

Prejudice and Discrimination

Lecture Nine

Obesity, Disability, Mental Health, & Sexuality

Dr Paul Hutchings

Miss Katie Sullivan

- Most research on prejudice and discrimination focuses on the 'big three'
 - Race
 - Gender
 - Age
- For good reason;
 - Easily categorisable from view
 - Possibly automatic classification
 - Long history of friction
 - Public interest and legislation

- We can use the research from these categories to understand other prejudices
 - Theories often hold for many types of prejudice
 - Personality types e.g., Adorno, Altemeyer
 - Overt and Covert prejudice and discrimination
- Briefly look at prejudice to
 - Obesity
 - Sexuality
 - Mental and physical impairment

Prejudice Towards Obesity

- Stylised Western culture
 - Changes over time
- 'Thin is beautiful'
 - Magazines – Vogue etc.
 - TV – '... next top model' etc.
 - TV programmes about obesity almost exclusively about avoidance
- The media tells us what is acceptable/desirable in our society

- *Fat Man In Air Rage Seat Row Slap Attack*
 - **South Wales Evening Post**



- The most obese-aversive nation in the world is...
 - The United States of America
 - That's the same USA that is predicted to have 50% of its population classified as 'overweight' by 2020 (Crandall & Martinez, 1996)
- Why?
 - Seen to violate the ideal of self-restraint and control (the Protestant work ethic; Owen & Laurel-Seller, 2000)
 - Seen as being a controllable attribute (internal, stable), and so responsibility lies with the individual (Crandall & Biernat, 1990)

Effects Of Obesity

- Evaluation of obese women against average-weight women (Regan, 1996)
 - Less sexually attractive
 - Less skilled
 - 'Colder'
- Parents less likely to provide financial support to overweight children (Crandall, 1995)
 - Particularly if parents are not obese themselves

Why So Aversive To Overweight People?

- Appears to start in childhood (Penny & Haddock, 2007)
 - Children show prejudice from an early age
 - Towards many out-groups; race, age... and overweight people
 - Child participants presented with drawings of children and asked which of them they would like to be friends with
 - Children preferred thin figures over fat figures
 - Even preferred other races over same-race fat figures
- Stronger prejudice in individualist cultures than collectivist cultures (Crandall et al., 2001)
- More negative attitudes in Caucasian women (Hebl & Heatherton, 1998)

- Most prejudices are 'socialised' out of children
 - Disapproval of parents; increased understanding of societal norms
 - Doesn't tend to happen with obesity; parents do not disapprove in ways they do with other prejudices; society does not treat prejudice towards overweight people as a serious issue
- Media portrayals negative to obesity/positive to thinness
 - Negativity towards issues such as bulimia and anorexia is limited

Homophobia/Heterosexism

- Homosexuality only legalised relatively recently
 - Still illegal in many countries
 - Singled out as a particular sin in the Bible ('an abomination')
 - Classified as a mental disorder until 1970s
- Long history of prejudice and discrimination (D'Emilio, 1983)
- Negative evaluation against gay and lesbian people
 - But heterosexual men more prejudiced against gay men
 - Heterosexual women more prejudiced against lesbian women (Kite, 1984)

■ Possible reason?

- Social Identity Theory (Tajfel, 1981)
 - In-group members who do not meet conform to group stereotypes are derogated
 - Masculine gay men negative towards effeminate gay men (Taywaditep, 2001)
- ## ■ Similar to obesity, homosexuality seen by many as 'controllable'
- 48% of Americans surveyed considered it to be a 'lifestyle choice' (Whitley, 1990)
 - LeVay (1991) possible role of the hypothalamus in sexual regulation and sexual orientation

- People high in RWA more likely to be prejudiced against homosexuals (Haddock, Zanna, & Esses, 1993)
 - More likely to endorse derogatory reports of HIV/AIDS spreads (Munro & Ditto, 1997)
 - More likely to support restrictions on HIV-positive individuals (Price & Hsu, 1992)
- Can be very hard to change attitudes towards homosexuality
 - High RWA/religiosity tend to go together (dogmatic view of the world)
 - Contact seems to be the best way to reduce prejudice
 - But high-prejudice individuals tend to have the least contact

Disabilities – Physical and Mental

- ‘Ableism’ / ‘Handicapism’ (Bogdan & Biklin, 1993)
- Mental disabilities
 - Often viewed more negatively than physical disabilities
 - Job applicant ratings – physical disability rated lower than able-bodied, regardless of requirements of job
 - But mental disabilities rated even lower (Gouvier et al., 2003)
- Stereotype associations with physical disability
 - ‘Ugly’; ‘Lifeless’; ‘Crippled’; ‘Someone to feel sorry for’ (Asch & Fine, 1986)

- Physical disabilities
 - Because they are observable, often give rise to fear, derision, disgust, pity and ridicule (Anderson, 1988; Bogdan et al., 1990)
- Student with a hearing aid rated as more introverted, depressed, and insecure than a non-disabled student (Silverman & Klees, 1989)
- Children rank order disabled children lower than White and Black children in study (Richardson & Green, 1971)
 - Similar to the obesity findings

- Derogation of physical disability no longer prevalent
 - But people still uneasy around physically disabled (Heinemann, 1990)
- Not the case for mental disability
 - Overt derogation still acceptable (for some disabilities)

- Why?
- Hostile/Biased media to mental disability
 - ‘mad men’ who are a threat to the welfare of the community (Seligman et al., 2001)
 - News media highlights of crimes committed by mentally ill
- Fear of mental illness
 - Similar to ‘ageism’
 - It could be us (particularly for degenerative disorders)



- *'Knife maniac freed to kill. Mental patient ran amok in the park.'*
Front page headline, Daily Mail
- *'Violent, mad. So Docs set him free. New 'Community Care' scandal.'*
The Sun
- *'Nutter Diagnosed'*
Bangkok Post

- *Newspapers label us all mad and dangerous, the only person I'm a danger to when ill is myself. But the stigma of the newspapers has me down as an axe murderer because of my illness. I've never even hurt a fly let alone another person.*

“Maria”

- Disbelief in mental illness

- Some symptoms viewed as wilful, offensive behaviours (Angermeyer & Matschinger, 1996a)
- Some view mental illness as a sign of weakness/depravity (Angermeyer & Matschinger, 1996b)
 - Should be hidden from view
- Szasz (1962) Institutional Psychiatry
 - Involuntary incarceration with the physician acting as an agent of social control rather than the patients' advocate

- Stigma of mental illness can lead to many issues
 - Not seeking treatment in order to avoid stigmatization
 - Stigma of mental health can lead to facilities not being made available (NIMBY approach to locating facilities in neighbourhoods)
 - Stigma can add to stress and make illness worse
- Not addressing the issues can lead to mentally ill becoming disenfranchised
 - So less likely to find treatment
 - More likely to abuse substances
 - More likely to conform to the societal stereotype

Applications To All

- Stigma (Goffman, 1963)
 - Stigmatized individuals can take on the prescribed stereotypes
- Media presentation
 - Even when trying to be positive
- Socialisation
 - Acceptance of prejudices towards individuals and groups