shame	1 to 5	3.42	1.06	0.80
Quality of Life	1 to 7	4.41	1.08	0.90

[1]Possible range for scale (not necessarily observed in study)

[2]Cronbach's α estimate of internal consistency

Table 6

Pearson Correlations for Main Variables in Path Analysis

	Classist Beliefs	**Positive Stereotypes**	**Negative Stereotypes**	**Self-esteem**	**Self-efficacy**	**Shame**
Classist Beliefs	-					
Positive Stereotypes	.128*	-				
Negative Stereotypes	-.074	-.545**	-			
Self-esteem	.123*	.574**	-.656**	-		
Self-efficacy	.119*	.570**	-.557**	.707**	-	
Shame	-.154*	-.364**	.403**	-.570**	-.463**	-
Quality of Life	.173**	.590**	-.569**	.711**	.564**	-.619**

* $p < .01$
** $p < .001$

Table 7

Pearson Correlations for Main Variables in Path Analysis and Social Class Status

	Current Subjective Social Status	**Childhood Subjective Social Status**
Classist Beliefs	.167***	-.018
Positive Stereotypes	.290***	-.036
Negative Stereotypes	-.269***	.069
Self-esteem	.311***	-.015
Self-efficacy	.256***	.010
Shame	-.313***	.129**
Quality of Life	.458***	-.097*

*$p < .05$
**$p < .01$
***$p < .001$

Table 8

Pearson Correlations for Social Class Status Indicators[***]

	Current Subjective Social Status	**Childhood Subjective Social Status**
Participant Education	.219[**]	.079
Spouse/Partner Education	.115[*]	.123[**]
Mother/Parent 1 Education	-.032	.345[**]
Father/Parent 2 Education	-.033	.340[**]
Participant Occupation	.334[**]	-.046
Spouse/Partner Occupation	.280[**]	.027
Mother/Parent 1 Occupation	.008	.200[**]
Father/Parent 2 Occupation	-.030	.358[**]
Household Income	.535[**]	-.096[*]

[*]$p < .05$

[**]$p < .001$

[***]Education and occupation levels taken from the the Barratt Simplified Measure of Social Status (see Appendix H; BSMSS; Barratt, 2012)

Table 9

Summary of Causal Effects of the Hypothesized Model

			Causal Effects	
Outcome	**Determinant**	**Direct**	**Indirect**	**Total**
Positive Stereotypes (R^2 = .06)	Classist Beliefs	.149*	--	.149*
Negative Stereotypes (R^2 = .03)	Classist Beliefs	-.071	--	-.071
Self-esteem (R^2 = .50)	Positive Stereotypes	.307*	--	.307*
	Negative Stereotypes	-.489*	--	-.489*
	Classist Beliefs	--	.081*	.081*
Self-efficacy (R^2 = .42)	Positive Stereotypes	.393*	--	.393*
	Negative Stereotypes	-.346*	--	-.346*
	Classist Beliefs	--	.083*	.083*
Shame (R^2 = .21)	Positive Stereotypes	-.214*	--	-.214*
	Negative Stereotypes	.278*	--	.278*
	Classist Beliefs	--	-.052*	-.052*
Quality of Life (R^2 = .62)	Positive Stereotypes	.233*	.168*	.401*
	Negative Stereotypes	-.098*	-.251*	-.349*
	Self-esteem	.348*	--	.348*
	Self-efficacy	-.009	--	-.009
	Shame	-.300*	--	-.300*
	Classist Beliefs	--	.085*	.085*

*$p < .05$

Table 10

Summary of Causal Effects of Exploratory Class-Based Shame Model

			Causal Effects	
Outcome	**Determinant**	**Direct**	**Indirect**	**Total**
Shame (R^2 = .024)	Classist Beliefs	-.154*	--	-.154
Satisfaction with one's				
Life	Classist Beliefs	--	.086	.086
(R^2 = .313)	Shame	-.560*	--	-.560
Employment	Classist Beliefs	--	.079	.079
(R^2 = .260)	Shame	-.510*	--	-.510
Friends	Classist Beliefs	--	.061	.061
(R^2 = .154)	Shame	-.392*	--	-.392
Family relationships	Classist Beliefs	--	.051	.051
(R^2 = .111)	Shame	-.333*	--	-.333
Health	Classist Beliefs	--	.060	.060
(R^2 = .150)	Shame	-.387*	--	-.387
Mental health	Classist Beliefs	--	.075	.075
(R^2 = .238)	Shame	-.488*	--	-.488
Leisure/recreation	Classist Beliefs	--	.059	.059
(R^2 = .145)	Shame	-.380*	--	-.380
Political/civic engagement	Classist Beliefs	--	.046	.046
(R^2 = .089)	Shame	-.298*	--	-.298
Finances	Classist Beliefs	--	.096	.096
(R^2 = .385)	Shame	-.621*	--	-.621
Self-care	Classist Beliefs	--	.071	.071
(R^2 = .211)	Shame	-.460*	--	-.460

*$p < .001$

Table 11

EFA Structure Coefficients

	Factor							
Item	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**
Nice	**-.840**	.317	-.045	.200	-.319	.434	.020	.278
Friendly	**-.819**	.311	-.090	.029	-.277	.371	.108	.235
Loving	**-.751**	.291	-.045	.106	-.221	.351	.163	.248
Well mannered	**-.616**	.416	.062	.176	-.283	.501	-.047	.227
Unkind	**.615**	-.008	.289	-.280	.587	-.408	.245	-.118
Family oriented	**-.573**	.271	-.193	.196	-.190	.477	.305	.295
Moral	**-.557**	.270	.015	.318	-.256	.529	.020	.306
Inconsiderate	**.547**	-.012	.236	-.295	.525	-.476	.261	-.110
Refined	-.256	**.792**	.001	-.029	-.194	.275	-.030	.240
Classy	-.364	**.743**	-.029	.086	-.247	.309	.078	.180
Good taste	-.374	**.617**	.006	.000	-.269	.388	-.105	.269
Depressed	.198	-.132	**.794**	-.179	.323	-.456	-.055	-.543
Mentally ill	.168	-.061	**.577**	-.342	.234	-.365	.005	-.480
Angry	.332	.046	**.561**	-.251	.415	-.323	.229	-.207
Drug abuse	.067	.015	.173	**-.642**	.140	-.188	-.087	-.133
Criminal	.124	.125	.043	**-.619**	.114	-.111	.050	-.005
Dirty	.294	-.048	.138	**-.536**	.412	-.482	.184	-.202
Alcoholic	.077	-.056	.219	**-.465**	-.004	-.174	.053	-.093
Promiscuous	.114	.023	.029	**-.465**	.107	-.186	.108	.006
Immoral	.332	.022	.198	**-.454**	.431	-.442	.172	-.103
Violent	.258	.117	.255	**-.424**	.273	-.278	.228	-.034
Abusive	.312	.166	.082	**-.372**	.283	-.222	.346	-.070
Stupid	.289	-.046	.264	-.247	**.752**	-.382	.063	-.161
Weak	.351	-.071	.436	-.099	**.672**	-.499	.014	-.518
Unpleasant	.500	-.045	.424	-.252	**.660**	-.463	.314	-.199
Intelligent	-.301	.404	.015	-.006	**-.552**	.355	.158	.193
Uneducated	.220	-.200	.150	-.105	**.526**	-.266	.015	-.106
Tacky	.088	-.122	.250	-.225	**.446**	-.350	.285	-.027
Hardworking	-.440	.321	-.073	.161	-.312	**.813**	.126	.397
Lazy	.303	-.135	.417	-.262	.423	**-.779**	.065	-.238
Unmotivated	.341	-.192	.504	-.247	.420	**-.728**	-.006	-.262
Responsible	-.442	.292	-.027	.312	-.299	**.683**	.097	.364
Too many children	-.051	-.029	.008	.034	-.031	.042	**.251**	-.036
Healthy	-.304	.385	-.183	.083	-.157	.380	.002	**.731**
Physically ill	.098	-.005	.241	-.132	.115	-.180	.144	**-.591**
Strong	-.458	.408	-.132	-.058	-.363	.497	.247	**.581**
Happy	-.534	.294	-.445	.115	-.337	.455	.280	**.571**
Proud	-.421	.458	-.141	.012	-.303	.422	.349	**.470**

Table 12

Summary of Causal Effects of EFA-Derived Stereotypes Model

			Causal Effects	
Outcome	**Determinant**	**Direct**	**Indirect**	**Total**
Strength/Pride (R^2 = .080)	Classist Beliefs	.181*	--	.181
Responsibility (R^2 = .099)	Classist Beliefs	.173*	--	.173
Classiness (R^2 = .043)	Classist Beliefs	.193*	--	.193
Self-esteem (R^2 = .432)	Classist Beliefs	--	.135	.135
	Strength/Pride	.454*	--	.454
	Responsibility	.369*	--	.369
	Classiness	-.061	--	-.061
Self-efficacy (R^2 = .439)	Classist Beliefs	--	.136	.136
	Strength/Pride	.369*	--	.369
	Responsibility	.444*	--	.444
	Classiness	-.041	--	-.041
Shame (R^2 = .177)	Classist Beliefs	--	-.076	-.076
	Strength/Pride	-.319*	--	-.319
	Responsibility	-.150*	--	-.150
	Classiness	.038	--	.038
Quality of Life (R^2 = .606)	Classist Beliefs	--	.140	.140
	Strength/Pride	.337*	.226	.563
	Responsibility	.066	.153	.219
	Classiness	.027	-.029	-.002
	Self-esteem	.289*	--	.289
	Self-efficacy	.006	--	.006
	Shame	-.288*	--	-.288

*$p < .05$

Appendix A

MacArthur Scale of Subjective Social Status (Adler et al., 2000; Goodman et al., 2001)

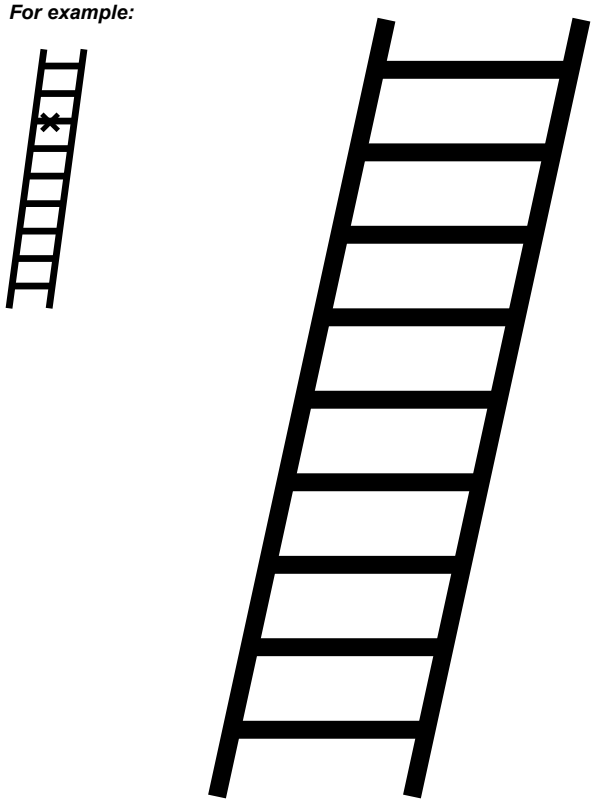
USA Ladder

INSTRUCTIONS:

Think of this ladder as representing where people stand in the United States. At the top of the ladder are the people who have the most money, most education, and most respected jobs. At the bottom are the people who have the least money, least education, and least respected jobs or no job. The higher up you are on this ladder, the closer you are to the people at the very top, and the lower you are, the closer you are to the people at the very bottom.

Where would you place yourself on this ladder? Please, place an "X" on the rung where you think you stand at this time in your life, relative to other people in the United States.

For example:



Appendix B

Modified Economic Beliefs Scale (Aosved & Long, 2006)
To what extent do you agree with the following statements?
Likert Scale – 1 (Strongly Disagree) to 5 (Strongly Agree)

Items

1. People who stay on welfare have no desire to work.
2. Welfare keeps the nation in debt.
3. People who don't make much money are generally unmotivated.
4. Equal educational opportunities exist for all people in our society.
5. Homeless people should get their acts together and become productive members of society.
6. Too many of my tax dollars are spent to take care of those who are unwilling to take care of themselves.
7. If every individual would carry his/her own weight, there would be no poverty.
8. There are more poor people than wealthy people in prisons because poor people commit more crimes.
9. Poor people are lazy.
10. Most poor people should not have children until they can afford to take care of them.
11. Most poor people aren't very smart.
12. If given the chance, a poor person would be able to keep a job.
13. Most poor people are in debt because they can't manage their money.
14. People who live in poverty could benefit from educational opportunities.
15. People living in poverty would rather commit crimes for financial gain than work for a living.

Items are summed for total score.

Appendix C

Internalized Classist Stereotypes & Attributes

How much are the following words and phrases characteristic of you?
Likert Scale – 1 (Not at all like me) to 6 (Very much like me)

Items

1. hardworking
2. healthy
3. proud
4. intelligent
5. family oriented
6. happy
7. strong
8. friendly
9. responsible
10. loving
11. nice
12. moral
13. well-mannered
14. refined
15. classy
16. good taste
17. lazy
18. stupid
19. dirty
20. uneducated
21. unpleasant
22. immoral
23. angry
24. weak
25. violent
26. mentally ill
27. have too many children
28. abusive
29. alcoholic
30. criminal
31. unkind
32. depressed
33. physically ill
34. promiscuous
35. unmotivated
36. drug abuse
37. inconsiderate
38. tacky

Items 1 to 16 make up the positive attributes factor. Items 17-38 make up the negative attributes factor. A mean score was generated for each factor separately.

Appendix D

Rosenberg Self-Esteem Scale (Rosenberg, 1965)
Below is a list of statements dealing with your general feelings about yourself. Choose the option that best represents how much you agree with each statement.
Likert Scale – 1 (Strongly Disagree), 2 (Disagree), 3 (Agree), 4 (Strongly Agree)

Items

1. I feel that I am a person of worth, at least on an equal plane with others.
2. I feel that I have a number of good qualities.
3. All in all, I am inclined to feel that I am a failure.
4. I am able to do things as well as most other people.
5. I feel I do not have much to be proud of.
6. I take a positive attitude toward myself.
7. On the whole, I am satisfied with myself.
8. I wish I could have more respect for myself.
9. I certainly feel useless at times.
10. At times I think I am no good at all.

Items 3, 5, 8, 9, and 10 are reverse-scored. Items are then summed for a total score.

Appendix E

General Self-Efficacy Scale (Schwarzer & Jerusalem, 1995)
Below is a list of statements dealing with your general feelings about yourself. Choose the option that best represents how true or not true the statement is about yourself.
Likert Scale – 1 (Not True at All), 2 (Hardly True), 3 (Moderately True), 4 (Exactly True)

1. I can always manage to solve difficult problems if I try hard enough.
2. If someone opposes me, I can find the means and ways to get what I want.
3. It is easy for me to stick to my aims and accomplish my goals.
4. I am confident that I could deal efficiently with unexpected events.
5. Thanks to my resourcefulness, I know how to handle unforeseen situations.
6. I can solve most problems if I invest the necessary effort.
7. I can remain calm when facing difficulties because I can rely on my coping abilities.
8. When I am confronted with a problem, I can usually find several solutions.
9. If I am in trouble, I can usually think of a solution.
10. I can usually handle whatever comes my way.

Items are summed for total score.

Appendix F

Internalized (Affective) Stigma (Mickelson & Hazlett, 2014)
To what extent do the following statements reflect your feelings about yourself?
Likert Scale – 1 (Definitely Disagree) to 5 (Definitely Agree)

1. I feel that I am odd or abnormal because of my financial situation.
2. There have been times when I have felt ashamed because of my financial situation.
3. I never feel self-conscious when I am in public.
4. I never feel embarrassed about my financial situation.

Scores on the latter two items are reversed. A mean score is generated from all items.

Appendix G

Adapted Quality of Life Measure

Likert Scale – 1 (Couldn't be worse), 2 (Displeased), 3 (Mostly dissatisfied), 4 (Mixed), 5 (Mostly Satisfied), 6 (Satisfied), 7 (Couldn't be better)

How satisfied are you with . . . ?

1. Your life as a whole
2. Your employment (or training/education program if that is your main occupation or being unemployed/retired if you are unemployed/retired)
3. Your friendships
4. Your relationships with your family
5. Your health
6. Your mental health
7. Your leisure time and/or recreation activities
8. Your political activism and/or civic engagement
9. Your finances
10. Your self-care abilities

A mean score is generated from all items.

Appendix H

The Barratt Simplified Measure of Social Status (BSMSS)
Measuring SES
Will Barratt, Ph.D.

Circle the appropriate number for your Mother's, your Father's, your Spouse / Partner's, and your level of school completed and occupation. If you grew up in a single parent home, circle only the score from your one parent. If you are neither married nor partnered circle only your score. If you are a full time student circle only the scores for your parents.

Level of School Completed	Mother	Father	Spouse	You
Less than 7th grade	3	3	3	3
Junior high / Middle school (9th grade)	6	6	6	6
Partial high school (10th or 11th grade)	9	9	9	9
High school graduate	12	12	12	12
Partial college (at least one year)	15	15	15	15
College education	18	18	18	18
Graduate degree	21	21	21	21

Circle the appropriate number for your *Mother's*, your Father's , your Spouse / Partner's, and your occupation. If you grew up in a single parent home, use only the score from your parent. If you are not married or partnered circle only your score. If you are still a full-time student only circle the scores for your parents. If you are retired use your most recent occupation.

Occupation	Mother	Father	Spouse	You
Day laborer, janitor, house cleaner, farm worker, food counter sales, food preparation worker, busboy.	5	5	5	5
Garbage collector, short-order cook, cab driver, shoe sales, assembly line workers, masons, baggage porter.	10	10	10	10
Painter, skilled construction trade, sales clerk, truck driver, cook, sales counter or general office clerk.	15	15	15	15
Automobile mechanic, typist, locksmith, farmer, carpenter, receptionist, construction laborer, hairdresser.	20	20	20	20
Machinist, musician, bookkeeper, secretary, insurance sales, cabinet maker, personnel specialist, welder.	25	25	25	25
Supervisor, librarian, aircraft mechanic, artist and artisan, electrician, administrator, military enlisted personnel, buyer.	30	30	30	30
Nurse, skilled technician, medical technician, counselor, manager, police and fire personnel, financial manager, physical, occupational, speech therapist.	35	35	35	35
Mechanical, nuclear, and electrical engineer, educational administrator, veterinarian, military officer, elementary, high school and special education teacher,	40	40	40	40
Physician, attorney, professor, chemical and aerospace engineer, judge, CEO, senior manager, public official, psychologist, pharmacist, accountant.	45	45	45	45

Level of School Completed Scoring

1	If you grew up with both parents add Mother + Father and divide by 2. If you grew up with one parent enter that score to the right.		
2	If you are married or partnered add Spouse + You and divide by 2. If you live alone enter Your score to the right. If you are a full-time student leave this blank.		
3	Double your score from line 2. If you are a full-time student leave this blank.		
4	If you are a full-time student enter only your parents' score. Add line 1 and line 3 then divide by 3 (three) for a **TOTAL EDUCATION** Score should be between 3 and 21		

Occupation Scoring

1	If you grew up with both parents add Mother + Father and divide by 2. If you grew up with one parent enter that score to the right.		
2	If you are married or partnered add Spouse + You and divide by 2. If you live alone enter Your score to the right. If you are a full-time student leave this blank.		
3	Double your score from line 2. If you are a full-time student leave this blank.		
4	If you are a full-time student enter only your parents' score. Add line 1 and line 3 then divide by 3 (three) for **TOTAL OCCUPATION** Score should be between 5 and 45		

TOTAL Score:

Add **TOTAL EDUCATION** + **TOTAL OCCUPATION**: Score should be between 8 and 66	