



*Brief report*

## Regulatory focus moderates the social performance of individuals who conceal a stigmatized identity

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People often choose to hide a stigmatized identity to avoid bias. However, hiding stigma can disrupt social interactions. We considered whether regulatory focus qualifies the social effects of hiding stigma by examining interactions in which stigmatized participants concealed a devalued identity from non-stigmatized partners. In the Prevention Focus condition, stigmatized participants were instructed to prevent a negative impression by concealing the identity; in the Promotion Focus condition, they were instructed to promote a positive impression by concealing the identity; in the Control condition, they were simply asked to conceal the identity. Both non-stigmatized partners and independent raters rated the interactions more positively in the Promotion Focus condition. Thus, promotion focus is interpersonally beneficial for individuals who conceal a devalued identity.

People living with stigmatized identities regularly contend with bias (Crocker, Major, & Steele, 1998; Jones *et al.*, 1984) and often hide their identities from others to avoid devaluation (Clair, Beatty, & MacLean, 2005). Although people expect that hiding a stigmatized identity is interpersonally beneficial, this strategy may ironically impair rapport and intimacy-building during social interactions (Newheiser & Barreto, 2014). In the present research, we examined whether a stigmatized identity can be concealed in a way that is not detrimental to social interactions, allowing the individual to reap the benefits of concealment.

Hiding a stigmatized identity involves both preventing exposure as stigmatized and promoting a more positive image of oneself (Goffman, 1963). When seeking to hide a stigmatized identity, one may focus primarily on either of these aspects of concealment

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(Barreto & Ellemers, 2003, 2009; Shih, Young, & Bucher, 2013). These two foci resemble the self-regulatory strategies delineated by regulatory focus theory (Higgins, 1997, 1998), according to which goal pursuit is shaped by two self-regulatory systems: Whereas promotion focus involves the pursuit of 'ideals', prevention focus involves the pursuit of 'oughts'. When under promotion focus, people are primarily sensitive to positive outcomes and seek to achieve success; and when under prevention focus, people are primarily sensitive to negative outcomes and seek to avoid failure.

Prior research suggests that identity devaluation can induce prevention focus (Oyserman, Uskul, Yoder, Nesse, & Williams, 2007; Seibt & Förster, 2004) and that regulatory focus affects emotions and task performance when one's identity is devalued (Grimm, Markman, Maddox, & Baldwin, 2009; Sassenberg & Hansen, 2007). In the present research, we investigated how regulatory focus impacts the social behaviour of individuals who hide a devalued identity – a complex situation with multiple cues for self-regulation. Prior work also indicates that how individuals frame social interactions influences their behaviour (Heimpel, Elliot, & Wood, 2006). For example, social performance is enhanced when relationships are viewed as opportunities (akin to promotion focus) rather than risks (akin to prevention focus; Anthony, Wood, & Holmes, 2007). We sought to extend these findings to understand whether framing social interactions as opportunities rather than risks improves the social performance of individuals who conceal a stigmatized identity.

We propose that stigmatized individuals who conceal a devalued identity may by default enter social interactions with prevention focus (e.g., with the goal of preventing exposure). This default prevention focus may help explain why concealment can impair intimacy-building during social interactions (Newheiser & Barreto, 2014). However, promotion focus may alleviate these negative interpersonal consequences because it allows one to concentrate on the opportunities the interaction provides for attaining positive outcomes (Higgins, 1997; see also Miller & Myers, 1998). Thus, we examined the effects of hiding a devalued identity in different ways, predicting that focusing on promoting a positive impression (i.e., concealment under promotion focus) would result in more positive social interactions, relative to focusing on preventing a negative impression (i.e., concealment under prevention focus).

Indirectly supporting our reasoning, self-regulatory strategies have been shown to affect cognitive depletion among non-stigmatized individuals engaged in intergroup interactions. Specifically, White participants who were instructed to prevent the expression of prejudice while interacting with a Black experimenter subsequently showed more cognitive depletion than White participants who were instructed to promote a positive intercultural exchange (Trawalter & Richeson, 2006). We extended this prior work by investigating self-regulation among stigmatized individuals.

In the present work, we examined an identity that was important to participants' self-image – student participants' study major identity – but that was portrayed as stigmatized in the context of the study (procedure adapted from Barreto, Ellemers, & Banal, 2006). 'Stigmatized' participants were told they would interact with another ('non-stigmatized') student who had expressed that they devalued 'stigmatized' participants' study major, and that their task would be to conceal their (contextually devalued) study major identity from their partner. Furthermore, in the Prevention Focus condition, stigmatized participants were asked to avoid making a negative impression on their partner by concealing their identity; in the Promotion Focus condition, they were asked to make a positive impression by concealing their identity; and in the Control condition, they were simply asked to conceal their identity.

After the interaction (which was videotaped), all participants rated how positive the interaction had been. We hypothesized that non-stigmatized participants whose stigmatized partners had been under promotion focus (vs. prevention focus or control condition) would evaluate the interaction more positively. This pattern would indicate that promotion focus is interpersonally beneficial for individuals who conceal a stigmatized identity. We did not anticipate differences between the prevention focus and control conditions because prevention focus may be the default among stigmatized individuals (i.e., may also have been induced in the control condition). Additionally, we hypothesized that independent raters would perceive stigmatized participants under promotion focus (vs. prevention focus or control) as hiding less information about themselves. Finally, we explored whether participants in dyads in which the stigmatized partner was under promotion focus were perceived as more engaged in the interaction. Such results would indicate that promotion focus leads stigmatized individuals to be perceived by others as navigating social interactions more successfully.

## Method

### Participants

Sixty-five same gender dyads (total  $N = 130$ ; 80 women; mean age = 21.28,  $SD = 3.15$ ) participated in return for €4.50 or course credit. In each dyad, one participant was 'stigmatized' and one was 'non-stigmatized'.

### Procedure

Participants completed the first part of the study individually in separate cubicles. Participants were told the study examined 'factors that affect team performance on analytical tasks'; they would be paired with another student and the teams would get acquainted before completing an analytical task (which was in reality never completed).

Participants received the following information: 'We know from previous research that . . . students from some disciplines generally perform better [on the analytical task] than students from other disciplines'. Participants were shown a rank ordering of eight disciplines, with 'stigmatized' participants' discipline always ranked as the second-to-worst performing and 'non-stigmatized' participants' discipline always ranked as the second-to-best performing. Stigmatized participants were students of psychology ( $n = 54$ ), pedagogy ( $n = 6$ ), or the arts ( $n = 5$ ); non-stigmatized participants were students of law ( $n = 26$ ), medicine ( $n = 32$ ), or business administration ( $n = 7$ ). The discipline ranking was designed to contextually devalue stigmatized participants' identity, while also drawing on common beliefs regarding the status of different disciplines. As an attention check, participants indicated whether students from their own discipline typically do well on analytical tasks (yes/no); two participants responded incorrectly, and data from their dyads were excluded, yielding a final sample of 126 participants in 63 dyads.<sup>1</sup>

The instructions next stated that some participants would be asked to indicate with whom they preferred to be paired. In reality, stigmatized participants were always asked to wait to be chosen as partners, whereas non-stigmatized participants were asked to state their preferences (in terms of partner gender, age, and study major; 1 = *not at all* to

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<sup>1</sup> Retaining data from all participants has a negligible impact on the results and does not change the interpretation.

7 = *very much*). We averaged preference ratings for a partner from a 'stigmatized' discipline into a single score, and ratings for a partner from a 'non-stigmatized' discipline into another score. As intended, non-stigmatized participants preferred a partner from a 'non-stigmatized' discipline ( $M = 5.07$ ,  $SD = 1.20$ ) over a partner from a 'stigmatized' discipline ( $M = 3.85$ ,  $SD = 1.60$ ), paired  $t(61) = 5.80$ ,  $p < .001$ .

Stigmatized participants were then shown information about their partner (always presented as 22 years old, of the same gender as the participant, and from a discipline associated with high performance on the analytical task) and were told that although their partner had expressed a preference for a partner with a 'high-performing' study major (i.e., from a discipline other than stigmatized participants' own), this preference could not be followed because there were not enough students from that discipline currently participating. Accordingly, stigmatized participants anticipated an interaction with a partner who explicitly devalued their identity. Importantly, non-stigmatized partners were never portrayed as expressing a preference for an ingroup member (i.e., the preference was never based on ingroup bias).

Stigmatized participants were randomly assigned to the Prevention Focus, Promotion Focus, and Control conditions. Instructions in the Prevention and Promotion Focus conditions first stated that because students from participants' own discipline do not perform well on the analytical task, their partner might have low expectations about their performance. This statement was included to explain the purpose of concealing the devalued identity (i.e., to reduce these negative expectations).

In the Prevention Focus condition ( $N = 20$  dyads), stigmatized participants read:

To prevent your partner from having low expectations for you and to prevent your interaction from not being optimal, it is important that you avoid making a negative impression on your partner. To achieve this, we suggest that you avoid revealing your study major when you talk with your partner and that you conceal information that may result in a negative impression. In this way you can prevent your partner from thinking negatively about you and can conceal the fact that you are a [stigmatized discipline] student.

Each sentence was focused on precluding the negative outcome (a hallmark of prevention focus) of revealing the identity.

In the Promotion Focus condition ( $N = 23$  dyads), stigmatized participants read:

To increase the likelihood that your partner will develop positive expectations for you and that your interaction will go as well as possible, it is important that you succeed in making a good impression on your partner. To achieve this, we suggest that you focus on things other than your study major when you speak with your partner, and that you give your partner information that will help him/her form a positive impression of you. In this way you can try to ensure that your partner thinks positively about you, and keep in the dark that you are a [stigmatized discipline] student.

Each sentence was focused on attaining the positive outcome (a hallmark of promotion focus) of a positive impression.

In the Control condition ( $N = 20$  dyads), we did not explicitly mention negative expectations in order not to strengthen the prevention focus that may be induced by stigma (Oyserman *et al.*, 2007). In the Control condition, stigmatized participants read:

Given previous research showing that students from your discipline do not perform well on this task, your partner may have certain expectations regarding your performance. To take

those expectations and their possible effects into account, we suggest that you do not reveal your study major but rather conceal it while talking with your partner.

Neither positive nor negative outcomes were emphasized.

Non-stigmatized participants did not receive instructions about regulatory focus or their own identities. All participants were told they would next get acquainted with their partner. Dyads were brought together for an unstructured, videotaped interaction. Participants were instructed to talk about whatever they wished, and tended to discuss topics one would expect from previously unacquainted students (e.g., student life, hobbies). Interaction duration did not vary across conditions,  $F < 1$  ( $M_{\text{duration}} = 382$  s,  $SD = 214$ ). Participants finally returned to separate cubicles to complete dependent measures.

## Measures

### Participants' ratings

Participants completed one item assessing whether they had felt threatened during the interaction (1 = *not at all* to 7 = *very much*). This item was included to confirm that stigmatized participants perceived their identities as devalued. The primary dependent measure was a five-item index of perceived interaction positivity (1 = *completely disagree* to 7 = *completely agree*): 'The interaction was awkward' (reverse-scored); 'I had to put a lot of effort into making the conversation go smoothly' (reverse-scored); 'I could choose whether to have another conversation, I'd rather not' (reverse-scored); 'The conversation went smoothly'; and 'If I had to repeat the conversation, I'd look forward to it' ( $\alpha = .91$  for stigmatized participants;  $\alpha = .86$  for non-stigmatized participants).

### Video ratings

The videotaped interactions were coded by three independent raters, blind to study design and hypotheses. Separate cameras were focused on each participant, and each participant was rated individually (1 = *not at all* to 7 = *very much*). Two items assessed the degree to which participants appeared to be hiding information: 'To what extent did the participant seem to be hiding information during the interaction?' and 'Did the participant behave during the interaction as if s/he wanted to hide something about him/herself?'. Inter-rater reliability was acceptable,  $\alpha = .55$  (within-rater  $r_s = .86-.98$ ). Two items indexed engagement: 'Did the participant seem interested in the conversation?' and 'Did the participant seem engaged in the conversation?'. Inter-rater reliability was good,  $\alpha = .72$  (within-rater  $r_s = .67-.87$ ).

## Results

The study employed a 2 (Participant's Stigma Status: Stigmatized, Non-stigmatized)  $\times$  3 (Stigmatized Participant's Regulatory Focus: Prevention, Promotion, Control/None) mixed-model dyadic design, with the first factor varying within-dyads and the second factor varying between-dyads. Because participants were nested within dyads, we treated dyads as the unit of analysis and used multilevel modelling to analyse the data (Kenny, Kashy, & Cook, 2006). Because we hypothesized specific patterns – expecting favourable outcomes specifically in the Promotion Focus condition – we conducted contrast analyses comparing the Promotion Focus condition to the Prevention Focus and Control

conditions, with orthogonal contrasts seeking to demonstrate no differences between the Prevention Focus and Control conditions. Each model employed the following predictors: Participant's Stigma Status (stigmatized = -1, non-stigmatized = 1); a contrast comparing the Promotion Focus condition to the Prevention Focus and Control conditions (Promotion = 2, Prevention = -1, Control = -1); a contrast comparing the Prevention Focus and Control conditions (Promotion = 0, Prevention = -1, Control = 1); and interactions between Participant's Stigma Status and both contrasts. Table 1 presents regression coefficients from each model.

### Participants' ratings

#### Threat

Analysis of the extent to which participants felt threatened during the interaction revealed a main effect of Participant's Stigma Status,  $b = -0.21$ ,  $SE = 0.10$ ,  $t(60) = -2.11$ ,  $p = .039$ . Stigmatized participants ( $M = 1.98$ ,  $SD = 1.23$ ) felt more threatened than non-stigmatized participants ( $M = 1.56$ ,  $SD = 0.95$ ). All other effects were non-significant,  $p_s \geq .172$ . This result aligns with the notion that contextual identity devaluation is an identity threat.

#### Interaction positivity

Stigmatized and non-stigmatized participants' perceptions of interaction positivity were non-independent, intraclass  $r = .38$ ,  $p = .001$ . The only significant effect for this dependent measure was the predicted interaction between Participant's Stigma Status and the contrast comparing the Promotion Focus condition to the Prevention Focus and Control conditions,  $b = 0.18$ ,  $SE = 0.07$ ,  $t(60) = 2.74$ ,  $p = .008$ . Simple slopes analyses revealed that regulatory focus did not affect stigmatized participants' perceptions of interaction positivity,  $b = -0.12$ ,  $SE = 0.12$ ,  $t(60) = -1.05$ ,  $p = .297$ . By contrast, as predicted, non-stigmatized participants rated the interaction as more positive in the

**Table 1.** Unstandardized regression coefficients from multilevel models predicting participants' perceptions of interaction positivity, independent raters' perceptions of the degree to which participants were hiding information during the interaction, and independent raters' perceptions of the degree to which participants were engaged in the interaction. Significant and marginally significant effects are noted with superscripts

	Perceived interaction positivity	Perceived hiding of information	Perceived engagement
Intercept	4.44***	2.99***	4.35***
Stigma status (stigmatized vs. non-stigmatized)	-0.02	-0.35***	0.03
Promotion (vs. prevention/control)	0.06	-0.10	0.12 <sup>++</sup>
Prevention (vs. control)	-0.04	-0.01	-0.10
Stigma status × promotion (vs. prevention/control)	0.18**	0.10 <sup>+</sup>	-0.00
Stigma status × prevention (vs. control)	-0.15	-0.13	-0.04

Note. <sup>+</sup> $p = .068$ ; <sup>++</sup> $p = .082$ ; \*\* $p < .01$ ; \*\*\* $p < .001$ .

Promotion Focus condition (vs. Prevention Focus and Control),  $b = 0.24$ ,  $SE = 0.12$ ,  $t(60) = 1.98$ ,  $p = .052$  (Figure 1). The contrast comparing the Prevention Focus and Control conditions was non-significant, as was its interaction with Participant's Stigma Status (see Table 1).

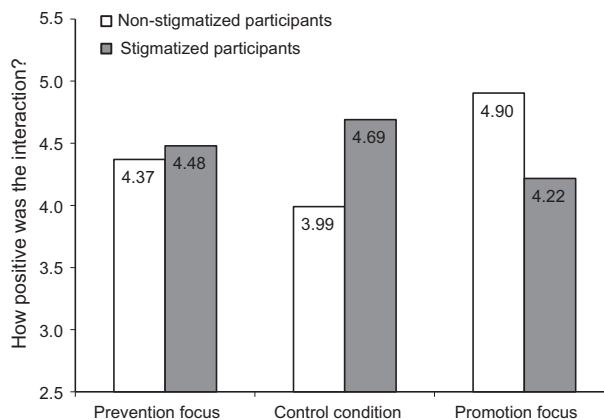
### Independent raters' perceptions

#### Perceived hiding of information

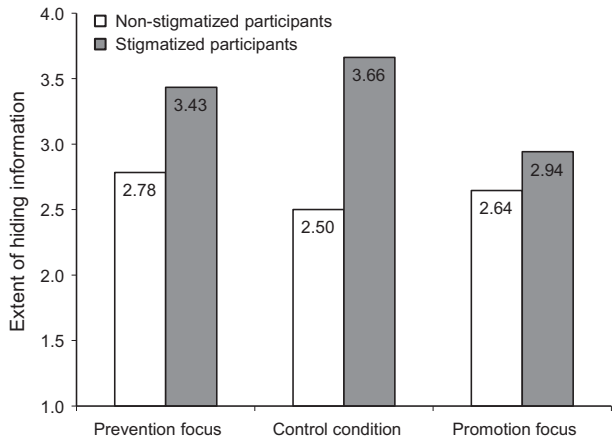
We examined the extent to which independent raters perceived the participants as hiding information. Ratings of stigmatized and non-stigmatized participants were independent, intraclass  $r = .08$ ,  $p = .520$ . The main effect of Participant's Stigma Status indicated that stigmatized participants were rated as hiding more information than were non-stigmatized participants. This effect was qualified by a marginal interaction with the contrast comparing the Promotion Focus condition to the Prevention Focus and Control conditions,  $b = 0.10$ ,  $SE = 0.05$ ,  $t(60) = 1.86$ ,  $p = .068$ . Simple slopes analyses revealed that regulatory focus did not affect the degree to which non-stigmatized participants were perceived as hiding information,  $b = 0.00$ ,  $SE = 0.07$ ,  $t(60) = 0.02$ ,  $p = .988$ . By contrast, stigmatized participants were rated as hiding less information in the Promotion Focus condition (vs. Prevention Focus and Control),  $b = -0.20$ ,  $SE = 0.09$ ,  $t(60) = -2.34$ ,  $p = .023$  (Figure 2). The contrast comparing the Prevention Focus and Control conditions was non-significant, as was its interaction with Participant's Stigma Status (see Table 1).

#### Engagement

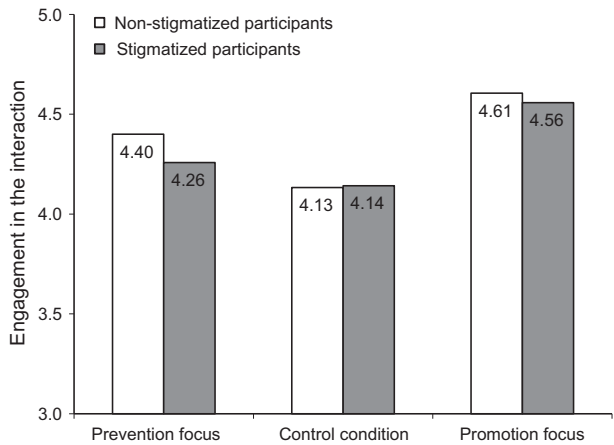
Finally, we examined independent raters' perceptions of how engaged participants were in the interaction. Ratings of stigmatized and non-stigmatized participants were non-independent, intraclass  $r = .59$ ,  $p < .001$ . The contrast comparing the Promotion Focus condition to the Prevention Focus and Control conditions was marginally significant,  $b = 0.12$ ,  $SE = 0.07$ ,  $t(60) = 1.77$ ,  $p = .082$ , and not moderated by Participant's Stigma Status,  $b = -0.00$ ,  $SE = 0.03$ ,  $t(60) = -0.10$ ,  $p = .923$  (Figure 3). Thus, all participants



**Figure 1.** Non-stigmatized and stigmatized participants' ratings of interaction positivity in the Prevention Focus, Control, and Promotion Focus conditions. Possible range: 1–7; higher scores reflect more positivity.



**Figure 2.** Independent raters' perceptions of the degree to which non-stigmatized and stigmatized participants in the Prevention Focus, Control, and Promotion Focus conditions appeared to be hiding information about themselves during the interaction. Possible range: 1–7; higher scores reflect more hiding.



**Figure 3.** Independent raters' perceptions of the degree to which non-stigmatized and stigmatized participants in the Prevention Focus, Control, and Promotion Focus conditions appeared to be engaged the interaction. Possible range: 1–7; higher scores reflect more engagement.

were perceived as marginally more engaged in the interaction in the Promotion Focus condition (vs. Prevention Focus and Control). The contrast comparing the Prevention Focus and Control conditions was non-significant, as was its interaction with Participant's Stigma Status (see Table 1).

**Discussion**

Although hiding a stigmatized identity is a common coping strategy, it can have negative interpersonal and intra-individual consequences (e.g., Barreto *et al.*, 2006; Newheiser &



Barreto, 2014; Sedlovskaya *et al.*, 2013). Accordingly, it is important to understand whether this strategy can be employed in ways that maximize its benefits and minimize its costs. This was the goal of the present research. We examined whether one can reap the interpersonal benefits of concealment by focusing on its positive aspects (i.e., the promotion of a positive impression).

Our results suggest that this is indeed possible. Hiding a stigmatized identity under promotion focus was interpersonally advantageous: Non-stigmatized partners perceived the interaction more favourably when stigmatized participants were under promotion focus. Furthermore, independent raters perceived stigmatized participants as hiding less information when these participants were under promotion focus, suggesting that the interaction had helped maximize the potential for promoting a positive impression. It is interesting that promotion focus did not lead stigmatized participants themselves to perceive the interaction more positively. We suggest that the effort and stress associated with identity concealment may have cancelled out the positive experience induced by promotion focus. In fact, our findings are consistent with prior work documenting that ethnic minority participants primed (vs. not primed) to expect being the target of prejudice were more engaged in intergroup interactions and were liked more by White interaction partners, despite enjoying the interaction less themselves (Shelton, Richeson, & Salvatore, 2005). Thus, while finding ways to manage a devalued identity – whether concealable or immediately visible – may yield interpersonal benefits, identity management is also accompanied with a variety of intra-individual costs to individuals contending with stigmatization.

Moreover, our findings also indicate that the majority of the work to achieve a positive social interaction is done by the stigmatized individual; not only do they need to conceal a devalued identity, but they also need to do so in a specific way to be perceived positively by their interaction partners and third-party observers (see also Miller & Myers, 1998; Shelton *et al.*, 2005). Thus, although stigmatized individuals may ultimately benefit interpersonally from concealing their identities under promotion focus, this solution places the burden on the targets of stigmatization (who are already coping with other burdens). Additional solutions to the problem of stigmatization that focus instead on the non-stigmatized are needed.

We note several promising avenues for future research. First, the fact that we examined participants from pre-existing groups that can be seen to differ in status leaves open the possibility that our findings may to some extent reflect differences between people who choose high-status versus low-status study majors. Relatedly, we focused on a contextually devalued identity; future work is needed to establish that our findings generalize to culturally stigmatized identities (e.g., LGBTQ\* identity; history of mental illness). For instance, culturally stigmatized identities are more intensely devalued than the identity we examined (although prior work has documented that processes associated with concealing stigma in social interactions generalize across contextually and culturally devalued identities; Newheiser & Barreto, 2014).

Second, future research will benefit from investigating mediators of the effects we observed. For example, the concern with negative outcomes that is associated with prevention focus may make the task of concealing a stigmatized identity more cognitively demanding – a demand that may be lifted by directing attention to positive outcomes (i.e., promotion focus). These differences in cognitive demand (e.g., cognitive depletion; Smart & Wegner, 1999; Trawalter & Richeson, 2006) may help explain why promotion focus was more interpersonally beneficial in the present work.

Third, contextual factors that vary across social interactions may influence stigmatized individuals' regulatory focus. In the present study, participants were explicitly asked to adopt a particular self-regulatory strategy; however, subtler characteristics of the context – such as the topic of conversation, or whether interaction partners have the ability to gauge the credibility of identity claims (Barreto, Spears, Ellemers, & Shahinper, 2003) – might also induce different regulatory foci.

Our findings suggest that individuals who contend with stigmatization can protect themselves from devaluation by hiding the devalued identity with a promotion-focused strategy. Focusing on promoting a positive self-presentation – an image of the self that is unconstrained by negative expectations associated with the stigma – allows for more favourable social interactions. The present research therefore offers encouragement for those who contend with stigma, and for those interested in uncovering how to alleviate the burden of stigmatization.

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Received 23 April 2013; revised version received 27 November 2014