Can Narrative Fiction Reduce Prejudice Toward the Mentally Ill?

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Abstract

This paper proposes an experimental study that will examine narrative fiction’s ability to reduce implicit and explicit prejudice toward the mentally ill through spontaneous perspective-taking. The study will measure participants’ (n=100) opinions toward the mentally ill, contact with the mentally ill, and disposition to perspective-taking. It will then manipulate when and if the fictional narrative reveals the protagonist to be mentally ill. The character will be revealed as mentally ill either at the outset of the narrative, at the end of the narrative, or not at all. The study will then measure participants’ implicit and explicit prejudice and the extent they took the perspective of the protagonist while reading the narrative. It is hypothesized that the narrative will more effectively reduce prejudice toward the mentally ill if the protagonist is revealed to be mentally ill at the end of the narrative compared to at the outset because participants will be more able to take the perspective of the protagonist if they do not know he is mentally ill. Also, the narrative will more effectively reduce prejudice if the protagonist is revealed to be mentally ill compared to if the protagonist is not revealed to be mentally ill because participants in both reveal conditions will be able to take the perspective of the mentally ill protagonist to some extent. This study may provide insight into how narrative fiction can best be utilized to reduce prejudice toward marginalized groups.

Key words: narrative fiction, perspective-taking, implicit prejudice, explicit prejudice, mentally ill, schizophrenia
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Introduction

The mentally ill often experience stereotyping, prejudice, and discrimination. This can lead to lower levels of employment, inferior health care, poor social treatment, and low self-esteem (Overton & Medina, 2008). To many, the mentally ill are an example of an outgroup. An outgroup is any group that an individual does consider to be their own group (Tajfel, Billig, Bundy, & Flament, 1971). In general, negative attitudes and prejudices toward outgroup members is well documented, whether the social group is defined by its race, ethnicity, age, sexuality, ability, habits, school, or team (Dovidio, Kawakami, & Gaertner, 2002; Shih, Wang, Trahan, & Stotzer, 2009; Galinsky & Ku, 2004; Kaufman and Libby, 2012; Clore & Jeffrey, 1972; Batson et. al, 1997; Tarrant, Calitri, & Weston, 2012). In light of this, perspective-taking has been utilized as a method to reduce these negative attitudes and prejudice toward outgroups. Perspective-taking, actively considering others’ thoughts and experiences, has been found to positively shift evaluations, reduce implicit and explicit prejudice, and increase helping behavior toward outgroups (Batson, Early, & Salvarani, 1997; Batson et. al, 1997; Todd, Bodenhausen, Richeson, & Galinsky, 2011; Batson, Chang, Orr, & Rowland, 2002; Dovidio, Kawakami, & Gaertner, 2002; Shi et. al, 2009; Galinsky & Ku, 2004). Explicit prejudice is self-reported while implicit prejudice is unconscious and often involuntary (Todd & Galinsky, 2014). Narrative fiction simulates social experiences, and in consequence, is able to spontaneously induce perspective-taking (Mar & Oatley, 2008). Due to this, narrative fiction involving an outgroup member has been found to reduce both explicit and implicit prejudices toward the outgroup (Johnson, Jasper, Griffin, & Huffman, 2013). The present study examines narrative fiction’s ability to reduce implicit and explicit prejudice toward the mentally ill. Specifically, it will
investigate whether or not the reader’s ability to perspective-take is affected by when the protagonist is identified as mentally ill during the course of the narrative.

**Stereotypes, Prejudice, and Discrimination**

According to Corrigan, Green, Lundin, Kubiak, and Penn (2001), a stereotype is a collectively agreed-upon idea about a certain social group. For example, “The mentally ill are dangerous.” By utilizing stereotypes, people are able to quickly and efficiently form impressions and expectations about how an individual who is a member of the stereotyped group will behave in certain contexts. If an individual agrees with a stereotype, a prejudice is activated. A prejudice is the affective and cognitive response to negative stereotypes. For example, “The mentally ill are dangerous so I am afraid of them.” Acting on these prejudices often leads to discrimination. For example, “I am not going to talk to or approach mentally ill people because they are dangerous.”

**Perspective-taking**

**Benefits of Perspective-taking**

Perspective-taking is defined as the active consideration of others’ mental states. Intergroup perspective-taking is actively considering the mental state of an outgroup member (Todd & Galinsky, 2014). Research has found intergroup perspective-taking to positively affect explicit evaluations toward outgroups. Explicit evaluations are important to consider because they have been found to predict intergroup behavior. For example, participants’ self-reported attitudes toward blacks predicted biases in their verbal behavior toward black confederates compared to white confederates. Participants who reported more positive explicit attitudes presented friendlier verbal behavior toward black confederates (Dovidio, Kawakami, & Gaertner,
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2002). The most documented effect of perspective-taking is positive changes in explicit evaluations of outgroups. Perspective-taking has been found to increase positive evaluations of various social groups, such as African Americans (Dovidio, ten Vergert, Stewart, & Gaertner, 2004), Asian Americans (Shih et. al, 2009), the elderly (Galinsky & Ku, 2004), drug addicts, the homeless, and convicted murderers (Batson et. al, 1997). For example, Shih et. al (2009) found that perspective-taking worked to increase positive attitudes toward Asian Americans. In experiment 1, participants watched a three minute video clip of an Asian American woman talking to her mother about how difficult it is to grow up in America while being held to traditional Asian standards. Participants in the perspective-taking condition were told, “While you are watching the following video clip, please imagine yourself in the position of the main character. As you watch it, try to imagine how June [the main character] feels about what is happening. Try to imagine how it has affected her life and how she feels as a result.” Those in the control condition were told, “As you watch it [the video clip], try to imagine what a newspaper reviewer might think of the clip. Try to imagine what sorts of things a newspaper reviewer would choose to write about and how he or she would say those things.” After watching the clip, participants wrote a paragraph about their thoughts on the movie. Participants were then given identical college applications from either an Asian American student or a European American student and asked to complete a questionnaire evaluating the student. The experimenters found that participants in the perspective-taking condition reported a more positive evaluation of the Asian American applicant compared to the control group. This suggests that taking the perspective of an outgroup member can lead to more positive evaluations of other members of that group. Dovidio, et. al, (2004), Batson, Chang, Orr, and Rowland (2002), and
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Galinsky and Ku (2004) also found that perspective-taking increases positive explicit evaluations toward the entire outgroup. These studies will be discussed below in more detail.

Perspective-taking has also been found to increase positive implicit evaluations of outgroup members. Implicit evaluations are important to consider because implicit evaluations of outgroups have been shown to predict both explicit evaluations and future intergroup behavior (Cameron, Brown-Iannuzzi, & Payne, 2012). For example, in one study, explicit racial attitudes were found to predict verbal behavior toward black confederates versus white confederates. Explicit prejudice did not, however, predict nonverbal behavior. Rather, implicit attitudes predicted the friendliness of nonverbal behavior toward black confederates (Dovidio, Kawakami, & Gaertner, 2002). Perspective-taking has been found to reduce implicit racial bias (Todd, Richeson, & Galinsky, 2011; Todd & Burgmer, 2013). For example, in experiment 1, participants watched a video that depicted acts of discrimination toward a black man. Participants were asked to either adopt the black man’s perspective or to remain objective while watching the video. Participants then completed a test that measured implicit racial bias. The experimenters found that those in the perspective-taking condition had significantly weaker pro-white biases compared to those in the objective condition. In experiment 2, discrimination was not made salient. Rather than showing a video depicting discrimination, participants were instead provided a photograph of a black man and were asked to write an essay about a day in his life. Participants were asked to either take the man’s perspective or remain objective while writing the essay. In this experiment, the findings in experiment 1 were replicated. Participants in the perspective-taking condition had a weaker pro-white biases compared to those in the objective condition (Todd, Richeson, & Galinsky, 2011, Experiment 1 & 2).
Perspective-taking has also been found to change actual behavior. For example, Todd, Richeson, and Galinsky (2011, Experiment 4) had participants sit in front of a screen with a joystick. The joystick was used to measure approach-oriented (move joystick toward the self) or avoid-oriented (move joystick away from self) reactions to pictures of outgroup members on the computer screen. They found that participants in the perspective-taking condition exhibited faster approach and slower avoidance in response to pictures of blacks compared to the objective condition. Participants were also asked to set up chairs in another room for themselves and a research assistant to prepare for the next task. The assistant was named either “Tyrone” (a “black-sounding” name) or “Jake” (a “white-sounding” name). Participants in the perspective-taking condition sat closer to Tyrone than participants in the control condition, but the seating distance from Jake was unaffected by perspective-taking. These findings suggest that taking the perspective of an outgroup member can strengthen approach-oriented reactions and weaken avoidance reactions toward the outgroup as a whole as well as toward other individual members of the outgroup.

Perspective-taking can also increase helping behavior toward outgroup members. For example, Batson, Chang, Orr, and Rowland (2002) found that participants who took the perspective of a heroin addict were more likely to donate to an Addiction Counseling Service compared to those asked to remain objective. Also, Shih et. al (2009, Experiment 2) found that participants who took the perspective of an Asian American were more likely to help an Asian confederate compared to those who remained objective. In the study, on the participants’ way out of the building a confederate walked in front of the participant, dropped their keys, and kept walking, pretending they did not notice. The study found that in the control condition,
participants helped the Caucasian confederate more than Asian confederate. In the perspective-taking condition, however, participants helped Caucasian and Asian confederates similarly. This demonstrates that taking the perspective of an outgroup member can also increase helping behavior toward other members of the outgroup.

Perspective-taking has also been found to inhibit stereotype maintenance (Todd, Galinsky, & Bodenhausen, 2012), discrimination denial, and stereotypic explanatory bias (Todd, Bodenhausen, & Galinsky, 2012). Stereotype explanatory bias occurs when individuals use dispositional factors, such as character, personality, or inherent skills, to explain stereotype-consistent behavior (such as a black man acting hostile). They use non-dispositional factors, such as situational factors out of the individual’s control, to explain stereotype-inconsistent behavior (such as a black man exhibiting kindness) (Todd, Bodenhausen, & Galinsky, 2012, Experiment 3). The details of these studies are discusses below.

Several studies suggest that the effects of perspective-taking continue to function beyond the experimental session. For example, Batson et. al (1997) found increased positive attitudes toward convicted murderers remained one to two weeks after the experimental session. Also, Clore and Jeffrey (1972) found perspective-takers’ increased positivity toward the disabled was still present four months later. The research on how long these effects last, however, is limited, and warrants further research.

**Underlying Mechanisms**

Several possible mechanisms underlying these effects have been proposed. Affective mechanisms explaining these effects are based on reactive and parallel empathy. Parallel empathy is feeling *as* another, experiencing the same emotion as the target. Several studies
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Manipulate perspective-taking by presenting video clips of a target member of an outgroup experiencing discrimination. The target member is the member of the outgroup that the participant either takes the perspective of or remain objective toward. A reasonable inference is that the target member feels anger or resentment toward those discriminating against him or her. Research has found that perspective-taking increases the extent to which the participant experiences feelings of anger and resentment toward the perpetrators, and these feelings underlie perspective-taking’s positive effect on explicit attitudes toward the outgroup (Dovidio, et. al, 2004). For example, white participants were presented a video of discriminatory acts toward a black man. Before watching the video, participants were either instructed to imagine how the black person felt and how it affected his life or to be as objective as possible while watching the video. The control condition was not given any instructions. Dovidio, et. al (2004) found that participants asked to imagine how the black man felt experienced a greater reduction of prejudice toward blacks. Also, feelings associated with recognizing injustice, such as anger, annoyance, or alarm, mediated the reduction of prejudice. A mediator variable explains the relationship between the independent variable, the observation set method (imaginative instruction, objective instruction, or no instruction), and the dependent variable, attitudes toward blacks. So, the extent varying instructions predicted attitudes toward blacks was dependent on participants’ feelings of injustice.

Reactive empathy is feeling for another, a reflective feeling of concern for the target. Batson et. al (1997) found that taking the perspective of a woman with AIDs increased feelings of empathetic concern, and these feelings were found to underly perspective-taking's positive effect on explicit attitudes toward the outgroup. Participants listened to a broadcast interview of a
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young woman named Julie who was HIV positive. Before listening to the interview, participants in the low empathy condition were asked to “Take an objective perspective toward what is described.” In the high-empathy condition, participants were asked to “Imagine how the woman who is interviewed feels about what has happened and how it affected her life. Try to feel the full impact of what this woman has been through and how she feels as a result.” The experimenters found that participants asked to imagine Julie’s feelings while listening to the interview experienced more empathetic concern toward Julie and self-reported more positive attitudes toward women with AIDS and people with AIDS regardless of whether or not Julia was depicted as responsible for contracting AIDS. Batson et. al (1997) replicated this experiment with a homeless man and a convicted murderer, and found that higher levels of empathic concern led to more positive attitudes toward both marginalized groups.

A proposed cognitive mechanism thought to underly perspective-taking is a shift in attributional thinking. Attributional thinking is the process of inferring the cause or explanation of a behavior. Dispositional attributions use an individual’s personality, character, or inherent abilities to explain the behavior. Non-dispositional attributions use situational and circumstantial factors beyond the individual’s control to explain the behavior. Stereotype explanatory bias occurs when individuals use dispositional factors to explain stereotype-consistent behaviors and non-dispositional factors to explain stereotype-inconsistent behaviors (Todd, Galinsky, & Bodenhausen 2012). This process works to perpetuate stereotypes, and this maintenance of stereotypes can be very damaging to marginalized groups, leading to prejudice and discrimination (Corrigan 2004). Research has found that following perspective-taking, participants shift toward stronger non-dispositional attributions and weaker dispositional
attributions to explain the target’s behavior. For example, Vescio, Sechrist, and Paolucci (2003) found that when explaining why a black student would have difficulty adjusting to college, perspective-taking participants assigned greater importance to non-dispositional attributes compared to dispositional factors. Participants listened to an interview where Jamal Johnson, an African American student at the University of Pennsylvania, described his experience adjusting to college. Before listening to the interview, participants were instructed to either imagine what Jamel was feeling or to take an objective stance toward the interview. The study then assigned participants to one of two interviews, a stereotype confirming interview and stereotype disconfirming interview. The stereotype confirming interview introduced Jamel as a first-generation college student who was the star of his high school football team. The stereotype disconfirming interview introduced Jamel as a first-generation college student who had a 4.0 GPA in high school and was attending the University of Pennsylvania on a full scholarship. In both interviews, Jamal went on to discuss group-related insecurities, such as fears of performing poorly and confirming negative stereotypes, his roommates’ racist banter, and the difficulty he has had trying to date white females. After listening to the interview, participants were asked to rate the relative importance of situational causal and dispositional factors for each issue Jamel raised in the interview. The experimenters then measured participants’ stereotype endorsements. Participants were provided positive stereotypes of African Americans (athletic and streetwise), negative stereotypes (hostile and aggressive), positive counter-stereotypes (hardworking and intelligent) and negative counter-stereotypes (humorless and insecure), and were asked to estimate the average standing of African Americans along each dimension. Experimenters then measured participants’ intergroup attitudes. Overall, the study found that participants who
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listened to the stereotype disconfirming interview endorsed less stereotypic perceptions of African Americans compared to those who listened to the stereotype confirming interview. This did not, however, influence intergroup attitudes. Perspective-taking influenced both stereotype endorsement and intergroup attitudes. Participants asked to take Jamel’s perspective ascribed greater importance to situational factors and reported more positive attitudes toward African Americans. This study demonstrates how perspective-taking can both shift attributional thinking and increase positive attitudes toward the target’s group.

Also, Todd, Bodenhausen, and Galinsky (2012) found that participants asked to take the perspective of a young black man recalled more stereotype inconsistent behaviors (Experiment 1) and spontaneously provided dispositional explanations for the stereotype-inconsistent behaviors compared to participants asked to remain objective (Experiment 2). In experiment 1, participants viewed a photograph of the man and were asked to either take his perspective or to remain objective while reading. They then read descriptions of the man’s behaviors. These descriptions included stereotype consistent (hostile) behaviors, such as swearing at a sale’s clerk, stereotype inconsistent (kind) behaviors, such as giving up his seat on a crowded subway, and stereotype irrelevant behaviors, such as eating a sandwich. Participants were later asked to recall as many behaviors as they could. Those asked to perspective-take recalled more stereotype inconsistent behaviors than those asked to remain objective. Experiment 2 found that participants in the objective condition spontaneously provided dispositional explanations for stereotype-consistent behavior and non-dispositional explanations for stereotype-inconsistent behaviors. Participants in the perspective-taking condition, however, provided dispositional explanations for
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stereotype-inconsistent behaviors. These experiments demonstrate how perspective-taking can shift attributional thinking and can work to undermine stereotype maintenance.

Another proposed cognitive mechanism underlying perspective-taking is self-outgroup merging. Self-outgroup merging is the overlap of mental representations of the outgroup and the self. Past research has found that perspective-taking increases the self-other overlap, where an individual’s thoughts about the target become more “self-like” and descriptions of the target resemble the self-representation of the perspective-taker. Perspective-taking implicitly activates the self-concept, and this self-concept is then applied to the target (Davis, Conklin, Smith, & Luce, 1996). Building on this, Todd and Burgmer (2013) propose an associative self-anchoring account of perspective-taking, where taking the perspective of an outgroup member works to strengthen associative links between the outgroup and the self. This strengthened self-outgroup association underlies how perspective-taking works to positively effect implicit evaluations of the outgroup.

This model is supported with evidence of an increased self-outgroup merging, where taking the perspective of an outgroup member strengthens implicit associations between the self and the outgroup (Todd, Bodenhausen, & Galinsky, 2012). In one study, experiment 1 found that taking the perspective of an African American while writing a narrative essay about the individual’s day led to a greater recognition of current discrimination against African Americans compared to remaining objective while writing the essay. Experiment 2 found that perspective-takers were more likely to endorse discrimination, rather than lack of motivation, as an explanation for group inequality compared to those who remained objective. This led to greater support for public policies designed to address group inequality and discrimination, such as
Affirmative Action. Experiment 3 examined the underlying mechanisms behind these findings. After either perspective-taking or remaining objective, participants completed an assessment that measured their automatic associations between the self and blacks versus their association between the self and whites. Participants then completed a questionnaire that measured the extent they believed blacks experience discrimination from fellow employees, from the police, from teaching assistants and faculty, from racially motivated glaring, and from racial motivated slurs. The experimenters found that perspective-takers exhibited stronger self-black association and reported greater perceptions of discrimination than those in the objective condition. The experimenters also found that the effect of perspective-taking on perceptions of discrimination was mediated by the self-black association. This study highlights that an association between the self and the target is one method in which perceptive-taking functions.

Todd and Burgmer’s (2013) model further specifies that perspective-taker’s self-association extends to the outgroup through an associative transfer process. Because most people positively self-associate (Yamaguchi et al., 2007), the associative transfer process creates a positive association with the outgroup (Todd & Burgmer, 2013). Todd and Burgmer (2013) and Galinsky and Ku (2004) found that individuals’ self-esteem moderated the benefits of perspective-taking, and negative associations with the self prevented the positive-association transfer. A moderator variable affects the strength of the relationship between the independent variable (perspective-taking) and the dependent variable (outgroup evaluations). In Galinsky and Ku’s (2004) study, participants were provided a picture of an old man reading a newspaper and were asked to write a narrative essay about a day in his life. Participants in the perspective-taking condition were instructed to take the perspective of the individual, where participants in the
control condition were given no further instruction. Participants then completed a questionnaire measuring their attitudes toward the elderly and filled out a questionnaire that measured their chronic self-esteem. The experimenters found that perspective-takers rated the elderly more positively than those who were not asked to perspective-take, and perspective-takers with higher self-esteem rated the elderly more positively than perspective-takers with low self-esteem.

In Todd and Burger’s (2013, Experiment 3) study, the experimenters first measured participants’ automatic self associations by measuring the extent individuals automatically associate the self (versus others) with positivity. Participants were then provided a photograph of a Turkish man and were instructed to write a narrative about his daily life. Participants were instructed to either take the man’s perspective or to remain objective. They subsequently completed the Intergroup Evaluation IAT, which assessed the extent participants automatically associated Turks versus Germans (all of the participants were German) with negativity versus positivity. This measure reflected participants’ pro-German bias, an automatic preference for Germans over Turks. The study found that perspective-takers exhibited a lower pro-German bias compared to those who were objective. Further analysis found, however, that perspective-taking only significantly reduced pro-German bias when participants had a positive automatic self-evaluation. For those with negative automatic self-evaluation, perspective-taking had a negligible effect on reducing pro-German biases. These studies suggest that the effect of perspective-taking on outgroup evaluations is moderated by the participants’ self-esteem.

This self-outgroup merging can also work in the other direction, where the self seems more like the outgroup. For example, Galinsky, Wang, and Ku (2008) found that participants reported feeling more attractive after taking a cheerleader’s perspective. Also, when they took the
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perspective of a professor, they reported feeling smarter and actually performed better on a analytic test. Also, Todd, Bodenhausen, and Galinsky’s (2012, Experiment 3) study on self-outgroup associations and awareness of group disparity, explained above, found that perspective-takers aligned their perceptions of discrimination with perceptions commonly held by African Americans.

Todd and Galinsky (2012) examine when which of the mechanisms described above operate, and conclude that empathy-based and attributional mechanisms operate when more target-relevant information is provided, such as the individual’s past experiences or background. When limited target-relevant information is provided, however, such as when only a photograph is provided, self-outgroup merging is more likely to operate. These conclusions, however, are tentative, and the authors maintain that more research on these underlying mechanisms is necessary in order to confirm these conclusions.

Limitations of Perspective-Taking

Certain individual differences can inhibit how effectively perspective-taking can benefit intergroup relations. For example, individuals who strongly identify with their ingroup exhibit a defensive reaction and increased prejudice toward the outgroup when asked to perspective-take. In a study where university students’ school identification was made salient, those who took the perspective of a student at another university attributed more negative traits to those students (the outgroup) compared to the control condition (Tarrant, Calitri, & Weston, 2012). Todd and Galinsky (2012) suggest that this is because individuals who strongly identify with the ingroup have difficulty establishing a connection with the outgroup, and this inhibits the positive associative transfer from the individual to the outgroup. Also, as discussed above, individuals
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with low self-esteem do not benefit from perspective-taking because they do not have a positive self-perception to transfer to the outgroup (Galinsky & Ku, 2004; Todd & Burgmer, 2013).

Finally, high-power individuals may be less likely to perspective-take because they are less dependent on others, they have increased demands on attention, and they have a more rigid self concept. Galinsky, Magee, Inesi, and Gruenfeld (2006) found that when participants were primed with power, they were less likely to spontaneously adopt others’ perspectives or detect others’ emotional states. For example, in experiment 1, participants were primed by being asked to recall and write about either an incident where they had power over someone (high power condition) or an incident where someone had power over them (low power condition). Participants then completed a resource-allocation task designed to reinforce the prime. Participants in the high power condition were asked to allocate lottery tickets, while participants in the low power condition were asked to estimate how many lottery tickets the other participant would give them. Then, participants were asked to draw an “E” on their forehead with a black marker. Participants in high power condition were more likely to draw self-oriented “E’s,” backwards and illegible from another person’s perspective. Participants in the low power condition, however, were more likely to draw other-oriented “E’s,” drawn as though another person would read it. This suggests that those with power are less likely to spontaneously take the perspectives of others.

The characteristics of the target must also be considered. When the outgroup target is extremely disliked or depicted as negatively stereotypic, perspective-taking can maintain stereotypes and negative attitudes toward the outgroup (Paluck, 2010; Skorinko & Sinclair, 2013). For example, Skorinko and Sinclair (2013) found that when participants took the perspective of an elderly person who was ambiguously stereotypic (an elderly man standing next
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to a newspaper stand), perspective-takers were more likely to write less stereotypical essays about the man compared to the control group. When the participants were provided a stereotypic photograph (an elderly man lying in a hospital bed), however, perspective-takers were more likely to write more stereotypic essays than the control group. The researchers suggest this is because when provided a stereotypic photograph, stereotypes are made salient. In consequence, the participants use stereotypes as a basis when surmising the experiences and feelings of the elderly man. Also, Todd and Galinsky (2012) propose that this negative stereotypic portrayal inhibits the individual’s ability to connect with the outgroup.

Long-standing intergroup conflict can also inhibit the benefits of perspective-taking. When competitive stakes are high, perspective-takers may assume the outgroup member has malicious intent toward them, and in consequence, respond aggressively. In one study, for example, participants were asked to either recall a time where they had competed with someone or a time where they had cooperated with someone. They were then asked to imagine that they were entering into a negotiation with this person. Participants in the baseline condition were asked to think about how they would approach the negotiation. Participants in the perspective-taking condition were asked to take the perspective of the person they recalled and imagine how that person would approach the negotiation. The experimenters found that those who took the perspective of competitors were more willing to use unethical tactics in the negotiation than those in the baseline condition. Those who took the perspective of cooperators, however, were no more likely to use unethical tactics than those in the baseline condition (Pierce, Kilduff, Galinsky, & Sivanathan, 2013, Experiment 2). A subsequent experiment found that taking the perspective of a perceived competitive opponent led participants to engage in deceptive behavior
in a public goods game (Experiment 3). This research suggests that in competitive environments, perspective-taking can contribute to unethical behavior.

**Narrative Fiction and Perspective-taking**

Mar and Oatley (2008) theorize that narrative fiction functions as a simulation of the social world and allows for spontaneous perspective-taking. Readers of narrative fiction experience the thoughts and emotions represented in the narratives. For example, when reading a horror novel, the reader experiences genuine fear although there is no real threat (Gerrig, 1993; Oatley, 1999). Also, narrative fiction models the social world. Like other models, it is informative, allowing for inferences and predictions while potentially revealing the underlying mechanisms of the model. It simulates what others may be thinking or feeling, and in doing so, helps individuals infer others’ mental states and aids in comprehension of complex social interactions. In order to engage in the simulation, the reader must experience what the character experiences. With this, reading and engaging in narrative fiction appears to be a distinct method of perspective-taking (Mar & Oatley, 2008).

The research on narrative fiction and its ability to reduce prejudice toward outgroups is surprisingly limited. A recent study found that secondary school children who read a book with multicultural themes demonstrated lower explicit prejudice and more positive intergroup behavioral intentions toward immigrants than those who read a book that did not address these themes (Vezzali, Stathi, & Giovannini, 2012). Also, research has found that transportation, the extent individuals are absorbed and transported into a story, can change explicit beliefs and attitudes to story-consistent beliefs and attitudes (Green & Brock, 2000). For example, individuals who were highly transported into a narrative that advocated tolerance toward
homosexuals reported decreased prejudice toward homosexuals. In the study, participants read a
story that described a conversation between a homosexual who had recently come out publicly
and a Christian who had recently converted. The story demonstrated that homosexuals
experience similar pressures and anxieties as Christians and are deserving of compassion. The
experimenters found that the more individuals were transported into the story, the more positive
their attitudes toward homosexuals (Mazzocco, Green, Sasota, & Jones, 2010).

Additionally, Johnson, Huffman, and Jasper (2014) found that participants who read a
fictional narrative about a Muslim woman exhibited lower categorical racial bias and lower
emotional racial bias. Categorical racial bias is where individuals categorize multiracial
individuals as a member of the outgroup (Chen & Hamilton, 2012). Emotional racial bias occurs
when individuals are more likely to categorize ambiguous-race faces exhibiting angry
expressions to be a member of the outgroup compared to faces that exhibit happy or neutral
expressions (Dunham, 2011). In experiment 1, participants either read a piece of narrative fiction
that described a counter-stereotypical Muslim woman or a content-matched synopsis. The
narrative did not explicitly state that there were similarities between Arab Muslim and White
individuals. Rather, the narrative described a pregnant Muslim women who was assaulted on a
New York City Subway and stood up to her attackers. The vignette provided the narrator’s inner
monologue, information about Muslim culture, and a counter-stereotypical exemplar. In the
synopsis, descriptive language, inner monologue, and dialogue were removed, but the content
remained the same. After reading, participants viewed Caucasian-Arab ambiguous faces and
were asked to determine the race of the face, either Arab, mixed (more Arab than Caucasian),
mixed (more Caucasian than Arab), or Caucasian. The Arab and Caucasian options were
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categorical perceptions of race. Participants in the narrative fiction condition made fewer
categorical evaluations and reported higher genetic overlap between Arabs and Caucasians than
participants in the synopsis condition. In experiment 2, participants either read the narrative, the
synopsis, or an article about the history of the automobile. After reading, participants were
shown Arab-Caucasian ambiguous faces that expressed varying level of anger. Experimenters
found that reading the narrative worked to inhibit the tendency to categorize race-ambiguous
faces that express anger as members of the outgroup. Participants in the narrative condition were
less likely to categorize angry race ambiguous faces as a member of the outgroup compared to
the synopsis and control condition. By providing a narrative condition as well as a synopsis
condition that matched exposure to counter-stereotypical exemplars and exposure to the
outgroup’s culture, these experiments were able to isolate the positive effects of the narrative on
racial biases.

Furthermore, Johnson, et, al (2013) found that spontaneous perspective-taking through
narrative fiction can work to reduce both explicit and implicit prejudice toward Arab-Muslims.
Participants either read a full narrative (the same narrative mentioned above), a condensed
narrative, or an article about the history of the automobile. After reading, participants completed
an implicit measure of racial prejudice toward Muslim-Arabs, an explicit measure, and a
questionnaire that measured the extent to which they were transported into the story. The
experimenters found that those in the narrative condition exhibited lower implicit prejudice
toward Arab-Muslims compared to the condensed narrative and control condition. Also, those in
the narrative condition exhibited lower explicit prejudice toward Arab-Muslims compared to the
control condition but not compared to the condensed narrative condition. This suggests
narrative's isolated ability to reduce implicit prejudice beyond exposure to counter-stereotypical exemplars and exposure to outgroup’s culture. This was not the case, however, with explicit prejudice.

**Differences in Narrative Style, Content, and Protagonist Group Membership**

The type of narrative can change how effectively readers are transported into the story and how effectively the narrative works to reduce prejudice. Green and Brock (2000) found that when the narrative was less compelling, participants were less transported into the story. For example, compared to “Bubbles in the Mall,” readers were more transported into “Murder at the Mall.” Also, discussed above, Johnson et. al (2013) found that a narrative better worked to reduce implicit prejudice and racial bias compared to a plot synopsis stripped of detail, inner monologue, and dialogue (Johnson, Huffman, & Jasper, 2014; Johnson, et. al, 2013).

The reader’s relationship to the content of the story can also effect the extent the reader is transported into the story. Green (2004) found that readers were more likely to be transported into the story if their personal experiences or prior knowledge were congruent with the experiences depicted in the narrative. For example, participants read a story about a homosexual man who faced difficulties in a fraternity setting because of his sexual orientation. Participants who had a homosexual friend or a family member reported being more transported into the story compared to participants who did not have a personal experience related to the content of the narrative.

Similarly, Kaufman and Libby (2012, Study 4) found that narratives about outgroup members inhibited simulation compared to narratives about ingroup members. They also found, however, that revealing the outgroup identity of the protagonist at the end of the narrative
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worked to overcome this barrier. For example, participants read one of three narratives: one where the protagonist was heterosexual, one where the protagonist was revealed to be homosexual early-on in the narrative, and one where the protagonist was revealed to be homosexual at the end of the narrative. The experimenters found that participants were able to simulate the experience of the protagonist in the heterosexual condition similarly to the homosexual-late condition. The simulation was inhibited, however, when the protagonist was identified as homosexual at the outset of the story. Also, participants in the late-homosexual condition reported more positive attitudes toward homosexuals and were less likely to judge the character stereotypically compared to the homosexual-early condition and the heterosexual condition. This suggests that while a protagonist’s out-group membership can inhibit transportation into the narrative, delayed revelation of this outgroup membership can diminish this inhibition and increase positive attitudes toward the outgroup.

The Mentally Ill: An Outgroup

Mental illness is currently defined as a wide spectrum of cognitions, emotions, and behaviors that interfere with interpersonal relationships and the ability to function. Wide-spread stereotyping, prejudice, discrimination, and stigmatization toward the mentally ill is well documented (Overton & Medina, 2008). A stigma is defined as an attribute or characteristic that identifies an individual with a certain social identity that is devalued by society (Crocker, Major, & Steele, 1998). The stigma against the mentally ill is rooted in the perceptions that the mentally ill are dangerous, unpredictable, responsible for their condition, worthless, and insincere (Corrigan, Edwards, Green, Diwan, & Penn, 2001; Feldman & Crandall, 2007). Being labelled mentally ill can be very damaging. The mentally ill experience severe social rejection and
discrimination (Feldman & Crandall, 2007). For example, employers are less likely to hire individuals labelled mentally ill (Link, Cullen, Frank, & Wozniak, 1990) and individuals are less likely to lease the mentally ill apartments (Page, 1977). Of all the mental illnesses, schizophrenia faces the harshest stigma. Individuals with schizophrenia are perceived to be dangerous, unpredictable, hard to talk to, to blame for their illness, and less likely to recover (Wood, Birtel, Alsawy, Pyle, & Morrison, 2014).

According to Corrigan (2004), stigma is a process. First, an individual recognizes a cue. A cue is a social cognitive process where an individual recognizes something is different about a person. In this case, a cue would infer that the person has a mental illness. A labelled diagnosis of a mental illness can cue a stereotype as well as visible behavioral cues, such as a deficit in social skills, muttering to oneself, or physical differences. This cue then activates stereotypes, collectively agreed-upon ideas about a certain group. Prejudice is the affective and cognitive response to negative stereotypes, and this prejudice can lead to discrimination. Narrative fiction can uniquely provide diagnostic, behavioral, cognitive, and emotional cues for stereotypes regarding the mentally ill because the narration can label the protagonist as mentally ill and detail the protagonist’s thoughts, emotions, and behaviors. The stereotype explanatory bias, discussed above, can reinforce the existence of these cues throughout the narrative. Once the protagonist has been labeled mentally ill, any thoughts, behaviors, and emotional responses consistent with the stereotype attached to the label may be attributed to the protagonist’s disposition, and this can work to reinforce the prejudice. For example, if a schizophrenic protagonist exhibits a strange behavior, such as muttering a sentence to oneself or performing poorly in a social interaction, the reader may use the diagnosis of schizophrenia to explain the
behavior rather than situational factors. The behavior would then function as a cue. Similarly, if the narrative reveals a thought process consistent with schizophrenia, such as paranoia, a paranoid thought that is considered normal for any person in an anxiety-provoking situation may function as a cue if the reader knows the protagonist has schizophrenia.

The Present Study

While the past literature on perspective-taking and narrative fiction demonstrates how narrative fiction can work to reduce prejudice toward outgroups through perspective-taking, the empirical evidence is limited. So far, no study has examined the mentally ill as an outgroup or if the timing of the identification of the protagonist as an outgroup member in a narrative changes how effectively readers can take the perspective of the protagonist. Past research has found that if the protagonist is immediately identified a member of an outgroup, the reader will be less able to transport into the narrative. If, however, the protagonist is identified later on in the narrative as an outgroup member, readers are able to engage in the simulation the same as if the protagonist was an ingroup member (Kaufman & Libby, 2012, Experiment 4). This study will further examine these findings using the mentally ill as the outgroup. The study will specifically identify the protagonist as schizophrenic because schizophrenia is so heavily stigmatized. The study will examine if identifying the protagonist as mentally ill at the outset of the narrative versus at the end of the narrative inhibits the reader’s ability to transport into the story and perspective-take, and in consequence, inhibit how effectively the narrative works to reduce prejudice toward the mentally ill. It will also examine if a fictional narrative that identifies the protagonist early-on in the narrative as mentally ill inhibits prejudice reduction toward the mentally ill through inhibited perspective-taking or through the reinforcement of prejudices through stereotype cues.
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Hypotheses

Hypothesis 1 predicts that the fictional narrative will better reduce implicit and explicit prejudice toward the mentally ill if the protagonist is identified as mentally ill at the end of the narrative compared to at the beginning of the narrative. This is because readers will be more able to engage in the simulation and take the perspective of the protagonist if the protagonist is not originally identified as mentally ill. Also, the experiences described will not act as stereotype cues and will not be interpreted as different or abnormal experiences.

Hypothesis 2 predicts that the narrative will reduce implicit and explicit prejudice toward the mentally ill if the protagonist is identified as mentally ill at the end of the narrative compared to if the protagonist is not identified as mentally ill at all. This is likely to occur as a result of the reader learning that the simulated experiences were the experiences of an outgroup member, and were in fact very similar to the experiences of the reader.

Finally, hypothesis 3 predicts that the narrative that identifies the protagonist as mentally ill at the outset of the narrative will more effectively reduce implicit and explicit prejudice toward the mentally ill compared to if the protagonist is not identified as mentally ill at all. The mechanism by which this is thought to occur is that the reader will still take the perspective of the outgroup member even if the perspective-taking is hindered with the identification of the protagonist as mentally ill.

Methods

Participants
Research participants will be 100 undergraduate students enrolled in lower-level psychology courses at Claremont McKenna College, aged 18-21. They will receive partial course credit for their participation through Sona System.

**Design and Procedure**

This study will use a one-way ANOVA with three levels. The independent variable will be when the narrative reveals the protagonist as mentally ill; at the outset, at the end, or not at all. The dependent variables will be explicit prejudice and implicit prejudice. There will also be a control condition, where participants will read an unrelated narrative. Participants will be informed by the experimenter that the purpose of the study is to examine the effects of reading on decision making. Participants will then be randomly assigned to one of four conditions, *early reveal*, *late reveal*, *no reveal*, or *unrelated narrative*. There will be 25 participants per condition. In the early reveal condition, participants will read a vignette that reveals almost immediately that the character is schizophrenic. In the late reveal condition, participants will read a vignette that reveals that the protagonist is schizophrenic at the end of the narrative. In the no reveal condition, participants will read a vignette that does not reveal that the protagonist is schizophrenic. In the unrelated narrative, participants will read an excerpt from a novel unrelated to the content of the other vignettes. The narratives are contained in Appendix E.

After being assigned a condition, participants will then be asked to complete a pre-manipulation questionnaire that will measure their contact with the mentally ill, their opinions about the mentally ill, and their predisposition to perspective-taking. Participants will then read the narrative. After reading, participants will complete a questionnaire measuring the extent to which they were transported into the story. They will subsequently complete a measure of
implicit prejudice toward the mentally ill and complete a questionnaire measuring their opinions about the mentally ill. Finally, participants will be debriefed.

**Materials**

**Pre-Manipulation Materials.** Increased contact with the mentally ill has been found to reduce stigma (Holmes, Corrigan, Williams, Canar, & Kubiak, 1999). In order to control for this contact, we will measure participants’ contact with the mentally ill with The Level of Contact Report (Cronbach’s alpha=.83) (Holmes, et. al, 1999). The measure lists 12 situations in which the extent intimate contact with the mentally ill occurs varies. Participants endorse which statements apply to them. The index score for this measure is determined by the rank score of the participant’s most intimate contact. For example, a participant who checked “I have watched a movie or television show in which the character depicted a person with mental illness” (rank order 3), “I have worked with a person who had a severe mental illness at my place of employment” (rank order 6), and “A friend of the family has a severe mental illness” (rank order 9), will receive a score of 9 because “A friend of the family has a severe mental illness” is the most intimate of the checked situations. See Appendix A for the measure.

In order to assess participant’s baseline attitudes toward the mentally ill, they will complete three subscales of the Opinions About Mental Illness Scale (Cohen & Struening, 1962). These three subscales have been found to parallel factor analyses on stigmatizing attitudes (Taylor & Dear, 1980; Brockington, Hall, Levings, & Murphy, 1993) and have been used extensively to describe attitudes toward the mentally ill (Cohen & Struening 1962, 1964, 1965; Holmes, et. al, 1999). The three scales measure authoritarianism (Cronbach’s alpha=.80)—the negative attitude that people with severe mental illness are threatening and inferior and must be
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Collectively handled; *benevolence* (Cronbach’s alpha=.72) — the negative attitude that people with severe mental illness need to be cared for and, therefore, should be approached paternalistically; and *social restrictiveness* (Cronbach’s Alpha=.77) — the negative attitude that the mentally ill are socially threatening and need to be restricted in hospital and community settings (Struening & Cohen, 1963). The scales present statements regarding the presentation and treatment of severe mental illness (e.g. “Although some mental patients seem all right, it is dangerous to forget for a moment that they are mentally ill”). Participants rate the extent to which they agree with each statement using a 6-point Likert Scale (6= strongly disagree). The higher the score on the OMI, the more they disagree with the stigmatizing attitudes. Half of the items from this measure will be given before the test and half will be given after the test. See Appendix B for the measure.

In order to control for individual dispositions to perspective-taking and the ability to be absorbed into a narrative, participants will complete the perspective-taking and fantasy subscales of the Interpersonal Reactivity Index (Cronbach’s Alpha: .79) (Davis, 1983). An example of a statement from the perspective-taking subscale is, “I sometimes try to understand my friends better by imagining how things look from their perspective.” An example of a statement from the fantasy subscale is, “I really get involved with the feelings of the characters in a novel.” Participants respond on a 5-point Likert scale, where A is “does not describe me well” and E is “describes me very well.” See Appendix C for the measure.

Interspersed among the pre-manipulation measures will be filler questions about problem-solving and political ideology so the purpose of the study is not revealed. See Appendix D for the filler questions.
Manipulation Materials. After completing the pre-manipulation questionnaire, participants will read the narratives. The vignettes for the early reveal, late reveal, and no reveal conditions are first person narratives that describe a man interviewing for a job at a dog shelter. In the no reveal condition, it is not revealed that the protagonist is schizophrenic (see Appendix Ea). In the early reveal condition, his mother calls him and tells him about a new medication for schizophrenia that does not produce as many side effects (see Appendix Eb). In the late reveal condition, the protagonist wonders if a woman he is interested in will know he is schizophrenic if she speaks to him (see Appendix Ec). In order to ensure the content of the narrative alone is not influencing prejudices and attitudes toward the mentally ill, the control condition will read an excerpt from *I Am the Messenger*, a first person narrative in which a male is describing his life (Zusak, 2005) (see Appendix Ed).

Post-Manipulation Materials. After reading the narratives, participants will complete the Transportation Scale (Cronbach’s Alpha=.76) (Green & Brock, 2000) to measure the extent the participants were absorbed into and comprehended the narrative. This will function as the perspective-taking manipulation check. Participants will read the statements (e.g. “While I was reading the narrative, I could easily picture the events in it taking place”) and respond on a 7-point Likert scale with 1 being “very much” and 7 being “not at all.” For the entire scale see Appendix F.

Participants will then complete an Implicit Association Test (IAT) assessing the association between mental illness and physical illness in order to assess implicit prejudice toward the mentally ill (Mannarini & Boffo, 2014). Participants will be instructed to categorize psychological stimuli (bipolar disorder, schizophrenia, depression) as mental illnesses and
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biological stimuli (diabetes, pneumonia, flu) as physical illnesses by pressing either “e” or “i” when the stimuli appear on the screen. Response time and accuracy will be measured. Using the same mechanism, participants will then be instructed to categorize harmful (i.e. “danger”) and harmless (i.e “gentle”) stimuli as either harmful or harmless. Then, participants will be asked to categorize mental illness and harmful stimuli together and physical illness and harmless stimuli together. Finally, participants will be asked to categorize harmless stimuli and mental illness together and harmful stimuli and physical illness together. Based on the speed of these responses, this test will determine if participants implicitly associate more danger with the mentally ill compared to the physically ill. The longer the response time, the more implicit prejudice (Mannarini & Boffo, 2014; Mental Health: Project Implicit, 2015).

Finally, to compare the baseline OMI scores measured before the manipulation, participants will fill out the second half of the OMI to measure attitudes toward the mentally ill (see Appendix B).
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Appendix A

Level Of Contact Report (Holmes, et. al, 1999)

Please read each of the following statements carefully. After you have read all of the statements below, place a check by the statements that best depict your exposure to persons with a mental illness.

I have watched a movie or television show in which a character depicted a person with a mental illness. (3)

My job involves providing services/treatments for persons with severe mental illness. (8)

I have observed, in passing, a person I believe may have had a severe mental illness. (2)

I have observed persons with a severe mental illness on a frequent basis. (5)

I have a severe mental illness (12)

I have worked with a person who had a severe mental illness at my place of employment. (6)

I have never observed a person that I was aware had a severe mental illness. (1)

My job includes providing services to persons with a severe mental illness. (7)

A friend of the family has a severe mental illness. (9)

I have a relative who has a severe mental illness. (10)

I have watched a documentary on the television about severe mental illness. (4)

I live with a person who has a severe mental illness. (11)

Appendix B

Opinions About Mental Illness Scale (Cohen & Struening, 1962)

6-Point Likert Scale with 1 being “strongly agree” and 6 being “strongly disagree”

Authoritarianism

There is hardly anything lower than a person who does not feel a great love, gratitude, and respect for his parents.
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Obedience and respect for authority are the most important virtues children should learn. (-)

When a person has a problem or worry, it is best not to think about it, but keep busy with more pleasant things.

A heart patient has just one thing wrong with him, while a mentally ill person is completely different from other patients.

All patients in mental hospitals should be prevented from having children by a painless operation.

There is something about mental patients that makes it easy to tell them from normal people.

People with mental illness should never be treated in the same hospital as people with physical illness.

Mental illness is usually caused by some disease of the nervous system.

If people would talk less and work more, everybody would be better off.

Every person should make a strong attempt to raise his social position.

It is easy to recognize someone who once had a serious mental illness.

Nervous breakdowns usually result when people work too hard.

People who are mentally ill let their emotions control them; normal people think things out.

Although patients discharged from mental hospitals may seem all right, they should not be allowed to marry.

One of the main causes of mental illness is a lack of moral strength or will power.

Every mental hospital should be surrounded by a high fence and guards.

People would not become mentally ill if they avoided bad thoughts.

Every person should have complete faith in some supernatural power whose decisions he obeys without question.

A person who has bad manners, habits, and breeding can hardly expect to get along with decent people.
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The best way to handle patients in mental hospitals is to keep them behind locked doors.

Although some mental patients seem all right, it is dangerous to forget for a moment that they are mentally ill.

College professors are more likely to become mentally ill than are business men.

Regardless of how you look at it, patients with severe mental illness are no longer really human.

The patients of a mental hospital should have something to say about the way the hospital is run.

**Benevolence**

Even though patients in mental hospitals behave in funny ways, it is wrong to laugh about them.

There is little that can be done for patients in a mental hospital except to see that they are comfortable and well fed.

Anyone who tries hard to better himself deserves the respect of others.

Patients in mental hospitals are in many ways like children.

To become a patient in a mental hospital is to become a failure in life.

Our mental hospitals seem more like prisons than like places where mentally ill people can be cared for.

Although they usually aren't aware of it, many people become mentally ill to avoid the difficult problems of everyday life.

More tax money should be spent in the care and treatment of people with severe mental illness.

Although some mental patients seem all right, it is dangerous to forget for a moment that they are mentally ill.

Every person should make a strong attempt to raise his social position.

**Social Restrictiveness**

A woman would be foolish to marry a man who has had a severe mental illness, even though he seems fully recovered.
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Although patients discharged from mental hospitals may seem all right, they should not be allowed to marry.

People who have been patients in a mental hospital will never be their old selves again.

There is little that can be done for patients in a mental hospital except to see that they are comfortable and well fed.

The law should allow a woman to divorce her husband as soon as he has been confined in a mental hospital with a severe mental illness.

Most women who were once patients in a mental hospital could be trusted as baby sitters.

The small children of patients in mental hospitals should not be allowed to visit them.

Most patients in mental hospitals don't care how they look.

All patients in mental hospitals should be prevented from having children by a painless operation.

Many patients in mental hospitals make wholesome friendships with other patients.

Anyone who is in a hospital for a mental illness should not be allowed to vote.

Appendix C

Interpersonal Reactivity Index (Davis, 1983)

The following statements inquire about your thoughts and feelings in a variety of situations. For each item, indicate how well it describes you by choosing the appropriate letter on the scale at the top of the page: A, B, C, D, or E. When you have decided on your answer, fill in the letter next to the item number. READ EACH ITEM CAREFULLY BEFORE RESPONDING. Answer as honestly as you can. Thank you.

ANSWER SCALE:
A DOES NOT DESCRIBE ME
B DESCRIBE ME
C WELL
D VERY WELL
E DESCRIBES ME

I daydream and fantasize, with some regularity, about things that might happen to me. (FS)

I sometimes find it difficult to see things from the "other guy's" point of view. (PT) (-)
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I really get involved with the feelings of the characters in a novel. (FS)

I am usually objective when I watch a movie or play, and I don't often get completely caught up in it. (FS) (-)

I try to look at everybody's side of a disagreement before I make a decision. (PT)

I sometimes try to understand my friends better by imagining how things look from their perspective. (PT)

Becoming extremely involved in a good book or movie is somewhat rare for me. (FS) (-)

If I'm sure I'm right about something, I don't waste much time listening to other people's arguments. (PT) (-)

After seeing a play or movie, I have felt as though I were one of the characters. (FS)

I believe that there are two sides to every question and try to look at them both. (PT)

When I watch a good movie, I can very easily put myself in the place of a leading character. (FS)

Before criticizing somebody, I try to imagine how I would feel if I were in their place. (PT)

Appendix D

Filler Statements

GMO foods are a superb scientific advance. They will allow more production at lower cost and thus will allow to feed more people in our time

Everything we need to know about living a moral life God has revealed to us.

Acts that are immoral are immoral because God forbids them.

An atheist can still understand what is morally right and wrong.

The federal government should decrease its defense spending.

Public schools should teach creationism/intelligent design along with evolution.

Abortion should be against the law except in cases of rape, incest and to save the woman’s life.
Illegal immigrants do more to weaken the US economy overall because they do not all pay taxes but can use public services.

The use of forceful interrogation techniques/torture is NEVER justified.

In the long run, the US will be safer from terrorism if it confronts the countries and groups that promote terrorism in the Middle East.

I favor a constitutional amendment that would make it illegal to burn the American flag.

The government should decrease current restrictions because global warming is a theory that has not yet been proven.

The federal government should fund research that would use newly created stem cells obtained from human embryos.

I find effective solutions by combining multiple ideas.

If I get stuck on a problem, I try to take a different perspective of the situation.

I try to act out potential solutions to explore their effectiveness.

Incorporating previous solutions in new ways leads to good ideas.

While working on something, I try to generate as many ideas as possible.

**Appendix Ea**

**No Label**

I dreamed I killed a man to save thousands. Scratchy sheets twisted around my sweat-drenched body, and I awoke afraid. It was eight o’clock, two hours before the interview. I hastily hopped out of bed, reached for the crumpled undershirt I wore yesterday, and pulled it over my head. The phone rang and I answered. It was my mom, wishing me luck and sending me love. I told her I was in a hurry and that I loved her before hanging up the phone.

The suit pants and dress shirt my mom bought me over the summer hung folded in the closet, crisp and untouched. I anxiously slipped the pants off the hanger and put them on. They felt snug and didn’t fit the way they had in the store. The metal clasp dug into my stomach and gray cotton rubbed uncomfortably against my legs. I grabbed my baby blue dress shirt off the hanger and pulled it over my stained undershirt. The saleswomen told me baby blue was professional but modern, and that it brought out my eyes. I peered into the mirror. Dark circles rested below my blue eyes and my smile didn’t look right.
“I am interested in the admission clerk position because your company provides a valuable service that helps people and I want to be a part of an organization that is making the world a better place,” I said to the mirror.

I practiced the line six more times, ran my fingers through my hair, and hopped on the bus to the dog shelter. I sat in the waiting room for an hour and a half before Mr. Loweman, the manager, called my name. I shook his hand, painfully aware of the sweat dripping down my ribs. I smiled at him, and he smiled back. A half-hearted smile. I followed him into his office and sat down in the chair in the corner of the room.

“So, Tom, why do you want to work for this company?” Mr. Loweman asked.

“I am interested in the admission clerk position because your company provides a valuable service that helps people and I want to be a part of an organization that is making the world a better place,” I replied. I said it exactly how I planned, but Mr. Loweman was silent for a long time before he asked his next question. Butterflies filled my stomach. Did I talk loud enough? Too loud?

“What can you uniquely bring to the company?” said Mr. Loweman. Again I answered as planned. Mr. Loweman looked out the window, distracted. Or bored. Was I boring him? I answered the next question and he pushed his hand under his nose, like something smelled bad. After my answer to his next question, Mr. Loweman looked at me strangely. Did I not make sense? We sat in silence until Mr. Loweman told me he had enough information and would contact me later this week. He shook my hand and gave me an cold smile. It reminded me of my dream, and I felt afraid.

The entire walk to the bus station I replayed the interview over in my head, feeling momentarily hopeful as I recalled my perfectly recited answers, only for this to evaporate seconds later as I remembered Mr. Loweman's strange silence. This cycle continued the entire walk to the bus station, my hands shaking. The bus arrived seven minutes late. I stepped on and walked to my usual seat, the second to the last row on the left side. People don’t usually sit in the back, but I liked to sit and watch the back of stranger’s heads and build their life. On my way to the interview the man six rows in front of me wore a maroon turtle neck and was just beginning to bald. He was on his way to see the matinee in town, A Midsummer’s Night Dream. He’d sit alone, but would watch his daughter's explosive performance as one of many attending fairies.

The woman across from him wore a navy beanie, and was on the way to the doctor for a her annual physical, although it’d been three years since she’d had one.

I sat down in my seat. Moments later, a beautiful woman with curls in her hair sat down in the seat across the aisle from me. She was wearing a white jacket, and I found myself wishing my mom had bought me a white shirt instead of blue. She looked at me.

“Hi,” I said. “I like you’re jacket.”

“Thanks,” she replied, and smiled. Then she turned and stared out the window.

I wanted to say something that would make her smile again, but I needed to wait until she turned her head. The back of her head didn’t look like the head of a person who smiles at strangers and wears magnificent white jackets. I stared straight ahead, waiting, trying not to wonder why she turned her head away from me. Instead I wondered what Mr. Loweman would say when he called me later this week. But then I thought about her smile and realized what I
would say to her. *What is your favorite kind of dog?* I could tell her about my favorite kind of
dog, German Shepards, and then about my almost position at the dog shelter. Yes.

Minutes passed, she didn’t turn, and a pit formed in my stomach. Maybe the question was
stupid, and what if I told her about the position but then I didn’t get it?

I turned to look at her, heart pounding. Black curls spilled across the back of her white
jacket. She had never been to this town before, and was watching the fall leaves pass us by. She
was headed to see her sister, who she hadn’t spoken to in years, to meet her baby niece. She
never liked kids. She was scared.

**Appendix Eb**

**Early Reveal**

I dreamed I killed a man to save thousands. Scratchy sheets twisted around my sweat-
drenched body, and I awoke afraid. It was eight o’clock, two hours before the interview. I hastily
hopped out of bed, reached for the crumpled undershirt I wore yesterday, and pulled it over my
head. The phone rang and I answered. It was my mom, wishing me luck and sending me love.
**She told me she heard about this new medication for schizophrenia with fewer side effects
and that she scheduled an appointment for me to talk to the doctor about it.** I told her I was
in a hurry, that we could talk about this later, and that I loved her before hanging up the phone.

The suit pants and dress shirt my mom bought me over the summer hung folded in the
closet, crisp and untouched. I anxiously slipped the pants off the hanger and put them on. They
felt snug and didn’t fit the way they had in the store. The metal clasp dug into my stomach and
gray cotton rubbed uncomfortably against my legs. I grabbed my baby blue dress shirt off the
hanger and pulled it over my stained undershirt. The saleswomen told me baby blue was
professional but modern, and that it brought out my eyes. I peered into the mirror. Dark circles
rested below my blue eyes and my smile didn’t look right.

“I am interested in the admission clerk position because your company provides a
valuable service that helps people and I want to be a part of an organization that is making the
world a better place,” I said to the mirror.

I practiced the line six more times, ran my fingers through my hair, and hopped on the
bus to the dog shelter. I sat in the waiting room for an hour and a half before Mr. Loweman, the
manager, called my name. I shook his hand, painfully aware of the sweat dripping down my ribs.
I smiled at him, and he smiled back. A half-hearted smile. I followed him into his office and sat
down in the chair in the corner of the room.

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long time before he asked his next question. Butterflies filled my stomach. Did I talk loud
enough? Too loud?
CAN NARRATIVE FICTION REDUCE PREJUDICE?

“What can you uniquely bring to the company?” said Mr. Loweman. Again I answered as planned. Mr. Loweman looked out the window, distracted. Or bored. Was I boring him? I answered the next question and he pushed his hand under his nose, like something smelled bad. After my answer to his next question, Mr. Loweman looked at me strangely. Did I not make sense? We sat in silence until Mr. Loweman told me he had enough information and would contact me later this week. He shook my hand and gave me an cold smile. It reminded me of my dream, and I felt afraid.

The entire walk to the bus station I replayed the interview over in my head, feeling momentarily hopeful as I recalled my perfectly recited answers, only for this to evaporate seconds later as I remembered Mr. Loweman’s strange silence. This cycle continued the entire walk to the bus station, my hands shaking. The bus arrived seven minutes late. I stepped on and walked to my usual seat, the second to the last row on the left side. People don’t usually sit in the back, but I liked to sit and watch the back of stranger’s heads and build their life. On my way to the interview the man six rows in front of me wore a maroon turtle neck and was just beginning to bald. He was on his way to see the matinee in town, *A Midsummer’s Night Dream*. He’d sit alone, but would watch his daughter’s explosive performance as one of many attending fairies. The woman across from him wore a navy beanie, and was on the way to the doctor for a her annual physical, although it’d been three years since she’d had one.

I sat down in my seat. Moments later, a beautiful woman with curls in her hair sat down in the seat across the aisle from me. She was wearing a white jacket, and I found myself wishing my mom had bought me a white shirt instead of blue. She looked at me.

“IHi,” I said. “I like you’re jacket.”

“Thanks,” she replied, and smiled. Then she turned and stared out the window.

I wanted to say something that would make her smile again, but I needed to wait until she turned her head. The back of her head didn’t look like the head of a person who smiles at strangers and wears magnificent white jackets. I stared straight ahead, waiting, trying not to wonder why she turned her head away from me. Instead I wondered what Mr. Loweman would say when he called me later this week. But then I thought about her smile and realized what I would say to her. *What is your favorite kind of dog?* I could tell her about my favorite kind of dog, German Shepards, and then about my almost position at the dog shelter. Yes.

Minutes passed, she didn’t turn, and a pit formed in my stomach. Maybe the question was stupid, and what if I told her about the position but then I didn’t get it?

I turned to look at her, heart pounding. Black curls spilled across the back of her white jacket. She had never been to this town before, and was watching the fall leaves pass us by. She was headed to see her sister, who she hadn’t spoken to in years, to meet her baby niece. She never liked kids. She was scared.

**Appendix Ec**

**Late Reveal**
I dreamed I killed a man to save thousands. Scratchy sheets twisted around my sweat-drenched body, and I awoke afraid. It was eight o’clock, two hours before the interview. I hastily hopped out of bed, reached for the crumpled undershirt I wore yesterday, and pulled it over my head. The phone rang and I answered. It was my mom, wishing me luck and sending me love. I told her I was in a hurry and that I loved her before hanging up the phone.

The suit pants and dress shirt my mom bought me over the summer hung folded in the closet, crisp and untouched. I anxiously slipped the pants off the hanger and put them on. They felt snug and didn’t fit the way they had in the store. The metal clasp dug into my stomach and gray cotton rubbed uncomfortably against my legs. I grabbed my baby blue dress shirt off the hanger and pulled it over my stained undershirt. The saleswomen told me baby blue was professional but modern, and that it brought out my eyes. I peered into the mirror. Dark circles rested below my blue eyes and my smile didn’t look right.

“I am interested in the admission clerk position because your company provides a valuable service that helps people and I want to be a part of an organization that is making the world a better place,” I said to the mirror.

I practiced the line six more times, ran my fingers through my hair, and hopped on the bus to the dog shelter. I sat in the waiting room for an hour and a half before Mr. Loweman, the manager, called my name. I shook his hand, painfully aware of the sweat dripping down my ribs. I smiled at him, and he smiled back. A half-hearted smile. I followed him into his office and sat down in the chair in the corner of the room.

“So, Tom, why do you want to work for this company?” Mr. Loweman asked.

“I am interested in the admission clerk position because your company provides a valuable service that helps people and I want to be a part of an organization that is making the world a better place,” I replied. I said it exactly how I planned, but Mr. Loweman was silent for a long time before he asked his next question. Butterflies filled my stomach. Did I talk loud enough? Too loud?

“What can you uniquely bring to the company?” said Mr. Loweman. Again I answered as planned. Mr. Loweman looked out the window, distracted. Or bored. Was I boring him? I answered the next question and he pushed his hand under his nose, like something smelled bad. After my answer to his next question, Mr. Loweman looked at me strangely. Did I not make sense? We sat in silence until Mr. Loweman told me he had enough information and would contact me later this week. He shook my hand and gave me an cold smile. It reminded me of my dream, and I felt afraid.

The entire walk to the bus station I replayed the interview over in my head, feeling momentarily hopeful as I recalled my perfectly recited answers, only for this to evaporate seconds later as I remembered Mr. Loweman's strange silence. This cycle continued the entire walk to the bus station, my hands shaking. The bus arrived seven minutes late. I stepped on and walked to my usual seat, the second to the last row on the left side. People don’t usually sit in the back, but I liked to sit and watch the back of stranger’s heads and build their life. On my way to the interview the man six rows in front of me wore a maroon turtle neck and was just beginning to bald. He was on his way to see the matinee in town, A Midsummer’s Night Dream. He’d sit alone, but would watch his daughter's explosive performance as one of many attending fairies.
The woman across from him wore a navy beanie, and was on the way to the doctor for a her annual physical, although it’d been three years since she’d had one.

I sat down in my seat. Moments later, a beautiful woman with curls in her hair sat down in the seat across the aisle from me. She was wearing a white jacket, and I found myself wishing my mom had bought me a white shirt instead of blue. She looked at me.

“Hi,” I said. “I like you’re jacket.”

“Thanks,” she replied, and smiled. Then she turned and stared out the window.

I wanted to say something that would make her smile again, but I needed to wait until she turned her head. The back of her head didn’t look like the head of a person who smiles at strangers and wears magnificent white jackets. I stared straight ahead, waiting, trying not to wonder why she turned her head away from me. Instead I wondered what Mr. Loweman would say when he called me later this week. But then I thought about her smile and realized what I would say to her. *What is your favorite kind of dog?* I could tell her about my favorite kind of dog, German Shepards, and then about my almost position at the dog shelter. Yes.

Minutes passed, she didn’t turn, and a pit formed in my stomach. Maybe the question was stupid, and what if I told her about the position but then I didn’t get it? *What if once she talked to me she’d know about my schizophrenia?*

I turned to look at her, heart pounding. Black curls spilled across the back of her white jacket. She had never been to this town before, and was watching the fall leaves pass us by. She was headed to see her sister, who she hadn’t spoken to in years, to meet her baby niece. She never liked kids. She was scared.

**Appendix Ed**

Unrelated narrative: excerpt from *I Am the Messenger* (Zuzak, 2005)

I live in a shack that I rent cheaply. Not long after moving in, I found out from the real estate agent that my boss is the owner. My boss is the proud founder and director of the cab company I drive for: Vacant Taxis. It’s a dubious company, to say the least. Audrey and I had no trouble convincing them that we were old enough and licensed enough to drive for them. Mix a few numbers up on your birth certificate, show up with what appears to be the appropriate license, and you’re set. We were driving within a week because they were short-staffed. No reference checks. No fuss. It’s surprising what you can achieve with trickery and deceit. As Raskolnikov once said: “When reason fails, the devil helps!” If nothing else, I can lay claim to the title of Youngest Cabdriver in these parts—a taxi-driving prodigy. That’s the kind of anti-achievement that gives structure to my life. Audrey’s a few months older than me.

The shack I live in is pretty close to town, and since I’m not allowed to take the cab home, it’s good walking distance to work. Unless Marv gives me a lift. The reason I don’t have a car myself is that I drive people around all day or night. In my time off, the last thing I feel like doing is more driving.
CAN NARRATIVE FICTION REDUCE PREJUDICE?

The town we all live in is pretty run-of-the-mill. It’s past the outskirts of the city and has good and bad parts. I’m sure it won’t surprise you that I come from one of the bad parts. My whole family grew up at the far north of town, which is kind of like everyone’s dirty secret. There are plenty of teenage pregnancies there, a plethora of shithead fathers who are unemployed, and mothers like mine who smoke, drink, and go out in public wearing Ugg boots. The home I grew up in was an absolute dump, but I stuck around until my brother, Tommy, finished school and got into university. At times I know I could have done the same, but I was too lazy at school. I was always reading books when I should have been doing math and the rest of it. Maybe I could have got a trade, but they don’t give apprenticeships out down here, especially to the likes of me. Due to my aforementioned laziness I was no good at school, except at English, because of the reading. I went straight into work when school was done. I started out in a forgettable hamburger chain that I don’t mention, due to shame. Next was sorting files in a dusty accountant’s office that closed down within weeks of my arrival. And finally, the height, the pinnacle of my employment history so far.

Cab driving.

I have one housemate. He’s called the Doorman, and he’s seventeen years old. He sits at the flyscreen door, with sun painted onto his black fur. His old eyes glow. He smiles. He’s called the Doorman because from a very early age he had a strong penchant for sitting by the front door. He did it back home, and he does it now at the shack. He likes to sit where it’s nice and warm, and he doesn’t let anyone in. This is because he finds it hard to move on account of the fact that he’s so old. He’s a cross between a Rottweiler and a German shepherd, and he stinks a kind of stink that’s impossible to rid him of. In fact, I think that’s why no one but my card-playing friends ever enters the shack. The initial stench of the dog slaps them in the face, and it’s all over. No one’s game enough to lengthen their stay and actually walk all the way in. I’ve even tried encouraging him to use some kind of deodorant. I’ve rubbed it under his arms in copious amounts. I’ve covered him all over with some of that Norsca spray, and all it did was make him smell worse. During that time, he smelled like a Scandinavian toilet.

He used to be my father’s, but when the old man died about six months ago, my ma shifted him onto me. She got sick of him using the patch under her clothesline.

(“Anywhere in the whole backyard he could use!” she’d say. “But where does he do it?” She’d answer the question. “Right under the bloody clothesline.”)

So when I left, I took him with me. To my shack.

To his door.

And he’s happy.

And so am I.
CAN NARRATIVE FICTION REDUCE PREJUDICE?

He’s happy when the sun throws warmth on him through the flyscreen door. He’s happy to sleep there and move on a forward slant when I try to shut the wooden door at night. At times like that, I love the hell out of that dog. I love the hell out of him anyway. But Christ, he stinks.

I suppose he’ll die soon. I’m expecting it, like you do for a dog that’s seventeen. There’s no way to know how I’ll react. He’ll have faced his own placid death and slipped without a sound inside himself. Mostly, I imagine I’ll crouch there at the door, fall onto him, and cry hard into the stench of his fur. I’ll wait for him to wake up, but he won’t. I’ll bury him. I’ll carry him outside, feeling his warmth turn to cold as the horizon frays and falls down in my backyard. For now, though, he’s okay. I can see him breathing. He just smells like he’s dead.

Appendix F

Transportation Scale (Green & Brock, 2000)

7-point Likert scale with 1 being “very much” and 7 being “not at all.”

While I was reading the narrative, I could easily picture the events in it taking place.

While I was reading the narrative, activity going on in the room around me was on my mind. (-)

I could picture myself in the scene of the events described in the narrative.

I was mentally involved in the narrative while reading it.

After finishing the narrative, I found it easy to put out of my mind. (-)

I wanted to learn how the narrative ended.

The narrative affected me emotionally.

I found myself thinking of ways the narrative could have turned out differently.

I found my mind wandering while reading the narrative. (-)

The events in the narrative are relevant to my everyday life.

The events in the narrative have changed my life.