

Social Factors Affecting Individuals Labeled with Mental Disorders

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### Abstract

It is seen from previous research that society holds negative views and perceptions towards individuals with mental disorder labels and that this seems to create a desire for greater social distancing. The purpose of this research paper is to demonstrate the fact that society is more leery and un-accepting of individuals who have been labeled with a mental disorder and/or illness as compared to the typical person which in turn creates adverse social issues in the areas of employment, interpersonal relationships and how society views individuals with mental disorder labels as a whole. Questionnaires using a standard Likert scale rating system were implemented in collecting participant's responses to a set of questions related to various character vignettes. The character vignettes depicted varying levels of mental disorder cases; severe-schizophrenia, moderate-chronic depression, slight-heavy drinker and normal-average person. The findings of this study support previous research suggesting that the public's perception of those with mental disorder labels affects their ability to function in society. Our results indicate that obtaining employment, maintaining and developing interpersonal relationships and the way in which those with labels are viewed seem to be negatively affected by society's biases and stereotypical ideas surrounding those with mental disorder labels.

### Social Factors Affecting Individuals Labeled with Mental Disorders

In society there is a general tendency to avoid that which is unknown or misunderstood and this can lead to the development of negative situations for certain vulnerable individuals in our society. The vulnerable individuals in our society that I am referring to are those who have been diagnosed and labeled with a mental disorder. The overall avoidance and lack of acceptance on the part of society as a whole towards individuals with mental disorder labels is primarily due to the fact that there is a misunderstanding of the labels themselves as well as the behaviors associated with said labels. In regards to these labels, reference is being made more towards the stereotypes held against them as opposed to the diagnosis itself. Does the adherence to such a tendency of avoiding what is unknown and misunderstood on the part of society effect individuals with mental disorder labels? The answer is most certainly yes and not only that but in an undesirable way by creating negative social situations and unnecessary difficulties (Link, Phelan, Bresnahan, Stueve, & Pescosolido, Public Conceptions of Mental Illness: Labels, Causes, Dangerousness, and Social Distance, 1999). The most critical of all the negative social situations that are experienced by those with mental disorder labels are difficulty in obtaining jobs, the inability to create and maintain lasting relationships, and the way in which they are viewed in society. When these three factors, employment and personal and social interactions are experienced negatively they greatly hinder the ability of individuals with mental disorder labels to perform as well-functioning members in society, and possibly reinforce the characteristics of the mental disorder in a vicious circular chain of reactions (Farina, Allen, & Saul, 1967).

In the public realm, we see that society as a whole has negative perceptions of those with mental disorders. In a study by Angermeyer and Matschinger (2003), the desire to have greater distance is increased when individuals in society perceive that another individual has a mental

disorder. This was seen to result from a heightened sense of fear and misapprehended sense of dangerousness. It was also suggested from the findings that this increase in perceiving dangerousness and heightened level of fearfulness occurred even in the absence of violent or aggressive displays of behavior. In another study by Link et al. (1999), this same factor of fear is also suggested as a possible explanation of the desire to socially distance those with mental disorders. It is suggested that the mental disorder label, other than the symptoms, create an unrealistically heightened fear of violence. It was seen in one study by Stuart Kirk (1974) that the desire of social distance increased as a result of the mental disorder label and not of any behaviors displayed by individuals with such labels. The major factor in the research above that is seen to have the greatest effect on the public's negative view of individuals with mental disorder labels is that of perceived fear and dangerousness.

The notion that society as a whole has been and is less accepting of individuals with mental disorder labels as compared to the typical individual in society is not a new idea and is mainly due to the misperception of specific behaviors associated with the mental disorder labels. According to an article by Angermeyer and Matschinger (2003) individuals labeled with the mental disorder schizophrenia were perceived to be highly dangerous and prone to dangerous displays of anger which resulted in an increase in fear and the preference for greater social separation. This desire to have greater distance by society from such individuals with mental disorder labels creates a situation which is in turn strengthening the symptoms of the mental disorder. In the case of schizophrenia, a greater social separation results in the individual with the label removing him or herself from society and thus strengthening the symptom of social withdrawal which is a key determinate in the diagnosis of the disorder (Link, et al. 1999). The desire for greater separation is not limited to the label of schizophrenia alone but was also seen to

be related to other labels as well. In an article by Markham (2003), individuals labeled with Border Line Personality disorder were subject to greater rejection not from society alone but from medical staff as well, and on top of this rejection, the medical staff was less optimistic regarding the treatment and recovery of the individuals diagnosed with border line personality disorder. It is not difficult to see how the situation can become circular. If an individual is diagnosed with a mental disorder that is characterized by social withdrawal, and through stereotypes or biases on the part of society, others desire to stay away from him or her, social withdrawal is likely increased and more severe than it would have otherwise been.

Due to this misapprehension of labels and the desire for greater separation by society it is not difficult to see that certain situations would arise in a negative sense for individuals being labeled with a mental disorder. Take for instance employment, how is it that a person is supposed to obtain a job when simply informing the potential employer that he or she has a mental disorder brings to mind stereotypes and false beliefs in regards to the disorder in question? Even if the employer has no problem with the hiring of an individual with a mental disorder label he or she would have to determine how it would look to potential customers and try to imagine how those customers would think and feel. The general understanding in society of mental disorders and the labels that go along with them are not positive or even reasonable but rather rest heavily on the side of prejudice and stigmas resulting in the discrimination of individuals with mental disorder labels (Corrigan, 2004). This situation is extremely negative and portrays the idea to individuals suffering from mental disorders that they are not welcome in society. The difficulty in finding work may lead to greater social rejection which in turn may cause the individual with a mental disorder to feel worthless and thus increase negative thoughts about him or herself leading possibly to thoughts of suicide once again reinforcing the characteristics of the illness. In

an article by Farina, Allen, and Saul (1967) the fact was shown that being treated in a socially negative manner at one point will, in a similar situation, elicit the same negative effect on the individual with the mental disorder label, independent of others actions, in the new situation. This demonstrates the level of negative emotions that are being experienced by individuals with mental disorder labels in actions by society through the desire to have greater separation.

Individuals that have been diagnosed and labeled with a mental disorder are seen by society in a very negative light and many in society really do not want to have any interaction with such individuals. This is carried to extremes in some situation where some will go so far as to not even want to live next door to individuals with mental disorder labels (Link, et al. 1999). In the face of these obstacles how is one expected to engage in social interaction and develop interpersonal relationships when all that seems to be desired from society is separation from those with mental disorder labels? This form of rationalizing is strikingly similar to that of racial discrimination and bigotry. It may seem hard to think that the society in which we live today with all of the advances in medical treatment as well as the advancements in the field of psychiatry and psychology, that society as a whole can be so distrustful and fearful simply due to a mental disorder label. This point is made evident in a study by Link et al. (1999) which demonstrated that individuals experienced greater fear of those with mental disorder labels even in the absence of mentioning or displaying violent behavior. It was found in the study that once a label was put forth a change occurred in the way in which the individual with the mental disorder label was perceived by others resulting in increased fear and dangerousness and the desire to separate one's self greatly from that individual. The above study also suggested that this desire for separation and the increased perception of dangerousness would create negative affects for those individuals with mental disorder labels (Link, et al. 1999).

Labeling individuals with a mental disorder creates negative social situations such as difficulty getting work, how they are seen by society and developing and keeping interpersonal relationships. It is also true that different types of mental disorder labels have different influences with how individuals labeled with a mental disorder are seen and treated by society as a whole. Research has found (Kirk, 1974; Link, et al. 1999) that participants rated different mental disorders with varying levels of fear and social segregation, responding with less fear and desire for separation to labels such as being an alcoholic, or severely depressed, while responding with heightened fear and avoidance of those with labels such as being a drug addict or schizophrenic. These findings suggest that some labels of mental disorders are perceived by the public to be worse than others. This however does not lessen the negativity that is created when biases are held thus making situations difficult for individuals with mental disorder labels. Such experimental findings clearly demonstrate the fact that there are indeed factors in society that are displayed in social interactions between typical members of society and individuals with mental disorder labels that tend to create situations that have a negative impact on the ability of individuals with mental disorder labels to function optimally in society in the areas of employment, interpersonal interactions and the public realm.

The purpose of this research paper would be to demonstrate the fact that society is more leery and un-accepting of individuals who have been labeled with a mental disorder and/or illness as compared to the typical person which in turn creates adverse social issues. These issues involve the difficulties in obtaining and keeping a job, the inability to develop and maintain interpersonal relationships and being negatively perceived by society due to interactions resulting from societies misunderstanding and prejudices towards those with mental disorder labels. I predict that the labeling of individuals with a mental disorder will create negative

environmental situations and difficulties because of the above mentioned possible biases and ignorance towards mental disorder labels in society. This will be tested and measured by questionnaires asking for participant's likeliness to employ, shop, interact, and befriend individuals perceived to have a mental disorder. The questionnaire will utilize a standard Likert scale rating system to record participant's responses and all questions, formats and directions will be the same for all participants. The challenges faced by individuals with mental disorder labels in each of the three social aspects in question reinforce symptoms that are related to the diagnosis perpetuating the condition such as the withdrawal from society when society is the one desiring greater separation.

## **Method**

### **Participants**

Participants were selected from two locations; one sample of participants was selected at the University of Utah from the Marriot library while the second sample of participants was drawn from a local job fair. The reason for utilizing two separate locations to draw a sample from was so that a representative sample could be determined when the two were combined. The Marriot library was chosen as the location at the University of Utah due to the fact that students from every area of study at the University utilize the resources provided at the library regardless of any differences in major or area of study. The second location of a local job fair was chosen to provide a representative sample of employers and how the labeling of an individual with a mental disorder as compared to those of normal mental functioning would be viewed when applying for work. The procedure used for selecting participants was systematic sampling where every other individual was selected to complete the survey and participate in the study. A total of 120 participants were selected from both locations; 30 from the job fair, 12 women and 18 men

between the ages of 24 and 36 years ( $M = 31.5$ ,  $SD = 2.2$ ); 90 from the Marriot library, 53 women and 37 men between the ages of 18 and 38 years ( $M = 26.3$ ,  $SD = 2.1$ ). All participants volunteered their time to participate in this study and answer the survey.

### **Materials**

Participants were provided with a questionnaire in which there were four different descriptions of individuals ranging from major mental disorder, moderate mental disorder, slight mental disorder, to that of an individual with normal mental functioning. These descriptions would be based off of character vignettes used in previous research and would appear as follows: “(Severe Case: Schizophrenia) Here is a description of a man. Imagine that he is a person living in your neighborhood. For a while now he has been very suspicious; he hasn't trusted anybody, and is sure that everyone is against him. Sometimes he thinks that people he sees on the street are talking about him or following him. A couple of times recently he has argued with men who didn't even know him, because he thought they were spying on him and plotting against him. The other night he got terribly angry at his wife, because he said she was working against him too just like everybody else. (Kirk, The Impact of Labeling on Rejection of the Mentally Ill: An Experimental Study, 1974)”

“(Moderate Case: Chronic Depression) Here is a description of a man. Imagine that he is a person living in your neighborhood. He has a good job and is doing fairly well at it. Most of the time he gets along all right with people, but lately he is always very touchy and loses his temper quickly if things aren't going his way, or if people find fault with him. He worries a lot about little things and seems to be moody and unhappy all the time. He can't sleep nights, brooding about the past and worrying about things that might go wrong. (Kirk, The Impact of Labeling on Rejection of the Mentally Ill: An Experimental Study, 1974)”

(Slight Case: Heavy Drinker) Here is a description of a man. Imagine that he is living in your neighborhood. He is the typical all around average guy easy to get along with, but becomes somewhat edgy when he has not had a drink (alcohol) over a prolonged period of time. He keeps up appearances when around others and his daily life is not greatly affected or even hindered noticeably. He drinks mostly in private and moderately at parties.

“(Normal Case) Here is a description of a man. Imagine that he is a person living in your neighborhood. He is pretty happy most of the time, has a good job and is fairly well satisfied with it. He is usually busy and his friends think he is easy to get along with most of the time. He is currently engaged to a young woman, but he is having trouble deciding whether he really wants to get married now. (Kirk, The Impact of Labeling on Rejection of the Mentally Ill: An Experimental Study, 1974)”

The participants answered questions in regards to how likely they would be to engage in certain situations, such as: how likely they would interact socially, how likely they would employ or shop where employed, or maintain personal relationships, with individuals from each description provided. The answers were recorded using a standard likert scale ranging from: (1) very likely, (2) likely, (3) occasionally, (4) uncertain, (5) rarely, (6) very rarely, (7) never. The reliability and validity of the scores obtained from a questionnaire involving a Likert scale is determined by the goodness-of-fit of the questions asked of the participants and the participants’ response being truly what is measured, See Appendix for questionnaire.

### **Design and Procedure**

Participants were asked if they would like to participate in a survey questionnaire identifying social perceptions towards others. In order to have the participants responses be accurate to what the participants actually felt and thought they were instructed to not put their

name on the survey questionnaire. Informed consent was obtained once the participant chose and accepted to participate in the study by having him or her sign a consent form. Once the participants agreed to take the survey questionnaire they were told to read the different descriptions and respond using the scale previously described. Participants completed the questionnaire individually and did so voluntarily with no other compensation made or offered. There was little interference or instruction provided by the experimenter other than asking the participant to participate in the study by completing a survey questionnaire and instructing the participant to read the descriptions and respond on the scale according to the individual descriptions. After having completed the questionnaire the participant would be provided with a debriefing form explaining the purpose of the study and what it was that was being measured.

### **Results**

Using descriptive statistics and univariate analysis we were able to determine the distribution, central tendency, and dispersion of our dependent variable which is participant responses from the questionnaire regarding the provided character vignettes. This data was then used to obtain frequency distribution and percentages along with response means and standard deviations. The collected data indicated that a statistically significant amount of the responses were negative in regards to individuals labeled with mental disorders. This however was shown to be dependent upon the level of the mental disorder label and not independent from it as was supposed in our hypothesis.

The data indicated that there was a statistical significance found among the three test variables of employment, interpersonal relationships and views of society that are considered to negatively affect social situations in the environment for those individuals diagnosed and labeled with both severe and moderate mental disorders. It was found that having either a severe or

moderate mental disorder label does indeed negatively impact an individual's ability to function optimally in the development and maintenance of interpersonal relationships. A statistical significance was also found for both levels, severe and moderate, of mental disorder labels indicating a negative effect in the ability to obtain employment. There was also found a statistical significance in regards to the negative way in which individuals diagnosed and labeled with a severe or moderate mental disorder are viewed in society. Demonstrated by the questionnaire was the fact that the desire to interact socially was decreased for individuals that characterized traits of mental disorder labels. There was however no statistically significant finding to support the hypothesis in regards to a slight mental disorder label such as depression. Both character vignettes of the slight mental disorder label depression and the label normal-troubled were found to have no statistical significance.

### **Discussion**

We began by showing the effects that mental disorder labels had in society and how those with the labels were stigmatized against and seen in a rather dismal perspective, generating a desire in society to be socially distanced from those who bore such labels. Research focusing on the topic of mental disorder labels and their effect on public perception fueled the desire to further investigate this subject. In an article by Angermeyer and Matschinger (2003), the labeling of individuals with mental disorders had an impact on public perception with the negative affects outweighing any benefits of the label. This avoidance, prejudice and lack of acceptance on the part of society towards those with mental disorder labels led to the idea that the labeling of mental disorders would only create negative situations for individuals with such labels. Three areas of interest were developed in which were to be demonstrated the negative effects of labeling mental disorders and those areas were the work environment, interpersonal

relationships, and the view in which society held those with labels. The results of these situations are that those with mental disorder labels were viewed negatively by society which in turn may result in the desire for greater social distancing. Also affected by these various negative situations is the difficulty of persons with mental disorder labels in obtaining employment due to social perception and their ability to function efficiently in the work environment along with the inability to create and maintain valued relationships with others.

The results regarding the area of the work environment (employment) are in support of the hypothesis in that being labeled with a mental disorder makes obtaining a job, or keeping a job, more difficult as compared to that of a normal person. For the difficulty in obtaining a job, questionnaire responses showed a decrease in the willingness to employ individuals that had been perceived as labeled with a mental disorder. This follows other similar research that has seen that the average person in society does not wish to interact with individuals who have been labeled with a mental disorder since something must be wrong with them (Kirk, *The Impact of Labeling on Rejection of the Mentally Ill: An Experimental Study*, 1974). This point was demonstrated in the questionnaire responses of the participants in the study. The results from this study relate to similar findings in other research studies where having a mental disorder label make obtaining a job very difficult for no other reason than simply bearing the label makes the typical person in society fear such individuals with mental disorder labels as dangerous (Link et al. 1999).

The results of our study regarding the view in which society holds individuals that have a mental disorder label support our hypothesis in that it indicates that people appear to see those with mental disorder labels as fearful, dangerous, unproductive and unsocial. This was shown by the majority of participants by the indication of the expected level of dangerousness or violence

form the various vignettes that were presented in the questionnaire. From the study it seems that society is quite fearful of those with mental disorder labels and this creates a negative perception of them which upholds the point made in our hypothesis and in that of other studies (Angermeyer & Matschinger, 2003; Kirk, 1974). The result of being socially misunderstood and misrepresented simply because of bearing a mental disorder label is one that needs to be corrected and one way in which it can be is through a proper education regarding mental disorder labels.

The results of our study in regards to interpersonal relationships support our hypothesis in that most in society desire nothing more than simply to be separate from those individuals who have been labeled with a mental disorder. Having such a label removes any individuality from your person and you are seen in the light of a bias, prejudice, or fear. The ability to create enduring personal relationships with others in society is due greatly in part to your ability to interact and engage with them. This idea is supported by past research which has identified mental disorder labels as creating a desire for greater social distancing and increased levels of fear and violent intent (Angermeyer & Matschinger, 2003). The point of social interaction is of great importance and as is seen from the results of this study, there seems to be a trend towards social desirability being not in favor of those who are labeled with a mental disorder. If one cannot interact and engage with others then building a relationship is entirely out of the question. Our hypothesis is supported by this point and the results of the study relating to this particular point. This is also described in several other studies adding to the reliability of our findings in determining an effect of mental disorder labeling.

The results of this study support our hypothesis in that the labeling of individuals' with a mental disorder will likely create negative situations in the public realm in how they are

perceived, in the social realm in the ability to develop and maintain valued relationships, and in the work environment in the ability to obtain employment. One point however in which there is no support for our hypothesis is in regards the severity of the mental disorder label. Our hypothesis stated that the effect would be the same regardless of level of severity which turned out not to be the case. There was no statistical significance for slight mental disorder labels such as depression which were viewed with no greater negativity than typical normal functioning individuals which point was also seen in other research findings (Angermeyer & Matschinger, 2003). Our results indicate that only mental disorders for severe to moderate labels have an effect that is statistically significant and supportive of our hypothesis. This raises important questions for future research that can be conducted to provide answers for why this is so, why do the lower levels not see the same effects, and what does this mean overall?

There are two major limitations in our study and they involve the generalizability of our findings and the responses of participants' to the questionnaire. The fact that our sample was mainly drawn from individuals at a university and potential employers suggests that the sample may be overly representative of only that population in disregards to say those in society who do not inhabit such environments. In regards to the participants' responses to the questionnaire, responses may be falsified or given to fit what they thought was the purpose of the study. One direction that may be taken in future research could be to gather another sample from a more widely accessible population such as a shopping center. Another direction for future research would be to develop a new questionnaire that would provide no hints or clues as to what is actually being studied, making participants' responses much more accurate and reliable. One possible reiteration of the study could be done by sending regular individuals with a varying

resume hinting at different levels of mental disorder to job interviews or blind dates to see if the results of this study actually apply in the real world.

The implications for the findings of this study are rather simple and relatively few. First the results of this study demonstrate the strength of society's biases and prejudices toward mental disorder labels and the desire for social distancing, which create a lack of acceptance of those individuals with such labels. This gives great weight to the argument that psychological labels should be done away with, and in place of the label, focus should be placed more on the symptoms and their treatment. The removal of mental disorder labels is a major topic in the world of psychology right now. What is meant in the idea of replacing labels with greater focus on symptoms is to use the symptoms in diagnosing the mental issue but to not transfer the label of the symptoms to the individual. Treatment can be provided to patients for mental disorder symptoms without having to create an identity for the patient such as being a schizophrenic. Second greater importance needs to be given to the education of society in regards to mental disorders and the labels that go along with them if they are to be continued. Having a better understanding of mental disorders will help by providing accurate information to society in place of any bias or false beliefs. A way to implement this could be accomplished in the employment area by having employers take a required instructional training course on the subject.

In regards to the social perception and interpersonal relationship areas, possible classes could be put in place in the public school system to educate younger generations before misinformation develops. The findings of this study indicate that the greater the perception of the mental disorder label the greater will be the negative effects experienced by those diagnosed and labeled with such mental disorders. This means that for the everyday lives of such labeled

individuals optimal social functioning may be greatly hindered and reduced possibly resulting in further withdrawal and feeling of rejection and depression.

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## Appendix

## Participant Questionnaire

**Questionnaire**

*In this questionnaire you will be asked to respond to different character vignettes using a standard Likert scale rating system. Please respond truthfully and according to how you would feel and not how you think you should feel.*

**Character 1:** Here is a description of a man. Imagine that he is a person living in your neighborhood. He has a good job and is doing fairly well at it. Most of the time he gets along all right with people, but lately he is always very touchy and loses his temper quickly if things aren't going his way, or if people find fault with him. He worries a lot about little things and seems to be moody and unhappy all the time. He can't sleep nights, brooding about the past and worrying about things that might go wrong.

**Question 1:** If you were an employer, how likely would you be willing to employ the character presented in the above vignette? Please select a single choice below.

(O)Very Likely (O)Likely (O)Occasionally (O)Uncertain (O)Rarely (O)Very Rarely (O)Never

**Question 2:** How likely is it that you would interact socially with the character presented in the above vignette?

(O)Very Likely (O)Likely (O)Occasionally (O)Uncertain (O)Rarely (O)Very Rarely (O)Never

**Question 3:** How likely would you be willing to frequent a store that has the character presented in the above vignette as an employee?

(O)Very Likely (O)Likely (O)Occasionally (O)Uncertain (O)Rarely (O)Very Rarely (O)Never

**Question 4:** How likely would you be willing to develop and maintain a personal relationship with the character presented in the above character vignette?

(O)Very Likely (O)Likely (O)Occasionally (O)Uncertain (O)Rarely (O)Very Rarely (O)Never

**Character 2:** Here is a description of a man. Imagine that he is a person living in your neighborhood. For a while now he has been very suspicious; he hasn't trusted anybody, and is sure that everyone is against him. Sometimes he thinks that people he sees on the street are talking about him or following him. A couple of times recently he has argued with men who didn't even know him, because he thought they were spying on him and plotting against him. The other night he got terribly angry at his wife, because he said she was working against him too just like everybody else.

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**Character 3:** Here is a description of a man. Imagine that he is a person living in your neighborhood. He is pretty happy most of the time, has a good job and is fairly well satisfied with it. He is usually busy and his friends think he is easy to get along with most of the time. He is currently engaged to a young woman, but he is having trouble deciding whether he really wants to get married now.

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**Character 4:** Here is a description of a man. Imagine that he is living in your neighborhood. He is the typical all around average guy easy to get along with, but becomes somewhat edgy when he has not had a drink (alcohol) over a prolonged period of time. He keeps up appearances when around others and his daily life is not greatly affected or even hindered noticeably. He drinks mostly in private and moderately at parties.

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