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Biased language usage and age in reinforcing marginalizing behavior

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Biased Language Usage and Age in Reinforcing Marginalizing Behavior

by

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Thesis
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Abstract

Biased language usage is prevalent within every society and within every level of all these societies. While there are many studies that look at the psychological, physical, and symbolic manifestations of biased language, it is unclear as to when this type of behavior is recalled as being derogatory by people. This study conducted in-depth face-to-face interviews of ten individuals in a medium-sized Midwestern city. Questions focused on the age and context in which interviewees recalled twenty-four different situations of exposure to derogatory and marginalizing language usage or behavior. The study suggests that most language is first encountered within the family and school settings between the ages of 4 to 10 years. Within the environmental aspects of the interviews, it was noted that the younger a child is exposed to the derogatory language, the less sustaining influence it had on the interviewees forming a biased opinion later in life. Some of the results had the opposite effect on forming marginalizing behavior, and, because of the negative experiences that occurred while they were younger, allowed the individuals to become more tolerant and accepting adults with a distinct aversion to derogatory behavior, with the majority of the respondents indicating that any type of marginalizing practices as unacceptable.
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Introduction

An enlightening conversation with a gentleman who is a practicing Lakota Sun Dancer led to a discussion about how, within his culture, mental illness is not viewed or labeled as derogatory as it is in many Anglo cultures prevalent in the United States. This invariably led “The People,” what the Sioux Indians call themselves, to view mental illness in a positive/alternate perspective instead of in a negative sense, which would require treatment. This conversation launched me on a path that took me beyond the questions “Is mental illness an alternative state of being,” and if so, “Why is it looked upon with such disdain and want of sequestering?” The broader question then became focused on the many other marginalized groups within our society and whether we do indeed treat these different groups of our society in this fashion. I especially became interested in the question, “At what point does the marginalization take place and how is that view shaped?”

Many studies have explored the nature of hate speech and its effects on its intended targets. This type of biased language, it is claimed, has been used to keep certain groups of people in a marginalized status, whether the language is directed at a group’s sexual orientation, race, gender, or socio-economic status. The conclusions could be applied to the marginalization of any intended targeted group. There have been numerous studies on what constitutes biased language and how language is used to keep people of different orientations and ethnicities in a disadvantaged status, and the effects on both the psychological and physiological states that occur within these targeted persons or groups. There currently is a paucity of research about when this type of language is “noticed” within a person’s cognitive makeup and regarded as normal by the current population. The arguments of whether derogatory and/or biased language is “protected” and “legal” will continue to be used to stop any advances in limiting hate speech
in certain arenas. Biased language needs to be regarded not just as a freedom of speech issue but also as a physically and psychologically debilitating practice despite the large array of intelligent and tactful people who employ this labeling. What is horrifying is that this intellect has permeated and sustained the highest levels of our law-making bodies, influenced our surrounding communities, warped our religious havens, and convinced the less informed and less educated that bias is the proper and correct way to describe, treat, and exclude people who are not of the dominant majority in power.
Review of Literature

The use of derogatory and biased language is prevalent in all cultures and within all levels of any society. Derogatory language, labeled sometimes as hate speech and sometimes as biased language, has been shown through research to manifest itself within the targeted population in many ways. Biased language is not just a sporadic comment here and there that causes an individual emotional duress for the moment, although this is one way in which the perpetrators use it. This type of communication sometimes becomes an insidious tactic in which the perpetrators engaging in it gain leverage and influence within every level of any society, from the exclusion of peer groups to the influence of political, law-making bodies. Biased language can prevent the emotional well-being of many individuals within a group, as the language is used as an exclusionary tactic. The consequences of biased language include negative letters of recommendation for internships at revered schools, job and advancement opportunities (Trix and Psenka, 2003), a change of resolve of previously empathetic and caring medical students, and skewed capacity for the care of the mentally disadvantaged by the same students at the end of their internships (Cutler et al., 2008).

Biased language is also used as a stepping-stone to close the distance between tolerance levels and its influence on behavior change. This is achieved by the use of embodied cognition through subliminal messaging to perpetuate physical violence against a person or entire group of people. The behavior change is accomplished by using the language, to label “others” automatic, through conditioning. Groups have been painted as less than human, by calling attention to assumed physical traits or engendered characteristics, therefore making the behavior more acceptable to adverse treatment (Ansorge et al., 2009). This type of conditioning is not only done with the use of verbal language as an attack on engendered characteristics, but also by the use of
symbols to denote special meaning. A group within a culture must come to a consensus as to the meaning of a symbol so that it can reflect an experience and therefore codify that experience; while symbols may imply an event, the symbol attached to the event cannot explain the entire experience by using just the symbol. There needs to be a relationship between the symbol and the event. A symbol is meaningless until we as a group or culture assign it meaning by tying an experience and event to that particular symbol. This is particularly evident when the structure and social function are trying to shape the content of the message. While this can be used in both positive and negative scenarios, in the event it is wielded in an exclusive manner, the symbol can actually be strengthened in a negative context by the excluded group’s absence, because the lack of input of the naming or assignment of cultural meaning could stymie possible excluded criticisms, and the back and forth volley that the excluded members are attempting to come to a consensus within the creative forming of the meaning of the symbol in question. Societies have long assigned symbols as a meaning of purity that denotes special meaning to social relationships by aligning a society’s allegiance to that perceived purity by relating the symbol as a thing of beauty or wisdom; therefore, tying that particular symbol into the social function of that society, it can be used as a weapon when the perceived beauty is threatened. Symbolism is meant to help with the action of a problem (Duncan, 1968). Biased language is not only introduced within family circles and within public settings such as schools but also in the new “form” of communication labeled as media logic. Media logic consists of formats that are organized and presented with particular behaviors emphasized in such a manner as to not only present the information but to interpret it as well. This format has become so prevalent that the communicator and receiver have taken for granted not only the message, but also the channel.
This has come to be understood as a “processual framework through which social action occurs (Altheide & Snow, 1979, as cited by Hepp, 2012).

Accordingly, popular media has been utilized as a desensitizing agent to lead the population that is unaware of the embodied cognition into subtle behavior changes. Popular media likely have been making the unaware population more comfortable with certain types of adverse treatment and negative labeling viewed on television and in the movies. This involves how minorities are viewed in terms of self-visualization. A recent study about the social comparison perspective on the exaggerated overweight portrayal of the characters Big Momma, Madea, and Rasputia (exaggeratedly overweight, non-sexual mammy-type figures of black women acted by men) in the movies discusses the effects these stereotypes that have been overly exaggerated have on African American women. Beauty is not only a social construction but an ideological one that is bound to the axis of power, including race, class, and gender (Durham, 2007, as cited by Chen et al., 2012). The Chen article points out that according to Festinger’s (1954) social comparison theory model, a person’s tendency to self-evaluate is most likely to compare themselves to people or groups they feel are most like them. The groups engaging in the marginalization can see this type of repetitive social construction of “others” as positive or negative by the groups that it targets. This type of behavior modification can and should be a concern. Communication scholars can, however, help influence and establish positive types of agenda-setting in defense of the negative trend-setting tactics. If popular media can be used to enable agenda-setting for the promotion of discrimination and intolerance, it can also be used to forward acceptance and tolerance. We are seeing this type of channel in the shifting norms of situation comedies that reflect non-traditional families, homosexual and lesbian couples, and/or open relationships and non-traditional sexual situations on television and at the theaters. The
potential of popular media to teach language sensitivity by use of these shifting norms could be realized positive trend setting. It should be noted, however, while the media bombards the typical North American society with 300 to 3,000 messages a day, most influence, especially influence that generates behavior change, takes place on an interpersonal level (Eadie, 2009).

Before change can be accomplished, it is necessary to understand how biased language is used to gain, or maintain, a position of privilege within a society in order to circumvent its degrading posturing. Also necessary is to understand the psychological and physiological damages that biased language can cause if a protective barrier is not learned and implemented to help buffer the assault of that projected hostility, even in its more covert forms. In an effort to understand how bias is passed on from generation to generation, and at what age is it ingrained into the schemata—the formation of the mental plan of a person enough that it formalizes opinion and behavior—it is essential to know the difference between offensive remarks and biased language. Based upon the review of extant literature, it is evident that insufficient attention has been devoted to the foundational influence of biased language. I therefore focus my study on how biased language shapes and reinforces marginalizing behavior.
The Psychological Manifestations of Biased Language

Studies dealing with self-stereotyping and the moderating effect of prejudice towards a group that is repeatedly targeted as inferior by use of biased language, whether it is benevolent or not, has a moderating effect on the schema of some of the targets (Schmitt and Wirth, 2009). Researchers have used Social Dominance Theory (SDT) to explain why human societies have levels of inequalities within the hierarchies of intergroup relations and why males specifically within these societies have exhibited higher levels of SDT than females. While very few empirical studies actually prove this, it has led to research that looks at self-stereotyping as a way of defining why women tend to make light of inferior status by use of accommodating language.

An example of social learning to deflect the gender bias could be, “It is unladylike to be as aggressive as a male in the workplace.” While this may seem like a choice of how genders are perceived, it nonetheless demonstrates socialization. If a person steps outside of that norm, he/she are assigned a label that is in its fashion, derogatory in nature, with the intent to cloister the individual into the confines of the accepted parameters of that particular behavior. This can be applied not only to gender role deviations but race, religion, and sexual preference that deviates from the predominantly accepted norm as well (Trix & Psenka, 2003).

Self-stereotyping not only ingrains itself into our accepted societal behavioral schema but also shows the fear of stepping outside of the norms to which we have been socialized. The fear of verbal reprisals can be just as devastating as physical ones, sometimes more so, because the absence of physical marks often leaves the target no recourse, as there is no physical proof that this harassing behavior is happening unless witnessed by another individual who is willing to step up and say something. This enables the abusive behavior to continue in an often-unrelenting and undetectable cycle. Environmental contexts such as self-stereotyping and verbally abusive
behavior can cause psychological debilitation and are often associated with situations like hostile work environments. Other types of psychological debilitation can be manifested as depression, increased self-abusive tendencies such as excessive drinking or drug use, sleep and eating disorders, raging, and somatoform disorders (Jay 2009). The obvious signs of affective disorders caused by the repeated occurrence of ongoing verbally abusive language is often part of a vicious circle in regard to mental deficiencies of any kind. Whether it is physiologically inherited or environmentally induced, any form of mental illness or psychotic breaks is considered a weakness and applied as a limiting condition regardless of its severity. One study looked at the perception of being in proximity to any “crazy” behavior that is viral and will somehow influence the “stable and grounded” person to be “crazy” as well (Cutler et al., 2008). This leads to an unfortunate diminishment of talented and emphatic individuals pursuing a career in the much-needed area of scientifically enhanced caregivers who later could become physicians, as only the affect is looked at instead of the social dimensions that caused it. This type of thinking and conditioning is like treating an abused child for the ailments caused by the abuse and then returning him/her right back into the abusive situation that caused the initial injuries. Groups who socialize young children at an early age in this fashion, as was witnessed by researcher Jack Kay (lecture at EMU, 2013) in a white supremacy training camp, essentially “inoculate” them against further reconditioning later on in life. Inoculation theory is explained as exposing someone to small doses of behavior before another type of conditioning can take place. If confronted with a differing stance later on, it is harder to change or “ward off” the previous conditioning (Eadie, 2009). This happens whether the conditioning is positive or negative. Unless the situation of bias is addressed at the source, the symptoms do not just go away. A prime example of this includes the school shootings that have been so prevalent in the first part
of the 21st century. While the media sensationalizes the event and looks at the “symptoms of the illness,” like the focus on the mental instability of the person, what is initially overlooked is the condition that caused the symptoms, that is, the lack of conscientious parenting, bullying by other students that is counteracted, or ostracization. The pervasive and constant bullying that is dealt with on a daily basis typically targets something about the person that is often only a slight difference in the person’s manner or appearance. The inability, whether from enacted laws or lack of parental controls, to deal with the behavior of the abusive dominant group’s actions causes some individuals to retaliate in a very violent and deadly manner. It is rare that an individual just “snaps.” If one takes the time to investigate the situation fully and asks the correct questions, it will be revealed that some type of biased and hateful verbal communicative language was behind the deviant-shaping behavior that caused the event (McHale, Zompetti, & Moffitt, 2007). It is enigmatic how certain individuals internalize biased language. According to a study by Liew and Boekmann (2002), minorities and women find hate speech to be considerably more harmful than do Caucasian males—so much so that the authors contended in a second study that the punishment for hate speech should be considerably more severe than it is now.
The Physical Manifestations of Biased Language

An array of physically manifested conditions and actions can result from hate speech. As stated in the previous section, being barraged with hostile verbiage can cause anxiety, depression, or a combination of the two. These conditions can lead to stress-related health problems that, unless looked at very carefully, cannot be tied to the constant assault of derogatory language and the atmosphere it creates. Even if an attending physician has preconceived prejudices when examining a different gender or race, many problems can be overlooked, causing another kind of stress. Any of these conditions could be exacerbated by the current disparities that effect the interaction of physicians and their patients who are of a different race or gender. A current study shows that Caucasian male doctors are more than twice as likely to have physician-centered encounters—meaning very little interaction or disclosure from the patient—as a female or minority physician. This attitude leads to shorter visits, less disclosure, and less satisfaction by the patient being attended (Peck & Denney, 2012). An example of hidden stress-related illness would be the physician who keeps bandaging a reoccurring wound over and over without looking into what is causing the reoccurring symptoms; the underlying condition will continue to be there, so the symptom will only get worse unless the initial problem is addressed. In essence, the physician treats the symptoms without trying to discover the cause of the illness.

When a person is in a constant state of stress, his or her body engages in what is known as the flight or fight response, which has activators that are memory-trained and will kick in automatically to help alleviate the situation if it goes on too long. If this kind of stress is constant over a period of time, it can lead to physical problems such as hair loss, high blood pressure, eating disorders, and substance abuse, to name a few. When dealing with diverse cultures, we encounter a whole new set of problems regarding how physical symptoms are diagnosed and
treated. Anxiety and depression are not just internal switches that can be turned on and off, caused by medicating symptoms like high blood pressure or telling the individual not to eat or drink certain things, but rather the result of interpersonal interactions with the world around us in which they are being targeted repeatedly. This is true for not only different ethnicities, but for LGBT and women as well (Friedman, 1997). Minorities and women are often misdiagnosed because the illness is not related to the person’s psychological interactions, even if they are adverse and that information is relayed to the physician. The individual is more often than not offered medication to alleviate the symptoms, when the offer of a local support group or counseling would be more beneficial in conjunction with the medication (Loue & Sajatovic, 2008).

These prior physical responses to the confrontation that is involved in hate speech, and the use of derogatory biased language, are of an internal nature. While no less important and difficult to deal with, it is the actual physical assault to a person, or threat of an assault to the person who is the target of hate speech, that happens too frequently to ignore. In studies dealing with bullying behavior it is often the case that the peer who is asserting physical dominance over an individual or other members in the group has a high sexual prejudice correlation as well as higher than normal aggressive tendencies and also uses derogatory language to isolate targets (Poteat & DiGiovanni, 2010). This is a deadly mixture of victimization for a who is already in a “less than” status and does not feel that he or she has proper recourse to the victimization. Studies where the perceived “difference” in the victims has been identified as the reason given by the aggressors—that the victims had to be assaulted— show that the “difference” was expressed as the “cause” of the problem (Nielsen, 2002).
The most serious form of physicality is on the societal level, as with genocide. If we look closer at any of the mass exterminations that have taken place throughout history we will find hate speech being used as a hegemonic conditioning. Mass targeting, such as genocide, starts on a smaller scale within the society, via the family unit, and carries over into the civil sector, then advances into the political arena where laws are enacted (McHale, Zompetti, & Moffit, 2007). This type of precursor is used to dehumanize and objectify a specific population so that acts of violence and, in many cases, mass extermination, are “justified” and carried out under the guise of a necessary act (Bosmajian, 1974).
Research Validation

Social Cognitive Theory stemmed out of work in the area of social learning theory in 1941. This proposition posits that if one were motivated to learn a particular behavior, then that particular behavior would be learned through clear observations. By imitating these observed actions, the observer would solidify that action and be rewarded with positive reinforcement.

While there are many relevant theories and studies of what causes biased thought and biased speech, along with a plethora of intentions, missing in the research is the question of at what point does biased behavior ingrain itself into the cognition of a person so that it is enacted as a marginalizing schema towards another targeted person or group? I argue that a study is needed that looks at what point individuals recall taking the step from internalizing and processing marginalizing behavior to enacting it into such forms as bullying, teasing and later, violent and/or discriminatory practices. Although studies in communication and other fields have come close to the question, I contend that a more in-depth study on when and why this ingrained view takes shape is needed.

Accommodation Theory originally emerged as a socio-psychological accounting of how our dialects and words change depending on to whom we are speaking. This theory can also embrace the paralinguistic of interpersonal communication and explain the reduction and magnification of commutative differences in interaction. This is explained by accommodation through convergence—a way of approximating towards another that increases liking- or in the case of biased language/marginalization, divergence, a way of non-accommodation that moves away from mirroring another to show interest and/or respect for their views, thoughts, and behaviors. Upward or downward subjective or objective communication behavior can be used to help explain how the reuse of certain phrases and words can create and maintain stereotypes. The
repetitive divergence in both young children and adults can be seen as legitimate reinforcement if they are exposed to no other social cognitive development, diverging opinions, or worldviews. Two points of the four main points of this theory help to explain how this type of conditioning can take place: Speakers will- other interactional motives notwithstanding increasingly non-accommodate or diverge from, the commutative patterns believed characteristics of their interactants, the more they wish to signal, or promote relational dissatisfaction or disaffection with, and disrespect for, the other person or group’s traits, demeanor, actions, or social identities (Baxter, L. & Braithwaite D., p.167). An example of repetitive divergence—non-accommodation—would be making fun of a person’s race or gender by degrading a characteristic thought to be associated with this person or group of people. The speakers can show their disrespect or contempt towards the marginalized group or person to others in the form of non-accommodation by repetitive divergence, and if this pattern is repeated many times in front of impressionable minds, it could be negatively reinforced over time to become biased and prejudicial thinking and behavior.

Based upon the review of extant literature, it is evident that insufficient attention has been devoted to the foundational influence of biased language. I therefore focus my study on the question of at what age biased language is shaped, and what is happening in the environment that reinforces marginalizing behavior with the following inquisition.
Research Question and Methodology

The research question that guides this study is: At what age does early exposure to biased language occur and what are the circumstances and context of this exposure?

The study involved in-depth face-to-face interviews of ten volunteer participants who were asked to recall their earliest exposure to biased situations and language. The participants ranged in age from 19 to 82 years of age, three of which were Caucasian males, five Caucasian females, and two African American females. The participants were recruited through the investigator’s personal and social networks in a medium sized city in the Midwestern area of the United States. For the first segment of the study participants were asked to fill out a questionnaire that used a Likert scale of 1 to 5 to assess whether the individual had ever experienced certain types of derogatory language or behavior and to ascertain whether further inquiry of these individuals would be facilitated. Once the participants were deemed qualified they were invited to take part in an audiotaped interview. The volunteers were then asked to sign consent forms to allow the interviews to be audiotaped so that the researcher could review the interviews at a later date. The interviews were audio-taped in conjunction with simultaneously filling out questionnaires which had Likert scale groupings within them so the investigator could refer to the interviews for each of the questions and load the responses into an Microsoft excel document for coding. After the numbers were loaded and first coded by the researcher two trained coders who were post-graduate students validated them. The raw numbers were then converted to percentages. The audio-tapes were referred to not only to measure perceived appropriateness of the symbols and age of when the interaction first occurred, but also where and with whom they were with during the recalled incident, tone of voice, language usage as it appeared to the researcher as negative or positive, and the narrative surrounding the recalled
situation in which the interviewees first experienced the symbols and incidents. From these narratives, reoccurring themes were ascertained, documented and then loaded into an excel document to break down into percentages as to how often each situation occurred within these contexts and then changed into percentages.

The first portion of the study focused on the use of symbols to try to elicit the environmental context surrounding either the positive or negative usage that was activated when the visuals were shown. Reoccurring themes were chosen as to the context of the surrounding situations of exposure for the symbols shown in the next section. The specific symbols were chosen by the investigator to represent stereotypical depictions surrounding ethnicity, mental or physical disabilities, sexual orientation and gender stereotyping. The following section provides examples of the symbols themselves and the wording of the questions that were asked for the in depth interviews.

In-depth Interviews

Interviewees were given the following instructions and asked the following questions:

Please answer the following questions by first discussing the situation and age that you recall seeing the symbol/pictograms shown, then using a Likert scale of 1 as very inappropriate to 5 as very appropriate as to your perception of them.

Figure 1- Swatiska

Can you recall the age you first saw this symbol and the circumstance surrounding the incident?

On a scale of one to five, do you think this is appropriate? 1 2 3 4 5
Figure 2- Handicap symbol
Can you recall the age you first saw this symbol and the circumstance surrounding the incident?
On a scale of one to five, do you think this is appropriate? 1 2 3 4 5

Figure 3- Rainbow symbol
Can you recall the age you first saw this symbol and the circumstance surrounding the incident?
On a scale of one to five, do you think this is appropriate? 1 2 3 4 5

Figure 4- Sexism depiction carton
Can you recall the age you first encountered gender stereotypes like the examples depicted in the cartoon here? On a scale of one to five, do you think this is appropriate? 1 2 3 4 5

The next part of the in-depth interviews sought to assess the participant’s evaluation of the appropriateness of the symbols. Interviewees were asked on a Likert scale of 1 to 5 how
appropriate did the participant feel the symbol was, with 1 being very inappropriate, 2 being inappropriate, 3 being middle of the road for appropriateness, 4 being appropriate and 5 as very appropriate. The responses were marked on the questionnaire, and loaded into an excel document and changed into percentages.

The second part of the interviews was numerically and thematically coded, asking the participants to recall at what age the interviewee first experienced 20 different biased situations and exposure to derogatory language. These ages were marked on the questionnaire and the age groups were loaded into an excel document and converted to percentages as to determine when the majority of the language was first experienced. The audiotapes were then used to identify reoccurring themes, which was charted and broken into percentages as well. The following is the samples of the questions used to identify age of exposure.

**Part II of in Depth Interview Questions**

- Can you recall your first interaction or observation of an interaction with, a person of different sexual orientation? Do you recall how old you were?
  4-7( ), 7-10( ), 10-13( ), 13-15( ), 15-18( ), other (specify age) ( ), N/A ( )

- Can you recall your first interaction or observation of an interaction with, a person of different gender? Do you recall how old you were?
  4-7( ), 7-10( ), 10-13( ), 13-15( ), 15-18( ), other (specify age) ( ), N/A ( )

Can you recall your first interaction or observation of an interaction with, a person of different race? Do you recall how old you were?
  4-7( ), 7-10( ), 10-13( ), 13-15( ), 15-18( ), other (specify age) ( ), N/A ( )

- Can you recall your first interaction or observation of an interaction with, a person of diminished mental or physical faculties? Do you recall how old you were?
• Do you recall how old you were when you felt you had formed a set opinion for persons of different sexual orientations? Ex: dirty, lazy, funny, stupid etc.

• Do you recall how old you were when you felt you had formed a set opinion for persons of different genders?

• Do you recall how old you were when you felt you had formed a set opinion for persons of different races?

• Do you recall how old you were when you felt you had formed a set opinion for persons of diminished mental or physical faculties?

• Can you describe a situation when you noticed that persons of different sexual orientation were treated differently? Do you recall how old you were?

• Can you describe a situation when you noticed that persons of different ethnicities were treated differently? Do you recall how old you were?

• Can you describe a situation when you noticed that persons of diminished mental and physical faculties were treated differently? Do you recall how old you were?
Can you describe a situation when you noticed that persons of different genders were treated differently? Do you recall how old you were?

4-7( ), 7-10( ), 10-13( ), 13-15( ), 15-18( ), other (specify age) ( ), N/A ( )

Do you recall how old you were when you started hearing/using derogatory language for persons of different sexual orientations?

4-7( ), 7-10( ), 10-13( ), 13-15( ), 15-18( ), other (specify age) ( ), N/A ( )

Do you recall how old you were when you started hearing/using derogatory language for persons of different genders?

4-7( ), 7-10( ), 10-13( ), 13-15( ), 15-18( ), other (specify age) ( ), N/A ( )

Do you recall how old you were when you started hearing/using derogatory language for persons of different race?

4-7( ), 7-10( ), 10-13( ), 13-15( ), 15-18( ), other (specify age) ( ), N/A ( )

Do you recall how old you were when you started hearing/using derogatory language for persons of different mental and physical handicapped faculties?

4-7( ), 7-10( ), 10-13( ), 13-15( ), 15-18( ), other (specify age) ( ), N/A ( )

Do you recall from whom you first heard a derogatory comment or saw a derogatory action against persons of different sexual orientations?

Do you recall from whom you first heard a derogatory comment or saw a derogatory action against persons of different genders?

Do you recall from whom you first heard a derogatory comment or saw a derogatory action against persons of different race?

Do you recall from whom you first heard a derogatory comment or saw a derogatory action against persons of diminished mental and physical faculties?
Results: Numerical Findings

In the portion of the study that deals with the numerical findings on the appropriateness of the symbols, the following results were found:

As shown in figure 1, the Swastika, as it pertains to Nazis and white supremacist hate groups and their negative stance on non-Aryan races, 80% of the respondents indicated they thought the symbol to be very inappropriate on the Likert scale, or a 1, and 20% found this symbol to be appropriate, or 2 on the Likert scale.

Figure 2, the handicap wheelchair symbol, as it pertains to the disabled community, shows that 90% of the respondents found this symbol to be very appropriate, or a 5 on the Likert scale, and 10% found the symbol to be very inappropriate, or a 1 on the Likert scale.

Figure 3, the rainbow symbol as it pertains to the Lesbian Gay Bisexual and Transgender community, demonstrates that 70% of the respondents thought the symbol was very appropriate, or a 5 on the Likert scale, 10% were found to be middle of the spectrum of appropriateness, or a 3 on the Likert scale, and 20% thought it was very inappropriate, or a 1 on the Likert scale.

Figure 4 as it pertains to an instance of gender stereotyping, shows that 56% of the respondents found it to be very inappropriate, or a 1 on the Likert scale, 33% found it to be inappropriate, or a 2 on the Likert scale, 11% found it to be middle of the road for appropriateness, or a 3 on the Likert scale. One person within the study did not have a response for this category so they were not calculated into the percentage breakdown for this area of the coding.

Within the age groups assigned to the second part of the in-depth interviews, the following numerical elements were found:
In the category of “1st interaction/observation with persons of different sexual orientation” which describes the interviewee’s first cognitively aware interaction or observation of someone else’s interaction with an individual who was of a different sexual orientation than what is considered by the heterosexual community to be; bisexual, homosexual, lesbian, or transgender. Of this category, 20% of our participants indicated the 4 to 7 year old range, 20% indicated the 10 to 13 year old range, 10% indicated the 13 to 15 year old range, 20% indicated the 15 to 18 year old range, and 30% chose “other” which indicated another age other than the groups listed in the questionnaire.

![Pie chart of first interaction/observation of interaction with persons of different sexual orientation]

**Figure 5**

In the category of “1st interaction/observation with persons of different genders” which, describes the interviewee’s first cognitively aware interaction or observation of someone else and their interaction with an individual who was of a different gender than the interviewee themselves such as, male or female. Of this category, 50% indicated the 4 to 7 year old range, 20% indicated the 7 to 10 year old range, and 30% indicated “other,” which indicated another age other than the groups listed in the questionnaire.
In the category of “1st interaction/observation with persons of different race,” which describes the interviewee’s first cognitively aware interaction or observation of someone else’s interaction with an individual who was of a different race or ethnicity than the participants’ own, such as, Arabic, Caucasian, African American, or Jewish. Within this category, 50% indicated the 4 to 7 year old range, 10% for the 7 to 10 year old range, 20% for the 10 to 13 year old range, and 20% indicated “other,” which indicated another age other than the groups listed in the questionnaire.

For the category “1st interaction/observation with persons who are disabled” which describes the interviewee’s first cognitively aware interaction or observation of someone else’s interaction with an individual who was disabled in a way that is either mentally or physically
handicapped. Of this category, 50% indicated the 4 to 7 year old range, 20%, for the 7 to 10 year old range, 20% for the 10 to 13 year old range and 10% for the 13 to 15 year old range.

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<thead>
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<th>1st interaction/observation with persons who are disabled</th>
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<td>4 to 7</td>
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<td>10%</td>
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*Figure 8*

For the category “Formed set opinion of different sexual orientation” which asks the participants to describe at what age they formed the opinion they currently hold now as an adult towards persons of a different sexual orientation that what they themselves ascribe to. Of this category, 10% of the respondents indicated the 4 to 7 year old range, 40% indicated the 10 to 13 year old range, 30% indicated the 15 to 18 year old range and 20% indicated “other” which indicated another age other than the groups listed in the questionnaire.

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<th>Formed set opinion of different sexual orientation</th>
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<td>4 to 7</td>
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<td>20%</td>
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*Figure 9*

For the category of “Formed set opinion of different genders” which asks the participants to describe at what age they formed the opinion they currently hold now as an adult towards persons of a different genders than what they themselves are classified as. Of this category 10%
indicated the 4 to 7 year old range, 10% indicated the 7 to 10 year old range, 40% indicated the 10 to 13 year old range, 20% indicated the 13 to 15 year old range, 10% indicated the “other,” which indicated another age other than the groups listed in the questionnaire, and 10% indicated N/A, which was indicated as they currently do not have a solidified opinion as of yet.

**Figure 10**

For the category of “Formed set opinion of different race” which asks the participants to describe at what age they formed the opinion they currently hold now as an adult towards persons of a different race or ethnicity that what they themselves ascribe to. Of this category, 20% indicated the 4 to 7 year old range, 10% indicated the 7 to 10 year old range, 30% indicated the 10 to 13 year old range, 10% indicated the 13 to 15 year old range, 20% indicated the 15 to 18 year range, and 10% indicated “other,” which indicated another age other than the groups listed in the questionnaire.

**Figure 11**
For the category of “Formed set opinion of persons who are disabled” which asked the participants at what age they formed the opinion that they currently hold now, about persons who are mentally or physically disabled. Of this category 30% indicated the 4 to 7 year old range, 10% indicated the 7 to 10 year old range, 20% indicated the 13 to 15 year old range, 10% indicated the 15 to 18 year old range and 30% indicated “other,” which indicated another age other than the groups listed in the questionnaire.

For the category of “Sexual orientation treated differently” which asked the participants at what age they first realized or noticed that persons of a different sexual preference were treated differently than the group they ascribe to. Of this category, 10% of the participants indicated the 4 to 7 year old range, 30% indicated the 7 to 10 year old range, 10% indicated the 10 to 13 year old range, 10% indicated the 13 to 15 year old range, 10% indicated the 15 to 18 year old range, 20% indicated the category of “other,” which indicated another age than the groups listed in the questionnaire, and 10% indicated N/A, which indicated that they do not perceive a difference in treatment.
For the category of “Genders treated differently” which asked the participants at what age they first realized or noticed that persons of a different genders were treated differently than the group they ascribe to. Of this category 40% indicated the 4 to 7 year old range, 10% indicated the 7 to 10 year old range, 10% indicated the 13 to 15 year old range, 10% indicated the 15 to 18 year old range, 20% indicated the category of “other”, which indicated another age than the groups listed in the questionnaire,” and 10% indicated N/A, which indicated that they do not perceive a difference in treatment.

For the category of “Race treated differently” which asked the participants at what age they first realized or noticed that persons of a different gender were treated differently than the group they ascribe to. Of this category 30% indicated the 4 to 7 year old range, 20% indicated...
the 7 to 10 year old range, 30% indicated the 10 to 13 year old range, 10% indicated the 13 to 15 year old range, and 10% indicated the 15 to 18 year old range.

**Figure 15**

For the category of “Disabled persons treated differently” which asked the participants at what age they first realized or noticed that persons with mental or physical disabilities were treated differently than persons who do not have disabilities, of this category 10% indicated the 4 to 7 year old range, 20% indicated the 7 to 10 year old range, 40% indicated the 10 to 13 year old range, 10% indicated the 13 to 15 year old range, 10% indicated the category of “other”, and 10% indicated N/A.

**Figure 16**

For the category of “1st Heard/used derogatory language for different sexual orientation” which asked the participants at what age they recall first hearing or using themselves, derogatory language against a person who did not ascribe to the heterosexual normative. Of this category,
40% indicated the 4 to 7-year-old range, 10% indicated the 10 to 13 year old range, 30% indicated the 13 to 15 year old range, and 20% indicated the “other,” which indicated another age than the groups listed in the questionnaire, category.

**Figure 17**

For the category “1st Heard/used derogatory language for different genders” which asked the participants at what age they recall first hearing or using themselves, derogatory language against a person who was not of the same gender as themselves. Of this category 20% indicated the 4 to 7 year old range, 40% indicated the 10 to 13 year old range, 20% indicated the 13 to 15 year old range, 10% indicated the 15 to 18 year old range, and 10% indicated the category of “other” which indicated another age than the groups listed in the questionnaire.

**Figure 18**

For the category of “1st Heard/used derogatory language for different races” which asked the participants at what age they recall first hearing or using themselves, derogatory language
against a person who was not of the same race or ethnicity as themselves. Of this category 20% indicated the 4 to 7 year old range, 30% indicated the 7 to 10 year old range, 30% indicated the 10 to 13 year old range, and 20% indicated the category of “other” which indicated another age than the groups listed in the questionnaire.

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<th>Heard/used derogatory language for different races</th>
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<td>4 to 7</td>
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<tr>
<td>20%</td>
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*Figure 19*

For the category of “1st Heard/used derogatory language for disabled persons” which asked the participants at what age they recall first hearing or using themselves, derogatory language against a person who had mental or physical disabilities. Of this category 30% indicated the 4 to 7 year old range, 30% indicated the 7 to 10 year old range, 10% indicated the 10 to 13 year old range, 20% indicated the 13 to 15 year old range, and 10% indicated the “other” which indicated another age than the groups listed in the questionnaire.

<table>
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<th>Heard/used derogatory language for disabled persons</th>
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<td>4 to 7</td>
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<td>10%</td>
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*Figure 20*
For last portion of the study where numerical findings were analyzed, the participants were asked:

“From whom you first heard a derogatory comment or saw a derogatory action against persons of different sexual orientations” which asks whether the first time a derogatory comment or action was recalled being made by a family member, a peer, in a public setting by someone unknown to them, or by a professional like a teacher, coach or religious leader. Of this category 50% indicated they had heard it from peers, 40% indicated the family, and 10% indicated that it came from a professional such as a teacher.

![Pie chart showing percentages of responses]

Figure 21

In the category “from whom you first heard a derogatory comment or saw a derogatory action against persons of different races” which asks whether the first time a derogatory comment or action was recalled being made was by a family member, a peer, in a public setting by someone unknown to them, or by a professional like a teacher, coach or religious leader. Of this category 20% indicated peers, 70% indicated the family, and 10% was in the public arena by an unknown person.
For the category “from whom you first heard a derogatory comment or saw a derogatory action against persons of different genders” which asks whether the first time a derogatory comment or action was recalled being made was by a family member, a peer, in a public setting by someone unknown to them, or by a professional like a teacher, coach or religious leader. Of this category 30% indicated peers, 60% indicated family, and 10% indicated professionals.

In the category “from whom you first heard a derogatory comment or saw a derogatory action against persons who are disabled” which asks whether the first time a derogatory comment or action was recalled being made was by a family member, a peer, in a public setting by someone unknown to them, or by a professional like a teacher, coach or religious leader. Of this category 60% indicated from peers, 20% indicated the family, and 20% indicated the public by persons unknown.
Figure 24

Mental/physically disabled

- Peer: 60%
- Family: 20%
- Professional: 20%
- Public-unknown: 20%
Results: Reoccurring Themes and Environmental Context

When the audiotaped interviews were analyzed for reoccurring themes, three prevalent arenas where derogatory language took place presented themselves. They have been classified as the following. “Public Forum” which is indicative of any type of language or behavior that was experienced in a public setting such as on a public street, within hospitals, museums, schools, or public activities such as, parades, festivals, or rallies.

Figure 25

Of the public forum category, 67% of our participants experienced language dealing with anything handicapped related within this sector, most of the body language and tone of voice during the interviews indicated that the experience was not negative and most indicated it was experienced within parking lots, public restrooms, or hospitals to denote handicap friendly facilities with the exception of an instance of isolating behavior within the school system:

Q: Can you describe to me how old you were and the circumstances surrounding the first time you noticed persons with physical or mental disabilities were treated differently?
A: Um yeah, I think I was in 4th or 5th grade, so I was like 10, and ah, it was just that all the classes were separate, so that was like the first thing I noticed, but then also whenever
they went to, or involved them in stuff with us, or put the classes together, they had to keep them separate even in like the assemblies in case someone in one of those classes had an outburst, because, um everyone would laugh or make jokes about them. So when they brought them together it didn’t go so well.

Q: You just graduated last year correct? So this is a relatively recent practice?

A: Yeah. (19-year-old Caucasian male. Interview #1A)

While it is necessary to help maintain a calming situation with an exit strategy for persons with disabilities in these types of situations, nonetheless, the observed separateness of the group who are “different" creates an opportunity to create targets for negative marginalization practices.

27% of our participants experienced anything related to the LGB community within this sector, most of the male respondents indicated comments such as; “you’re a fag” from peers in school or at school sporting events to one another at a pre-adolescent age, and while a few respondents admitted they were not sure what some of the labels meant, they knew them to be derogatory. The women in the study were the witnesses to these types of comments but none of them indicated using this type of language even in jest, while only 6% of our participants experienced anything racist related within this sector, but the majority of these encounters were negative:

Q: Can you recall when you first formed a set opinion about persons of a different race?

A: About the same time as the other category, um, about 35 or 40 years old. Even when the race riots were going on in Detroit, I said well, I suppose they got their own point of view, I mean they have been mistreated, I mean ya know, nothing is ever just black and white. You’re not going to run into too many people that have the same views as I do, we
need to see what we can do to correct the wrong we did. (82-year-old Caucasian woman, interview #1D)

This woman, went on to explain that the majority of her life persons of different ethnicities kept to themselves and did not frequent the same areas, public or private as she grew up during the time era of segregation, so she did not have a great deal of exposure until later on in her life. But the minimal exposure that did occur was when she encountered them in a public place and derogatory comments were made in front of her, to the person or persons interacting with the person of a different race. This happened in her presence at her farm stand that her family ran when she was very young. A complete stranger chastised her stepmother for speaking with what the stranger considered to be a black child:

We had a stepmother on the farm that sold berries and potatoes and whatnot, and she was waiting on this woman in a car when my brother Bernie, which was the oldest of us, walked up to the car and asked our stepmom a question that he had, and she answered him and he went back to work, and that woman said to her “why in the world would you ever let that black child talk to you like that?” Because Bernie was very dark, we’re part Native American, us three kids, and my two brothers had the black hair and the oldest one-Bernie, who was being talked about, was darker skinned than the rest of us, but he wasn’t that dark at all, but we were out in the sun all day long. But my step-mother went on to say he is my stepson and he is not colored he is part Indian.

This instance relates back to the fear of stepping outside of ones socialized boundaries, instead of the stepmother chastising the unknown woman for commenting on something that is inappropriate and rude, excuses were made to circumvent this unknown woman’s attempt to marginalize someone who was perceived as different. The interviewee made her feelings very
clear that she did not feel it was right that anyone should be treated differently or less than her or anyone else, because they were somehow perceived as different. From this episode of the vicarious targeting that her brother experienced, formed a lasting impression on her that is still vivid in her mind almost 75 years later and is attributed to how she feels about racism in general as being wrong and unnecessary today.

For the forum of “As depicted within the media” which is indicative of any type of language or behavior that was experienced through media such as printed materials; pamphlets, magazines, books, newspapers, and also includes any kind of broadcasting such as; television, movies, documentaries, radio, and social media like Twitter, Facebook, My Space or any kind of persuasion centered Internet websites.

![Figure 26](image)

Within this category, 50% of our participants experienced racism through these channels; one interviewee discussed the first experience of the swastika symbol used in a racist representation when he was very young:

Q: The first symbol I am going to show you is the swastika, do you remember the very first time you recall seeing this symbol and how old you were?
A: Probably first grade.

Q: So about four or five years old?

A: I have no clue, I just remember grade-wise.

Q: Ok, so first grade is about five or six years old, do you remember where you saw it?

A: The history channel, always blame the history channel. I had absolutely no context to what it represented at the time, I just saw the symbol and it kinda sticks out if ya know what I mean.

Q: Ok, so as an adult now, do you have an opinion to what this symbol represents now, on the appropriate scale, where would you place this symbol?

A: It depends on how it is used, if it is used as its common use as a Nazi swastika, then it would be a 2 or a 1, but if it is used like people use it in Jainism then it is appropriate.

Q: Jainism? I don’t know what this is. Can you elaborate?

A: It’s a very unorthodox religion that is almost hippie –like, the total opposite of what the skinheads use it for. (21-year-old Caucasian male. Interview 1F).

This discussion directly relates back to Duncan’s (1968) idea that a symbol is meaningless until a group or culture assign it meaning by tying an experience and event to that symbol. Within the white supremacy culture, the swastika is a symbol of purity and power, to those outside of that culture it is viewed by some as a symbol of hate and violence, but some cultures have adopted and transformed the meaning of the symbol to something entirely different as the participant indicated when he mentioned Jainism.

Within the same forum 42% of the participants experienced anything related to the LGBT community through his channel, most through television shows or coverage of gay pride parades.
on the news, and 8% of our participants experienced anything related to sexism through these channels as well.

The “Within the family unit” forum, which is indicative of any type of language or behavior that was, experienced by, or within the influence of, family members, friends of family members, or within a home setting. This is also includes assigned roles within the family units.

![Pie chart showing within family unit experiences](image)

**Figure 27**

Within this category, 69% of our participants experienced sexism through this influence:

Q: Can remember when you first experienced gender stereotyping like is depicted is this cartoon?

A: Yeah, the boys (her brothers) and my dad used to tell jokes when I was very little about me and my mom getting busy with the dishes or laying around all day, so around six or seven years old, so I was very young. In my house it was a joke, but I was so young I didn’t understand that at the time. (35-year-old, Caucasian woman. Interview, #1H1).

While as a woman now, this respondent understands her male family members meant this type of language as a joke, she did go on to mention that the chore assignments within her household were very regimented, the boys did the yard work and anything mechanically or building related,
and her and her mother took care of the laundry and cleaning. She went on to explain that even as an adult today, she will still call her brothers or father to do the yard work or anything handyman related at her home.

23% experienced racism through this influence, with most of this type of influence was the use of a derogatory name when speaking of a specific person or race they belonged to, and 8% experienced anything related to the LGBT community through this influence:

Q: Do you recall your first experience with a person of a different sexual orientation?
A: Yeah, it was at a family party, ahhh, one of my mom’s cousins, and people made comments.

Q: Was it a positive or a negative experience for you?
A: I don’t think it was negative experience, I just didn’t understand why other people had to talk about it so much, instead of just saying “oh, he’s gay he likes boys” they had to whisper about it like it was bad.

Q: So it was the way it was framed for you?
A: Yeah

This type of conditioning directly corresponds with social cognition theory and accommodation theory and some of their principles in which the way we learn is through not only direct observation of verbal and non-verbal indicators, but reinforcement of those observations.
Conclusion

This study reveals three important findings related to the research question. First, individuals respond differently to the many different symbols around them and this response develops during preschool and elementary school. An example of this would be the Nazi Swastika playing double duty as a symbol of hate as well as a symbol of peace and love as with Jainism. This can be related to Duncan’s idea that if we as a culture understand that a symbol is meaningless until we as a group or culture assign it meaning by showing relatedness of a specific phenomenon or event to that symbol, it may be assumed that we can recondition already assigned symbols that are currently perceived as negative, into a positive stance, by retying the symbol related to that group to a contextualized experience that would reflect something to the group/experience that is either positive or negative, which ever avenue we are trying to achieve. I believe this could be done within the school systems where the majority of the participants indicated their first understanding of what these symbols denote became evident.

A second important finding is that biased language usage and behavior as experienced by the participants was first encountered within the home by family members, or by their peers within the school systems at very early ages. When I started reading about biased language usage and bullying I was prepared to find that the earlier this type of language was experienced, the more ingrained it would become later in life, and therefore much harder to circumvent because of the inoculation theory perspective. This does not seem to be the case with these participants. I perceived from the tone of voice, body language, and responses to the questions of the participants, that what I initially thought would be ingrained and possibly irreversible behavior to be the opposite of this. The earlier the behavior was encountered, the less likely the individuals in
this study said they believed this language and behavior to be appropriate or that they engage in derogatory language or behavior usage.

The third important finding that became evident was that as each generation grouping that was interviewed, there was a very noticeable shift in what was “considered” as biased, derogatory and inappropriate language or behavior. I found that the youngest of the study participants, the 19 to 33 year olds, were the most tolerant and less discriminatory in their nature from their responses about what was considered appropriate language or behavior. When examples were given to describe what I meant by derogatory naming to the respondents within this age category, they became visibly agitated and uncomfortable with even the mention of the examples. This could be from some of the anti-bullying measures that have been put into place within the school systems, or this could be from the media explosion that has occurred within this generation’s upbringing. The type of persuasion seen in movies and television shows within the last 15 years, depicting more diversity and painting individuals who use bullying and prejudicial tactics in a negative context, thus making discriminatory practices less acceptable. This may have contributed to this shift not only in arenas like the workplace and schools, but in public forums as well, as this study shows a decrease in negative targeting in this area as well. On top of these factors, something that can be videotaped and exposed to the world via the Internet is an all too real and embarrassing factor in behavior modification that is a very useful tool which is utilized within this generation like no other, Youtube being an explosive phenomenon.

The findings in this study while positive, raise some questions that need to be answered as to their cause. My first line of inquiry would be, why is the 13 to 15 year old category the age group that is ingraining biased language and behavior instead of the 4 to 7 year old category?
This is a direct contradiction to the inoculation theory as explained by Eadie in 2009. Could it be possible that unless a direct personal experience is tied to the language or action it has no context in which to stick? This needs to be further investigated.

The depiction below is a visual representation of how this exposure/context theory may develop.

4 to 7 - no context in which comment or action is tied to derogatory comment.

7 to 13 - repeated exposure to derogatory language and behavior starts to shape opinions.

13 to 18 - situation or context in which to reinforce or refute prior comments or behavior.

Another area that needs further inquiry is what amount of embodied cognition through subliminal messaging usage can be used to produce positive self-stereotyping within the school environments to promote behavior change? Possibly a study that could be activated within the schools system is to have persons who are perceived as “popular,” “athletic,” or “top honors,” perform as mentors to persons that are being targeted as “other” than, to help enable this shift might be looked at.

The last area that I believe needs more attention is how overtly blatant derogatory communication practices that were experienced as little as two decades ago have shifted to a more insidious and covert form of communication and what types of channels are being used to spread this covert type of marginalization. Hate groups have become incredibly savvy with the
promotion of music, clothing lines, Internet sights and the more familiar channel of published material to promote conditioned hate and bias. While I am not for the censorship of a persons right to think, read, and express their own ideals, I do believe that sights that promote violence and hate through violent means needs some attention. If not by censorship via government agencies, than by the study of these channels in an effort to form defensive alternatives before a catastrophe happens, when these same public agencies are tasked with the after effects of what discriminatory practices can ensue-such as school shootings.
Limitations

Although this study had participants representing a wide spectrum of ages, it was small in sample size with only ten respondents. But in an interesting turn of events, this study showed with this particular group that the younger a person was exposed to derogatory language or behavior, the less effective it was in producing marginalizing behavior later in life. While it could be speculated that the results would be very different if the study was done in a different geographical region of the United States where the culture is somewhat less liberal than an area surrounded by more than a few universities, with a very diverse demographic make up. This occurrence could also be because of the role in which media and social networking have opened up the world view to the audiences, meaning that diversity is more prevalently on display so it has become less sensational because it is now a familiar aspect when we log on the computer or turn on the television. The results may have also been very different if we had a larger sample size with more diverse demographics such as male to female ratios, gender and sexual preference differences. We only had two African American respondents, both of which grew up in somewhat privileged circumstances, with one who grew up in Canada predominantly within a Military environment where the majority of the service members came from very diverse backgrounds, so her conditioning was very different than what would have been experienced within the United States. If we were to illicit different demographics in different socioeconomic climes, the results I believe would be very different.

Another limitation that became evident while conducting the study was that in the older respondents, the 47 to 82 year-old range, had a more difficult time recalling a specific situation that was considered by today’s standards as derogatory. The changing cultural norms from the time of recall and what is considered politically correct now made the rephrasing of the questions
necessary. This age group also had very little exposure to any diverse groups of people until much later in life, as the segregation of the population was still prevalent in the areas and socioeconomic climates where they grew up. This instance could very well have changed the results about when the recall experiencing things if the language of the questions are changed to reflect more accurately for each specific age group range to reflect the societal norm for the time period when they first experienced it.
Works Cited


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