# THE ROLE OF SEXISM IN WHITE HETEROSEXUAL WOMEN'S VOTING BEHAVIORS IN THE 2016 PRESIDENTIAL ELECTION: A FEMINIST PERSPECTIVE

by

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(Under the Direction of GEORGIA CALHOUN)

#### ABSTRACT

The purpose of the current study is to assess the role of oppression in white heterosexual women's voting behaviors in the 2016 U.S. general presidential election. Sexist beliefs were measured utilizing the Internalized Misogyny Scale (Piggott, 2004) and the Ambivalent Sexism Inventory (Glick and Fiske, 1996). Results revealed rates of sexism were related to voting behaviors. Individual with higher levels of sexism were more likely to have voted for the male candidate. A logistic regression and predictive discriminant analysis were then conducted. Results found the we could predict who a participant voted for based on their scores and answers on the hostile sexism subscale of the ambivalent sexism inventory. Results, implications, and limitations of the study are discussed.

 INDEX WORDS:
 Sexism, Voting Behaviors, 2016 Presidential Election, Ambivalent Sexism

 Inventory
 Inventory

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# DEDICATION

Dedicated to my family, chosen and biological, thank you.

# ACKNOWLEDGEMENTS

I want to acknowledge all the help and support I have received from my mentors, teachers, and those before me.

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#### CHAPTER 1

#### Introduction

#### **Statement of the Problem**

Despite rumblings of a post-sexist era, misogyny unfortunately stills play a pivotal role in women's lives and mental distress. Research, personal anecdotes, and cultural norms all demonstrate that sexism is thriving. It is observed from the wage gap to rates of sexual assault to the negative effect media has on female body image. Research suggests that 97% of women experience at least one sexist event a year, over 80% of women reported being sexually harassed and about one in five women in the U.S. will be sexually assaulted (CDC, 2018; Chatterjee, 2018; Klonoff & Landrine, 1995). These experiences of culturally embedded and socially perpetuated oppression inevitably lead to and exacerbate increased mental distress among women.

Given the presence of sexism in nearly every aspect of women's lives, the question of how sexism changes and continues to impact women is important. Research suggests that women experience higher levels of depression, anxiety, and other mental health concerns that can be directly related to these experiences of discrimination (Landry & Mercurio, 2009; Schmitt, Branscombe, Postmes, & Garcia, 2014). Further, women exposed to sexist materials or events tend to have a lower sense of self-worth, lower self-esteem, negative body images, and additional concerns (Grabe, Ward, & Hyde, 2008; Sherlock & Wagstaff, 2018). The impact goes beyond mental health and directly effects the physical wellness of women such as increased yeast infections, cardiovascular concerns, and pelvic inflammatory disease (Pascoe & Smart Richman, 2009). Such research demonstrates the significance of oppression in women's lives and wellbeing.

In order to understand the role of sexism in women's lives, we need to understand how it manifests in women themselves. The more familiar overt form of sexism experienced by women, there is a less researched internal form that can be equally insidious in nature. The internalization of oppression has mostly been neglected in the research on discrimination among women, particularly white heterosexual women. However, internalization has been demonstrated among women holding multiple marginalized identities. For example, among lesbian and bisexual females, internalized sexism has been associated with increased mental distress and a lower selfperception (Szymanski & Henrichs-Beck, 2014). Among women of color, internalized sexism was related to higher rates of depression, lower self-esteem, and increased stress (Buchanan & Fitzgerald, 2008; Szymanski & Stewart, 2010). Additional evidence presents itself in more indirect ways. For example, it could be claimed that body image issues are an internalized form of oppression. Thus, studies demonstrating the high rates of this experience among women are evidence that standards based on oppressive ideals/representations of women in the media can be turned inwards (Szymanski & Moffitt, 2011). Furthermore, in addition to sexism being turned inwards on the individual, evidence suggests, both anecdotally and in research, that women also engage in the perpetuation and projection of stereotypes and discrimination against other members of their gender in general. For example, one study highlights that females view female rape survivors as partially to blame for their own assault, an idea born of patriarchal notions (Hockett, Smith, Klausing, & Saucier, 2016). Another study found that women, in addition to men, perceive female employees as less competent than their male peers, perpetuating the belief of inferiority (Heilman, Block, & Lucas, 1992). This process of in-group discrimination occurs within various marginalized populations in addition to women (Tsang et al., 2016).

Even less research addresses how such internalized sexism manifests in voting behaviors among women. Such questions have become acutely important given the most recent presidential election of 2016. Most experts and the general public predicted that Hilary Clinton would be elected despite her gender, however a less qualified male candidate ended up winning (Katz, 2016). This was confounding to most given the male candidates limited political background, numerous discriminatory statements, and unconventional approach. In the aftermath of the election, experts attempted to understand how this unprecedented chain of events occurred. Collectively the detrimental role of sexist ideologies and culture on the election and voting behaviors of citizens became clear. Specifically, one widely circulated statistic was 53% of white women voted for Trump (CNN, 2016). This revelation was shocking to many given the blatantly sexist remarks Trump has made throughout his campaign and public life. It begs the question: why would (white) women vote for someone who is seemingly degrading of them and their sex? This was particularly surprising given that most past research suggests that the opposite would have in fact occurred. Previous research has found that women tend to be swing voters and would perhaps even change their voting party to support a qualified female candidate (Simon & Hoyt, 2008; Brians, 2005).

The aforementioned issues of discrimination and the potential role it plays in voting behaviors highlights the importance of further investigating the mechanisms of internalized oppression. The purpose of the current study is to assess the role of sexism among females regarding their voting in the most recent election. Our findings could help shed light on the concrete political manifestations of social oppression among women. Such information may help increase our understanding of how negative messages about our in-groups can perpetuate a cycle that we ourselves take part in and suffer from, on both an individual level and a more global macro-level.

#### **Purpose of the Present Study**

Given the current sociopolitical climate it is imperative to investigate the role of internalized prejudice among women. This study aims to understand how internalized oppression can manifest in women and potentially impact their voting behaviors. This project considers if such oppression could be associated with 52% of white women voting for a candidate who is openly misogynistic (Cnn.com, 2018). The goal is to increase our knowledge of how women's perceptions of their own gender may influence how they behave politically and thus contribute to or challenge their systemic oppression. Specifically, it is essential to determine how women's sexism manifests in the political realm. Information gathered from the study could shed light on the very real and relevant consequences of sexism on U.S. politics. Oppression on the internalized level can manifest on a larger social scale.

#### **Context within Counseling and Feminist Psychology**

Over the past several decades the field of counseling psychology has been at the forefront of a social justice movement. Within this movement, the study and consideration of oppression and the context of people's lives have become essential components of counseling psychology. Historically, counseling psychology (CP) was founded in vocational counseling, the maintenance of well-being, and approaches other than psychoanalysis (Heppner, Casas, Carter, & Stone, 2000). While these are still important components of CP, in 1979 the president of the Division of Counseling Psychology, Allen Ivey, updated the core values of counseling. He established an emphasis on preventive factors, strength-based approaches to research and practice, and an increasing awareness of diversity and the role of social context (Delgado-Romero, Lau, & Shullman, 2012). Such considerations may have been influenced by the longstanding and important work being done in minority psychology spheres such as Black Psychology and Feminist Psychology. Since the redefining of counseling psychology's mission, the field has become increasingly committed to social justice and multicultural concerns and has embraced these values in all aspects of the science and practice. Counseling psychologists have demonstrated their commitment to understanding and impacting oppression and social justice via their actions in response to social and political discrimination over the past several years (Delgado-Romero, Lau, & Shullman, 2012). It became increasingly clear in our research, training, and clinical interventions in the late 1980s and the 1990s (Heppner, Casas, Carter, & Stone, 2000). Thus, the current study is uniquely representative of counseling psychology's core values as it aims to continue to explore the role of oppression in the lives of women and the larger impact it can have on society in general. We are aiming to take a rare glance at what occurs when oppression and socially unjust values become part of the oppressed's internal world and belief system.

Investigating the role of social oppression in women's voting and perception of their sex is inherently in the realm of counseling psychology's core values as a social justice issue. It helps psychologists understand how oppression can impact the internal lives of a marginalized group. Additionally, it sheds light on how inner experiences of oppression can potentially manifest and collectively impact greater social issues and behaviors. Further, this study aims to highlight the role of social context as it relates to internal experiences. Feminist psychology suggests that all mental distress is the result of oppressive contexts. By placing the actions and beliefs of a group of marginalized individuals within the context in which they live, as opposed to individual circumstance and personality etc., the study is at its core based on counseling psychology and feminist theory. Investigating the role of social oppression on mental distress and the subsequent behaviors falls in line with stance of not placing sole responsibility or blame on the individual but rather focuses on how their environment and oppression creates a toxic inner and outer world from which beliefs, behaviors, and distress stem.

#### **Research Statement**

The current study aims to investigate the presence of sexist attitudes and beliefs among college-age females in the Southeast. The study will examine to what degree sexist beliefs are endorsed and how these beliefs may relate to their self-reported voting behaviors. Specifically, we will aim to explore the relationship of shame and misogyny among women. And determine if sexism is related to which candidate participants reported voting for in the 2016 general presidential election.

## **Definition of Terms**

<u>Ambivalent Sexism</u>- sexism consisting of two forms of sexism, hostile and benevolent (Glick and Fiske, 1996).

<u>Benevolent Sexism</u>- "a set of interrelated attitudes towards women that are sexist in terms of viewing women stereotypically and in restricted roles but that are subjectively positive feeling tone and also tend to elicit behaviors typically categorized as pro-social or intimacy seeking (Glick and Fiske, 1996)."

<u>Discrimination-</u>"is the unfair or prejudicial treatment of people and groups based on characteristics such as race, gender, age or sexual orientation (Brondolo, Mays, Jackson, & Jones, n.d.).

<u>Feminism</u>- "the theory of the political, economic, and social equality of the sexes (Merriam-Webster, 2018)."

<u>Hostile Sexism</u>- Overt hostility, prejudice, and discrimination towards women on the basis of sex (Glick and Fiske, 1996).

<u>Microaggression</u>- "...the everyday verbal, nonverbal, and environmental slights, snubs, or insults, whether intentional or unintentional, which communicate hostile, derogatory, or negative messages to target persons based solely upon their marginalized group membership (Sue, 2010)." <u>Oppression</u>–"unjust or cruel exercise of authority or power (Merriam-Webster, 2018)" <u>Sexist Events</u>-"gender-specific, negative life events or stressors that are analogous to generic life events" covering a range of experiences from sexual harassment to microaggressions (Klonoff & Landrine, 1995).

<u>Prejudice</u>-is the predetermined and irrational opinions or beliefs one person or group can hold about another (Merriam-Webster, 2018).

#### **Research Questions**

This study will examine the relationship and impact of sexism on females voting choices across the primary presidential candidates of 2016. Pearson correlations, independent samples *t*-tests, and logistic regression will be utilized to determine the associations and predictive abilities of sexism on voting. The following research questions are based on the literature regarding women's voting behaviors and the negative impact of sexism on women.

#### Research Question 1

Is there a relationship between internalized discrimination, internalized shame, and ambivalent sexism? *Null Hypothesis I*: There is no relationship between internalized misogyny and shame, and ambivalent sexism among female participants.

### Research Question 2:

Are the experiences of internalization and ambivalent sexism different between participants who reportedly voted for Hilary Clinton and those who stated they endorsed Donald Trump? *Null Hypothesis II:* Internalized misogyny, internalized shame, and ambivalent sexism are not significantly different across women who voted for Clinton and those who voted for Trump.

## Research Question 3

Can internalized oppression among women be utilized to predict participants voting behaviors in the 2016 general election? *Null Hypothesis III*: Levels of internalized oppression do not significantly predict who women voted for among the 2016 presidential candidates.

#### CHAPTER 2

#### **Review of Relevant Literature**

#### **Pervasiveness of Discrimination**

Discrimination is an everyday occurrence in the lives of many not belonging to dominant groups. The consequences of experiencing oppression are severe and negatively impact mental and physical well-being. Although many people believe that discrimination is no longer a concern in the modern developing country, such as the U.S., research, news reports and anecdotal evidence confirm otherwise. In a recent survey conducted by the American Psychological Association involving over three thousand adult participants, about 69% of people reported experiencing discrimination. Sixty-one percent of these individuals reported experiencing discrimination daily and almost half are subject to hostile and overt forms of oppression such as being threatened or dealing with harassment from police and/or neighbors etc. (APA, 2016). More specifically, "42% in the United States say they have faced discrimination on the job because of their gender (Parker & Funk, 2017)." Ninety percent of Black adolescents have reported experiencing race based discrimination (Lanier, Sommers, Fletcher, Sutton, Roberts, 2017). And within a singular year, "87% of African American youth and 90% of Caribbean Black youth indicated that they had experienced at least one discriminatory incident (Seaton, Caldwell, Sellers, & Jackson, 2008)." Among sexual minorities, about 50% of gay men reported having been discriminated against within a year, and 54% of lesbian women reported experiencing discrimination (Bostwick, Boyd, Hughes, & West, 2015). Such numbers provide a glimpse into the common occurrence of discrimination experienced by minorities.

Although many with privileged identities might be unaware of the oppression experienced by others, it cannot be dismissed. The experiences and challenges of oppression have recently begun to gain more exposure in the era of social media in which people are sharing their stories and content to larger audiences with easy access. In the midst of this swelling awareness among the masses and the interminable dissemination of information, psychology has taken part and is increasingly examining the detrimental effects of such prejudice and discrimination on people's well-being (Heppner, Casas, Carter, & Stone, 2000).

#### **Discrimination: Mental and Physical Health**

Exposure to and/or experiences of discrimination are known to have negative effects on mental health (Pascoe & Smart Richman, 2009; Szymanski & Stewart, 2010, & Klonoff & Landrine, 1995). Indeed, feminist theory posits almost all mental distress is a product of oppressive contexts (Brown, 2009). While mental distress concerns are often multi-factorial in nature, the role of discrimination is clear. Research has repeatedly demonstrated the harmful consequences of oppression on well-being, including a variety of mental health symptoms and disorders such depression, anxiety, low self-worth and more (Pascoe & Smart Richman, 2009; Szymanski & Stewart, 2010).

The damaging results of oppression have been witnessed across diverse peoples, cultures, and identities. A meta-analytic review of 134 studies conducted in 2009 (Pascoe & Smart Richman) revealed discrimination significantly contributed to increased mental distress across varying mental health concerns, ethnic identities, and genders. An extension of this metaanalysis captured similar results examining a greater number of studies (Schmitt, Branscombe, Postmes, & Garcia, 2014). They found a positive relationship between perceived discrimination and depression, anxiety, psychological distress, and negative mood across participants from multiple studies (Schmitt et al., 2014). Further, the negative relationship between perceived discrimination and psychological well-being was significantly greater for participants belonging to more marginalized groups than those from more advantaged or privileged groups (Schmitt et al., 2014).

The associations highlighted in meta-analyses regarding general discrimination are further demonstrated in studies regarding specific marginalized identities. For example, meta data regarding individuals who identify as Asian found that racial discrimination was related to psychological distress, depression, and anxiety (Lee & Ahn, 2011). Among college-aged Korean Americans, discrimination is associated with decreased self-esteem, depressive symptoms, and less social connection (Lee, 2005). Meta-analyses investigating the experiences of individuals who are Latina/o and Black also captured that relationship between discrimination and mental health concerns (Anderson, 2013; Britt-Spells, Slebodnik, Sands, & Rollock, 2018; Lee & Ahn, 2011; Pieterse, Todd, Neville, Carter, 2012). Discrimination was related too depressive symptoms and general psychological distress (Britt-Spells, Slebodnik, Sands, & Rollock, 2018; Lee & Ahn, 2011; Pieterse, Todd, Neville, Carter, 2012). Additionally, research highlights exposure to discrimination can contribute to more intense and frequent emotional and physical stress responses (Anderson, 2013; Britt-Spells, Slebodnik, Sands, & Rollock, 2018; Pieterse, Todd, Neville, Carter, 2012). Regarding individuals who are sexual minorities, meta and singular research reveals similar patterns, including a positive relationship between discrimination and suicidal ideation (Almeida, J., Johnson, R., Corliss, H., Molnar, B., & Azrael, D., 2009; Meyer, 2003). Overall, this snap shot of studies demonstrates a multitude of research exists conveying the effects of oppression on multiple and intersecting identities.

The impact of discrimination goes beyond emotional stress. Recent research highlights that managing daily and chronic forms of oppression has significant physical health implications and symptoms as well. Sexual and ethnic minority adults are reported to have significantly higher stress levels and stress responses than white and non-LGBT individuals (APA, 2016; Anderson, 2013; Clark, Anderson, Clark, & Williams, 1999). Such levels of stress have been related to a variety of health problems such as heart issues. For example, stress from discrimination was found to have a significant negative effect on blood pressure, heart rate variability, and cardiovascular disease (Wagner, Lampert, Tennen, & Feinn, 2015). Further, discrimination has been found to contribute to other health concerns such as pelvic inflammatory disease, yeast infections, diabetes, headaches, upper respiratory concerns and more (Pascoe & Richman, 2009). These health concerns are further perpetuated by a lack of access to health care, food, support, and other resources (APA, 2016; Riley, 2012).

### Sexism: Discrimination of Women

Sexism exist across all cultures and identities and can occur on an institutional, interpersonal, and/or internal level (Bearman & Amrhein, 2014). One way to understand sexism is via the theory of ambivalent sexism which breaks down this prejudice into two forms: hostile and benevolent. Hostile sexism is the more traditional form and is understood as typically blatant, obvious, and hateful (Glick and Fiske, 1996). It is what many people usually think of when considering sexism. Although many may believe this sexism is no longer of concern in developed countries, like the United States, they are mistaken. Women are still too often the victims and survivors of gender-based violence, such as domestic and sexual abuse, two primary examples of crimes that are a direct result of cultural misogyny and hostile sexism. Nearly one in three women will be a victim of sexual violence and about a fifth of women will be sexually assaulted in their lifetime, a statistic based on significant underreporting (CDC.gov, 2012; CDC Features, 2018; National Research Council, 2014). Further, sexual assault can lead to a variety of physical and mental concerns. About 70% of women who are sexually assaulted meet criteria for PTSD (Bownes, O'Gorman, & Sayer, 1991). And, due to the social stigma against female sexuality and rape culture within the U.S., women are often blamed for their own attacks (Ullman, Townsend, Filipas, & Starzynski, 2007). Thus, the context and aftermath of a women's assault often results in self-blaming and self-criticism that leads to higher rates of shame and has been shown to prolong and increase PTSD symptomatology (Donde, 2017; Ullman, Townsend, Filipas, & Starzynski, 2007). Another major issue facing women that is arguably a result of hostile sexism is death by intimate partner violence (IPV). Over half of all female homicides are the result of intimate partner violence (CDC, 2017). Sexual assault and IPV are just two common examples of hostile sexism. Less physically violating, but still blatant harmful forms of sexism, also remain of great concern and are numerous in nature.

In addition, to hostile/overt sexism, another less obvious manifestation also exists. Benevolent sexism is more nuanced and may appear to some individuals as socially positive or even considerate, however it is still based on degrading ideas about women (Glick & Fiske, 1996). For example, the recent culturally discussed phenomena of 'mansplaining' in which a man explains a concept or idea to a woman that does not really need explaining/that the woman can understand on her own (Chira, 2017). Such efforts may be subjectively perceived as kind or helpful, but ultimately, they are likely based in the assumption that women are intellectually inferior or incapable of understanding concepts on their own. Overlapping, but different enough to be outside of the theory of ambivalent sexism is subtle sexism (Swim, Mallet, & Stangor, 2004). Subtle sexism is referred to differently by different researchers and theorists. Similar constructs are "...modern sexism (Benokraitis, & Feagin, 1995; Lewis, 2018), everyday sexism (Lewis, 2018; Swim, Hyers, Cohen, & Ferguson, 2001), and gender microaggressions (Capodilupo, 2010; Sue, 2010)" (Bearman & Amrhein, 2014). These constructs refer to the insidious forms of gender bias that are so deeply embedded in our society and ways of being we become ignorant to them (Capodilupo, 2010). However, these daily subtle forms of oppression still have a significant impact on mental health. Such discrimination can lead to increased depression and rumination (Kaufman, Baams, and Dubas, 2017), decreased self-esteem (Oswald, Baalbaki, & Kirkman, 2018), sleep disturbance, (Ong, Cerrada, Lee, & Wiliams, 2017), and even increased suicidal ideation (Hollingsworth et al, 2017). For example, women who are simply exposed to sexually objectifying images in the media have then demonstrated increased levels of shame, eating disorders, and a lower sense of self-worth (Moradi & Huang, 2008). Further, a majority of women experience sexual objectification on a daily or weekly basis (Swim, Hyers, Cohen, & Ferguson, 2001). Such objectification can lead to similar mental distress and body monitoring (Szymanski, Moffitt, & Carr, 2011). Although subtle oppression has been normalized, the incessant exposure to degrading ideas about women has significant negative consequences (Bearman & Amrhein, 2014).

A related but distinct concept articulated by Sue (2010) is gender microaggressions. Microaggressions are "the everyday verbal, nonverbal, and environmental slights, snubs, or insults, whether intentional or unintentional, which communicate hostile, derogatory, or negative messages to target persons based solely upon their marginalized group membership (Sue, 2010)." These messages can be targeted towards any oppressed group, including women and thus are a recurrence of sexism on a daily basis (Capodilupo, 2010). These microaggressions have been demonstrated to negatively impact a woman's sense of self and well-being (Oswald, 2018). Such as, lower body image and less healthy behaviors (Kaskan & Ho, 2017). Another illustration of the detriments of gender based microaggressions is sexual harassment, a regularly occurring experience for women at work and in their personal lives (Senthilingam, 2017). This common form of microaggression and sometime overt aggression leads to increased stress, lower sense of self-esteem, and increased feelings of social isolation (Buchanan & Fitzgerald, 2009; Chan, Lam, Chow, Cheung, 2008).

In addition to the aforementioned oppression occurring on an interpersonal level, there is a long history and ongoing issue of sexism occurring at the institutional level. For example, compared to their male counterparts, women are still underrepresented in leadership roles in major corporations and the U.S. government (DeSilver, 2018; Kurtzleben, 2016); about only one in five politicians in congress are women (Kurtzleben, 2016). Further, one of the primary political concerns in the country currently is the increasing limited access to affordable reproductive healthcare for women (Goldstein, Eilperin, & Wan, 2017). Another example is the wage gap; women are still regularly payed significantly less than their male colleagues (Hayes & Hartmann, 2018). These brief examples highlight the systemic nature of oppression in our culture that degrade and undermine women regularly.

Variations of sexism are often experienced simultaneously and overlap, making clear distinctions challenging in the real lives of women. However, each manifestation of sexism is harmful singularly and collectively. Further, the effects of sexism and other oppressions may intersect and accumulate more for women who hold additional marginalized identities. Research needs to continue explore the complex nature of oppression among all women and the ways it affects them. Ultimately, increased awareness and consideration could lead to change.

#### **Internalization of Oppression**

Often when we think of discrimination we consider the external forms that are enacted against the target group. However, prejudices and discrimination, such as racism, homophobia, etc. may also become internalized (David & Derthick, 2014). The process of internalization occurs when the messages about a certain group/culture/etc. is consciously or subconsciously integrated into the psyche and mental structure of a person belonging to the oppressed group (David & Derthick, 2014; Piggott, 2004). This process is insidious in nature because the person being oppressed by the majority may perpetuate their oppression internally to the effect that they begin to police themselves and others belonging to their identifying group (Szymanski, Gupta, Carr, & Stewart, 2009; Piggott, 2004). Such a process has been found among various identities.

**Fanon's model of colonization.** One of the most detrimental effects of living in a discriminatory and oppressive context is the internalization of one's oppression. Discrimination can happen on multiple levels from macro to micro. Living in a context that is filled with negative messages and ideas occurring in reciprocal connection with actions, events, policies etc. can lead to the eventual internalization of such beliefs about oneself.

In Fanon's (1965) model of colonization (leading to its inevitable internalization) he breaks down the mechanics of how colonization occurs and becomes internalized by marginalized peoples. According to Fanon (1965) colonization occurs in four stages that are summarily explained by David & Derthick (2014). The first stage occurs when foreign colonizers arrive to a region with the purpose of dominating it. The colonizer will aim to take advantage of the land's resources and to take advantage of its people, typically in the form of cheap labor or slavery. Once colonizers have arrived they begin to undermine the indigenous culture; this is the second phase. Colonizers assert their worldviews and ways of being in direct comparison to and as superior to the indigenous culture and people. The degradation, othering, and establishment of the indigenous culture as inferior creates the foundation for an oppressive hierarchal society. This begins the third phase, which is essentially the propagation of a prejudiced white man's burden ideology. During this phase colonizers disseminate prejudice notions regarding the constructed inferiority of the indigenous culture. The colonizers rationalize their oppressive dominance as necessary and beneficial for the indigenous people due to their 'inferiority.' Once these discriminatory ideas are established, the fourth phase begins; systematic oppression. Institutions and systems are built upon oppressive narratives and the colonizers worldview. These systems serve to maintain and further validate oppressive ideologies by enforcing prejudiced policies and procedures (Fanon, 1965). Marginalized people are prevented from accessing resources and stripped of power in a systematic fashion, negatively impacting them socially, economically, politically, and in their community (Fanon, 1965). This discrimination serves to increase the power of the dominant colonizer group and continually disempower the oppressed (Fanon, 1965). As people attempt to survive in the new culture they may be rewarded by the colonizing culture and institutions for assimilating or may be punished for not conforming (Fanon, 1965). This model highlights how a social hierarchy is created and how societies and their institutions are founded on prejudice to maintain socially constructed beliefs and power dynamics.

Once the discriminatory beliefs are formulated and embedded both ideologically and systematically into a culture the negative impact on the oppressed is extreme (David & Derthick, 2014). When these beliefs become the foundation of a society, overtime the oppressed may begin to believe the messages received about themselves and their identities (David & Derthick, 2014; Fanon, 1965). Degrading messages will be delivered by numerous sources on a constant basis and thus impossible to avoid (David & Derthick, 2014). The beliefs of inferiority will be seemingly confirmed by the systematically ensured inferior successes and progress of the oppressed (David & Derthick, 2014). The disempowerment will be due to the institutional

discrimination; however, people will be taught to believe it is due to the invented inferiority of the minority by the dominant culture (David & Derthick, 2014). When surrounded by these negative messages and what seems like evidence of one's own inferiority, the messages are interpreted as valid and become internalized, even on a subconscious level (David & Derthick, 2014; Meyer, 2003). The internalization can occur on individual, group, and inter/intra-group levels (Bearman & Amrhein, 2014; Duran & Duran, 1995). When living in oppression and when discrimination becomes internalized, individuals face a frustrating dilemma. Their frustration can become directed at themselves and at individuals within their identity group (David & Derthick, 2014; Fanon, 1965). Individuals with similar identities may remind them of their own oppression (David & Derthick, 2014). Additionally, in internalizing their own oppression they may buy into the false prejudice idea that their identity group is somehow responsible for their oppression (David & Derthick, 2014). Thus, there may be an attempt to distance oneself from one's identity group to be closer to the dominant group (David & Derthick, 2014). A similar process can occur between different minority groups as well (David & Derthick, 2014). One oppressed group may express anger or try to gain power by oppressing another marginalized group (David & Derthick, 2014). Summarily, Fanon's theory demonstrates the beginning of colonization and the vicious cycles and structures that lead to its internalization and perpetuation (David & Derthick, 2014). The effects of this process and the incessant continuation are detrimental to all marginalized people (David & Derthick, 2014).

Research has highlighted that internalization of oppression is related to psychological distress, lower self-esteem, anxiety, and more (David, 2008; Szymanski & Gupta, 2009). The experience of internalized oppression has been found in many marginalized groups including lgbtq individuals, women, ethnic minorities, and more. Perhaps one of the most well-known

demonstrations of this experience is the Clark and Clark (1947) study in which African American children were asked to make inferences about two dolls (one white, one black) and then to choose a doll. A significant number of children in the study referred to the white doll as good and preferential, choosing it over the black doll, the one that looked like them (Clark & Clark, 1947). The results of this experiment were used to demonstrate the negative impact of the separate but equal policy on ethnic minority children and highlighted how children could begin to view their in-group in the same prejudicial manner that the oppressive majority does (Clark & Clark, 1947).

Since this landmark study, the detrimental effects of internalization have been increasingly validated in research. Among ethnic minorities, race based discrimination has been associated with increased depressive symptoms, increase psychological distress, and decreased self-esteem and self-worth (Jones, Peddie, Gilrane, King, & Gray, 2013; Mouzon & McClean, 2017). It has also been related to increased health concerns such as obesity and excessive cortisol secretion (Mouzon & McClean, 2017). Similar findings have been found among additional marginalized groups.

**Internalization among women.** The constant exposure to sexist messages, beliefs, and degradation etc. leads to the internalization of these messages (Bearman & Amrhein 2014; David & Derthick, 2014). Such a process is outlined by Fanon's (1965) model of colonization. When women begin to inevitably internalize sexist culture they see themselves as inferior and/or problematic (Bearman & Amrhein 2014). Internalization can begin at an early age and birth a vicious internal cycle that is continuously reinforced by an individual's context throughout their life. It is important to note that internalized oppression among women can be conceptualized in a multitude of ways (Szymanski & Henrichs-Beck, 2014). It can be measured directly as

internalized sexism or internalized misogyny, or can be measured indirectly as selfobjectification, low self-worth, body image concerns, self-blame post assault, and more (Bearman & Amrhein, 2014; Calogero, Davis, Thompson, 2005; Szymanski & Henrichs-Beck, 2014; Szymanski & Henning, 2006). Regardless, the internalization of sexist beliefs can lead to women maintaining a subconscious level of self-hatred and intragroup hatred (Bearman & Amrhein, 2014). This experience has not been given the attention it deserves, although there are several studies that demonstrate its presence and impact. The limited research that has been done suggests that women with higher rates of internalized oppression suffer from increased mental distress that can lead to or exacerbate psychological symptoms (Bearman & Amrhein, 2014; Szymanski & Henrick-Beck, 2014). For example, the well documented experience of women blaming themselves, as well as society blaming, them for being sexually assaulted (Donde, 2017; Peter-Hagene & Ullman, 2018). Another example, women who self-objectify have higher rates of depression and disordered eating (Miner-Rubino, Twenge, & Fredrickson, 2002; Szymanski & Henning, 2007, Moradi et al., 2005). Further, being exposed to objectifying material can increase eating disorder symptoms and negatively impact body image (Calogero, Davis, Thompson, 2005). In addition, women who subconsciously accept sexist gender roles and bias are shown to have increased mental distress and lower self-worth (Fischer & Holz, 2007). Another study has highlighted that such beliefs can contribute to feelings of social isolation (Piggott, 2004). Among sexual minority women similar associations have been found (Piggott, 2004; Szymanski & Henrich-Beck, 2014). Lesbian and bisexual women who score high on internalized misogyny struggle with decreased self-esteem, symptoms of depression, and increased body shame (Piggott, 2004). A similar study conducted by Carr, Szymanski, Taha, West, & Kaslow (2014) found that among African American women the process of internalization as a coping strategy in

response to self-objectification and racism impacted depressive symptoms. Furthermore, women who are exposed to sexist events which are harmful in themselves will experience even greater distress then other women when they hold higher rates of internalized misogyny (Szymanski, Gupta, Carr, & Stewart, 2009). Overall, the research highlights the harm and pervasiveness of internalized sexism on the women's psyche, although not enough research has been done investigate this experience.

## **Voting Behaviors**

Regarding voting behaviors and candidate evaluations, sexism has been shown to unfortunately have a significant effect on both men and women, although admittedly there have been some varying results. Many studies examining sexism and voting appeared around the time of the historical 2008 primaries and general election in which Palin, Clinton, and Obama were all involved. Smith, Paul, and Paul (2008) conducted two studies which had all participants evaluate the same resume, but the resume was attributed to either a male or female politician via the name on the resume. Results found that when evaluating the candidate for a senate position there was no bias, however when evaluating the candidates for president there was a significant bias against female politicians (Smith, Paul, and Paul, 2008). The female candidate was rated as less skilled and less qualified than the identical male candidate (Smith, Paul, and Paul, 2008). It is important to note that in their two-part study, the sample for study one was 44.4% female and in study two was 45% female (Smith, Paul, and Paul, 2008).

Another 2008 study, in which participants were primarily female (69%), self-identified 'likely' voters responses to a phone survey in Ohio were examined (Paul and Smith, 2008). Participants were asked to rate the qualifications of five potential candidates: Hillary Clinton, Elizabeth Dole, John Edwards, Rudy Giuliani, and John McCain. Results found that female candidates were viewed as significantly less qualified than male candidates to be president (Paul and Smith, 2008). Further, the same study paired female candidates against male candidates and asked participants who they would vote for in a general election. Female candidates lost to the male candidates in every hypothetical match-up (Paul and Smith, 2008). Additionally, a significant number of participants would switch their voting party to vote for the male candidate if the opposition candidate was female (Paul and Smith, 2008).

Additional studies have lent support to the notion that bias against women does play a role in candidate evaluation either directly or indirectly (Ditonto, Hamilton, and Redlask, 2013; Winfrey, Warner, & Banwart, 2014). In 2013, Ditonto, Hamilton, and Redlask published a study in which they examined the "amounts and types of information that voters searched for during a campaign." They discovered that compared to searches on male candidates, participants looked up more competency related information regarding female candidates. A majority of the participants that investigated female candidates' competence were republican women (Ditonto, Hamilton, and Redlask, 2013). Winfrey, Warner, and Banwart (2014) conducted a study based on the 2012 campaign and election between Obama and Romney. They found that nondemocratic women who endorsed more egalitarian gender role beliefs rated Obama more favorably and those with more traditional gender role beliefs rated Romney more favorably. These results suggest that perhaps a women's ideas about her own gender group can influence evaluations and perceptions of candidates. Further, research has demonstrated that politically powerful women, such as Clinton, are perceived as less feminine (Gervais and Hillard, 2011). Additionally, sexist beliefs impact voting likelihood; those who endorsed benevolent sexism were more likely to vote for Palin, in theory this is because individuals who are benevolently sexist view more traditionally 'feminine' woman favorably (Gervais and Hilliard, 2011). Further, female participants endorsing hostile sexism were less likely to vote for Clinton, adding additional support to the theory that gender role beliefs and beliefs about women can affect evaluations of political candidates and voting behaviors of women (Gervais and Hillard, 2011).

However, despite this research, polling and other studies have suggested that individuals, particularly women, are ready or would vote for a qualified female politician if given the opportunity (Brians, 2005). Simon and Hoyt (2008) found that individuals with more liberal attitudes towards women and women voters were more likely to endorse a female candidate. Women were also found to have better attitudes then men toward women in authority (Simon & Hoyt, 2008). Further, many studies have demonstrated that women are often more liberal in their political beliefs, more likely to be swing voters, and may vote against their own party to support a female candidate who is running in the opposition party (Simon & Hoyt, 2008; Brians, 2005). Thus, there is seemingly conflicting findings in the current research. In explanation, Smith, Paul, and Paul (2007) have suggested in discussion of their study that there could be a gap between explicit intentions and a subconscious bias against women that is difficult to measure or capture in typical polling procedures. Ultimately, the research suggests there is not yet a clear picture on the role of bias in voting behaviors or intentions among women.

Further, it is important to note that although women are often more democratic and considered more liberal in the research, studies have not fully examined the role of additional within group demographic information such as sexual orientation, race/ethnicity, and more. These important differences in identity and culture could account for some of the incongruence between the research and the 52% statistic regarding white women (Cnn.com, 2018) that has been surprised many. Even though, as a group, a majority of white women historically have voted republican (CNN, 2016). Data examining the voting behavior of white women specifically

suggests that they tend to vote republican in most general elections, including the elections of 2008, 2012, and 2016 (Cottle, 2016). Thus, although research highlights the liberalism and fluidity of female voters it is clear that discussing women as a monolithic voting group is not productive or accurate. However, the unusual aspect regarding the 2016 election is the atypical nature of the republican candidate these women supported; the candidate has made some openly sexist remarks and has less political experience, and yet most white female voters still endorsed him. The reasons are likely multi-factorial but given the existing research it is likely that internalized sexism did have some role to play among white heterosexual women.

#### Summary

In summary, research indicates that discrimination can have a multitude of detrimental effects. Among women, sexism can lead to increased mental and physical distress (Kaufman, Baams, and Dubas, 2017; Landry & Mercurio, 2009; Thai, Lyons, Lee, & Iwasaki, 2017; Ong, Cerrada, Lee, & Wiliams, 2017; Schmitt, Branscombe, Postmes, & Garcia, 2014). An aspect of sexism that is particularly insidious is the internalization of it (Bearman & Amrhein, 2014). Internalized sexism has been shown to have several negative consequences for women (Carr et al., 2014; Piggott, 2004). One realm in which these consequences may occur is voting (Gervais and Hilliard, 2011). In academic research it has been suggested that women are likely to vote for a qualified female candidate and are more fluid and liberal in their voting (Brians, 2005; Simon & Hoyt, 2008). However, many white women voted for a misogynistic and arguably less qualified male candidate in the 2016 election over a female (Cnn.com, 2016). While it is important to note that research has not examined within group differences among female voters and a majority of white women have often voted republican, the voting choices in the most recent election were still a surprise to many experts (Cnn.com, 2016; Katz, 2016). This study

aims to explore and contribute to the understanding of women's voting choices. Specifically, to understand if internalized sexism has a role in white heterosexual women's voting choices.

## CHAPTER 3

#### Research Methodology

# Procedure

The data used in this study was gathered via Qualtrics utilizing self-report measures. The University of Georgia Institutional Review Board reviewed and approved the study and the data collection. The Qualtrics survey site was organized and put together by the doctoral student conducting the study with the help of a master's student in the University of Georgia Professional Counseling program.

Participants learned of the survey through one of two ways. The first way involved students taking a course in the Counseling & Human Development Services department at a Southeastern university. These students are required to engage in research as part of their course. Via syllabi these students were made aware of the Qualtrics site which listed various studies they could partake in for credit, including the study for this dissertation. The second way individuals were notified of the study was via an email sent to several thousand students at a Southeastern university using a database of emails made available to the researcher by the university. The email informed students of the study and provided an incentive; those who participated would be entered in a raffle to win one of three \$25 Amazon gift cards. The email included a link to the survey site. If students were interested in participating they clicked the link and were taken to the Qualtrics site. The first page participants were redirected to requested their email information for the purpose of entering it into the lottery for the gift card and to deliver the electronic gift card if they won. Once they entered their email they clicked a next button which redirected them to another webpage containing the survey. This redirection was performed to keep their identifying information separate from their answers to maintain anonymity. The second page participants

were taken to contained an informed consent. Participants were informed the study was completely voluntary and they had the option to stop at any time without consequence. They were also informed they would still be entered in the lottery for the amazon gift card if they did not complete this portion of the survey or if they started the survey and quite at any time. If they wanted to continue they clicked a button stating they understood the informed consent and decided to continue.

The questionnaires followed the informed consent. As part of another study not related to this dissertation, they were asked to read a resume belonging to a politician. After the resume they completed several questionnaires. Completion of the questionnaires should have taken between 30-45 minutes. At the end of the survey participants were provided with a short debriefing statement and given the contact information of the investigator if they had any follow up questions or concerns. The internal review board at the University of Georgia approved all procedures of this study. Data was stored on the Qualtrics server and then downloaded into SPSS for analysis. The identifying email information was downloaded separately from survey answers. A mechanism of Qualtrics prevented individuals from being able to take the survey more than once, controlling for false data. Gift card winners were then randomly selected using a random number generator at the end of the study.

#### **Participants**

Participants meeting inclusion criteria for the study totaled 179 undergraduate students. Univariate analysis for outliers identified three participants exceeding 3.2 standard deviations above the mean age of the sample. After controlling for univariate outliers, the total sample consisted of 176 undergraduate students between the ages of 18 to 24 years with a mean age of 19.82 (SD = 1.32). All participants included in this study were white heterosexual females as

required to be included in the study. The self-identified political affiliation breakdown consisted of a Republican majority (N = 91; 51.7%). Remaining sample demographics consisted of 51 Democrats (29.0%), 27 Independents (15.3%), and seven participants who identified as Other (4.0%). Regarding presidential candidate selection, 97 participants endorsed Donald Trump (55.1%) while 79 participants endorsed Hillary Clinton (44.9%). Of the whole sample, 168 participants reported that they voted for their endorsed presidential candidate (93.2%), while 12 participants reported that they did not vote at all (6.8%). Refer to Table 1 for demographic characteristics.
# Table 1:

Demographic Characteristics of Participants (N=179)

Characteristics	Frequency	Percentage
Presidential Selection		
Donald Trump	97	55.1%
Hillary Clinton	79	44.9%
Political Affiliation		
Republican	91	51.7%
Democrat	51	29.0%
Independent	27	15.3%
Other	7	4.0%
Vote Casting		
Yes, I voted	164	93.2%
No, I did not vote	12	6.8%

## Instruments

#### Internalized Misogyny Scale (IMS)

The IMS is a self-report questionnaire that consists of 17-items, which reflect three factors that include: distrust of women, devaluation of women, and gender bias in favor of men (Piggott, 2004; Syzmanski, Gupta, Carr, & Stewart, 2009). The questionnaire is formatted in a 7-point Likert-type scale (1 = Strongly Disagree to 7 = Strongly Agree). Example items include "Women exaggerate problems they have at work," "It is generally safer not to trust women too much," and "I prefer to listen to male radio announcers than female." Items are aggregated to yield three factor scores along with a full-scale score, representative of overall internalized misogyny (Piggot, 2004). This study used the IMS full-scale score for statistical analysis. The IMS has demonstrated solid construct validity (Piggot, 2004; Syzmanski et al., 2009) with high internal consistency ( $\alpha = .88$ ; Syzmanski et al., 2009). Within the current study, Cronbach's reliability coefficient indicated high internal consistency ( $\alpha = .88$ ).

#### Internalized Shame Scale (ISS)

The ISS is a 30-item self-report questionnaire that provides an accurate and stable measure of internalized shame (Cook, 1994). The ISS consists of a 24-item total shame score and a six item self-esteem score; the six items yielding this score were adapted from the Rosenberg Self-Esteem Scale (Rosenberg, 1965). The total shame score is acquired by omitting the six self-esteem items and then aggregating all remaining items. The questionnaire is formatted in a 5-point Likert-type scale (0 = never, to 4 = Almost Always); scores range from 0 to 96. ISS scores that exceed 50 are indicative clinical levels of internalized shame (Cook, 1994). The ISS has demonstrated solid construct validity with high internal consistency and test-retest reliabilities across several studies ( $\alpha = .96$ ; Cook, 1987). Within the current study, Cronbach's reliability

coefficients indicated high internal consistency for the ISS Total Shame ( $\alpha = .96$ ) and Self-Esteem ( $\alpha = .87$ ) scores.

#### Ambivalent Sexism Inventory (ASI)

The ASI is a 22-item self-report questionnaire that taps into ambivalent sexism and its primary subcomponents of hostile sexism (11 items) and benevolent sexism (11 items) (Glick, & Fiske, 1996). The ASI is formatted in a 6-point Likert-type scale (0 = disagree strongly to 5 = agree strongly). The ASI has demonstrated solid construct validity with moderate to high internal consistencies ranging from  $\alpha = .83$  to .92 for the ASI composite,  $\alpha = .80$  to .91 for the Hostile Sexism subscale, and  $\alpha = .73$  to .85 for the Benevolent Sexism subscale. Further, research provides ample evidence for both convergent and discriminate validity (Glick, & Fiske, 1996). Within the current study, Cronbach's reliability coefficients indicated high internal consistency for the ASI composite ( $\alpha = .91$ ) and by corresponding subscales, including both Hostile Sexism ( $\alpha = .91$ ) and Benevolent Sexism ( $\alpha = .82$ ).

### **Data Analysis**

Prior to statistical analysis, data was screened for univariate outliers for all measures; no outliers were detected. Next, a correlation analysis was run between each of the three scales. This was done to answer the first research question: is there a relationship between ambivalent sexism, internalized misogyny, and internalized shame among women. To address the second research question an independent samples *t*-test. This was conducted to investigate if there were any differences among the scales between participants who reported voting for Clinton and those who voted for Trump. A third analysis was run to determine if the differences in attitudes among participants could be used to predict how they voted. This required a logistical regression to be run and interpreted with 95% confidence. As part of this analysis a Cook's test was completed to

identify outliers. Lastly, a fourth analysis was conducted to expand the third. A stepwise predictive discriminant analysis (PDA) was conducted to further and more specifically examine the predictive aspects of the prior analysis.

## **Research Questions**

#### Research Question 1

Is there a relationship between the internalized discrimination and ambivalent sexism, internalized misogyny and internalized shame, and internalized shame and ambivalent sexism?

#### Research Question 2

Are the presence and levels of internalized oppression and ambivalent sexism different between participants who voted for Hilary Clinton and those who endorsed Donald Trump?

# Research Question 3

Can internalized oppression among women, as measured by the internalized misogyny scale and ambivalent sexism inventory, be utilized to predict who participants reportedly voted for?

## **Limitations of the Study**

- 1. A limitation of this study is the studies reliance on self-report data on all three measures.
- 2. A second limitation in the study is the reliance on self-report regarding who they voted for in the election.
- 3. A final limitation to the study is the limited diversity and generalizability of the sample. All participants in this study were undergraduate students in the state of Georgia.

#### **Assumptions of the Study**

- 1. It is assumed that all participants answered the measures honestly and that each of the measures are valid.
- 2. It is assumed that all invalid measures were removed from the sample.

#### **CHAPTER 4**

#### Findings

The primary purpose of this study was to examine if and how experiences of oppression among women impacted voting behaviors. We first wanted to explore if there was any relationship between the internalization of misogyny and shame and ambivalent sexism. We were interested to know to what extent women endorsed these experiences and if they were related. We then aimed to understand if there was a difference in the experience of these constructs between participants who voted differently. Lastly, we wanted to expand on this notion by determining if presidential candidate choice could be determined in part by the endorsement of shame, internalized misogyny, and/or ambivalent sexism.

## **Data Analysis**

## Research Question 1:

Is there a relationship between experiences of internalized misogyny and ambivalent sexism, internalized misogyny and internalized shame, and internalized shame and ambivalent sexism?

## Analysis 1:

In order to assess the relationship between experiences and beliefs of internalized shame, internalized misogyny, and ambivalent sexism Pearson product-moment correlation coefficients were computed with a 95% confidence. Positive correlations were found between the IMS and the ASI (r = .728, p < .001). More specifically, positive correlations were found between the IMS and both subscales of the ASI as follows: Hostile Sexism (r = .783, p < .001) and Benevolent Sexism (r = .452, p < .001). Both subscales also positively correlated with each other as would be expected, (r = .517, p < .001). Further, in continued support of previous findings in research,

the ISS Total Shame score and Self-Esteem score were negatively correlated (r = -.704, p < .001). However, the ISS scores did not correlate with the IMS or the ASI, p > .05 in all cases. In conclusion, there was a strong, positive correlation between endorsed internalized misogyny and ambivalent sexist attitudes. However, there was no significant correlation between internalized shame or self-esteem. Refer to Table 2 for correlation matrix.

*Null Hypothesis I:* There is no relationship between internalized shame, internalized misogyny, and ambivalent sexism. The results indicated a significant association between internalized misogyny and ambivalent sexism beliefs. There was no significant relationship between internalized shame and internalized misogyny. Additionally, there was no significant relationship between internalized shame and ambivalent sexism. Although some findings were nonsignificant, there was significant findings for the IMS and the ASI. Therefore, Null Hypothesis I is rejected.

*Correlation Matrix for the Internalized Misogyny Scale (IMS), Internalized Shame Scale (ISS), and Ambivalent Sexism Inventory (ASI) among White hetero-normative female voters* 

( <i>N</i> = 176)	1	2	3	4	5	6
1. IMS: Total						
2. ISS: Shame	.09					
3. ISS: Self-Esteem	06	70***				
4. ASI: Hostile Sexism	.78***	.08	07			
5. ASI: Benevolent Sexism	.45***	.00	.05	.52***		
6. ASI: Composite	.73***	.06	01	.90***	.84***	

*p*<.05\*, *p*<.01\*\*, *p*<.001\*\*\*

### <u>Research Question II:</u>

Are the presence and levels of internalized oppression and ambivalent sexist beliefs different between participants who voted for Hilary Clinton and those who endorsed Donald Trump?

### <u>Analysis II:</u>

Mean differences for the IMS, ISS, and ASI were examined using independent samples *t*-tests comparing those who endorsed Hillary Clinton and those who endorsed Donald Trump; *t*-tests were interpreted with 95% confidence. For the IMS, Levene's test for quality of variance was violated, F(2, 174) = 14.55, p < .001. As a result, a *t* statistic not assuming homogeneity of variance was computed. After controlling for heterogeneity of variance, the IMS was found to be statistically significant, t(174) = -7.26, p < .001, with a large effect size (d = 1.08). Similarly, the ASI was found to be statistically significant, t(174) = -9.95, p < .001, with a very large effect size (d = 1.50).

Significant differences among corresponding ASI subscales also emerged. The Benevolent Sexism subscale was found to be statistically significant, t(174) = -5.63, p < .001, with a large effect size (d = .86). For the Hostile Sexism subscale, Levene's test for quality of variance was violated, F(2, 174) = 9.79, p = .002. As a result, a *t* statistic not assuming homogeneity of variance was computed. After controlling for heterogeneity of variance, the Hostile Sexism subscale was found to be statistically significant, t(174) = -11.10, p < .001, with a very large effect size (d = 1.65).

In contrast, both ISS subscales (Shame and Self-Esteem) *did not* demonstrate statistical differences when comparing participants who endorsed Hillary Clinton to participants who endorsed Donald Trump. Refer to Table 3 for *t*-test output.

# Table 3:

Summary of independent samples t-tests for the IMS, ISS, and ASI between women who voted for Hillary Clinton and women who voted for Donald Trump

	Clint	ton Vote	ers	Tru	mp Vote	ers		
							Mean	
	М	SD	n	М	SD	Ν	Difference t	d
IMS: Total	34.00	11.61	79	50.34	18.04	97	-16.34 -7.26***	1.08
ISS: Shame	61.67	20.04	79	58.36	17.63	97	3.31 1.17	.17
ISS: Self-Esteem	22.46	4.32	79	22.51	3.82	97	-0.05 -0.08	.01
ASI: Hostile Sexism	0.85	0.71	79	2.26	0.98	97	-1.41 -11.10***	1.65
ASI: Benevolent Sexism	1.56	0.82	79	2.27	0.83	97	-0.70 -5.63***	.86
ASI: Composite	1.21	0.66	79	2.26	0.74	97	-1.06 -10.06***	1.50
-1.05*	*							

p < .05\*, p < .01\*\*, p < .001\*\*\*

## Research Question III:

Can internalized oppression, as measured by the internalized misogyny scale and ambivalent sexism inventory, predict candidate choice?

## <u>Analysis III:</u>

Due to significant mean differences between those who endorsed Hillary Clinton and those who endorsed Donald Trump, the IMS and ASI were included in the predictive model. To identify the utility of the IMS and the ASI subscales in predicting participants' presidential candidate endorsement, a logistic regression analysis was computed and interpreted with 95% confidence. The analysis also estimated the odds of presidential candidate preference based upon change in the total score among subscales. To identify outliers, analogs of Cook's influence statistics were computed; Cook's distances fell below .50. To evaluate goodness-of-fit, Hosmer and Lemeshow tests were performed; results indicated no conflict with model assumptions of fit (p > .05). Further, variance inflation factors (VIFs) all fell below 4.0, indicating low probability of multicollinearity within the predictive model.

## Results

A logistic regression analysis revealed that the model was statistically predictive of presidential candidate selection,  $\chi^2$  (3, 176) = 88.085, p < .0001. The overall accuracy of the model for predicting presidential candidate selection was 80.7% and accounted for 53% of total variance (Nagelkerke  $R^2 = .53$ ). However, results revealed that the ASI: Hostile Sexism subscale was the only significant predictor in the model,  $\chi^2$  (1, 176) = 25.125, p < .0001. Specifically, the odds ratio for the Hostile Sexism subscale was 6.422, indicating that participants were 6.422 times more likely to endorse Donald Trump for every one point increase on the Hostile Sexism

subscale. The Internalized Misogyny Scale and ASI: Benevolent Sexism subscale were not statistical predictors at the  $\alpha$  = .05 level. Refer to Table 4 for logistic regression results. *Analysis 4* 

In order to identify the ASI: Hostile Sexism subscale items that most contributed to accurate classification, a stepwise predictive discriminant analysis (PDA) was conducted with all 11 subscale items using a leave-one-out cross validation (LOOCV). The stepwise PDA employed a backward elimination procedure and utilized the Wilks'  $\lambda$  stepwise method for predictor identification; this study used *F* value criteria to determine entry (*F* = 3.84) and removal (*F* = 2.71) of predictors. Prior to computing the PDA, Mahalanobis distances were calculated to screen for multivariate outliers. Six outliers were detected (*p* < .001) and subsequently excluded from the stepwise PDA (*N* = 170). Finally, to minimize skewness and stabilize the variances, the data were subjected to a square root transformation.

Results revealed a discriminant function comprised of three ASI items that was statistically significant in classifying whether participants endorsed Hillary Clinton or Donald Trump,  $\lambda = .548$ ,  $\chi^2(3, 170) = 103.65$ , p < .0001; a medium effect size was indicated (canonical  $r^2 = .46$ ). As shown in Table 5, the primary predictors included the following items: "Women exaggerate problems they have at work," "When women lose to men in a fair competition, they typically complain about being discriminated against," and "Feminists are not seeking for women to have more power than men." The discriminant function derived from the items correctly classified 79.7% of participants who endorsed Hillary Clinton and 83.5% of participants who endorsed Donald Trump. Overall, the discriminant function correctly classified 81.8% of the original grouped cases. When subjected to cross-validation, the discriminant function and 82.4% of

participants who endorsed Donald Trump. Overall, the discriminant function correctly classified 80.6% of cross-validated grouped cases. Refer to Table 6 for discriminant function classification and cross-validation results.

Summary of logistic analyses for three-predictor model calculating the probability of voting for Hillary Clinton or Donald Trump in the 2016 Presidential Election

	President			
Participants ( $N = 176$ )	β	SE $\beta$	$e^{B}$	Wald $\chi^2$
Predictor 1: IMS: Total	017	.021	.984	.628
Predictor 2: ASI: Hostile Sexism	1.860	.371	6.422	25.125***
Predictor 3: ASI: Benevolent Sexism	.298	.272	1.348	1.204
$\chi^2$		88.085***		
Nagelkerke $R^2$		.53		
Percent Accuracy		80.7%		
df		3		

p < .05\*, p < .01\*\*, p < .001\*\*\*

Structure of the Discriminant Function of the ASI: Hostile Sexism subscale items predicting presidential selection

ASI: Hostile Sexism Subscale Items $(N = 170)$	Loading
Women exaggerate problems they have at work.	.81
When women lose to men in a fair competition, they typically complain about being discriminated	.76
against.	
Feminists are not seeking for women to have more power than men.	.73
Women are too easily offended.	.73
Many women are actually seeking special favors, such as hiring policies that favor them over men,	.63
under the guise of asking for "equality."	
Women seek to gain power by getting control over men.	.61
Once a woman gets a man to commit to her, she usually tries to put him on a tight leash.	.58
Feminists are making entirely reasonable demands of men.	.54
Most women interpret innocent remarks or acts as being sexist.	.53
Most women fail to appreciate fully all that men do for them.	.43
There are actually very few women who get a kick out of teasing men by seeming sexually available	e .24
and then refusing male advances.	

\*Bolded values indicate the items retained as significant predictors. All other items were excluded from final analysis

Discriminant Function of the ASI: Hostile Sexism subscale as a predictor of presidential candidate selection

	Pred	Predicted			
Observed (N = 170)	Hillary Clinton	Donald Trump	Percentage Correct		
Hillary Clinton	63	16	79.3%		
Donald Trump	15	76	83.5%		
Overall Percentage			81.8%		
Cross-validated	Hillary Clinton	Donald Trump	Percentage Correct		
Hillary Clinton	62	17	78.5%		
Donald Trump	16	75	82.4%		
Overall Percentage			80.6%		

#### CHAPTER 5

#### Discussion

Discrimination has significant mental health concerns. Numerous studies have highlighted the increased rates of mental distress related to oppression among marginalized groups (Pascoe & Smart Richman, 2009). In fact, from a feminist perspective, almost all mental health concerns are the result of living in oppressive social and political contexts (Brown, 2009). Oppression against groups of peoples and identities occurs over a long period of time in a series of stages (Fanon, 1965). The process involves the systematic devaluation of a people's culture and identities. The dominant group slowly asserts their values and way of being as the "right" and superior form. As the new hierarchy is being established the dominant group engages in exploitative behaviors and continues to "other" the indigenous or underserved populations. Eventually this "othering" begins to occur on an institutional level and discrimination manifests in laws, rules, and the new majority culture. Oppressive and prejudiced beliefs become embedded in the culture. People begin to receive messages regarding their inferiority continuously and those messages are validated by the socially constructed policies and culture. When this happens, the oppressed individuals will begin to believe the prejudiced perception the majority culture holds of them. This can begin at an early age (Clark & Clark, 1947) and leads to internalized oppression. Internalized oppression can have severe negative consequences. When individuals begin to believe in the false inferiority the dominant culture has established several things can occur. Individuals may maintain damaging feelings of self-hatred contributing to low self-esteem, depression, anxiety, and other mental health concerns (Bearman & Amrhein, 2014; David & Derthick, 2014).

Sexism exists across the globe. It frames females and femininity as unequal and inferior to the masculine (Bem, 1981). Generally, in western countries, women have higher rates of mental distress, such as anxiety and depression, than men (NIMH, 2017a.; NIMH, 2017b). Much of women's mental health concerns may be traced back in part of experiences of oppression (Brown, 2009). For example, trauma among women is a significant concern, particularly trauma related to sexual assault (Bownes, O'Gorman, & Sayer, 1991). A significant number of women will be sexually assaulted in their lifetime (CDC.gov, 2012; National Research Council, 2014). The violent offenses occur alongside less physically endangering overt forms of sexism as well such as sexual harassment at work and cat-calling (Senthilingam, 2017). Sexism can occur to varying degrees on institutional, interpersonal, and intrapersonal levels (Bearman & Amrhein, 2014). Interpersonally, sexism occurs on a daily subtly basis via microaggressions (Sue, 2010). Microaggressions and other systematically embedded subtle versions of sexism can be hurtfully and damaging, regardless of the intention of the perpetrator (Sue, 2010). The daily exposure to negative messages about women can contribute to the internalization of sexism (Bearman & Amrhein, 2014). The internalization of this form of prejudice has not been studied extensively in the field of psychology among heterosexual women. Among some marginalized group of women, such as sexual minorities and women of color, research has related internalized oppression to emotional distress (Szymanski & Gupta, 2009; Szymanski & Henrichs-Beck, 2014).

The current study aimed to understand how internalized oppression among women could affect their voting behaviors. If one subconsciously perceives their own sex as inferior it therefore may be difficult to support an individual of the same sex in a powerful position. Past research suggests women may perceive women to be incapable of leadership and/or may be unfairly critical or prejudice (Ditonto, Hamilton, and Redlask, 2013; Smith, Paul, and Paul, 2008; Windfrey, Warner, & Banwart, 2014), and this study proposes that internalized sexism may play a role. Previous studies on voting behaviors suggested that women were ready and willing to vote for a female candidate for president if certain conditions were present, such as being qualified, which is admittedly subjective (Simon & Hoyt, 2008; Brians, 2005). However, post voting statistics found that slightly over 50% of white women voted for an atypical male candidate who made misogynistic remarks instead of the politically experienced female front runner (Cnn.com, 2016).

This study aimed to investigate if internalized sexism could have played a role in the voting behaviors of white heterosexual women in the most recent presidential election. The first step was to examine if women endorsed feelings and beliefs of sexism and internalized shame and if there was a relationship between sexist beliefs, internalized sexism, and internalized shame. We then wanted to examine if there were differences in candidate choice related to rates of internalized oppression and sexism. Finally, we investigated if we could predict who an individual voted for based on their endorsement of internalization of sexism.

#### **Discussion of the Findings**

The relationship between internalized misogyny, internalized shame, and ambivalent sexism was examined utilizing Pearson correlation coefficients. A positive relationship was found between the IMS and the ASI (r = .728, p < .001). Further, internalized misogyny was associated with both scales on the Ambivalent Sexism Inventory; Hostile Sexism (r = .783, p < .001) and Benevolent Sexism (r = .452, p < .001). Internalized shame was not associated with either internalized misogyny or ambivalent sexism. The results reveal that higher levels of internalized misogyny were related to higher levels of sexist beliefs. More specifically, women

who held higher levels of hostile sexism towards women had higher levels of internalized sexism. Women who endorsed higher levels of benevolently sexist beliefs, a more subtle version of sexism that is sometimes socially rewarded, also had higher levels of internalized sexism. These results highlight that if women maintain sexist beliefs, whether they are overt or subtle, they are also more likely to be subconsciously sexist towards themselves. In other words, they are not immune to turning their oppression against themselves, even if they might not be aware they are doing it.

After finding that women can maintain sexist beliefs and internalized sexism, we examined how this may relate to voting behaviors. We explored the differences in sexist attitudes and beliefs between women who voted for the democratic female candidate and the republican candidate in the 2016 presidential general election. To determine if there was a difference an independent samples t-test was run. Significant differences were found for the Internalized Misogyny Scale; individuals who reported voting for Trump had higher levels of internalized misogyny (M = 50.34, SD = 18.04) then those who voted for Clinton (M = 34.00, SD = 11.61). Significant differences were also found for the Ambivalent Sexism Scale with individuals who voted for Trump reporting higher levels of sexism (M = 2.26, SD = 0.74) than women who voted for Clinton (M = 1.21, SD = 0.66). Further, scores were significantly different for both scales on the ambivalent sexism with Trump voters (M = 2.26, SD = 0.98) having higher levels of hostile sexism than Clinton voters (M = 0.85, SD = 0.71). Similarly, Trump voters also endorsed higher levels of benevolent sexism (M = 2.27, SD = 0.83) than Clinton voters (M = 1.56, SD = 0.82). No significant differences between Trump (M = 58.36, SD = 17.63) and Clinton (M = 61.67, SD =20.04) voters were presented regarding feelings of internalized shame. These results demonstrate that among our sample of white heterosexual college aged women, participants who

had higher levels of sexist beliefs and attitudes and higher levels of internalized sexism were more likely to vote for Trump. Such results fit with the conception of Trump as a candidate who expressed misogynistic beliefs and behaviors during the campaign and thus, at least on a subconscious level, his supporters may relate to those beliefs. Further, it aligns with some previous research suggesting that women may have difficulty perceiving female candidates as competent (Ditonto, Hamilton, and Redlask, 2013; Paul and Smith, 2008; Windfrey, Warner, & Banwart, 2014). If women have sexist ideologies, they may not believe a woman can successfully hold a leadership position. Another interesting finding was the lack of the difference between shame. Both participants who reported voting for Trump and those who reported voting for Clinton had clinically significant high scores on the ISS. This finding could indicate that for women experiences of shame may be high regardless of sexist beliefs and internalized sexism. The root of these feelings of shame is unknown, however it could that regardless if sexism is highly internalized, living in a society that is consistently degrading may lead to feelings of shame.

After finding that sexism related to voting behaviors the next step was to determine if sexism could predict voting behaviors. A logistic regression analysis was completed, and it was found that scores on the Hostile Sexism subscale could predict how a person voted. Participants were 6.422 times more likely to endorse Donald Trump for every one point increase on the Hostile Sexism subscale. This counted for 53% of the variance in voting choice and was about 80% accurate in nature. These findings suggest that unfortunately, among women, sexist beliefs were related to endorsing Trump and the degree of one's sexism could accurately predict voting choice.

A final analysis was completed to further examine the predictive aspect of hostile sexism. A stepwise predictive discriminant analysis was conducted. Three items on the hostile sexism scale were uniquely predictive of voting behaviors: "Women exaggerate problems they have at work," "When women lose to men in a fair competition, they typically complain about being discriminated against," and "Feminists are not seeking for women to have more power than men." These items correctly classified 80.6% of voters.

These findings suggest that among undergraduate white heterosexual women, sexism influences voting behaviors. In this specific election, women's sexism was related to their choice of candidate. Women who reported voting for Trump had higher rates of sexism. Further the degree of sexist beliefs could be used to predict who a woman voted for. Overall, the findings in this study illustrate that sexist beliefs held by and internalized by women can impact their voting behaviors. Such processes demonstrate how social context and oppression influence the oppress, leading to internalization and degrading beliefs regarding identities they hold. This represents the insidious nature of oppression and the ways in which it can be perpetuated by the very people it is harming. The intermittent reality is marginalized individuals, including white heterosexual women, can internalize their own oppression. We still do not fully understand the reach of consequences of internalization, but this study offers additional insight into how it can effect the greater society. It highlights that individuals were not born in isolation but are often in part a product of the context in which they exist. When one lives in a world that consistently declares and reaffirms one's inferiority it is difficult to inoculate oneself. Thus, unknowingly we can perpetuate our own degradation, a common notion in therapy.

## **Clinical and Practical Implications**

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The findings of this study have several clinical implications. Among white heterosexual women internalized oppression and internalized shame are both substantial issues that are related to mental well-being. In treatment, clinicians should be mindful of the role internalized oppression and shame can play in their clients' mental distress. These findings represent the importance of maintaining an awareness of social and political context as it relates to a client's distress. If clinicians challenge the oppression faced by the client and its internalization perhaps they can begin to undo some of the shame and self-worth issues of which much distress can stem. Empowerment in therapy with women should be a key element to help them overcome and manage the oppressive contexts of their lives. The findings suggest that moving subconscious internalized sexism to conscious awareness could be a powerful intervention.

More globally, these findings highlight the need for psychologists to look for ways to empower women via the broad vessel of culture and macro-level movements. Past research highlighting the role of culturally embedded discrimination is supported by this study. Thus, as psychologists we need to begin to explore mechanisms of undermining and subverting the dominant social, cultural, and political oppression of women for the sake of mental health. Furhter, we need to continue to search for resiliency and strength-based factors that protect women against oppression and/or help them manage it.

#### Limitations

The findings and implications of this study are exciting and perhaps controversial. However, there are several important limitations to the study that need to be considered in both appreciation for and critical evaluation of the study. This study is significantly limited in generalizability. The sample was not diverse and only highlights the perspective and experience of white heterosexual undergraduate college women in the Southeast. While findings can suggest how other women may experience themselves or their context, more research needs to be done with a larger more diverse sample to draw any conclusions. Another major limitation of this study was the lack of consideration and measurement for other factors that could have contributed to voting for Hilary or for Trump. For example, the study did not explore if candidate policy or party affiliation was also related to voting choice. Without measuring these important factors, it is difficult to determine the extent to which sexism may play a role in conjunction with additional reasons. Further, by only examining sexism as a factor, a risk of confirmation bias arises that could have impacted results. The assumption at the start of the study, based on previous research and rooted in theory, was that sexism may play a role. A third limitation was the reliance on self-report measures. Each of the data points utilized by this study analysis was self-reported by participants and the assumption was that participants were being honest, however there is no way to ensure this was the case. Lastly, an important consideration is the potential subconscious bias of this researcher conducting the study. It is possible that my own identities, experiences, etc. could have impacted aspects of conducting the study that altered results unknowingly. Any actions or factors that may have done would have been subconscious and unintentional, however it is important to know that any study or piece of research is not immune to the influence of the researcher.

#### **Recommendations for Future Research**

Given the significant findings of this study it would be beneficial for future research to replicate and expand on this research. Future studies would benefit from replicating this study with a more diverse sample of women, in terms of region, identity factors, age, and more. Future studies should also examine additional factors associated with voting choice alongside subconscious and/or internalized oppression. Considering such factors could help determine more accurately the extent to which internalized sexism plays a role in voting. Furhter, it would be extremely beneficial for research to examine protective factors associated with less internalization among women. Such information could help clinicians and others build resiliency and encourage supportive and empowering qualities or factors in women's lives.

#### References

- Almeida, J., Johnson, R. M., Corliss, H. L., Molnar, B. E., & Azrael, D. (2009). Emotional distress among LGBT youth: The influence of perceived discrimination based on sexual orientation. *Journal Of Youth And Adolescence*, *38*(7), 1001-1014. doi:10.1007/s10964-009-9397-9
- American Psychological Association (2016). <u>Stress in America: The impact of discrimination</u>. Stress in America<sup>™</sup> Survey.
- Anderson, K. F. (2013). Diagnosing Discrimination: Stress from Perceived Racism and the Mental and Physical Health Effects\*. *Sociological Inquiry*, 83(1), 55–81. https://doi.org/10.1111/j.1475-682X.2012.00433.x
- Bearman, S., & Amrhein, M. (2014). Girls, Women, and Internalized Sexism. In E. J. David (Ed.), *Internalized oppression: The psychology of marginalized groups* (pp. 191-225). New York, NY: Springer Pub. Company.
- Bem, S. L. (1981). Gender schema theory: A cognitive account of sex typing. *Psychological Review*, 88(4), 354-364. <u>http://dx.doi.org/10.1037/0033-295X.88.4.354</u>
- Benokraitis, N. V., & Feagin, J. R. (1995). Modern sexism : blatant, subtle, and covert discrimination. Englewood Cliffs, N.J. : Prentice Hall, c1995.
- Bostwick, W. B., Boyd, C. J., Hughes, T. L., & West, B. (2014). Discrimination and Mental Health Among Lesbian, Gay, and Bisexual Adults in the United States. *The American Journal of Orthopsychiatry*, 84(1), 35–45. <u>http://doi.org/10.1037/h0098851</u>
- Bownes, I. T., O'Gorman, E. C., & Sayers, A. (1991). Assault characteristics and posttraumatic stress disorder in rape victims. *Acta Psychiatrica Scandinavica*, 83(1), 27–30. https://doi.org/10.1111/j.1600-0447.1991.tb05507.x

- Brians, C. L. (2005). Women for Women? *American Politics Research*, *33*(3), 357–375. https://doi.org/10.1177/1532673X04269415
- Britt-Spells, A. M., Slebodnik, M., Sands, L. P., & Rollock, D. (2018). Effects of perceived discrimination on depressive symptoms among Black men residing in the United States: A meta-analysis. *American Journal Of Men's Health*, 12(1), 52-63.

doi:10.1177/1557988315624509

- Brondolo, E., Mays, V., Jackson, J., & Jones, J. (n.d.). Discrimination: What it is, and how to cope. Retrieved July 4, 2018, from <u>http://www.apa.org/helpcenter/discrimination.aspx</u>
- Brown, L. S. (2009). Feminist therapy. Washington, DC: American Psychological Association.
- Buchanan, N. T., & Fitzgerald, L. F. (2008). Effects of racial and sexual harassment on work and the psychological well-being of African American women. *Journal Of Occupational Health Psychology*, *13*(2), 137-151. doi:10.1037/1076-8998.13.2.137
- Calogero, R. M., Davis, W. N., & Thompson, J. K. (2005). The Role of Self-Objectification in the Experience of Women with Eating Disorders. *Sex Roles*, 52(1-2), 43-50. doi:10.1007/s11199-005-1192-9
- Capodilupo, C. M., Nadal, K. L., Corman, L., Hamit, S., Lyons, O. B., & Weinberg, A. (2010).
  The manifestation of gender microaggressions. In D. W. Sue, D. W. Sue (Eds.), *Microaggressions and marginality: Manifestation, dynamics, and impact* (pp. 193-216).
  Hoboken, NJ, US: John Wiley & Sons Inc
- Carr, E. R., Szymanski, D. M., Taha, F., West, L. M., & Kaslow, N. J. (2014). Understanding the link between multiple oppressions and depression among African American women: The role of internalization. *Psychology Of Women Quarterly*, 38(2), 233-245. doi:10.1177/0361684313499900

CDC Features. (2018, April 05). Retrieved July 2, 2018, from https://www.cdc.gov/features/sexualviolence/index.html

CDC. (2017, July 18). Morbidity and Mortality Weekly Report (MMWR): Racial and Ethnic Differences in Homicides of Adult Women and the Role of Intimate Partner Violence — United States, 2003–2014. Retrieved from

https://www.cdc.gov/mmwr/volumes/66/wr/mm6628a1.htm?s\_cid=mm6628a1\_w

- CDC.gov. (2012). Sexual Violence: Facts at a glance. Retrieved July 2, 2018, from https://www.cdc.gov/violenceprevention/pdf/sv-datasheet-a.pdf
- Chan, D. K., Lam, C. B., Chow, S. Y., & Cheung, S. F. (2008). Examining the job-related, psychological, and physical outcomes of workplace sexual harassment: A meta-analytic review. *Psychology Of Women Quarterly*, *32*(4), 362-376. doi:10.1111/j.1471-6402.2008.00451.x
- Chatterjee, R. (2018, February 22). A New Survey Finds 81 Percent Of Women Have Experienced Sexual Harassment. Retrieved July 4, 2018, from <u>https://www.npr.org/sections/thetwo-way/2018/02/21/587671849/a-new-survey-finds-eighty-</u> percent-of-women-have-experienced-sexual-harassment
- Chira, S. (2017, June 15). The Universal Phenomenon of Men Interrupting Women. Retrieved July 2, 2018, from <u>https://www.nytimes.com/2017/06/14/business/women-sexism-workhuffington-kamala-harris.html</u>
- Clark, K. B., & Clark, M.P. (1947). Racial identification and preference among negro children. In E.L. Hartley (Ed.), *Readings in social psychology*. New York, NY: Holt, Reinhart, and Winston.

- Clark, R., Anderson, N. B., Clark, V. R., & Williams, D. R. (1999). Racism as a stressor for African Americans: A biopsychosocial model. *American Psychologist*, 54(10), 805–816. <u>https://doi.org/10.1037/0003-066X.54.10.805</u>
- Cnn.com. (2018). 2016 election results: National Exit polls. [online] Available at: https://www.cnn.com/election/2016/results/exit-polls/national/president [Accessed 2 Jul. 2018].
- Cook, D.R. (1994). *Internalized Shame Scale: Professional manual*. Menomonie, WI: Channel Press.
- Cottle, M. (2016, November 14). Why White Women Continue to Back the GOP. *The Atlantic*. Retrieved July 4, 2018, from <u>https://www.theatlantic.com/politics/archive/2016/11/white-</u> women-support-gop/507617/
- cottle. (n.d.). White Female Voters Continue to Support the Republican Party The Atlantic. Retrieved August 30, 2017, from

https://www.theatlantic.com/politics/archive/2016/11/white-women-support-gop/507617/

- David Paul & Jessi L. Smith (2008) Subtle Sexism? Examining Vote Preferences When Women
  Run Against Men for the Presidency, Journal of Women, Politics & Policy, 29:4, 451-476,
  DOI: 10.1080/15544770802092576
- David, E. R. (2008). A colonial mentality model of depression for Filipino Americans. *Cultural Diversity And Ethnic Minority Psychology*, 14(2), 118-127. doi:10.1037/1099-9809.14.2.118

David, E., & Derthick, A. (2014). What Is Internalized Oppression, and So What? In INTERNALIZED OPPRESSION: The Pscyhology of Marginalized Groups (pp. 1-30). New York, NY: Springer Publishing Company

- Delgado-Romero, E. A., Lau, M. Y., & Shullman, S. L. (2012). The Society of Counseling
  Psychology: Historical values, themes, and patterns viewed from the American Psychological
  Association presidential podium. In N. A. Fouad, J. A. Carter, L. M. Subich, N. A. Fouad, J.
  A. Carter, L. M. Subich (Eds.), *APA handbook of counseling psychology, Vol. 1: Theories, research, and methods* (pp. 3-29). Washington, DC, US: American Psychological
  Association. doi:10.1037/13754-001
- DeSilver, D. (2018, April 30). Women scarce at top of U.S. business and in the jobs that lead there. Retrieved from <u>http://www.pewresearch.org/fact-tank/2018/04/30/women-scarce-at-top-of-u-s-business-and-in-the-jobs-that-lead-there/</u>
- Dictionary by Merriam-Webster: America's most-trusted online dictionary. (n.d.). Retrieved July 4, 2018, from <u>https://www.merriam-webster.com/</u>
- Ditonto, T., Hamilton, A., & Redlawsk, D. (2014). Gender Stereotypes, Information Search, and Voting Behavior in Political Campaigns. *Political Behavior*, 36(2), 335-358. Retrieved from <u>http://www.jstor.org/stable/43653193</u>
- Donde, S. D. (2017). College women's attributions of blame for experiences of sexual assault. *Journal Of Interpersonal Violence*, *32*(22), 3520-3538. doi:10.1177/0886260515599659
- Fanon, F. (1965). The wretched of the earth. New York, NY: Grove.
- Gervais, S. J., & Hillard, A. L. (2011). A role congruity perspective on prejudice toward Hillary Clinton and Sarah Palin. *Analyses Of Social Issues And Public Policy (ASAP)*, 11(1), 221-240. doi:10.1111/j.1530-2415.2011.01263.x
- Glick, P., & Fiske, S. T. (1996). The Ambivalent Sexism Inventory: Differentiating hostile and benevolent sexism. *Journal of Personality and Social Psychology*, 70(3), 491–512. https://doi.org/10.1037/0022-3514.70.3.491

- Goldstein, A., Eilperin, J., & Wan, W. (2017, October 06). Trump administration narrows
   Affordable Care Act's contraception mandate. Retrieved July 3, 2018, from
   <a href="https://www.washingtonpost.com/national/health-science/trump-administration-could-narrow-affordable-care-acts-contraception-mandate/2017/10/05/16139400-a9f0-11e7-92d1-58c702d2d975">https://www.washingtonpost.com/national/health-science/trump-administration-could-narrow-affordable-care-acts-contraception-mandate/2017/10/05/16139400-a9f0-11e7-92d1-58c702d2d975</a> story.html?noredirect=on&utm
- Grabe, S., Ward, L. M., & Hyde, J. S. (2008). The role of the media in body image concerns among women: A meta-analysis of experimental and correlational studies. *Psychological Bulletin*, 134(3), 460-476. doi:10.1037/0033-2909.134.3.460
- Grabe, S., Ward, L. M., & Hyde, J. S. (2008). The role of the media in body image concerns among women: A meta-analysis of experimental and correlational studies. *Psychological Bulletin*, 134(3), 460-476. doi:10.1037/0033-2909.134.3.460
- Hayes, J., & Hartmann, H. (2018, April 10). Wage Gap Will Cost Millennial Women \$1 Million Over their Careers. Retrieved July 3, 2018, from <u>https://iwpr.org/publications/wage-gap-cost-</u> millennial-women-1-million-over-careers/
- Heilman, M. E., Block, C. J., & Lucas, J. A. (1992). Presumed incompetent? Stigmatization and affirmative action efforts. *Journal Of Applied Psychology*, 77(4), 536-544. doi:10.1037/0021-9010.77.4.536
- Heppner, P. P., Casas, J. M., Carter, J., & Stone, G. L. (2000). The maturation of counseling psychology: Multifaceted perspectives, 1978–1998. In S. D. Brown, R. W. Lent, S. D.
  Brown, R. W. Lent (Eds.), *Handbook of counseling psychology* (pp. 3-49). Hoboken, NJ, US: John Wiley & Sons Inc.

- Hockett, J. M., Smith, S. J., Klausing, C. D., & Saucier, D. A. (2016). Rape myth consistency and gender differences in perceiving rape victims: A meta-analysis. *Violence Against Women*, 22(2), 139-167. doi:10.1177/1077801215607359
- Hollingsworth, D. W., Cole, A. B., O'Keefe, V. M., Tucker, R. P., Story, C. R., & Wingate, L. R. (2017). Experiencing racial microaggressions influences suicide ideation through perceived burdensomeness in African Americans. *Journal Of Counseling Psychology*, 64(1), 104-111. doi:10.1037/cou0000177
- Jones, K. P., Peddie, C. I., Gilrane, V. L., King, E. B., & Gray, A. L. (2016). Not so subtle: A meta-analytic investigation of the correlates of subtle and overt discrimination. *Journal Of Management*, 42(6), 1588-1613. doi:10.1177/0149206313506466
- Kaskan, E. R., & Ho, I. K. (2016). Microaggressions and Female Athletes. *Sex Roles*, 74(7–8), 275–287. https://doi.org/10.1007/s11199-014-0425-1
- Katz, J. (2016, July 19). 2016 Election Forecast: Who Will Be President? Retrieved July 07, 2018, from https://www.nytimes.com/interactive/2016/upshot/presidential-polls-forecast.html
- Kaufman, T. M. L., Baams, L., & Dubas, J. S. (2017). Microaggressions and depressive symptoms in sexual minority youth: The roles of rumination and social support. *Psychology of Sexual Orientation and Gender Diversity*, 4(2), 184–192. https://doi.org/10.1037/sgd0000219
- Klonoff, E. A., & Landrine, H. (1995). The Schedule of Sexist Events: A measure of lifetime and recent sexist discrimination in women's lives. *Psychology Of Women Quarterly*, *19*(4), 439-472. doi:10.1111/j.1471-6402.1995.tb00086.x

- Kurtzleben, D. (2016, June 11). Almost 1 in 5 Congress Members Are Women. Here's How Other Jobs Compare. Retrieved from <u>https://www.npr.org/2016/06/11/481424890/even-with-</u><u>a-female-presumptive-nominee-women-are-underrepresented-in-politics</u>
- Landry, L.J. & Mercurio, A.E. Sex Roles (2009) 61: 192. https://doi.org/10.1007/s11199-009-9624-6
- Lanier, Y., Sommers, M. S., Fletcher, J., Sutton, M. Y., & Roberts, D. D. (2017). Examining racial discrimination frequency, racial discrimination stress, and psychological well-being among Black early adolescents. *Journal Of Black Psychology*, 43(3), 219-229. doi:10.1177/0095798416638189
- Lee, D. L., & Ahn, S. (2011). Racial discrimination and Asian mental health: A meta-analysis. *The Counseling Psychologist, 39*(3), 463-489. doi:10.1177/0011000010381791
- Lee, R. M. (2005). Resilience Against Discrimination: Ethnic Identity and Other-Group Orientation as Protective Factors for Korean Americans. *Journal of Counseling Psychology*, 52(1), 36–44. <u>https://doi.org/10.1037/0022-0167.52.1.36</u>
- Lewis, J. A. (2018). From modern sexism to gender microaggressions: Understanding contemporary forms of sexism and their influence on diverse women. In C. B. Travis, J. W. White, A. Rutherford, W. S. Williams, S. L. Cook, K. F. Wyche, ... K. F. Wyche (Eds.), *APA handbook of the psychology of women: History, theory, and battlegrounds* (pp. 381-397). Washington, DC, US: American Psychological Association. doi:10.1037/0000059-019
- Meyer, I. H. (2003). Prejudice as Stress: Conceptual and Measurement Problems. *American Journal Of Public Health*, *93*(2), 262-265. doi:10.2105/AJPH.93.2.262

- Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. *Psychological Bulletin*, 129(5), 674-697. doi:10.1037/0033-2909.129.5.674
- Miner-Rubino, K., Twenge, J. M., & Fredrickson, B. L. (2002). Trait self-objectification in women: Affective and personality correlates. *Journal Of Research In Personality*, 36(2), 147-172. doi:10.1006/jrpe.2001.2343
- Moradi, B., & Funderburk, J. R. (2006). Roles of perceived sexist events and perceived social support in the mental health of women seeking counseling. *Journal of Counseling Psychology*, 53(4), 464–473. <u>https://doi.org/10.1037/0022-0167.53.4.464</u>
- Moradi, B., & Huang, Y.-P. (2008). Objectification Theory and Psychology of Women: A Decade of Advances and Future Directions. *Psychology of Women Quarterly*, *32*(4), 377–398. <u>https://doi.org/10.1111/j.1471-6402.2008.00452.x</u>
- Mouzon, D. M., & McLean, J. S. (2017). Internalized racism and mental health among African-Americans, US-born Caribbean Blacks, and foreign-born Caribbean Blacks. *Ethnicity & Health*, 22(1), 36-48. doi:10.1080/13557858.2016.1196652
- National Research Council. 2014. *Estimating the Incidence of Rape and Sexual Assault*. Washington, DC: The National Academies Press. <u>https://doi.org/10.17226/18605</u>

NIMH (2017). *NIMH » Major Depression*. [online] Nimh.nih.gov. Available at: https://www.nimh.nih.gov/health/statistics/major-depression.shtml [Accessed 3 Jul. 2018].

NIMH. (2017). Any Anxiety Disorder. Retrieved July 3, 2018, from

https://www.nimh.nih.gov/health/statistics/any-anxiety-disorder.shtml

- Ong, A. D., Cerrada, C., Lee, R. A., & Williams, D. R. (2017). Stigma consciousness, racial microaggressions, and sleep disturbance among Asian Americans. *Asian American Journal Of Psychology*, 8(1), 72-81. doi:10.1037/aap0000062
- Oswald, D. L., Baalbaki, M., & Kirkman, M. (2018). Experiences with benevolent sexism: Scale development and associations with women's well-being. *Sex Roles*, doi:10.1007/s11199-018-0933-5
- Oswald, D. L., Baalbaki, M., & Kirkman, M. (2018). Experiences with benevolent sexism: Scale development and associations with women's well-being. *Sex Roles*, doi:10.1007/s11199-018-0933-5
- Parker, K., & Funk, C. (2017, December 14). Gender discrimination comes in many forms for today's working women. Retrieved July 3, 2018, from <u>http://www.pewresearch.org/fact-</u> tank/2017/12/14/gender-discrimination-comes-in-many-forms-for-todays-working-women/
- Pascoe, E. A., & Smart Richman, L. (2009). Perceived discrimination and health: A metaanalytic review. *Psychological Bulletin*, *135*(4), 531-554. <u>doi: 10.1037/a0016059</u>
- Peter-Hagene, L. C., & Ullman, S. E. (2018). Longitudinal effects of sexual assault victims' drinking and self-blame on posttraumatic stress disorder. *Journal Of Interpersonal Violence*, *33*(1), 83-93. doi:10.1177/0886260516636394
- Pieterse, A. L., Todd, N. R., Neville, H. A., & Carter, R. T. (2012). Perceived racism and mental health among Black American adults: A meta-analytic review. *Journal of Counseling Psychology*, 59(1), 1–9. <u>https://doi.org/10.1037/a0026208</u>
- Piggot, M. (2004). Double jeopardy: Lesbians and the legacy of multiple stigmatized identities.Psychology Strand at Swinburne University of Technology, Australia: Unpublished thesis.Refs

- Riley, W. J. (2012). Health Disparities: Gaps in Access, Quality and Affordability of Medical Care. *Transactions of the American Clinical and Climatological Association*, *123*, 167–174.
- Rosenberg, M. (1965). *Society and the adolescent self-image*. Princeton, NJ: Princeton University Press.
- Schmitt, M. T., Branscombe, N. R., Postmes, T., & Garcia, A. (2014). The consequences of perceived discrimination for psychological well-being: A meta-analytic review. *Psychological Bulletin*, 140(4), 921-948. doi:10.1037/a0035754
- Seaton, E. K., Caldwell, C. H., Sellers, R. M., & Jackson, J. S. (2008). The prevalence of perceived discrimination among African American and Caribbean Black youth. *Developmental Psychology*, 44(5), 1288-1297. doi:10.1037/a0012747
- Senthilingam, M. (2017, November 29). Sexual harassment: How it stands around the globe. Retrieved July 2, 2018, from <u>https://www.cnn.com/2017/11/25/health/sexual-harassment-violence-abuse-global-levels/index.html</u>
- Sherlock, M., & Wagstaff, D. L. (2018). Exploring the relationship between frequency of Instagram use, exposure to idealized images, and psychological well-being in women. *Psychology Of Popular Media Culture*, doi:10.1037/ppm0000182
- Simon, S., & Hoyt, C. L. (2008). Exploring the gender gap in support for a woman for president. Analyses Of Social Issues And Public Policy (ASAP), 8(1), 157-181. doi:10.1111/j.1530-2415.2008.00167.x
- Smith, J. L., Paul, D., & Paul, R. (2007). No place for a women: Evidence for gender bias in evaluations of presidential candidates. *Basic And Applied Social Psychology*, 29(3), 225-233. doi:10.1080/01973530701503069

- Sue, D. W. (2010). *Microaggressions in everyday life : race, gender, and sexual orientation*. Hoboken, N.J. : Wiley, ©2010.
- Swim, J. K., Hyers, L. L., Cohen, L. L., & Ferguson, M. J. (2001). Everyday sexism: Evidence for its incidence, nature, and psychological impact from three daily diary studies. *Journal Of Social Issues*, 57(1), 31-53. doi:10.1111/0022-4537.00200
- Swim, J. K., Mallett, R., & Stangor, C. (2004). Understanding Subtle Sexism: Detection and Use of Sexist Language. Sex Roles, 51(3-4), 117-128. doi:10.1023/B:SERS.0000037757.73192.06
- Szymanski, D. M., & Gupta, A. (2009). Examining the relationship between multiple internalized oppressions and African American lesbian, gay, bisexual, and questioning persons' self-esteem and psychological distress. *Journal Of Counseling Psychology*, 56(1), 110-118. doi:10.1037/a0013317
- Szymanski, D. M., & Henning, S. L. (2007). The role of self-objectification in women's depression: A test of objectification theory. *Sex Roles*, 56(1-2), 45-53. doi:10.1007/s11199-006-9147-3
- Szymanski, D. M., & Henrichs-Beck, C. (2014). Exploring sexual minority women's experiences of external and internalized heterosexism and sexism and their links to coping and distress. *Sex Roles*, *70*(1-2), 28-42. doi:10.1007/s11199-013-0329-5
- Szymanski, D. M., & Stewart, D. N. (2010). Racism and sexism as correlates of African American women's psychological distress. *Sex Roles*, 63(3-4), 226-238. doi:10.1007/s11199-010-9788-0

- Szymanski, D. M., Moffitt, L. B., & Carr, E. R. (2011). Sexual objectification of women: Advances to theory and research. *The Counseling Psychologist*, 39(1), 6-38. doi:10.1177/0011000010378402
- Szymanski, D.M., Gupta, A., Carr, E.R., & Stewart, D. (2009). Internalized misogyny as a moderator of the link between sexist events and women's psychological distress. *Sex Roles*, 61, 101-109.
- Thai, C. J., Lyons, H. Z., Lee, M. R., & Iwasaki, M. (2017). Microaggressions and self-esteem in emerging Asian American adults: The moderating role of racial socialization. *Asian American Journal Of Psychology*, 8(2), 83-93. doi:10.1037/aap0000079
- Tsang, H. W. H., Ching, S. C., Tang, K. H., Lam, H. T., Law, P. Y. Y., & Wan, C. N. (2016).
  Therapeutic intervention for internalized stigma of severe mental illness: A systematic review and meta-analysis. *Schizophrenia Research*, *173*(1–2), 45–53.

https://doi.org/10.1016/j.schres.2016.02.013

- Wagner, J., Lampert, R., Tennen, H., & Feinn, R. (2015). Exposure to Discrimination and Heart Rate Variability Reactivity to Acute Stress among Women with Diabetes. *Stress and Health : Journal of the International Society for the Investigation of Stress, 31*(3), 255–262. https://doi.org/10.1002/smi.2542
- Winfrey, K. L., Warner, B. R., & Banwart, M. C. (2014). Gender identification and young voters: Predicting candidate evaluations and message effectiveness. *American Behavioral Scientist*, 58(6), 794-809. doi:10.1177/0002764214521769