STEREOTYPE ACTIVATION IN ADVERTISING: IMPLICATIONS FOR CONSUMER BEHAVIOUR

by

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ABSTRACT

Two studies assessed the impact of ads featuring stigmatised group members on attitudes toward the ad, attitudes toward the product, purchase intent, and ultimately, purchase behaviour. The primary goal of Study 1 was to assess whether stereotypes or implicit prejudice are automatically activated when participants are exposed to ads featuring stigmatised group members. The presence or absence of stigmatised group members in ads was manipulated and participants' automatic stereotype activation, along with attitudes toward the ad, attitudes toward the product, purchase intent, and purchase behaviour were assessed. Results revealed that implicit prejudice was activated to a somewhat greater extent for high prejudice individuals exposed to an ad featuring a stigmatised group member than high prejudice individuals exposed to an ad featuring a nonstigmatised group member. In contrast, implicit prejudice was activated to a somewhat lesser extent for low prejudice individuals exposed to an ad featuring a stigmatised group member than low prejudice individuals exposed to an ad featuring a nonstigmatised group member.

The goal of Study 2 was to assess whether the simultaneous activation of conflicting stereotypes (i.e., both positive stereotypes associated with membership in a positively valued group and negative stereotypes associated with membership in a stigmatised group) in advertisements featuring stigmatised group members eliminates the potential negative impact of negative stereotype or implicit prejudice activation. As in Study 1, attitudes toward the ad, attitudes toward the product, purchase intent, and

purchase behaviour were assessed. Study 2 results suggest that individuals experienced activation of implicit prejudice (but not stereotypes about Blacks) to a somewhat greater extent when exposed to an advertisement featuring a Black target than an advertisement featuring a White target. Positive stereotypes about doctors were activated to a somewhat greater extent when individuals were exposed to an advertisement featuring the target (Black or White) depicted as a doctor. Furthermore, motivation to control prejudice reactions was found to moderate the effect of the presence of stigmatised group members in advertising and membership in a positively valued group on subsequent attitudes toward the ad, attitudes toward the product, purchase intent, and purchase behaviour. Additional results and implications are discussed.

DEDICATION

To my family and friends for their ongoing support and encouragement.

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Introduction

In today's society, many groups are still considered stigmatised. These groups include but are not limited to the poor, people living with AIDS, homosexuals, physically disabled persons, individuals who suffer from mental illness, the elderly, and members of various racial or ethnic minorities such as Blacks. These groups share several commonalities: They are often economically disadvantaged, the targets of negative stereotypes, often rejected interpersonally, and are discriminated against (Crocker, Major, & Steele, 1998). Given the defining features of stigmatised groups, one might wonder why a company might want to feature members of stigmatised groups in their advertisements. Aside from demonstrating that they are socially aware, companies may prevent alienating or failing to represent key market segments in the population by featuring stigmatised group members in their advertisements.

The Benetton ads are perhaps the most well known ads that feature stigmatised group members on an ongoing basis. However, there are other ads that feature minority group members. For example, Tyra Banks (a famous African American model) and Serena and Venus Williams (professional African American tennis players) were featured in the "Got Milk?" Campaign – an advertising campaign featuring celebrities promoting the benefits of drinking milk. In a more unconventional campaign, MAC cosmetics featured drag queen RuPaul as its spokesmodel (Klein, 2000, p. 113). Nike regularly

features Black athletes in their advertising campaigns, and Tommy Hilfiger marketed his fashion collection using African American style.

However, with the exception of celebrity endorsements, fashion advertisements, and ads that are featured in magazines that are geared for African American, Asian, or Hispanic target markets, there are *relatively* few ads that feature minority group members. Groups such as the Race Relations Advisory Council on Advertising established by the Canadian Advertising Foundation in 1990 exist to encourage the expanded use of visible minorities in advertising (http://www.media-awareness.ca/eng/indus/advert/rraca.htm). Yet there continues to be relatively limited use of ethnic minorities in ads. In fact, some research has found that African Americans and Hispanics appeared in less than eleven and ten percent of television commercials, respectively (Wilkes & Valencia, 1989). Why are advertisers hesitant to depict minorities in ads? Perhaps they are hesitant to feature members of stigmatised groups in advertising because of the potential subtle impact that these ads might have on product evaluation and ultimately purchase behaviour.

The primary objective of the proposed research is to examine the impact of the presence of stigmatised group members in advertisements on stereotype and prejudice activation, product and brand attitudes, and consumer behaviour. If negative stereotypes or prejudice are automatically activated when ads feature stigmatised group members, it is not difficult to imagine that this might have detrimental effects on attitudes toward the ad, attitudes toward the product, and ultimately, purchase behaviour. In this paper, I will first present a review of the literature investigating stereotype activation in the presence of stigmatised group members. Second, I will discuss stereotype activation and describe

its implications for attitudes and behaviour. Third, I will discuss the potential mediational roles of negative affect, and the spreading of attitude between stereotype activation and attitudes towards the ad, in influencing consumer behaviour. Fourth, I will discuss research investigating the presence of stigmatised group members in advertising on product evaluations and purchase behaviour. Finally, based on an integration of these literatures, I will report the results of two studies that assessing whether the presence of stigmatised group members in advertising automatically activates stereotypes (or prejudice) about the stigmatised group. Furthermore, the reported studies assessed whether stereotype activation engenders negative affect or a spreading of negative attitude that has an impact on product or brand attitudes and ultimately purchase behaviour.

Stereotype and Prejudice Activation

Stereotypes and prejudice exist. However, it is important to consider the circumstances by which stereotypes and prejudice come to mind. Stereotypes can be defined as socially shared sets of beliefs about attributes that are characteristic of members of a social category (Greenwald & Banaji, 1995, p. 14). There is considerable evidence that stereotypes and prejudice can be activated in the presence of stigmatised group members. Dovidio, Evans, and Tyler (1986), for example, demonstrated that stereotypes about Blacks (or Whites) can be activated in response to Black (or White) primes. These authors presented racial categories (Black, White) as primes, and positive and negative black and white stereotypic words as test stimuli. Participants indicated whether the test word could "ever be true" of the prime category or was "always false" and reaction time to indicate a response was recorded. Results revealed that primes of

Black and White facilitated responses to traits that are stereotypically attributed to these social groups (i.e., participants responded more quickly to positive White stereotypic traits when primed with the category "White" and negative Black stereotypic traits when primed with the category "Black").

In a key study, Macrae, Bodenhausen, and Milne (1995) demonstrated that stereotypes about Chinese individuals were activated when people viewed a videotape of a Chinese woman. These authors conducted three studies assessing stereotype activation. In Study 1, either the category woman or the category Chinese was primed. Participants then viewed a short videotape of a Chinese woman reading a book, and completed a lexical decision task. Results revealed that participants primed with the category "Chinese" responded more quickly to traits associated with the Chinese than traits associated with women. Participants primed with the category "woman" responded more quickly to traits associated with women than traits associated with the Chinese. Study 2 replicated these results. In Study 3, participants viewed a videotape depicting a Chinese woman either eating noodles from a bowl with a pair of chopsticks (meant to prime Chinese and inhibit woman) or putting on makeup by a mirror (meant to prime woman and inhibit Chinese). As in the prior studies, participants then completed a lexical decision task. Results revealed that participants who watched the videotape of the Chinese woman eating with chopsticks responded more quickly to traits that are associated with the Chinese than traits that are associated with women. Similarly, participants who watched the videotape of the Chinese woman applying makeup responded more quickly to the traits associated with women than traits associated with the Chinese.

Although participants in these studies were not subliminally primed with images of stigmatised group members, stereotypes seem to have been activated in a relatively automatic fashion (i.e., they were unintentionally or spontaneously activated, in an uncontrollable manner, without much conscious effort (Bargh, 1994)). In fact, there is considerable evidence supporting the notion that stereotypes can be activated in a fully automatic manner (i.e., completely unconsciously). Devine's (1989) research provides an excellent example of how stereotypes can be automatically activated. White participants were subliminally primed with words associated with the target group, African Americans (e.g., poor, slavery, jazz, and basketball). Some participants were exposed to many of these words whereas others were exposed to only a few of these words. Participants then read about and were asked to interpret ambiguous behaviour of an individual of unknown ethnicity. Participants who had seen the larger number of African American-related words in the subliminal priming task rated the target's behaviour to be more hostile than participants who had seen fewer African American-related words in the subliminal priming task.

Lepore and Brown's (1997) research also supports the notion that stereotypes about Blacks can be activated in an automatic fashion. These authors presented White participants with either words associated with Black people in Britain or nonsense letter strings subliminally on a computer screen. Each participant then read a description of a target person that was related to traits included in the Black stereotype (e.g., athletic, aggressive). Participants then rated the person on the stereotypic traits as well as other traits. Results revealed that participants who had been primed with words related to Blacks rated the person in a manner that was more consistent with the stereotype (i.e.,

they formed a more negative impression of the target) than those who had not been primed with such words. This effect was stronger for high prejudice individuals than for low prejudice individuals (i.e., for those who have more negative general attitudes towards Blacks). Similarly, Wittenbrink, Judd, and Park (1997) found that subliminally presented Black primes resulted in stronger facilitation to negative stereotypic attributes in comparison to positive stereotypic attributes. In contrast, subliminally presented White primes resulted in stronger facilitation to positive stereotypic traits in comparison to negative stereotypic traits.

A study by Fazio, Jackson, Dunton, and Williams (1995) also supports the notion of automatic stereotype and prejudice activation following subliminal exposure to Black primes. White participants were primed with images of Black or White faces on a computer screen followed by positive or negative words (e.g., sunshine or disease). Participants were asked to quickly press one of two keys to indicate whether the word was positive or negative. Results of this research revealed that responses to positive words were faster following a White person's face than following a Black person's face and responses to negative words are faster following a Black person's face than following a White person's face.

To summarize, the results of these studies demonstrate clearly that the automatic activation of stereotypes and prejudice towards Black persons can occur among White participants. However, it should be noted that this effect is not limited to the Black or Chinese stereotype. For example, research has revealed that stereotypes can also be automatically activated in the presence of gender (Blair & Banaji, 1996), and age cues (Purdue & Gurtman, 1990).

Individual Differences in Prejudice Associated with Automatic Stereotype Activation

Although stereotypes and prejudice have been shown to be activated in the presence of stigmatised group members, there has been some debate as to whether there are individual differences in prejudice associated with the activation of stereotypes. That is, some researchers have found that there are no individual differences associated with stereotype activation whereas other researchers have found evidence of individual differences associated with stereotype activation. Devine's (1989) research provides evidence that individual differences do not exist in stereotype activation. Participants subliminally primed with words related to the African American stereotype activated the stereotype regardless of their level of prejudice (an individual difference variable of negative attitudes measured by the Modern Racism Scale). That is, both high and low prejudice participants viewed an ambiguous target as more hostile after subliminal priming (implying that stereotype activation occurred for both groups). Therefore, Devine concluded that even those who are unprejudiced and who do not openly endorse negative stereotypes about African Americans activate the stereotype automatically when they are unable to engage in the controlled processing necessary to override the activation. On the basis of Devine's research then, one might conclude that there are no individual differences associated with the automatic activation of stereotypes.

Additional research suggests that there are individual differences in automatic stereotype activation. The consensus among these researchers is that egalitarians (i.e., low prejudice individuals) tend not to show evidence of stereotype activation to the same extent as high prejudiced individuals. Locke, MacLeod, and Walker (1994) provide evidence in support of the individual differences perspective. These authors found that

high prejudiced participants were more likely than their low prejudice counterparts to activate negative rather than positive traits regardless of how the traits related to the cultural stereotype of the target group "Aborigines". Further support for individual differences in automatic stereotype activation was found by Lepore and Brown (1997). These researchers subliminally primed White British students with words relevant to the stereotype of Blacks. Automatic stereotype activation occurred for high prejudiced individuals: Relative to low prejudiced individuals, high prejudiced individuals rated the target as more aggressive and unreliable when they were primed with Black words. Although this measure reflects stereotype application (rather than activation per se), stereotype application implies previous activation, and thus the results suggest that prejudice is related to activation. Finally, Wittenbrink, Judd, and Park (1997) also obtained evidence that high prejudice individuals are more likely than low prejudice individuals to automatically activate stereotypes about stigmatised group members. Thus, although there have been mixed findings across studies, the existing research seems to suggest that individual differences in prejudicial attitudes predict the likelihood of stereotype activation (for a review see Macrae & Bodenhausen, 2000).

Behavioural Implications of Stereotype Activation

Regardless of individual differences associated with the activation of stereotypes, what is important about the automatic activation of stereotypes and prejudice is the potential resulting negative consequences. Once stereotypes or prejudice have been activated, they can exert effects on judgments without one's awareness. In fact, an early study by Word, Zanna, and Cooper (1974) reported negative behavioural consequences following stereotype activation. These authors found that White participants who

interviewed a Black job applicant, actually a confederate, maintained greater physical distance between themselves and the applicant, made more speech errors during the interview, and ended the interview more rapidly than White participants who interviewed a White job applicant, also a confederate.

More recently, studies suggest that even stereotypes and prejudice that are activated outside of our awareness may influence our behaviour toward others. Fazio et al. (1995) provides an example of how behaviours can be adversely affected as a result of stereotype and prejudice activation. These authors demonstrated that participants with more readily activated negative feelings about Blacks behaved less friendly toward an experimental assistant who happened to be Black. In addition, participants attributed greater responsibility to Blacks for the riots following the Rodney King verdict when negativity had been previously activated.

To further illustrate the negative impact of stereotype activation, a clever study by Bargh, Chen, and Burrows (1996) provides an example of the negative impact of stereotype activation on behaviour using an interesting methodology. Non-African American participants were presented briefly with a large number of circles on a computer screen. Participants' task was to decide whether the number of circles was odd or even. Each picture was preceded with the subliminal presentation of a photograph of a young male. Half of the participants were subliminally presented with photographs depicting African Americans. The remaining half of participants were subliminally presented with photographs depicting Caucasians. This task went on for a large number of trials until an error message appeared and the participant was informed that it would be necessary to begin again. Participants' reactions were captured on a hidden video camera.

These reactions were then coded for hostility. Results revealed that participants who had been subliminally primed with African American faces responded in a more hostile manner in response to a request from the experimenter than did participants who had been subliminally primed with Caucasian faces.

Finally, Chen and Bargh (1997) also demonstrated that hostility can stem from stereotype activation. White participants were subliminally exposed to photographs of either African American men or White men. Then, each of these participants was paired with a partner who had not been exposed to any photographs and played a word-guessing game. The investigators created two separate audiotapes of the game (one containing only the words of the participant who had been primed with photographs, and one containing the words of the partner). Two judges, blind to the study's hypotheses, listened to the audiotapes and rated each player's level of hostility. Results revealed that participants primed subliminally with African American faces demonstrated greater hostility than did those primed with White faces. Furthermore, those interacting with the participant who had been primed with African American faces demonstrated greater hostility than did those interacting with the participant who had been primed with White faces.

Thus, these studies demonstrate the negative impact that stereotype and prejudice activation may have on judgments and behaviour.

Mood Congruency and Product Evaluation

Given that the mere presence of stigmatised group members is sufficient to produce stereotype and prejudice activation and such activation can negatively impact

judgments and behaviour, it seems possible that the presence of stigmatised group members in advertising will activate stereotypes (as well as accompanying prejudicial feelings) that may engender negative affect which will, in turn, negatively impact product and brand attitudes and, ultimately, consumer behaviour. Once negative stereotypes have been activated and prejudicial feelings have been evoked, negative affect may result. This negative affect may transfer or become associated with proximal stimuli (i.e., advertisements, products). Thus, product evaluations and purchase behaviour may be adversely affected.

Past research supports the notion that people who are experiencing positive moods are more likely than those experiencing negative moods to view the world in a more favourable light. In fact, mood congruency effects in social judgments wherein people evaluate others more favourably when they are in a good mood than when they are in a bad mood have been documented extensively. Presumably, moods automatically prime mood congruent thoughts that are later used in forming impressions of others. Alternatively, moods may be used heuristically to help people determine how they feel about a person (e.g., Forgas, 1995, Schwarz & Clore, 1996).

These findings are not limited to the social psychological research. Mood states have also been shown to have an impact on consumer behaviour. More specifically, researchers have found that mood has an impact on product evaluation. For example, Gorn, Goldberg, and Basu (1994) provide evidence in support of this view in their investigation of the effects of mood on product evaluation. Participants were asked to evaluate stereo speakers from which they heard music that induced either a good or a bad mood. Awareness of the music as the source of their mood was manipulated to be high or

low by asking participants to evaluate the music they heard either before evaluating the speakers (high awareness) or after evaluating the speakers (low awareness). In the low source awareness condition, mood biased the evaluation of the speakers: Participants evaluated the speakers more favourably when in a good mood than when in a bad mood. In contrast, in the high source awareness condition, there were no differences in speaker evaluations between participants in a good or bad mood.

Ciarrochi and Forgas (2000) found that mood does indeed have an impact on product evaluations. However, this effect is moderated by individual differences in openness to feelings. Participants were induced to feel good or bad (using either an autobiographical memory induction procedure or a video induction procedure) and estimated the subjective and objective value of a number of consumer items they owned or wanted to own. In addition, participants completed the Openness to Feelings scale. Mood had no effect on objective evaluations. However, a significant interaction was revealed between personality and mood on subjective evaluations. Individuals scoring high on Openness to Feelings showed a mood-congruent pattern: They reported more positive evaluations of consumer items when they were in a positive mood than when they were in a negative mood. In contrast, people scoring low on Openness to Feelings showed an opposite mood-incongruent bias.

A similar set of studies by Forgas and Ciarrochi (2001) yielded a general pattern of findings consistent with those reported above. Participants who scored high or low on the Openness to Feelings scale were induced to feel good or bad and were asked to estimate the subjective and objective value of a variety of consumer items they already owned or wanted to own. Results showed a mood-congruent pattern. People in a positive

mood valued both actual and potential possessions more highly than did people in a negative mood. However, people who scored high on the Openness to Feelings scale were most influenced by their moods. People who scored low on this scale showed the reverse pattern of results. Taken together, the results of these studies reveal that consumer behaviour has the potential to be very much affected by one's current affective state – particularly for those individuals who are most open to their feelings. Thus, it is possible that the negative affect associated with stereotype activation may have a similar impact on subsequent consumer attitudes and behaviour.

Spreading Attitude Effect

The spreading attitude effect offers a potential alternative mechanism by which activation of a negative stereotype might affect attitudes towards the ad, attitudes towards the product, attitudes toward the brand, and ultimately, purchase behaviour. The spreading attitude effect refers to the phenomenon that occurs when the pairing of a target with a liked or disliked person or object affects the evaluation of the previously neutral person or object and also spreads to the other individuals or objects that are associated with the target (Walther, 2002). Walther offers the example of a woman named Mary watching two individuals she does not know very well, Peter and Paul, interacting at a conference with Mark, an individual whom she dislikes. Paul's interaction with Mark affects Mary's evaluation of Paul as well as her evaluation of his friend Peter. Thus, the spreading attitude effect is said to have taken place.

If, in fact, stereotypes and prejudice are activated in the presence of stigmatised group members, it seems possible that, by pairing a product (or brand) with a stigmatised group member, this might affect the evaluation of the product and have an impact on the

brand image. That is, if an individual has negative feelings or attitudes towards stigmatised group members, those feelings or attitudes may transfer or spread to the product and brand being advertised and, hence, decrease the likelihood that the consumer will purchase the advertised product.

The Impact of the Presence of Stigmatised Group Members in Advertising on Product Evaluations and Purchase Behaviour

Although researchers have not examined stereotype and/or prejudice activation and their potentially negative consequences within the context of advertising and consumer behaviour, extensive research has been conducted to examine the effects of the presence of stigmatised group members in advertising on consumer attitudes and behaviour. Research in the 1960's and 1970's began to examine the impact of depicting African Americans in advertising on advertisement evaluations, product evaluations, company evaluations, message processing, purchase intentions, and purchase behaviour. For the most part, this body of research revealed that White participants' reactions to advertisements featuring Black actors were not extremely negative (e.g., Barban 1969; Barban & Cundiff, 1964; Bush, Gwinner, & Solomon, 1974; Bush, Hair, Solomon, 1979; Guest, 1970; Muse, 1971). Interestingly, however, there was a tendency for White participants' reactions to Black actors to be somewhat more negative than their reactions to White actors (e.g., Schlinger & Plummber, 1972). This effect was found to be particularly true among high prejudice individuals (Cagley & Cardozo, 1970; for review see Whittler, 1991).

The recent research in this area has also yielded mixed findings. In a somewhat more recent study, Whittler (1989) examined the impact of actors' race and viewers'

racial attitudes on viewers' reactions to the advertisements. In this study, it was demonstrated that the impact of actor's race on purchase likelihood and product evaluations depends on the race of participants. In addition, the impact of actor's race on interest in receiving additional product information depends on participants' prejudice level. High and low prejudice participants were exposed to an ad for liquid laundry detergent or a word processor that featured either a Black or White male actor. Results indicated that participants reported greater likelihood of purchase when exposed to ads with White or Black actors relative to controls who viewed ads that did not feature actors. Furthermore, Black participants reported greater likelihood of purchase when ads featured Black actors than when they featured White actors. White participants reported an equal likelihood of purchase when ads featured White or Black actors. In addition, advertisements with White and Black actors elicited more favourable evaluations than the control advertisements (regardless of participants' race). The results of this study suggest that White participants do not react negatively to advertisements featuring Black actors. Interestingly, some results suggest that some White participants may even respond more favourably to ads featuring stigmatised group members. When asked if they would like additional product information about the laundry detergent low prejudice White participants showed greater interest when exposed to an ad featuring a Black actor than an ad featuring a White actor. In contrast, high prejudice White participants showed greater interest in additional information when exposed to an ad featuring a White actor than an ad featuring a Black actor.

These results were not replicated in Whittler & DiMeo (1991). Rather, these authors found evidence that ads featuring Black actors were evaluated more negatively

than ads featuring White actors. In this study, high and low prejudice participants were exposed to either an ad for liquid laundry detergent or an ad for a fur coat that featured either a Black or White actor. Results indicate that, regardless of their attitudes towards African Americans, White participants were less likely to purchase the product, had less favourable attitudes towards the advertisement, and had less favourable attitudes toward the product when the advertisements featured Black actors as opposed to White actors.

Although much of the research in this domain examines White participants' reactions to advertisements featuring Black actors, research conducted by Whittler (1991) examined reactions of both Black and White participants. It seems that across these studies by Whittler and his colleagues, there is some tendency for White consumers to evaluate products more favourably when ads feature White actors. This is particularly true for high prejudice individuals. Two studies were conducted to assess viewers' reactions to racial cues in advertising stimuli. In Study 1, high and low prejudice white participants and high and low identification Blacks (i.e., those who identified with being Black) were exposed to either an ad for liquid laundry detergent or an ad for a portable word processor that featured either a Black or White actor. Results indicated that Black participants revealed an increased likelihood of purchase behaviour when ads featured Black actors relative to White actors. White participants reported an equal likelihood of purchase when ads featured White or Black actors. Furthermore, high prejudice White participants were less interested in obtaining further information about the laundry detergent when the ad featured a Black actor as opposed to a White actor. In Study 2, high and low prejudice White participants were exposed to either an ad for liquid laundry detergent or an ad for a fur coat that featured either a Black or White actor. Results

indicated that among the group of participants who expressed greater interest in additional information, there was a tendency for participants to be more likely to purchase the products, and evaluate the product and the ad more favourably when the ad featured a White actor than when the ad featured a Black actor.

Although some of Whittler's research suggests that there may be negative consequences of featuring stigmatised group members in ads for consumer behaviour, some additional recent research suggests otherwise. For instance, Appriah (2001) demonstrated that ads featuring Black actors are equally as appealing as those featuring White actors. The author exposed Black and White adolescents to advertisements that featured either Black or White actors. Results revealed that Black adolescents with a strong ethnic identity perceive themselves to be more similar to and identify more strongly with advertisements featuring Black actors than do Black adolescents with weaker ethnic identities. Furthermore, regardless of strength of ethnic identity, White adolescents find advertisements featuring Black actors that vary in terms of Black cultural cues to be as appealing as advertisements featuring White actors.

Also, Perkins, Thomas, and Taylor (2000) manipulated the racial composition of employees portrayed in job recruitment advertisements and did not reveal a negative impact of ads featuring stigmatised group members on subsequent attitudes toward the organization. These researchers found that as the ads became more racially diverse, African American attraction to the organization, perceptions of compatibility to the organization, and ratings of the organization's image increased. However, there was no influence on White participants' attraction to the organization, perceptions of

compatibility to the organization, and ratings of the orgainization's image as the ads became more racially diverse.

In another recent study involving ads featuring stigmatised group members, Brumbaugh (2002) found that ads featuring Black targets resulted in more positive outcomes than ads featuring White targets. This author exposed Black and White participants to ads for two fictitious products (an instant developing film and an unsecured personal loan) that varied in terms of the race of the actors in the ad (Black versus White) and the culture of the nonsource cues (i.e., background setting, language and linguistic cues, etc.) (Black versus White). Black participants tended to evaluate ads featuring Black sources more favourably than ads featuring White sources. It is interesting to note that attitudes toward the ad were more favourable among White participants when ads feature Black sources than when ads feature White sources. The authors suggest that aversive racism may have been operating (Dovidio & Gaertner, 1986) wherein White viewers may have overcompensated for a decreased preference for the ad featuring the stigmatised group member by reporting highly favourable attitudes (Brumbaugh, 2002).

Brumbaugh (2002) is not the first to report more favourable reactions to ads featuring stigmatised group members than ads featuring nonstigmatised group members. Recall that Whittler (1989) reported similar findings on some measures. These findings can be interpreted in terms of aversive racism as Brumbaugh (2002) suggested. Thus, these findings may be interpreted as a reverse discrimination type of effect wherein people act more favourably toward members of devalued outgroups (Alvaro & McFarland, in preparation).

Although much of the prior research has focused on White participants' reactions to stigmatised group members, some research has focused solely on reactions of African American's to advertising featuring stigmatised group members versus nonstigmatised group members. For example, Green (1999) has found that strong ethnic identifiers have more positive evaluations of ads that feature African Americans in positions of dominance and are placed in racially targeted media. In contrast, weak ethnic identifiers have more positive evaluations of ads that feature Whites in positions of dominance and are placed in nontargeted media.

Simpson, Snuggs, Christiansen, and Simples (2000) exposed high and low ethnic identifiers to racially congruent or racially incongruent advertisements. Results indicated that, regardless of participants' level of ethnic identification, racial congruity with the actor in the advertisement had an influence on the level of perceived similarity. Furthermore, when the racial cue was a White actor, the perceived similarity was higher for low ethnic identifiers than for high ethnic identifiers. The reverse was true when the racial cue was a Black actor. Finally, there was a significant impact of perceived similarity on purchase intent.

Most recently, Whittler and Spria (2002) exposed Black participants high and low in identification with Black culture to a garment bag advertisement that featured either a Black or White model and contained strong or weak message arguments. Results indicated that Blacks who identify strongly with Black culture evaluated the ad and product more favourably when it featured a Black model than when it featured a White model. Black participants who identify weakly with Black culture evaluated the ad and product similarly when it featured a Black or White model. In addition, the Black

model's race (in comparison to the White model) had a positive influence on Black participants' thoughts about the product. This, in turn, resulted in more favourable product evaluations.

Most of the research on the effects of stigmatised group members in advertising focuses on racial or ethnic minorities. However, Bhat, Leigh, and Wardlow (1998) examined heterosexuals' reactions to the portrayal of homosexuals in ads. They demonstrated that attitudes toward ads featuring homosexuals depended on individual differences in attitudes toward homosexuality. Individuals with more negative attitudes towards homosexuality experienced greater negative emotional reactions to a homosexual ad than individuals with more positive attitudes towards homosexuality.

In summary, the research investigating the effects of stigmatised group members in advertising on evaluations of advertisements and evaluations of products has revealed mixed findings. However, the most consistent pattern that has emerged is that high prejudiced White individuals have more negative evaluations of ads, have more negative evaluations of products, and are less likely to purchase the product, when the advertisements feature Black actors than when the advertisements feature White actors. In contrast, low prejudice White individuals are have more positive evaluations of ads, have more positive evaluations of products, and are more likely to purchase the product when the advertisements feature Black actors than when the advertisements feature White actors.[1]

Motivation to Control Prejudiced Reactions

Although it has not been examined within the context of the research described in the prior section, there is an emerging body of evidence that individual differences exist in the motivation to control prejudiced reactions. Dunton and Fazio (1997) developed a measure of such motivation (i.e., the Motivation to Control Prejudiced Reactions Scale). These authors maintain that, if individuals are motivated to engage in cognitive effort and have the opportunity to do so, controlled processing may temper any effects of automatically activated negativity toward Blacks. They report evidence that the expression of racial prejudice is moderated by individual differences in motivation to control prejudiced reactions. Specifically, Dunton and Fazio (1997) found that participants high in motivation to control prejudiced reactions inhibited the expression of racial prejudice (i.e., they reported less prejudiced attitudes on self-report measures of feelings towards Blacks). Participants high in motivation to control prejudiced reactions tended to report positive evaluations of Blacks even when negativity had been activated automatically via unobtrusive racial attitude estimates derived from a procedure used by Fazio et al. (1995). In contrast, when negative attitudes had been automatically activated, those low in motivation to control prejudiced reactions expressed racial prejudice consistent with their automatically activated negativity towards Blacks. These findings are consistent with evidence suggesting that motivation to control prejudiced reactions is correlated with individual differences in prejudice such that high scores on the Motivation to Control Prejudiced Reactions Scale are associated with less prejudiced Modern Racism Scale scores (Dunton & Fazio, 1997).

Although higher scores on the Motivation to Control Prejudiced Reactions Scale are associated with lower scores on the Modern Racism Scale (Dunton & Fazio, 1997) and scores on the Motivation to Control Prejudiced Reactions Scale are correlated with scores on self reported levels of prejudice such as the Attitude Toward Blacks Scale (ATB) ($r = .20, p < .05$; Plant & Devine, 1998), the scales measure distinct constructs. First, motivation to control prejudiced reactions is characterized by two factors – concern with acting prejudiced and restraint to avoid dispute (Dunton & Fazio, 1997). The Attitude Toward Blacks Scale (Brigham, 1993) and the Modern Racism Scale are attitudinal measures of sentiment toward Blacks – as evidenced by agreement with various socio-political statements. Second, motivation to control prejudiced reactions represents a conscious desire to protect an egalitarian or non-prejudiced self-image. Thus, persons low in motivation may be either high or low in prejudice. Someone who is low in motivation to control prejudiced reactions may not possess any underlying negative attitudes towards Blacks (i.e., they may truly be nonprejudiced) and, hence, may not be motivated to "prove" to themselves or others that they are nonprejudiced. Alternatively, someone who is low in motivation to control prejudiced reactions may very well possess underlying negative attitudes towards Blacks yet lack a concern with maintaining an egalitarian self-image or presenting themselves as such to others. Persons high in motivation to control prejudiced reactions may also be high or low in prejudice. Individuals high in motivation to control prejudiced reactions may have underlying negative attitudes towards Blacks yet be highly motivated to avoid appearing prejudiced to themselves or others. Other individuals high in motivation to control prejudiced

reactions may be truly nonprejudiced and, hence, highly motivated not to have his or her actions misconstrued as prejudiced.

Consistent with Dunton and Fazio's (1997) research, several other researchers have challenged the notion of the inevitability of stereotyping and the expression of prejudice. For example, Wyer, Sherman, and Stroessner (2000) found that, when individuals are motivated to avoid stereotyping others (i.e., when they are motivated and have capacity to do so), the influence of prior stereotyping is minimized. Furthermore, in a recent paper, Kunda and Spencer (2003) have argued that both the activation and application of stereotypes can depend on one's motivation to control prejudice. They cite evidence that motivation to avoid prejudice can inhibit the activation of stereotypes as well as any subsequent application of stereotypes that have been previously activated (e.g., Fein et al., 2003; Moskowitz et al., 1999; see Kunda and Spencer, 2003 for a complete review).

Although much of the research in this area conceptualises motivation to control prejudiced reactions in general terms, it should be noted that researchers have made a distinction between internal and external motivation to respond without prejudice (Plant & Devine, 1998). Plant and Devine (1998) maintain that internal motivation to respond without prejudice is characterized by a concern with appearing prejudiced to oneself whereas external motivation to respond without prejudice is characterized by a concern with appearing prejudiced to others. Interestingly, internal motivation to respond without prejudiced was negatively correlated with actual prejudice levels (i.e., lower prejudiced persons score higher in internal motivation to respond without prejudice) whereas external motivation to respond without prejudice was positively correlated with actual

prejudice levels (i.e., higher prejudiced individuals score higher on external motivation to respond without prejudice). These authors found that individuals higher in external motivation to respond without prejudice adjusted or inhibited prejudiced responding (as indicated by endorsement of the Black stereotype) in public when compared with increased expression of prejudice in private. In contrast, individuals high in internal motivation to respond without prejudice did not adjust their expressions of prejudice and demonstrated relatively little difference in the endorsement of the Black stereotype in public and private and showed little endorsement of the Black stereotype relative to individuals high in external motivation.

Interestingly, researchers have noted that the notion of motivation to respond without prejudice is consistent with Gaertner and Dovidio's (1986) concept of the aversive racist (e.g., Plant & Devine, 1998; Son Hing et al., 2002). Aversive racists are characterized as consciously espousing egalitarian standards even though they unconsciously harbour negativity towards Blacks. Egalitarian values are of great importance to the aversive racist's self-concept. Thus, when their underlying negativity towards Blacks threatens to become salient, aversive racists become motivated to avoid acting in ways that are consistent with this underlying negativity. That is, they become motivated to avoid prejudiced reactions. Gaertner & Dovidio (1986) suggest two possible outcomes. In some cases, aversive racists may overcompensate for their underlying negative feelings and/or attitudes by engaging in overly positive behaviours (i.e., by engaging in reverse discrimination) to reaffirm their egalitarian self-image. In other cases, aversive racists may express negativity but do so in more subtle or rationalizable ways or ways that can be justified as non-racist. Thus, aversive racists can

become less motivated to avoid prejudiced reactions when situations allow for alternative, non-prejudiced interpretations of prejudiced actions.

The Current Research

A growing body of social cognition research would suggest that there are automatic influences on our purchasing and consumption behaviour (Bargh, 2002). One potential source of such influence on our purchase behaviour comes in the form of advertising. The primary objective of the current research was to examine the impact of the presence of stigmatised group members in advertising on the activation of stereotypes and/or prejudice (and any accompanying negative affect), attitudes toward the ad, attitudes toward the brand, and, ultimately consumer behaviour. Although prior research has examined the effects of the presence of stigmatised group members in advertising on advertising evaluations, product evaluations, purchase intentions, and purchase behaviour, the findings are mixed and the past research has not examined stereotype activation and negative affect as the potential processes mediating the effects. The primary hypothesis was that ads featuring stigmatised group members (i.e., Blacks) will automatically activate stereotypes about the stigmatised group when compared to ads that do not feature stigmatised group members. Furthermore, it is expected that this automatic activation of stereotypes will negatively impact consumers' attitudes toward the advertisement, attitudes toward the brand, purchase intent, and purchase behaviour. (See Figure 1). Presumably, once negative stereotypes or prejudice have been activated, negative affect (or a spreading of negative attitude) will transfer to the attitudes to the ad, attitudes toward the product/brand, purchase intent, and purchase behaviour. Importantly, this pattern of effects should occur primarily among persons who possess

generally negative attitudes towards stigmatised group members (i.e., among those higher in prejudice on the Modern Racism Scale) or those low in motivation to control prejudiced reactions (on the Motivation to Control Prejudiced Reactions Scale).

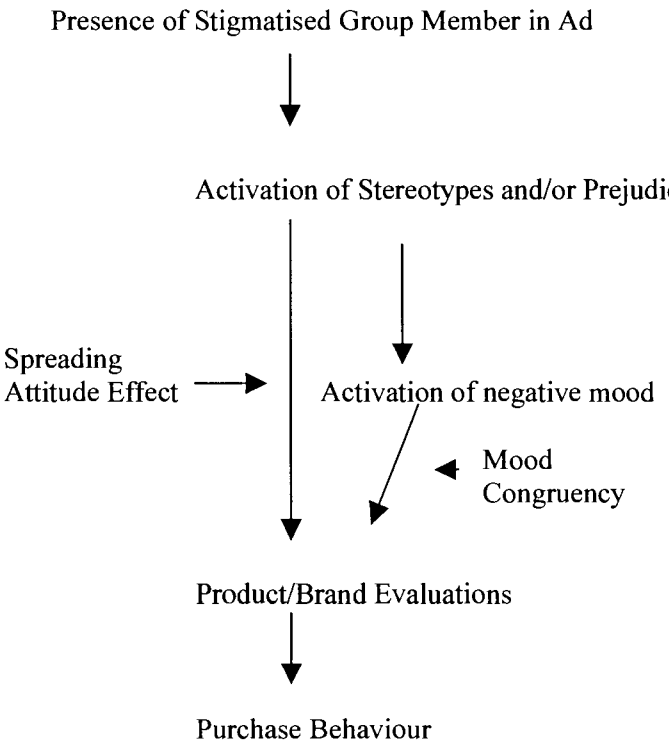

Figure 1

Study 1

The primary goal of Study 1 was to assess participants' automatic stereotype activation upon exposure to existing advertisements featuring stigmatised group members (i.e., Black persons). One half of the participants were exposed to an advertisement that features a stigmatised group member. The remaining half of the participants were exposed to an advertisement featuring a nonstigmatised group member (i.e., a White person). Additionally, to increase generality, the product depicted in the ad was varied (half of the persons in the ad conditions viewed an ad for milk and the remainder viewed

an ad for runners). Stereotype activation, attitudes toward the products, attitudes toward the ads, attitudes toward the brands, purchase intent, and purchase behaviour were assessed. Individual differences in prejudice and motivation to control prejudiced reactions were also assessed in order to determine whether these variables play a moderating role in the effect of the presence of stigmatised group members in advertising on subsequent consumer attitudes and behaviour.

It was predicted that among high prejudice participants, implicit stereotypes (and implicit prejudice) would be activated when ads feature stigmatised group members. Furthermore, it was expected that once such stereotypes were activated, negative affect could result and negative attitudes would transfer to the ad, product/brand, and would potentially adversely affect purchase intent and purchase behaviour. In contrast, it was predicted that among low prejudice participants, stereotypes (and implicit prejudice and negative affect) would not be activated when ads feature stigmatised group members. Therefore, negative affect and negative attitudes would not transfer to the ad, product/brand, and would not adversely affect purchase intent and purchase behaviour. Given past research findings, it was possible that the low prejudice participants might even respond more favourably to advertisements featuring stigmatised group members resulting in positive attitudes toward the ad, attitudes toward the product/brand, and positively affecting purchase intent and purchase behaviour. Predictions for the potential moderating role of motivation to control prejudiced reactions mirror those predicted for prejudice levels. That is, low prejudice can be substituted with high motivation to control prejudiced reactions and high prejudice can be substituted with low motivation to control prejudiced reactions.

Method

Participants. One hundred and forty-four undergraduate students (79 females and 65 males) from the Department of Psychology at Simon Fraser University were recruited to participate in this study in exchange for course credit or as volunteers. Participants of differing ethnic backgrounds were represented (72 (50%) Caucasian, 52 (36.1%) Asian, 10 (6.9%) East Indian, 1 (.7%) Black, 9 (6.3%) other). Note that there was insufficient data to analyze the role of ethnic/racial background of participant on the main dependent variables. However, preliminary analyses of variance and regression analyses similar to those described below, but including race of participant (Caucasian versus other) as a factor, were conducted on the main dependent variables. Note that the results of these analyses did not yield any significant interactions with ethnic/racial background of participant. Thus, it would seem that race of participant does not affect the general pattern of results. However, given that some cells had very few participants, the issue of whether the ethnic/racial background of participant might affect the pattern of results described in the sections that follow remains an open question -- one that is worth pursuing in future research.

Design. The design of this study is a 2(presence/absence of stigmatised group member in ad: presence of stigmatised group member in ad vs. presence of nonstigmatised group member in ad) X 2 (evaluated product: milk vs. running shoes) X 2 (prejudice level: high vs. low) between subjects factorial design. Note that the stigmatised group in this experiment was Black persons. This group was selected for this study because it is a minority group that is more commonly depicted in advertising. The activation of stereotypes following exposure to the ads was assessed. In addition,

participants' attitudes toward the ads, attitudes toward the products, and purchase intent were assessed. Individual differences in prejudice and motivation to control prejudiced reactions were also assessed.

Procedure. Upon arrival, participants were told that they would be participating in two separate studies being conducted by different researchers. They were told that the purpose of the Study 1 was to examine how cognitive style affects consumers' reactions to advertised products. Accordingly, they were informed that they would view a series of ads, complete measures of cognitive style, and indicate their attitudes toward the ads and the advertised products. In actuality, "Study 1" exposed participants to both a filler and target ad, and obtained measures of implicit prejudice activation and stereotype activation. In addition, participants' attitudes toward the ad, attitudes toward the product, attitudes toward the model depicted in the target ad, and purchase intent were assessed for both the target product and the filler product. (Note that the measures pertaining to the target ad were obtained prior to those pertaining to the filler ad. Responses relevant to the filler ad were only included to be consistent with the cover story and, hence, were not included in the analyses). Finally, a measure of purchase behaviour was obtained. Participants were told that Study 2 examined how attitudes and personality style influence impressions of others. Participants were informed that they would read some information about an individual and provide their impression of this person and then complete a questionnaire assessing their attitudes about various issues as well as their personality style. In actuality, "Study 2" included an assessment of individual differences in indirect and direct prejudice and motivation to reduce prejudiced reactions. Both "Study 1" and "Study 2" were administered via computer using MediaLab software.

Manipulation of Presence of Stigmatised Group Members and Product. One half of the participants viewed an ad featuring stigmatised group members (either an ad for milk or an ad for runners). The remaining half of the participants viewed an ad featuring nonstigmatised group members (either an ad for milk or an ad for runners). Note that the Got Milk? ads were used in Study 1. These ads were part of a campaign to increase awareness of the benefits of drinking milk. Although the Got Milk? ads do feature stigmatised group members in their ads, the stigmatised group members featured in the ads also happen to be celebrities. This may have activated conflicting and more favourable stereotypes (e.g., Sinclair & Kunda, 1999). Therefore, this might work against obtaining an effect of the presence of a stigmatised group member in an ad on the activation of negative stereotypes and negative affect and its subsequent adverse impact on brand attitudes and purchase behaviour. To eliminate this possibility, an additional set of ads (ads for KSwiss running shoes) were included in the design. These ads also varied the presence of a stigmatised group member (i.e., African Americans). However, the people depicted in these ads were not celebrities. This set of ads was ideal in that almost all aspects of the various versions of the ad were held constant except for the presence of the stigmatised group member. To control for gender, half of the ads for each product featured a male target and half featured a female target. (See Appendix B for ads).

Automatic Stereotype Activation. Participants then completed the stereotype activation measure. As part of the cover story, they were informed that the researcher was interested in assessing how cognitive style influences people's perceptions and evaluations of advertisements and products. Stereotype activation was assessed using a word fragment completion task similar to those used by other researchers (Gilbert &

Hixon, 1991; Sinclair & Kunda, 1999; Spencer et al., 1998; Steele & Aronson, 1995). In this task, participants are asked to generate completions for word fragments. For example, participants might observe the following word fragment: WEL_ _ _ _. The underlying logic is that, if the African American stereotype has just been activated, participants will be more likely to create a word associated with that stereotype (e.g., *welfare*). Alternatively, if the stereotype has not been activated, participants will be more likely to create a word that is not associated with the stereotype (e.g., *welcome*). The measure was adapted from Sinclair & Kunda (1999). In total, participants completed 41 word fragments (allowing for two word fragments between each of the stereotype word fragments). Thirteen of the word fragments have words associated with the stereotype of African Americans as the possible solution and were embedded among nonstereotypic word fragments. The list of stereotypic words included: _ _ C E (RACE); L A _ _ (LAZY); _ _ A C K (BLACK); _ _ O R (POOR); CL_S_ (CLASS); BR_ _ _ _ _ (BROTHER); MI_ _ _ _ _ _ (MINORITY); WEL_ _ _ _ (WELFARE); CO_ _ _ (COLOR); TO_ _ _ (TOKEN); CR_ _ _ (CRIME); _AP (RAP); DR_ _ (DRUG).

Implicit Prejudice. Implicit prejudice was assessed using the word fragment completion task used by Dovidio, Kawakami, Johnson, Johnson, and Howard (1997). There are 24 word stems in total that could either produce positive, negative, or neutral words. The word stems to be used include: HA_E, RU_E, PRO_ANE, _IGHT, _URE, _INISTER, LO_D, GO_D, POLI_E, BU_, MA_, _ITY, W_RM, _AGE, WI_E, S_ORT, LA_Y, _RUNK, CLEA_, B_D, S_AVE, MEA_, LO_AL, and POO_. Note that some items used in the word fragment completion for the implicit measure of prejudice are duplicated on the stereotype activation word fragment completion task. Every effort was

made to avoid this. It is my understanding that the word fragments used for the implicit measure of prejudice are intended to be more evaluative in nature. Therefore, the more evaluative word fragments that are duplicated in the stereotype activation measure (e.g., lazy, poor) will be removed and used only in the implicit measure of prejudice. There are other measures of implicit prejudice that may circumvent this issue (see Fazio (in press) for review). However, these measures are lengthy to complete and it is likely that any effect of the independent variable on the dependent measures (of consumer behaviour and cognition) would dissipate by the time participants have completed the implicit measures of prejudice.

Affect. Participants then rated their current mood on two 7-point bipolar scales (good-bad, happy-sad; see Ciarrochi & Forgas, 2000; Forgas & Ciarrochi, 2001).

Attitudes toward the ad. Participants were asked to respond to three 7-point Likert scales anchored by good-bad, pleasant-unpleasant, favourable-unfavourable as used by previous researchers (e.g., Aylesworth & MacKenzie, 1998; Chattopadhyay & Nedungadi, 1992; Homer, 1990; MacKenzie & Lutz, 1989; MacKenzie & Spreng, 1992; Mitchell, 1986).

Attitudes toward the product. Participants then completed selected items from the Attitude Toward the Product/Brand (Semantic Differential) Scale (Bruner & Hensel, 1992; see Appendix C). Participants were asked to evaluate the specific product on the basis of an adjective listing. Attitudes were assessed on seven- point semantic differential scales (1 = superior; 7 = inferior), with higher scores indicating a more negative attitude toward the product. Items were reverse scored when necessary.

Purchase intent. Purchase intent was assessed using three variables. First, participants were asked "How likely are you to buy this product?" (1 = not at all; 7 = extremely). Participants were subsequently asked "How likely are you to purchase this product between now and the end of the year?" (1 = not at all; 7 = extremely likely).[2] Finally, participants were asked "How likely are you to purchase this product on your next shopping trip?" (1 = not at all likely; 7 = extremely likely).

Source evaluation. Participants were asked to rate the model featured in the advertisement on the following attributes on a scale ranging from 1 to 7: warm-cold, likeable-unlikeable, friendly-unfriendly, sincere-insincere. Higher numbers were indicative of more negative attitudes toward the model (Whittler & DiMeo, 1991).

Manipulation check on the identification of model's race. Participants were asked to identify the race of the model depicted in the ad: White (1), Black (2), Hispanic (3), Asian (4), East Indian (5), Can't remember (6).

Familiarity with the product. Participants were then asked to rate their familiarity with the advertised product on a scale ranging from 1 (unfamiliar) to 7 (familiar).

Purchase behaviour. Given that the ultimate goal of advertising is to influence purchase behaviour, it is important to include some sort of behavioural measure to tap into whether participants are likely to purchase the advertised products. Therefore, participants were asked to select one coupon that they would like to receive as a token of appreciation for their participation in the research. They were told to select one of two coupons: (1) a coupon for the target product (i.e., milk or Kswiss runners depending on the target ad to which they were initially exposed) or (2) a coupon for a different product

of equal value that had been rated as equal to the target product on the basis of a pre-test (i.e., bread or Diesel Jeans). For the pre-test, 12 participants rated products that were thought to roughly equal the value of the target product (e.g., milk, bread, dish soap, orange juice and running shoes, jeans, hooded sweatshirt, backpack). The products were rated on the items selected from Attitude Toward the Product/Brand (Semantic Differential) Scale as described above (Bruner & Hensel, 1992). Products were rated as follows: milk ($M = 2.63$), bread ($M = 2.42$), dish soap ($M = 3.02$), orange juice ($M = 3.19$) running shoes ($M = 2.25$), jeans ($M = 2.26$), hooded sweatshirt ($M = 2.80$), backpack ($M = 2.40$). The product rated most similarly to the target product was selected as the alternative coupon. Thus, milk was paired with bread, $F(1,11) = .74$, *ns*. Running shoes were paired with jeans, $F(1,11) = .004$, *ns*.

Indirect measure of individual differences in prejudice. Although researchers have recently obtained individual differences effects using the Modern Racism Scale (MRS) as a measure of prejudice (e.g., Sinclair & Kunda, 1999; Petty, Flemming, & White, 1999), some authors have questioned the use of this measure due to its reactivity (e.g., Fazio, 1995). Thus, an indirect measure of prejudice was obtained prior to the Modern Racism Scale and was used as the primary individual difference measure of prejudice in this study. Social psychological research has revealed that people generally like those who are similar to themselves. For example, in Byrne (1971) participants were given a questionnaire on social and political attitudes supposedly completed by another student. The closer the stranger's attitudes were to their own, the more participants liked the unknown individual. In order to assess individual differences in indirect prejudice, participants were asked to review a sample questionnaire ostensibly completed by a

participant from a previous study. The questionnaire was actually the Modern Racism Scale (McConahay, 1986). Items had been circled on the questionnaire such that the ostensible participant expressed racist attitudes towards Blacks (See Appendix D). Upon viewing this sample questionnaire, participants were told that "People often form impressions of another individual based on that person's personal attitudes or beliefs. In a prior session, we have asked various individuals to rate their attitudes on a variety of issues. On the next screen, you will find one individual's responses to various items that were part of an attitudinal questionnaire. Please take a moment to review the responses. You will then be asked to rate your impression of this individual." Participants were asked to rate their impression of the individual who had completed the questionnaire on the following attributes: likeable-unlikable, friendly-unfriendly, warm-cold, caring-uncaring, kind-unkind, honest-dishonest, sincere-insincere, good-bad, open-minded – closed minded, tolerant-intolerant, fair-unfair, respectful-disrespectful. Items were coded so that higher numbers were indicative of more negative impressions of the target individual (i.e., and hence lower prejudice). Note that the correlation between participants' scores on the Modern Racism Scale and the indirect measure of prejudice was quite high, $r\,(144) = -.51, p < .01$. Thus, individuals scoring high on the Modern Racism Scale rated a target espousing negative attitudes towards Blacks more favourably (i.e., expressed greater prejudice) than those scoring low on the Modern Racism Scale.

Direct measure of individual differences in prejudice. Participants were also asked to provide their responses to the same questionnaire. Thus, individual differences in prejudice were assessed using the Modern Racism Scale (McConahay, 1986; see Appendix E). As mentioned above, some authors have questioned the use of this

measure (e.g., Fazio, 1995). However, researchers have recently obtained individual difference effects using the Modern Racism Scale as a measure of prejudice and, thus, this measure was included in the study (e.g., Sinclair & Kunda, 1999; Petty, Flemming, & White, 1999).

Individual differences in motivation to control prejudiced reactions. The Motivation to Control Prejudiced Reactions Scale (Dunton & Fazio, 1997) was included to assess the extent to which individuals are motivated to not be perceived as prejudiced in any manner, have non-prejudiced thoughts, and engage in non-prejudiced behaviours. The potential moderating role of this variable was also explored.

Results

Creation of indices. Two indices of negativity towards Blacks in response to the ads were created. First, an overall index of stereotype activation was computed by adding the total number of stereotype related words participants created on the stereotype activation word fragment completion task (possible range = 0 to 13). Second, an index of implicit prejudice activation was computed by adding the total number of negative words participants created on the implicit prejudice activation word fragment completion task (possible range = 0 to 14). Next, two indices reflecting individual differences in prejudice were created. The first index (indirect prejudice index) was created by averaging participants' responses on the impression formation task (alpha = .94). Higher scores reflect more unfavourable impressions of the target (i.e., lower prejudice) (possible range = 1 to 7). The second index (direct prejudice index) was created by averaging participants' responses to the Modern Racism Scale (alpha = .83). Higher scores on this measure are indicative of higher prejudice (possible range = 1 to 5). An index of

individual differences in motivation to reduce prejudiced reactions was also created by averaging participants' responses on the Motivation to Control Prejudiced Reactions Scale (alpha = .75). Higher scores reflect greater motivation to control prejudiced reactions (possible range = 1 to 7). Note that participants were categorized as high or low on these three individual difference measures on the basis of median splits (This categorization scheme was used for the analyses of variance. However, corresponding regression analyses used the total scores on each index). In order to assess whether stereotype activation results in negative affect, participants' responses on the two mood items were averaged to form an index of negative affect (alpha = .88; possible range = 1 to 7). Higher scores are reflect more negative mood. Two attitudinal indices were also created. An index of attitudes toward the ad was computed by averaging participants' responses on the three attitude toward the ad items (alpha = .90; possible range = 1 to 7). An index of attitudes toward the product was computed by averaging participants' responses on the Attitude Toward the Brand/Product Scale items (alpha = .86; possible range = 1 to7). Higher scores on both of these attitudinal indices reflect more negative attitudes. Finally, an overall index of purchase intent was computed by averaging participants' responses on the three purchase intent items (alpha = .89; possible range = 1 to 7). Higher scores are indicative of greater purchase intent.

Manipulation Check: Identification of model's race. Participants were asked to identify the race of the model depicted in the ad. The results of a chi-square analysis with race of target and race identified as variables revealed that the distribution of identified race differs as a function of the race of target, χ^2 (4) = 126.56, $p < .0001$. For the most part, participants were fairly accurate when it came to identifying the race of the model

depicted in the ad. For participants exposed to an ad featuring a Black target, 67 participants (91.8%) stated that the target was Black, 1 participant (1.4%) stated that the target was Hispanic, 3 participants (4.1%) stated that the target was East Indian, and 2 participants (2.7%) could not recall the model's race. For participants exposed to an ad featuring a White target, 64 participants (90.1%) accurately stated that the target was White, 2 participants (2.8%) stated that the target was Black, 2 participants (2.8%) stated that the target was Hispanic, 1 participant (1.4%) stated that the target was East Indian, and 2 participants (2.8%) could not recall the model's race. Thus, it seems that participants were paying close attention to the race of the model featured in the ad.

Note that additional chi-square analyses were conducted to determine whether identification of the model's race varied as a function of not only race of target but also as a function of the race of participants. Participants were categorized as Caucasian or Non-Caucasian (i.e., collapsing across all non-White ethnic/racial categories such as Asian, East Indian, Black, and other). The results of a chi-square analysis with race of target and identified race as variables revealed a similar overall pattern of results when examining the data for Caucasian participants only, χ^2 (4) = 63.45, $p < .0001$. When exposed to an ad featuring a Black target, 34 participants (94.4%) correctly identified the target as Black. One participant (2.8%) mistakenly identified the target as East Indian and 1 participant (2.8%) could not recall the model's race. When exposed to an ad featuring a White target, 30 participants (83.4%) correctly identified the target as White. One participant (2.8%) mistakenly identified the target as Black, 2 participants (5.5%) mistakenly identified the target as Hispanic, and 1 participant (2.8%) mistakenly

identified the target as East Indian. Two participants (5.5%) could not recall the model's race.

The results of a chi-square analysis with race of target and identified race as variables revealed a similar overall pattern of results when examining the data for Non-Caucasian participants only, χ^2 (3) = 67.12, $p < .0001$. When exposed to an ad featuring a Black target, 33 participants (91.7%) correctly identified the target as Black. One participant (2.8%) mistakenly identified the target as Hispanic and 2 participants (5.5%) mistakenly identified the target as East Indian. When exposed to an ad featuring a White target, 34 participants (97.1%) correctly identified the target as White. One participant (2.9%) mistakenly identified the target as Black.

Additional separate chi-square analyses with race of participant and race identified were conducted for each category of target race (i.e., Black vs. White). The results of these analyses were not significant, Black χ^2 (3) = 2.39, *ns.*, and White χ^2 (4) = 5.24, *ns.* Thus, within each target race, race of participant did not alter the distribution of race identification. Based on the findings of these analyses, it seems that identification of the model's race did not vary as a function of participants' race (see Table 1).

		Race Identification					
		White	Black	Hispanic	Asian	East Indian	Can't Remember
Race of Participant							
	Model's race						
East Indian	Black	0	5	0	0	0	0
	White	5	0	0	0	0	0
Caucasian	Black	0	34	0	0	1	1
	White	30	1	2	0	1	2
Black	Black	0	1	0	0	0	0
	White	0	0	0	0	0	0
Asian	Black	0	20	1	0	2	0
	White	28	1	0	0	0	0
Other	Black	0	7	0	0	0	0
	White	1	0	0	0	0	0
Overall	Black	0	67	1	0	3	1
	White	64	2	2	0	1	2

Note: The data presented in this table represent the number of participants who identified the model as belonging to a particular race.

Table 1: Model's race identification as a function of race of participant

Stereotype activation as a function of presence of stigmatised group member in ad and individual differences in indirect prejudice. It was predicted that stereotypes would be more likely to be activated for individuals who were exposed to ads featuring stigmatised group members than for individuals who were exposed to ads featuring nonstigmatised group members. This was expected to be particularly true for high prejudiced individuals in comparison to low prejudice individuals. To test this prediction, a 2(target: presence of stigmatised group member in ad vs. presence of

nonstigmatised group member in ad) X 2(evaluated product: milk vs. KSwiss running shoes) X 2(prejudice level: high vs. low) ANOVA was conducted on the stereotype activation scores. There was no significant interaction between the target featured in the ad and participants' prejudice level, $F(1, 136) = .000$, *ns.*, Cohen's $f = .001$ (see the first six rows of Table 2). It should also be noted that there was no significant three-way interaction between the target featured in the ad, participants' prejudice level, and the evaluated product, $F(1, 136) = .03$, *ns.*, Cohen's $f = .01$.

Measure and Indirect Prejudice Level		Target: Black	Target: White
Stereotype Activation			
Low Indirect Prejudice	*M*	1.59	1.49
	SD	1.19	1.15
	N	37	31
High Indirect Prejudice	*M*	1.70	1.64
	SD	.88	1.00
	N	36	40
Implicit Prejudice			
Low Indirect Prejudice	*M*	4.93	5.74
	SD	1.54	2.38
	N	37	31
High Indirect Prejudice	*M*	5.71	4.99
	SD	1.97	1.90
	N	36	40
Negative Affect			
Low Indirect Prejudice	*M*	2.86	2.80
	SD	1.24	1.09
	N	37	31
High Indirect Prejudice	*M*	3.25	2.84
	SD	1.11	1.29
	N	36	40

Note: Higher numbers are indicative of greater negativity for all measures listed in the table.

Table 2: The effect of target and individual differences in indirect prejudice on stereotype activation, implicit prejudice activation, and negative affect

Implicit prejudice activation as a function of presence of stigmatised group member in ad and individual differences in indirect prejudice. It was predicted that implicit prejudice activation would be greater for individuals who were exposed to ads featuring stigmatised group members than for individuals who were exposed to ads featuring nonstigmatised group members. This effect was expected to be particularly strong for high prejudiced individuals in comparison to low prejudice individuals. To test

this prediction, a 2(target: presence of stigmatised group member in ad vs. presence of nonstigmatised group member in ad) X 2(evaluated product: milk vs. KSwiss running shoes) X 2(prejudice level: high vs. low) ANOVA was conducted on the implicit prejudice activation scores. This analysis revealed a significant interaction between the target featured in the ad and participants' indirect prejudice level, $F(1, 136) = 5.40, p < .02$, Cohen's $f = .20$. Implicit prejudice was activated to a somewhat greater extent for high prejudiced participants exposed to an ad featuring a stigmatised group member ($M = 5.71$) than for high prejudiced participants exposed to an ad featuring a nonstigmatised group member ($M = 4.99$), $t(136) = 1.60$, *ns.* In contrast, implicit prejudice was activated to a somewhat lesser extent for low prejudiced participants exposed to an ad featuring a stigmatised group member ($M = 4.93$) than for low prejudiced participants exposed to an ad featuring a nonstigmatised group member ($M = 5.74$), $t(136) = -1.70, p < .10$. (See the middle six rows of Table 2). Interestingly, whereas high prejudice individuals expressed implicit prejudice toward Blacks, low prejudiced individuals appear to have suppressed implicit prejudice toward Blacks. There was no significant three-way interaction between the target featured in the ad, participants' prejudice level, and the evaluated product, $F(1, 136) = .06$, *ns.*, Cohen's $f = .02$.[3]

Negative affect as a function of presence of stigmatised group member in ad and individual differences in indirect prejudice. It was predicted that high prejudice individuals who were exposed to ads featuring stigmatised group members would experience greater negative affect than high prejudice individuals exposed to ads featuring nonstigmatised group members. Furthermore, low prejudice individuals exposed to ads featuring stigmatised group members or ads featuring nonstigmatised

group members were not expected to experience negative affect. To test this prediction, a 2(target: presence of stigmatised group member in ad vs. presence of nonstigmatised group member in ad) X 2(evaluated product: milk vs. KSwiss running shoes) X 2(prejudice level: high vs. low) ANOVA was conducted on the negative affect measure. There was no significant interaction between the target featured in the ad and participants' prejudice level, F (1, 136) = .73, *ns.*, Cohen's f = .07 (see the last six rows of Table 2). Note that there was no significant three-way interaction between the target featured in the ad, participants' prejudice level, and the evaluated product, F (1, 136) = .006, *ns.*, Cohen's f = .01.

The effect of the presence of stigmatised group members in advertising and individual differences in indirect prejudice on attitudes toward the ad. It was predicted that high prejudice participants would have more negative attitudes toward the ad when the ad featured a stigmatised group member than when the ad featured a nonstigmatised group member. In contrast, low prejudice participants were predicted to have more, or equally, positive attitudes toward the ad when the ad featured a stigmatised group member rather than a nonstigmatised group member. To test these predictions, a 2(target: presence of stigmatised group member in ad vs. presence of nonstigmatised group member in ad) X 2(evaluated product: milk vs. KSwiss running shoes) X 2(prejudice level: high vs. low) ANOVA was conducted on the average scores from the attitude toward the ad index. There was no significant interaction between the target featured in the ad and participants' prejudice level, F (1, 136) = .64, *ns.*, Cohen's f = .005 (see the first six rows of Table 3). There was no significant three-way interaction

between the target featured in the ad, participants' prejudice level, and the evaluated product, $F(1, 136) = .10$, *ns.*, Cohen's $f = .03$.

Dependent Measure				Target: Black	Target: White
Attitudes toward the ad					
	Low Prejudice		*M*	3.19	3.22
			SD	1.40	1.65
			N	37	31
	High Prejudice		*M*	3.49	3.15
			SD	1.27	1.22
			N	36	40
Attitudes toward the product					
	Low Prejudice		*M*	2.92	3.13
			SD	.84	1.17
			N	37	31
	High Prejudice		*M*	3.24	3.15
			SD	1.04	.89
			N	36	40
Purchase Intent					
	Low Prejudice		*M*	3.87	3.52
			SD	1.82	2.13
			N	37	31
	High Prejudice		*M*	4.04	3.84
			SD	2.03	1.94
			N	36	40
Purchase Behaviour					
	Low Prejudice	Coupon Accepted	Count	17	12
			%	45.9	38.7
		Coupon Rejected	Count	20	19
			%	54.1	61.3
	High Prejudice	Coupon Accepted	Count	23	23
			%	63.9	57.5
		Coupon Rejected	Count	13	17
			%	36.1	42.5

Table 3: The effect of target and individual differences in indirect prejudice on attitudes toward the ad, attitudes toward the product, purchase intent, and purchase behaviour

The effect of the presence of stigmatised group members in advertising and individual differences in indirect prejudice on attitudes toward the product. It was predicted that high prejudice participants would have more negative attitudes toward the

product when the ad featured a stigmatised group member than when the ad featured a nonstigmatised group member. In contrast, low prejudice participants were predicted to have more, or equally, positive attitudes toward the product when the ad featured stigmatised group members rather than nonstigmatised group members. To test these predictions, a 2(target: presence of stigmatised group member in ad vs. presence of nonstigmatised group member in ad) X 2(evaluated product: milk vs. KSwiss running shoes) X 2(prejudice level: high vs. low) ANOVA was conducted on the average scores from the Attitude Toward the Product/Brand Scale. There was no significant interaction between the target featured in the ad and participants' prejudice level, $F(1, 136) = .96$, *ns.*, Cohen's $f = .08$ (see the second six rows of Table 3). It should also be noted that there was no significant three-way interaction between the target featured in the ad, participants' prejudice level, and the evaluated product, $F(1, 136) = .77$, *ns.* However, there was a significant main effect of product , $F(1, 136) = 24.75$, $p < .00$, Cohen's $f = .72$. Participants expressed more negative attitudes towards KSwiss running shoes ($M = 3.49$) than milk ($M = 2.73$).

The effect of the presence of stigmatised group members in advertising and individual differences in indirect prejudice on purchase intent. It was predicted that high prejudice participants would be less likely to state that they intend to buy the product if a stigmatised group member was featured in the ad than if a nonstigmatised group member was featured in the ad. In contrast, low prejudice participants were expected to be more likely (or equally likely) to state that they intend to buy the product if a stigmatised group member was featured in the ad than if a nonstigmatised group member was featured in the ad. To test this prediction, a 2(target: presence of

stigmatised group member in ad vs. presence of nonstigmatised group member in ad) X 2(evaluated product: milk vs. KSwiss running shoes) X 2(prejudice level: high vs. low) ANOVA was be conducted on the purchase intent index. There was no significant interaction between the target featured in the ad and participants' prejudice level, F (1, 136) = .49, *ns.,* Cohen's f = .06 (See the third six rows of Table 3). Note that there was no significant three-way interaction between the target featured in the ad, participants' prejudice level, and the evaluated product, F (1, 136) = .77, *ns.,* Cohen's f = .08. However, there was a significant main effect of product , F (1, 136) = 125.4, $p < .001$, Cohen's f = .92. Participants expressed greater purchase intent for milk (M = 5.17) than KSwiss running shoes (M = 2.46).

The effect of the presence of stigmatised group members in advertising and individual differences in indirect prejudice on purchase behaviour. It was predicted that high prejudice participants would be more likely to request a coupon for the advertised product if they were exposed to an ad featuring a nonstigmatised group member than an ad featuring a stigmatised group member. In contrast, low prejudice participants were expected to be more likely to request a coupon for the advertised product if they were exposed to an ad featuring a stigmatised group members than an ad featuring a nonstigmatised group member. To test this prediction, a logistic regression analysis with coupon request as the dependent variable and target, product, and indirect prejudice as independent variables. This analysis did not reveal a significant interaction between target and prejudice, *Wald* (1) = .30, $p < .59$ (See the last eight rows of Table 3 for frequencies obtained in each condition). It should be noted that the three-way interaction between target, product, and indirect prejudice was not significant, *Wald* (1) =

.81, $p < .37$. However, there was a main effect of product, *Wald* (1) = 3.70, $p < .05$. Participants were more likely to select a coupon for milk (the advertised product, count = 47) over bread (the nonadvertised product, count = 25) than for KSwiss running shoes (the advertised product, count = 28) over Diesel Jeans (the nonadvertised product, count = 44).

Source evaluation. It was predicted that high prejudice participants would have more negative evaluations of the model when the ad featured a stigmatised group member than when the ad featured a nonstigmatised group member. In contrast, low prejudice participants were predicted to have more positive, or equally positive, evaluations of the model when the ad featured a stigmatised group member rather than a nonstigmatised group member. To test these predictions, a 2(target: presence of stigmatised group member in ad vs. presence of nonstigmatised group member in ad) X 2(evaluated product: milk vs. KSwiss running shoes) X 2(prejudice level: high vs. low) ANOVA was conducted on the average scores from the source evaluation index. There was no significant interaction between the target featured in the ad and participants' prejudice level, F (1, 136) = .64, *ns.*, Cohen's f = .07. There was no significant three-way interaction between the target featured in the ad, participants' prejudice level, and the evaluated product, F (1, 136) = .10, *ns.* Cohen's f = .03. Thus, source evaluations did not differ as a function of the presence of a stigmatised group member in the ad, the evaluated product, and prejudice level.

Subsidiary Analyses. Six separate regression analyses (each using the centered indirect prejudice index, target (dummy coded), product (dummy coded), and pertinent interaction terms (see Aiken and West, 1991) were conducted on the dependent measures.

For the most part, these analyses replicated the findings reported using ANOVA (i.e., There were significant main effects of product on both attitudes toward the product, $p < .001$, and purchase intent, $p < .001$. The main effect of product on attitudes toward the product indicates that participants rated Kswiss runners more negatively than milk. Similarly, the main effect of product on purchase intent indicates that participants reported greater intent to purchase milk than runners). Also, a marginal interaction between target and indirect prejudice emerged on the implicit prejudice activation measure, $p < .09$. This interaction indicates that activation of implicit prejudice was somewhat greater for high prejudice participants exposed to a Black target than a White target. In contrast, implicit prejudice was activated to a somewhat greater extent for low prejudice participants exposed to a White target than a Black target. In addition, there was a marginal interaction between target and indirect prejudice on the mood index, $p < .06$. This interaction indicates that high prejudice participants experienced somewhat more negative affect when exposed to a Black target than a White target. In contrast, low prejudice participants did not differ in negative affect as a function of race of target. Furthermore, a marginal interaction between target and indirect prejudice emerged on attitudes toward the ad, $p < .09$. The target by indirect prejudice interaction on attitudes toward the ad indicates that high prejudice participants exposed to an ad featuring a Black target expressed somewhat more negative attitudes toward the ad than when exposed to a White target.

Additional Potential Moderating Variables. The potential moderating role of individual differences in direct prejudice (i.e., scores on the Modern Racism Scale), and Motivation to Reduce Prejudiced Reactions were examined in separate analyses of

variance and logistic regressions. However, results of these analyses did not reveal any of these variables to be significant moderators of the effect of the presence of a stigmatised group member in advertising on stereotype activation, implicit prejudice, negative affect, attitudes toward the ad, attitudes toward the product, purchase intent, or purchase behaviour. Note that regression analyses similar to those described above were also conducted with the direct prejudice and motivation to reduce prejudiced reactions indices as predictors. For the most part, these additional analyses confirmed that none of these alternative individual differences interacted with target to affect stereotype activation, implicit prejudice activation, mood, attitudes toward the ad, attitudes toward the product, or purchase intent. However, when direct prejudice was included as a predictor, a marginal interaction between target and direct prejudice emerged on the implicit prejudice activation measure, $p < .06$. This interaction indicates that high prejudice participants experienced somewhat greater activation of implicit prejudice when exposed to an ad featuring a Black target than an ad featuring a White target. In contrast, low prejudice participants did not differ in the activation of implicit prejudice as a function of target race. In addition, a significant interaction between target and direct prejudice emerged on the mood index, $p < .05$. This interaction revealed that high prejudice participants experienced somewhat greater negative affect when exposed to a Black target than when exposed to a White target. Low prejudice participants did not differ in the experience of negative affect as a function of target race. Finally, when motivation to reduce prejudiced reactions was included as a predictor, a three-way interaction between target, product, and motivation to reduce prejudiced reactions emerged on the implicit prejudice activation measure, $p < .05$. This interaction revealed

that, for milk, individuals high in motivation to control prejudiced reactions experienced greater activation of implicit prejudice when exposed to a White target than when exposed to a Black target. In contrast, individuals low in motivation to control prejudiced reactions experienced the activation of implicit prejudice to a somewhat greater extent when exposed to a Black target than when exposed to a White target. For Kswiss runners, individuals high in motivation to control prejudiced reactions did not differ in the activation of implicit prejudice as a function of target race. However, individuals low in motivation to control prejudiced reactions experienced the activation of implicit prejudice to a somewhat greater extent when exposed to a White target than when exposed to a Black target.

Familiarity with the product. Participants were asked to rate their familiarity with the advertised product ($M = 4.65$). When familiarity was included as a factor in the research design, some cells were left with very low numbers of participants in each condition. Thus, there was insufficient data to fully examine the potential moderating role of familiarity with the product.

Discussion

Using existing ads, Study 1 provided a preliminary test of the hypothesis that stereotypes would be activated in the presence of stigmatised group members in advertising and result in negative consequences for consumer attitudes and behaviour. Although Study 1 did not find stereotype activation to result from the presence of stigmatised group members in advertising, there was some indication that implicit prejudice was activated for some participants. Results revealed that high prejudice individuals tended to express negativity toward Blacks whereas low prejudice individuals

tended to suppress negativity toward Blacks. More specifically, implicit prejudice was activated to a somewhat greater extent for high prejudice participants exposed to an ad featuring a stigmatised group member than for high prejudice participants exposed to an ad featuring a nonstigmatised group member. In contrast, implicit prejudice was activated to a somewhat lesser extent for low prejudice participants exposed to an ad featuring a stigmatised group member than for low prejudice participants exposed to an ad featuring a nonstigmatised group member.

Although implicit prejudice was activated for high prejudice participants exposed to a stigmatised group member in advertisements, there was no evidence to support the notion that the activation of such negativity carried through to attitudes toward the ad, attitudes toward the product, or purchase behaviour. However, these results should be interpreted with caution. There are some potential problems associated with the ads that were selected for use in Study 1. Two sets of existing ads were used in Study 1: (1) Got Milk? ads, and (2) KSwiss running shoe ads. Both sets of ads featured either a stigmatised group member (i.e., Black person) or a nonstigmatised group member (i.e., White person). However, it may be the case that participants in Study 1 were highly familiar with these sets of ads (and/or products). This may be particularly true for the Got Milk? ads. The Got Milk? ad campaign is fairly widespread. It has been featured in magazines and billboards. Moreover, the Got Milk? ad campaign features celebrities (a positive reference group) in the ads. Thus, it may be the case that celebrity status overrides any impact of stigmatised group membership. The KSwiss ads may also be problematic. The KSwiss ads happen to feature a trendy product – retro style runners as well as attractive models. Thus, it is possible that the popularity of the product and use of

attractive models in the advertisements may override any negative impact of the presence of stigmatised group members in the ads.

Another limitation of Study 1 concerns using the word fragment completion task as a measure of stereotype activation. Although the word fragment completion task is a widely used and well-established measure of stereotype activation, this task may be open to some criticism. First, there are problems with completing the task itself. It may be the case that participants find the task to be somewhat confusing. Although they were given an example in the instructions for this task, some participants were concerned about whether they were to type in the entire word or simply the relevant letters. Second, and perhaps a greater cause for concern, perhaps the presence of a stigmatised group member in an ad did prime negative thoughts or activate stereotypes about the group (particularly for high prejudiced individuals). However, it is possible that participants who experienced such activation and did think of stereotype related words were reluctant to reveal that they came up with a derogatory word and opted for a different (stereotype unrelated) word in an effort to avoid appearing prejudiced. Although anonymity was assured, participants were typically seated in a laboratory room with two computer stations. Thus, participants potentially were able to view each other's responses.

Given that the ads used in Study 1 featured attractive models or celebrities and products (and possibly ads) that participants were familiar with, Study 2 involved creating ads for a single product (determined to be rated neutral on the basis of a pre-test). The ads featured unknown models (i.e., non-celebrities) as well as a novel product (i.e., a product that participants were not familiar with). In addition, stereotype activation

was assessed using a lexical decision task (e.g., Kunda, Davies, Adams, & Spencer, 2002) rather than the word fragment completion task.

Study 2

In Study 2, an attempt was made to apply the notion that individuals may belong to two conflicting categories – a positively valued group and a negatively valued group -- to the study of advertisements featuring minority group members. Sinclair and Kunda (1999) propose that both positive and negative category membership about a person can be activated simultaneously by a single target individual (e.g., a Black person can also be viewed as a doctor; an Asian person can also be viewed as a lawyer).

In advertisements featuring stigmatised group members, negative stereotypes are likely to be activated for high prejudice individuals leading to negative effects on consumer reactions and behaviour. However, there may be ways in which stigmatised group members can be featured in advertisements that elicit a different reaction. When stigmatised group members are depicted in a manner that reveals that they also belong to positively valued groups, the simultaneous activation of a positive stereotype may prevent negative effects on consumer behaviour among high prejudiced individuals. Study 2 examined this possibility. In this study, participants were exposed to one of four advertisements. In the first condition, participants were exposed to an ad featuring a nonstigmatised group member (i.e., White) with no additional information about that individual's category membership (i.e., White "nondoctor"). In the second condition, participants were exposed to an ad featuring a stigmatised group member (i.e., Black) with no additional information about that individual's category membership (i.e., Black "nondoctor"). In the third condition, participants were exposed to an ad featuring a

nonstigmatised group member (i.e., White) that was depicted as being a member of an additional [positively valued] group (i.e., White doctor). In the fourth condition, participants were exposed to an ad featuring a stigmatised group member (i.e., Black) that was depicted as being a member of an additional [positively valued] group (i.e., Black doctor). The activation of stereotypes following exposure to the ads was assessed. In addition, participants' attitudes toward the ad, attitudes toward the product, and purchase intent were assessed. As in Study 1, individual differences in prejudice and motivation to control prejudiced reactions were also assessed.

Predictions Involving Individual Differences in Prejudice

It was predicted that among participants exposed to target group members with no additional positive information provided (i.e., when the ad featured a target individual who was not depicted as a doctor), high prejudice participants exposed to an ad featuring a White nondoctor would reveal more favourable attitudes toward the ad, more favourable attitudes toward the product, report an increased likelihood of purchase intent and purchase behaviour than when they were exposed to an ad featuring a Black nondoctor. Furthermore, high prejudice individuals exposed to an advertisement featuring a Black nondoctor were expected to be more likely to experience the activation of negative stereotypes and implicit prejudice than high prejudice individuals exposed to an advertisement featuring a White nondoctor. Therefore, high prejudice individuals exposed to an advertisement featuring a Black nondoctor were predicted to be more likely to reveal unfavourable attitudes toward the ad, unfavourable attitudes toward the product, and report a decreased likelihood of purchase intent and purchase behaviour than high prejudice individuals exposed to an advertisement featuring a White nondoctor.

Among participants exposed to target group members with additional group membership information provided (i.e., targets depicted as doctors), high prejudice individuals exposed to ads featuring a Black doctor were expected to reveal attitudes toward the ad, attitudes toward the product, purchase intent and purchase behaviour comparable to that of high prejudice individuals exposed to an ad featuring a White doctor. However, it is also possible that high prejudiced participants' reactions to a Black doctor would be slightly less favourable than those in response to the White doctor even though these reactions were expected to be more favourable than those toward either the White or Black nondoctor. Also note that high prejudice individuals exposed to an advertisement featuring a Black doctor are expected to be more likely to experience the activation of implicit prejudice and both negative and positive stereotypes than those in other conditions.

It was predicted that among participants exposed to an advertisement in which the target member was not depicted as a doctor, low prejudice participants exposed to a White nondoctor individual or a Black nondoctor would reveal equally favourable attitudes toward the ad, attitudes toward the product, report an equal likelihood of purchase intent and purchase behaviour. However, it was also possible that low prejudice participants would evaluate an ad featuring a Black nondoctor more favourably and report an increased likelihood of purchase intent and purchase behaviour than those featuring a White nondoctor. It was further predicted that, negative stereotypes would not be activated for low prejudice individuals when they were exposed to an advertisement featuring a Black nondoctor. As well, low prejudice individuals exposed to an advertisement in which a Black target is depicted as a doctor were expected to

reveal equally, or more favourable attitudes toward the ad, attitudes toward the product, purchase intent and purchase behaviour than those exposed to an ad in which a White target individual is depicted as a doctor. Also note that low prejudice individuals exposed to an advertisement in which a Black target was depicted as a doctor were not expected to experience the activation of implicit prejudice or negative stereotypes. However, they may experience the activation of positive stereotypes.

Predictions Involving Individual Differences in Motivation to Control Prejudiced Reactions

Predictions for individuals low in motivation to control prejudiced reactions were expected to parallel those of high prejudice individuals as described in the previous section. Similarly, predictions for individuals high in motivation to control prejudiced reactions were expected to parallel those of low prejudice individuals. However, it should be noted that an alternative pattern of results is possible for this last set of participants. It is possible that, when exposed to an advertisement featuring a Black doctor, participants high in motivation to control prejudiced reactions may respond more negatively to that ad. Thus, in addition to responding negatively in terms of attitudes and behaviours relevant to the ad and product, these individuals should also reveal negativity on the implicit prejudice and Black stereotype activation measures. This alternative prediction is consistent with the notion of the aversive racist (Gaertner & Dovidio, 1986). Recall that an aversive racist is motivated to avoid prejudiced reactions because he or she possesses egalitarian standards. Yet, the aversive racist has underlying negative attitudes toward Blacks. Thus, given the opportunity to justify his or her prejudicial actions in terms of nonprejudiced explanations (e.g., perhaps the experimenter is well aware of

racism and discrimination and people's motives to avoid appearing prejudiced and therefore was trying to manipulate them or influence them by portraying a member of a stigmatised group in a positive light – as a doctor), will demonstrate actions consistent with discrimination – albeit a more subtle form of discrimination (e.g., more negative attitudes toward the ad and/or product).

Method

Participants. One hundred and sixty seven undergraduate students (118 females and 49 males) from the Department of Psychology at Simon Fraser University were recruited to participate in this study in exchange for course credit. However, data from 14 participants were identified as outliers and excluded from the analyses because their reaction times were 2.36 standard deviations from the mean on either the Black stereotype activation or doctor stereotype activation measures. Thus, data from 153 participants (108 females and 45 males) remained in the analyses.

Participants of differing ethnic backgrounds were represented (57 (37.3%) Caucasian, 66 (43.1%) Asian, 17 (11.1%) East Indian, 13 (8.5%) other). As in Study 1, there was insufficient data to analyze the role of ethnic/racial background of participant on the main dependent variables. However, preliminary analyses of variance and regression analyses similar to those described below, but including race of participant (Caucasian versus other) as a factor, were conducted on the main dependent variables. Again, the results of these analyses did not yield any significant interactions with ethnic/racial background of participant. Thus, one might conclude that race of participant does not affect the general pattern of results. However, as in Study 1, some cells had very few participants. Therefore, the issue of whether the ethnic/racial background of

participant might affect the pattern of results described in the sections that follow remains an open question.

Design. The design of this study is a 2(race of target featured in the ad: Black vs. White) X 2(additional group membership: no additional information about group membership other than race of target vs. depiction of target as belonging to a positively valued group [doctor]) X 2 (individual difference level: high vs. low) between subjects factorial design. The conditions are labelled as follows: White nondoctor, Black nondoctor, White doctor, and Black doctor.

Procedure. Upon arrival, participants were told that they would be participating in two separate studies being conducted by different researchers. They were told that the purpose of Study 1 was to examine how cognitive engagement affects consumers' reactions to advertised products. Accordingly, they were informed that they would view a series of ads, complete measures of cognitive engagement, and indicate their attitudes toward the ads and the advertised products. In actuality, in "Study 1" participants were exposed to both a filler and target ad, completed measures of implicit prejudice activation and stereotype activation. In addition, participants' attitudes toward the ad, attitudes toward the product, attitudes toward the model depicted in the target ad, and purchase intent were assessed for both the target product and the filler product (Note that the measures pertaining to the target ad were obtained first). Finally, a measure of purchase behaviour was obtained. Participants were told that Study 2 examined how attitudes and personality style influence impressions of others. Participants were informed that they would read some information about an individual and provide their impression of this person and then complete a questionnaire assessing their attitudes about various issues as

well as their personality style. In actuality, "Study 2" included an assessment of individual differences in indirect and direct prejudice and motivation to reduce prejudiced reactions. Both "Study 1" and "Study 2" were administered via computer using MediaLab software.

Presence of Stigmatised Group Members in Advertisements. Participants viewed two ads: an ad for Silk brand chocolate soy milk (i.e., a filler ad) and an ad for Fruve brand fruit and vegetable drink (i.e., the target ad for a fictitious product created for the purposes of this research). Note that Silk brand chocolate soy milk and Fruve fruit and vegetable drink were rated equally on the basis of a pre-test. For the pre-test, participants rated products that were thought to roughly equal the value of the target product (e.g., Fruve fruit and vegetable drink, Special K cereal bar, Body Smarts chocolate chews calcium supplement, Silk brand chocolate soy milk, Slim Fast chewy granola bar, Sun Rype calcium enriched orange juice, Carb Solutions high protein bar). The products were rated on the items selected from Attitude Toward the Product/Brand (Semantic Differential) Scale as described above (Bruner & Hensel, 1992). Eleven participants rated the products (on a scale ranging from 1 to 7 where higher numbers were indicative of more negative attitudes) as follows: Fruve fruit and vegetable drink (M = 3.20), Special K cereal bar (M = 3.74), Body Smarts chocolate chews calcium supplement (M = 3.81), Silk brand chocolate soy milk (M = 3.38), Slim Fast chewy granola bar (M = 3.66), Sun Rype calcium enriched orange juice (M = 2.71), Carb Solutions high protein bar (M = 4.02). The product rated most similarly to the target product was selected as the filler ad and alternative coupon for the purchase behaviour

measure described below. Thus, Fruve fruit and vegetable drink was paired with Silk brand chocolate soy milk, $F(1, 9) = .48$, *ns*.

Thus, participants were exposed to the ads for Silk chocolate milk and Fruve fruit and vegetable drink. Each ad appeared on the computer screen for 30 seconds. The filler ad was comprised of text and an image of the product and the target ad appeared last. In terms of the target ad, participants were exposed to one of four ads. One fourth of the participants viewed an ad for Fruve fruit and vegetable drink featuring a nonstigmatised group member (i.e., a White nondoctor). One fourth of the participants were exposed to an ad for Fruve fruit and vegetable drink featuring a stigmatised group member (i.e., a Black nondoctor). One fourth of the participants were exposed to an ad for Fruve fruit and vegetable drink featuring a nonstigmatised group member who belongs to two evaluative groups (i.e., "White" and "doctor"). The remaining fourth of the participants were exposed to an ad for Fruve fruit and vegetable drink featuring a stigmatised group member who belongs to two "evaluatively conflicting" groups (i.e., "Black" and "doctor"). (See Appendix F for ads). Thus, half of the participants were provided with information that the target belonged to a single group (White nondoctor or Black nondoctor) and half of the participants were provided with information that the target belonged to two groups (Black doctor or White doctor).

Implicit Prejudice. Participants then completed the implicit prejudice measure. Implicit prejudice was assessed using the word fragment completion task used by Dovidio, Kawakami, Johnson, Johnson, & Howard (1997) as in Study 1. However, unlike Study 1, the word fragments LA_ _ (lazy) and _ _ OR (poor) were also included in Study 2 given that a new measure of stereotype activation was used in the second study.

Automatic Stereotype Activation. Following the implicit prejudice measure, participants completed the measure of stereotype activation. However, unlike Study 1, stereotype activation was assessed using a lexical decision task (e.g., Kunda, Davies, Adams, & Spencer, 2002) rather than the word fragment completion task. In this task, participants are asked to indicate whether each of a series of letter strings is a word or nonword by pressing an appropriate key (1 = word, 2 = nonword). The stimuli were presented at the top left of the screen. Each letter string remained on the screen until the participant responded. As in Kunda et al. (2002), the stereotypic words included race, colour, athletic, basketball, rap, crime, dangerous, aggressive, rhythm, ignorant, uneducated, sexual, dealer, jazz, poor, stupid, drugs. The neutral words included ready, sour, jeans, staging, conscious, illustrate, basis, clerk, poet, abruptly, parade, weekly, literalism, unique, integral, soap, horizontal. The nonwords included pnafted, hadtice, stofwus, gertpris, meunstah, coelept, notirgin, blentirp, cadpecht, geppiot, tongiter, merfica, oetis, glizete, pnertap, brectelp, wastisp, predtet, brifcige, hoendas (Whittlesea & Williams, 1998). Additional word fragments were included to assess whether positive stereotypes relevant to the category "doctors" have also been activated in the conditions that depicted the target as belonging to a positively valued group (i.e., doctor). The words related to the positive stereotypes of doctors included intelligent, competent, educated, wealthy, and caring. These words were matched with the following neutral words of equal length and frequency (Kucera & Francis, 1967): perspective, displayed, colorful, antique, and syntax. Order of presentation was randomised for each participant. Shorter reaction times to stereotype related words versus neutral words are indicative of stereotype activation.

Affect. Next, participants rated their current mood on several dimensions. As in Devine et al., (1989), participants rated their current mood on items reflecting negative self-directed affect (angry at myself, guilty, disappointed with myself, regretful), discomfort (uncomfortable), positive mood (good, happy), general negative mood (bad, sad), and negative other-directed affect (angry at others, disgusted with others, irritated with others). Two additional items were also included (ashamed and hostile). All items were rated on a 7-point scale (1 = not at all, 7 = extremely).

Attitudes toward the ad. As in Study 1, participants were then asked to respond to three 7-point Likert scales anchored by good-bad, pleasant-unpleasant, favourable-unfavourable.

Attitudes toward the product. As in Study 1, participants then completed selected items from the Attitude Toward the Product/Brand (Semantic Differential) (Bruner & Hensel, 1992). Note that the subset of items was further reduced to include good-bad, like very much-dislike very much, pleasant-unpleasant, favourable-unfavourable, positive-negative, useful-useless, desirable-undesirable, superior-inferior, and interesting-boring.

Purchase intent. Purchase intent was assessed using three variables. First, participants will be asked "How likely are you to buy this product?" (1 = not at all; 7 = extremely). Participants will subsequently be asked "How likely are you to purchase this product between now and the end of the year?" (1 = not at all; 7 = extremely likely). Finally, participants will be asked "How likely are you to purchase this product on your next shopping trip?" (1 = not at all likely; 7 = extremely likely).

Source evaluation. Participants were asked to rate the model featured in the advertisement on the following attributes on a scale ranging from 1 to 7: warm-cold, likeable-unlikeable, friendly-unfriendly, sincere-insincere. Higher numbers were indicative of more negative attitudes toward the model (Whittler & DiMeo, 1991).

Identification of model's race. Participants were asked to identify the race of the model depicted in the ad: White (1), Black (2), Hispanic (3), Asian (4), East Indian (5), Can't remember (6).

Purchase behaviour. Participants were told that as a token of appreciation for their participation in this study, the researchers would like to give them a coupon to use toward the purchase of either Silk brand Chocolate Soy Milk or Fruve brand fruit and vegetable drink (the two advertised products). They were informed that the researcher could only give them one coupon. Thus, participants were asked to rate their preference for receiving either a coupon for Fruve fruit and vegetable drink or Silk Chocolate Soy Milk (1 = I am most interested in receiving a coupon for Silk Chocolate Soy Milk, 4 = I am not interested in either coupon, 7 = I am most interested in receiving a coupon for Fruve fruit and vegetable drink). Participants were told that the experimenter would provide them with the **ONE** coupon that they were **MOST** interested in receiving at the end of the session.

Indirect measure of individual differences in prejudice. As in Study 1, participants completed the impression formation task as an indirect measure of prejudice. (Note that some changes were made to the Modern Racism Scale as described below). It should be noted that the items honest-dishonest and sincere-insincere were removed from the impression ratings and the following items remained: warm-cold, caring-uncaring,

kind-unkind, good-bad, open minded-closed minded, tolerant-intolerant, fair-unfair, respectful-disrespectful. These two items were removed because it was possible that participants would rate the target individual as being honest and sincere (i.e., favourable qualities) even though the target individual endorsed items consistent with prejudicial attitudes toward Blacks. Favourable evaluations of the target individual are indicative of greater prejudice toward Blacks.

Individual differences in direct prejudice. As in Study 1, participants were then asked to provide their own responses to the Modern Racism Scale questionnaire that they had reviewed in the impression formation task. Individual differences in prejudice were assessed using the Modern Racism Scale (McConahay, 1986). However, item 5 was modified to read "Blacks have more influence on government policies than they ought to have" (modified item from Hodson & Esses, manuscript submitted for publication) and an additional item (Blacks are, by their nature, more violent than others) was included (modified item from Son Hing et al., 2002).

Individual differences in motivation to control prejudiced reactions. The Motivation to Control Prejudiced Reactions Scale (Dunton & Fazio, 1997) was included to assess the extent to which individuals are motivated to not be perceived as prejudiced in any manner, have non-prejudiced thoughts, and engage in non-prejudiced behaviours. The potential moderating role of this variable was explored.

Results

Creation of indices. As in Study 1, two indices of negativity towards Blacks were created. First, an index of implicit prejudice activation was computed by adding the

total number of negative words participants created on the implicit prejudice activation word fragment completion task. Second, an overall index of stereotype activation about Blacks was obtained by computing a difference score of the reaction time to identify words associated with the Black stereotype and reaction time to identify matched neutral words (i.e., reaction time to identify words associated with the Black stereotype – reaction time to identify matched neutral words) on the basis of the lexical decision task. An index of stereotype activation about doctors was also computed on the basis of the lexical decision task. A difference score was computed by subtracting the reaction time to identify matched neutral words from the reaction time to identify words associated with stereotypes about doctors. For both stereotype activation measures, negative numbers are indicative of greater stereotype activation. Note that participants were highly accurate in identifying words and nonwords. On average, participants correctly identified 16.84 of the 17 words related to the black stereotype and 16.66 of the 17 neutral words matched to the black stereotype. Participants also correctly identified 4.94 of the 5 words related to the doctor stereotype and 4.87 of the 5 neutral words matched to the doctor stereotype. Finally, participants correctly identified 19.20 of the 20 nonwords.

Next, two indices reflecting individual differences in prejudice were created. The first index (indirect prejudice index) was created by averaging participants' responses on the impression formation task (alpha = .96). The second index (direct prejudice index) was created by averaging participants' responses to the modified Modern Racism Scale (alpha = .75). An index of individual differences in motivation to control prejudiced reactions was also created by averaging participants' responses on the Motivation to Reduce Prejudiced Reactions Scale (alpha = .77). Note that participants were categorized

as high or low on these three individual difference measures on the basis of median splits. In order to assess whether stereotype activation results in negative affect, participants' responses on the 14 mood items were averaged to form an index of negative affect (alpha = .87). Two attitudinal indices were also created. An index of attitudes toward the ad was computed by averaging participants' responses on the three attitude toward the ad items (alpha = .87). An index of attitudes toward the product was computed by averaging participants' responses on the subset of Attitude Toward the Brand/Product Scale items used in Study 2 (alpha = .93). In addition, an overall index of purchase intent was computed by averaging participants' responses on the three purchase intent items (alpha = .85). Note that these three attitudinal indices (attitudes toward the ad, attitudes toward the product, and purchase intent) were highly correlated (attitudes toward the ad and attitudes toward the product $r = .68$, $p < .01$; attitudes toward the ad and purchase intent $r = -.45$, $p < .01$, and attitudes toward the product and purchase intent $r = -.69$, $p < .01$). Thus, an overall attitudinal index was created by combining these three measures. First, the attitudes toward the ad and attitudes toward the product scales were reverse scored so that higher numbers reflect more favourable attitudes toward the ad and product. Then, all three indices were converted to z scores before they were combined to form the single index. Finally, an index of attitudes toward the model (i.e., source evaluation) was obtained by averaging participants' responses to the four source evaluation items (alpha = .77).

Manipulation Check: Identification of model's race. Participants were asked to identify the race of the model depicted in the ad. The results of a chi-square analysis with race of target and race identified as variables revealed that the distribution of identified

race differed as a function of race of target, χ^2 (4) = 129.41, $p < .0001$. As in Study 1, participants were relatively accurate when it came to identifying the race of the model depicted in the ad. For participants exposed to an ad featuring a Black target, 42 participants (53.8%) stated that the target was Black, 8 participants (10.3%) stated that the target was Hispanic, and 25 participants (32.1%) stated that the target was East Indian, and 3 participants (3.8%) could not recall the model's race. For participants exposed to an ad featuring a White target, 65 participants (86.7%) accurately stated that the target was White, 7 participants (9.3%) stated that the target was Hispanic, and 1 participant (1.3%) stated that the target was East Indian, and 2 participants (2.7%) could not recall the model's race. Thus, as in Study 1, participants seemed to pay attention to the race of the model featured in the ad. However, when the ad featured a Black target, participants tended to mistakenly identify the Black model as an East Indian model.

As in Study 1, additional chi-square analyses were conducted to determine whether identification of the model's race varied as a function of not only race of target but also as a function of the race of participants. Again, participants were categorized as Caucasian or Non-Caucasian (i.e., collapsing across all non-White ethnic/racial categories).

The results of a chi-square analysis with race of target and identified race as variables revealed a similar overall pattern of results when examining the data for Caucasian participants only, χ^2 (4) = 50.14, $p < .0001$. When exposed to an ad featuring a Black target, 13 participants (52%) correctly identified the target as Black. Four participants (16%) mistakenly identified the target as Hispanic and 8 participants (32%) mistakenly identified the target as East Indian. When exposed to an ad featuring a White

target, 29 participants (90.6%) correctly identified the target as White. One participant (3.1%) mistakenly identified the target as Hispanic, 1 participant (3.1%) mistakenly identified the target as East Indian, and 1 participant (3.1%) could not recall the model's race.

The results of a chi-square analysis with race of target and identified race as variables revealed a similar overall pattern of results when examining the data for Non-Caucasian participants only, χ^2 (4) = 83.26, $p < .0001$. When exposed to an ad featuring a Black target, 29 participants (54.7%) correctly identified the target as Black. Four participants (7.5%) mistakenly identified the target as Hispanic, 17 participants (32.1%) mistakenly identified the target as East Indian, and 3 participants (5.7%) could not recall the model's race. When exposed to an ad featuring a White target, 36 participants (83.7%) correctly identified the target as White. Six participants (14%) mistakenly identified the target as Hispanic, and 1 participant (2.3%) could not recall the model's race.

Again, as in Study 1, additional separate chi-square analyses with race of participant and race identified were conducted for each category of target race (i.e., Black vs. White). The results of these analyses were not significant, Black χ^2 (3) = 2.62, *ns.*, and White χ^2 (3) = 3.79, *ns.* Thus, within each target race, race of participant did not alter the distribution of race identification. Based on the findings of these analyses, it seems that identification of the model's race did not vary as a function of participants' race (see Table 4).

		Race Identification					
		White	Black	Hispanic	Asian	East Indian	Can't Remember
Race of Participant							
	Model's race						
East Indian	Black	0	6	0	0	4	0
	White	4	0	3	0	0	0
Caucasian	Black	0	13	4	0	8	1
	White	29	0	1	0	1	1
Black	Black	0	0	0	0	0	0
	White	0	0	0	0	0	0
Asian	Black	0	21	2	0	10	1
	White	29	0	3	0	0	0
Other	Black	0	2	2	0	3	2
	White	3	0	0	0	0	1
Overall	Black	0	42	8	0	25	3
	White	65	0	7	0	1	2

Note: The data presented in this table represent the number of participants who identified the model as belonging to a particular race.

Table 4: Model race identification as a function of race of participant

Indirect prejudice

Implicit prejudice as a function of race of target in ad, group membership, and individual differences in indirect prejudice. It was predicted that high prejudice participants would be more likely to experience the activation of implicit prejudice when they were exposed to an advertisement featuring a Black nondoctor or a Black doctor than when they were exposed to an advertisement featuring a White nondoctor or a White doctor. It was further predicted that low prejudice participants exposed to an ad featuring

a White nondoctor, low prejudice participants exposed to an ad featuring a Black nondoctor, and low prejudice participants exposed to an ad featuring a Black doctor or White doctor would not experience the activation of implicit prejudice. Thus, a two-way interaction between race of target and prejudice level was predicted.

To test this prediction, a 2(race of target featured in the ad: Black vs. White) X 2(group membership: no additional information about group membership other than race of target vs. depiction of target as belonging to a positively valued group [doctor]) X 2 (prejudice level: high vs. low) ANOVA was conducted on the implicit prejudice activation measure. The predicted two-way interaction between race of target depicted in the ad and participants' prejudice level was not obtained, F (1, 145) = .0001, *ns.*, Cohen's f = .001. However, there was a marginal main effect of target such that implicit prejudice was activated to a greater extent when the ad featured a Black target (M = 6.02) relative to a White target (M = 5.48), F (1, 145) = 2.41, $p < .12$, Cohen's f = .02. Note that there was no significant three-way interaction between race of target depicted in the ad, group membership and participants' prejudice level, F (1, 145) = .17, *ns.*, Cohen's f = .03 (see Table 5). In summary, inconsistent with predictions, prejudice level did not moderate the effect of race of target on implicit prejudice activation. Instead, participants reacted somewhat more negatively to the Black target than the White target regardless of prejudice level.

	Race of Target		Group Membership Non Doctor	Doctor
Prejudice Level				
Low Prejudice	Black	*M*	6.30	6.20
		SD	2.34	1.61
		N	20	15
	White	*M*	6.00	5.43
		SD	1.85	2.13
		N	18	16
High Prejudice	Black	*M*	5.74	5.83
		SD	1.82	1.93
		N	19	14
	White	*M*	5.14	5.35
		SD	2.92	1.84
		N	21	20

Note: Higher numbers are indicative of greater implicit prejudice activation.

Table 5: The effect of race of target, group membership, and indirect prejudice on implicit prejudice activation.

Activation of stereotypes about Blacks as a function of race of target in ad, group membership, and individual differences in indirect prejudice. It was predicted that high prejudice participants exposed to an ad featuring a White nondoctor or a White doctor would not experience stereotype activation. Furthermore, negative stereotypes were predicted to be activated for high prejudice individuals when they are exposed to an ad featuring a Black nondoctor or a Black doctor. It was predicted that low prejudice participants exposed to an advertisement featuring a White nondoctor or a White doctor and low prejudice participants exposed to an advertisement featuring a Black nondoctor or a Black doctor would not experience stereotype activation. Thus, a two-way interaction between race of target, and prejudice level was predicted.

To test these predictions, a 2(race of target featured in the ad: Black vs. White) X 2(group membership: no additional information about group membership other than race of target vs. depiction of target as belonging to a positively valued group [doctor]) X 2 (prejudice level: high vs. low) ANOVA was conducted on the stereotype activation measure (where negative difference scores are indicative of greater activation of stereotypes about Blacks). The two-way interaction between race of target and prejudice level was not significant, $F(1, 145) = .17$, *ns.*, Cohen's $f = .03$. Thus, inconsistent with predictions, the activation of stereotypes about blacks did not differ as a function of race of target and prejudice level (see Table 6). However, a significant main effect of group membership emerged such that stereotypes about Blacks were activated to a greater extent when the target was not depicted as a doctor ($M = -109.40$) than when the target was depicted as a doctor ($M = -48.14$), $F(1, 145) = 3.84$, $p < .05$, Cohen's $f = .18$. Also, a marginal main effect of prejudice level emerged such that stereotypes about Blacks were activated to a greater extent for low prejudice participants ($M = -104.38$) when compared to high prejudice individuals ($M = -53.16$), $F(1, 145) = 2.68$, $p < .10$, Cohen's $f = .14$. Thus, inconsistent with predictions, prejudice level did not moderate the effect of race of target on stereotype activation. Oddly, stereotypes about Blacks were activated to a greater extent for targets that were not depicted as doctors than when targets were depicted as doctors.

	Race of Target		Group Membership Non Doctor	Doctor
Prejudice Level				
Low Prejudice	Black	*M*	-165.69	-73.55
		SD	241.92	187.78
		N	20	15
	White	*M*	-85.72	-92.54
		SD	179.07	179.03
		N	18	16
High Prejudice	Black	*M*	-108.78	-2.19
		SD	186.25	134.21
		N	19	14
	White	*M*	-77.40	-24.27
		SD	215.34	194.52
		N	21	20

Note: Negative numbers are indicative of greater stereotype activation.

Table 6: The effect of race of target and indirect prejudice on stereotype activation about Blacks

Activation of stereotypes about doctors as a function of race of target in ad, group membership, and individual differences in indirect prejudice. It was predicted that regardless of race of target or prejudice level, participants exposed to an advertisement featuring the target depicted as a doctor would experience the activation of stereotypes about doctors. Such stereotypes were not expected to be activated when the target in the ad was not depicted as a doctor. Thus, a main effect of additional group membership was predicted.

To test these predictions, a 2(race of target featured in the ad: Black vs. White) X 2(group membership: no additional information about group membership other than race of target vs. depiction of target as belonging to a positively valued group [doctor]) X 2

(prejudice level: high vs. low) ANOVA was conducted on the stereotype activation measure. More negative difference scores are indicative of greater activation of stereotypes about doctors. A main effect of group membership approached significance, $F(1, 145) = 3.14, p < .08$, Cohen's $f = .14$. Consistent with predictions, stereotypes about doctors were activated to a greater extent when the target was depicted as a doctor ($M = -100.52$) than when the target was not depicted as a doctor ($M = -1.56$). Thus, consistent with predictions, depicting the target as a doctor resulted in the activation of stereotypes associated with doctors.

Negative affect as a function of race of target in ad, group membership, and individual differences in indirect prejudice. It was predicted that negative affect would be greater for high prejudice individuals who have been exposed to ads featuring stigmatised group members regardless of group membership than for all remaining conditions. Thus, a two-way interaction between race of target and prejudice level was predicted. To test this prediction, a 2(race of target featured in the ad: Black vs. White) X 2(group membership: no additional information about group membership other than race of target vs. depiction of target as belonging to a positively valued group [doctor]) X 2 (prejudice level: high vs. low) ANOVA was conducted the negative affect measure. The predicted two-way interaction between race of target and prejudice level was not obtained, $F(1, 145) = 1.04$, *ns.*, Cohen's $f = .01$. However, an unexpected significant two-way interaction emerged between race of target and group membership, $F(1, 145) = 3.81, p < .05$, Cohen's $f = .16$. When the target was not depicted as a doctor, participants exposed to a White target experienced slightly greater negative affect ($M = 2.36$) than those exposed to a Black target ($M = 2.04$), $t(145) = 1.61$, *ns.* In contrast, when the

target was depicted as a doctor, participants exposed to a Black target experienced slightly greater negative affect ($M = 2.34$) than those exposed to a White target ($M = 2.10$), $t\,(145) = 1.18$, *ns.* Also, a significant main effect of prejudice level emerged such that high prejudice individuals experienced greater negative affect ($M = 2.39$) than low prejudice individuals ($M = 2.03$), $F\,(1, 145) = 6.17$, $p < .01$, Cohen's $f = .21$. The three-way interaction between race of target, group membership, and prejudice level was not significant, $F\,(1, 145) = 1.96$, $p < .16$, *ns.*, Cohen's $f = .11$ (see Table 7). In summary, inconsistent with predictions, prejudice level did not moderate the effect of target race on negative affect. Rather, group membership seemed to moderate the effect of target race on negative affect.

	Race of Target		Group Membership Non Doctor	Doctor
Prejudice Level				
Low Prejudice	Black	*M*	2.03	2.14
		SD	.76	1.12
		N	20	15
	White	*M*	2.01	1.96
		SD	.72	.72
		N	18	16
High Prejudice	Black	*M*	2.04	2.55
		SD	.87	1.04
		N	19	14
	White	*M*	2.71	2.26
		SD	.93	.74
		N	21	20

Note: Higher numbers are indicative of greater negative mood.

Table 7: The effect of race of target, group membership, and indirect prejudice on negative affect

Attitudes toward the ad as a function of race of target in ad, group membership, and individual differences in indirect prejudice. It was predicted that when the target is not depicted as a doctor, high prejudice participants would have more favourable attitudes toward the ad when the ad features a White target than when the ad features a Black target. However, when the target is depicted as a doctor, high prejudice participants were expected to have equally favourable attitudes toward an ad featuring a Black target and ad featuring a White target. In contrast, low prejudice participants were predicted to have more positive attitudes, or equally favourable attitudes, toward the ad when the ad featured a Black nondoctor rather than a White nondoctor. Similarly, it was predicted that low prejudice participants would have equally or more favourable attitudes

toward the ad when the ad featured a Black doctor than when the ad featured a White doctor. Thus, a three-way interaction between race of target, group membership, and prejudice level was predicted.

To test these predictions, a 2(race of target featured in the ad: Black vs. White) X 2(group membership: no additional information about group membership other than race of target vs. depiction of target as belonging to a positively valued group [doctor]) X 2 (prejudice level: high vs. low) ANOVA was conducted on the attitude toward the ad index. The anticipated three-way interaction between race of target, group membership, and prejudice level did not approach significance, $F(1, 145) = .05$, *ns.*, Cohen's $f = .02$ (see Table 8). However, a marginal main effect of race of target emerged such that participants expressed more negative attitudes toward the ad when the ad featured a Black target ($M = 4.19$) than when the ad featured a White target ($M = 3.79$), $F(1, 145) = 2.68$, $p < .10$, Cohen's $f = .14$. Thus, prejudice level and group membership did not play a moderating role in the effect of target race on attitudes toward the ad. Instead, participants expressed greater negativity in response to ads featuring a Black target than ads featuring a White target.

	Race of Target		Group Membership Non Doctor	Doctor
Prejudice Level				
Low Prejudice	Black	*M*	4.48	4.09
		SD	1.58	1.77
		N	20	15
	White	*M*	4.17	3.54
		SD	1.36	1.25
		N	18	16
High Prejudice	Black	*M*	3.90	4.28
		SD	1.57	1.19
		N	19	14
	White	*M*	3.76	3.70
		SD	1.45	1.60
		N	21	20

Note: Higher numbers are indicative of negative attitudes.

Table 8: The effect of race of target, group membership, and indirect prejudice on attitudes toward the ad

Attitudes toward the product as a function of race of target in ad, group membership, and individual differences in indirect prejudice. The same pattern of results as those expected for attitudes toward the ad was predicted for attitudes toward the product. That is, a three-way interaction was expected to emerge between race of target, additional group membership, and prejudice level.

To test these predictions, a 2(race of target featured in the ad: Black vs. White) X 2(group membership: no additional information about group membership other than race of target vs. depiction of target as belonging to a positively valued group [doctor]) X 2 (prejudice level: high vs. low) ANOVA was conducted on the Attitude Toward the Product/Brand Scale. The expected three-way interaction between race of target, group

membership, and prejudice level did not approach significance, F (1, 145) = .30, *ns.*, Cohen's f = .04 (see Table 9). Thus, inconsistent with predictions, prejudice level and group membership did not play a moderating role in the effect of target race on attitudes toward the product.

Prejudice Level	Race of Target		Group Membership: Non Doctor	Group Membership: Doctor
Low Prejudice	Black	*M*	3.73	3.55
		SD	1.22	1.51
		N	20	15
	White	*M*	3.29	3.57
		SD	1.51	1.66
		N	18	16
High Prejudice	Black	*M*	3.86	3.81
		SD	1.35	1.10
		N	19	14
	White	*M*	3.77	3.26
		SD	1.50	1.12
		N	21	20

Note: Higher numbers are indicative of negative attitudes.

Table 9: The effect of race of target, group membership, and indirect prejudice on attitudes toward the product

Purchase intent as a function of race of target in ad, group membership, and individual differences in indirect prejudice. The same pattern of results as those expected for attitudes toward the ad and attitudes toward the product was predicted for the purchase intent measure. That is, a three-way interaction was expected to emerge between race of target, additional group membership, and prejudice level.

To test this prediction, a 2(race of target featured in the ad: Black vs. White) X 2(group membership: no additional information about group membership other than race of target vs. depiction of target as belonging to a positively valued group [doctor]) X 2 (prejudice level: high vs. low) ANOVA was conducted on the purchase intent index. The expected three-way interaction between race of target, group membership, and prejudice level did not approach significance, $F(1, 145) = 1.90, p < .17$, *ns.*, Cohen's $f = .11$ (see Table 10). However, a marginal main effect of group membership emerged such that participants expressed greater purchase intent when the target featured in the ad was depicted as a doctor ($M = 3.03$) than when the target featured in the ad was not depicted as a doctor ($M = 2.59$), $F(1, 145) = 3.58, p < .06$, Cohen's $f = .16$. Thus, prejudice level and group membership did not play a moderating role in the effect of target race on attitudes toward the product. However, it seems that individuals show greater intent to purchase products when an advertisement features a doctor than when the advertisement features a nondoctor.

Prejudice Level	Race of Target		Group Membership: Non Doctor	Doctor
Low Prejudice	Black	*M*	2.53	3.51
		SD	1.44	1.76
		N	20	15
	White	*M*	2.61	2.92
		SD	1.29	1.54
		N	18	16
High Prejudice	Black	*M*	2.67	2.60
		SD	1.39	1.34
		N	19	14
	White	*M*	2.56	3.08
		SD	1.44	1.12
		N	21	20

Note: Higher numbers are indicative of greater purchase intent.

Table 10: The effect of race of target, group membership, and indirect prejudice on purchase intent

Overall attitude as a function of race of target in ad, group membership, and individual differences in indirect prejudice. The same pattern of results as those expected for attitudes toward the ad, attitudes toward the product, and purchase intent was predicted for overall attitudes toward the ad (as reflected on the combined index of attitudes toward the ad, attitudes toward the product, and purchase intent). That is, a three-way interaction was expected to emerge between race of target, additional group membership, and prejudice level.

To test this prediction, a 2(race of target featured in the ad: Black vs. White) X 2(group membership: no additional information about group membership other than race of target vs. depiction of target as belonging to a positively valued group [doctor]) X 2

(prejudice level: high vs. low) ANOVA was conducted on overall attitude index. Keep in mind that, for this index, higher numbers are indicative of more favourable attitudes. The anticipated three-way interaction between race of target, group membership, and prejudice level did not approach significance, F (1, 145) = 1.46, *ns.,* Cohen's f = .10 (see Table 11). However, there was a marginal main effect of group membership such that participants expressed more favourable attitudes when the target was depicted as a doctor (M = .09) than when the target was not depicted as a doctor (M = -.18), F (1, 145) = 3.20, $p < .08$, Cohen's f = .15. Thus, although prejudice level and group membership did not play a moderating role in the effect of target race on overall attitudes, there was a tendency for participants to express more favourable attitudes toward ads depicting doctors than ads depicting nondoctors.

Prejudice Level	Race of Target		Group Membership: Non Doctor	Doctor
Low Prejudice	Black	*M*	-.24	.35
		SD	.88	1.21
		N	20	15
	White	*M*	-.27	.005
		SD	.78	.99
		N	18	16
High Prejudice	Black	*M*	-.05	-.16
		SD	.86	.83
		N	19	14
	White	*M*	-.14	.17
		SD	.93	.82
		N	21	20

Note: Higher numbers are indicative of favourable attitudes.

Table 11: The effect of race of target, group membership, and indirect prejudice on overall attitude

Purchase behaviour as a function of race of target in ad, group membership, and individual differences in indirect prejudice. The same pattern of results as those expected for attitudes toward the ad, attitudes toward the product, purchase intent, and overall attitudes was predicted for the purchase intent measure (i.e., a preference for the coupon for the target product (i.e., Fruve fruit and vegetable drink) over the filler product (i.e., Silk chocolate soy milk)). That is, a three-way interaction was expected to emerge between race of target, additional group membership, and prejudice level.

To test this prediction, a 2(race of target featured in the ad: Black vs. White) X 2(group membership: no additional information about group membership other than race of target vs. depiction of target as belonging to a positively valued group [doctor]) X 2

(prejudice level: high vs. low) ANOVA was conducted on the coupon preference measure. The expected three-way interaction between race of target, group membership, and prejudice level did not approach significance, F (1, 145) = .86, *ns.*, Cohen's f = .08 (see Table 12). However, an unexpected significant two-way interaction between group membership and prejudice level emerged, F (1, 145) = 5.25, p < .02, Cohen's f = .19. Low prejudice participants expressed greater interest in receiving a coupon for the target product when the target featured in the ad was depicted as a doctor (M = 4.41) than when the target featured in the ad was not depicted as a doctor (M = 3.11), t (145) = 2.36, p <.05. In contrast, high prejudice participants expressed somewhat less interest in receiving a coupon for the target product when the target featured in the ad was depicted as a doctor (M = 3.74) than when the target featured in the ad was not depicted as a doctor (M = 4.13), t (145) = -.77, *ns.* In summary, prejudice level and group membership did not play a moderating role in the effect of target race on purchase behaviour. However, inconsistent with predictions, results suggest that prejudice level does moderate the effect of group membership on purchase intent. Low prejudice participants were more interested in receiving the advertised product when the ad featured a doctor whereas high prejudice participants showed the opposite pattern of results.

Prejudice Level	Race of Target		Group Membership: Non Doctor	Doctor
Low Prejudice	Black	*M*	3.60	4.20
		SD	2.19	2.62
		N	20	15
	White	*M*	2.61	4.63
		SD	2.30	2.22
		N	18	16
High Prejudice	Black	*M*	3.79	3.38
		SD	1.75	2.22
		N	19	14
	White	*M*	4.48	4.10
		SD	2.34	2.53
		N	21	20

Note: Higher numbers are indicative of increased purchase behaviour.

Table 12: The effect of race of target, group membership, and indirect prejudice on purchase behaviour

Source evaluation as a function of race of target, group membership, and individual differences in indirect prejudice. The same pattern of results as those expected for attitudes toward the ad, attitudes toward the product, purchase intent, overall attitudes, and purchase behaviour was predicted for the source evaluation measure. That is, a three-way interaction was expected to emerge between race of target, additional group membership, and prejudice level.

To test this prediction, a 2(race of target featured in the ad: Black vs. White) X 2(group membership: no additional information about group membership other than race of target vs. depiction of target as belonging to a positively valued group [doctor]) X 2 (prejudice level: high vs. low) ANOVA was conducted on the source evaluation index.

The expected three-way interaction between race of target, group membership, and prejudice level did not approach significance, $F(1, 145) = .37$, *ns.*, Cohen's $f = .05$ (see Table 13).

Prejudice Level	Race of Target		Group Membership: Non Doctor	Doctor
Low Prejudice	Black	*M*	3.89	3.78
		SD	1.11	1.33
		N	20	15
	White	*M*	3.96	3.63
		SD	1.22	1.33
		N	18	16
High Prejudice	Black	*M*	3.84	3.46
		SD	.89	1.19
		N	19	14
	White	*M*	3.69	3.54
		SD	1.03	1.13
		N	21	20

Note: Higher numbers are indicative of negative evaluations.

Table 13: The effect of race of target, group membership, and indirect prejudice on source evaluation

Subsidiary Analyses. Although the analyses described above are based on median splits, separate regression analyses (each using the centered indirect prejudice index, race of target (dummy coded), group membership of target (dummy coded), and pertinent interaction terms (see Aiken and West, 1991) were conducted on the dependent measures. For the most part, these analyses replicated the findings reported using ANOVA. There were only a few exceptions. First, a main effect of indirect prejudice emerged on the implicit prejudice activation measure, $b = .27$; $p < .04$. This main effect indicates that

low prejudice participants experienced the activation of implicit prejudice to a greater extent than high prejudiced participants. Second, a marginal two-way interaction between group membership and individual differences in indirect prejudice emerged on the overall mood index, $b = .33$; $p < .09$. This interaction indicates that high prejudice participants exposed to a nondoctor experienced slightly greater negative affect than low prejudice participants exposed to a nondoctor. Similarly, high prejudice participants exposed to a doctor experienced slightly greater negative affect than low prejudice participants exposed to a doctor. Third, a significant interaction emerged between race of target and individual differences in indirect prejudice on the overall mood index, $b = .45$; $p < .003$. This interaction revealed that high prejudice participants experienced slightly greater negative affect when exposed to a White target than when exposed to a Black target. In contrast, low prejudice participants showed no differences in negative affect as a function of target race. Fourth, a significant two-way interaction between race of target and group membership emerged on the overall mood index, $b = .64$; $p < .03$. For ads depicting nondoctors, an ad featuring a White target evoked more negative affect than an ad featuring a Black target. For ads depicting doctors, an ad featuring a Black target evoked more negative affect than an ad featuring a White target. Fifth, a main effect of indirect prejudice emerged on the purchase intent index, $b = .18$; $p < .04$. Low prejudice participants expressed greater purchase intent that high prejudiced participants.

In addition to these analyses, ANOVAs and regression analyses were also conducted with the direct prejudice index as a predictor. For the most part, these additional analyses mirrored the findings of the analyses using indirect prejudice as a predictor.

Motivation to Control Prejudiced Reactions

Implicit prejudice as a function of race of target in ad, group membership, and individual differences in motivation to control prejudiced reactions. It was predicted that participants low in motivation to control prejudiced reactions would be more likely to experience the activation of implicit prejudice when they were exposed to an advertisement that features a Black nondoctor or an advertisement that depicts a Black doctor than when they were exposed to an advertisement featuring a White nondoctor or a White doctor. In contrast, those higher in the motivation to control prejudiced reactions should react similarly to ads depicting a Black target (nondoctor or doctor) or a White target (nondoctor or doctor). It should be noted that, consistent with the alternative hypothesis presented earlier based on Gaertner and Dovidio's (1986) concept of the aversive racist, it was also reasonable to expect that individuals high in motivation to control prejudiced reactions would experience the activation of implicit prejudice when exposed to either an ad featuring a stigmatised group member or an ad featuring a stigmatised group member depicted as belonging to a positively valued group. Thus, either a two-way interaction between motivation to control prejudiced reactions and race of target or a main effect of race of target were expected.

To test this prediction, a 2(race of target featured in the ad: Black vs. White) X 2(group membership: no additional information about group membership other than race of target vs. depiction of target as belonging to a positively valued group [doctor]) X 2 (motivation to control prejudiced reactions: high vs. low) ANOVA was conducted on the implicit prejudice measure. The expected two-way interaction between motivation level and race of target did not approach significance, $F(1, 145) = 1.23$, *ns.*, Cohen's $f = .09$.

However, there was a marginal main effect of target such that implicit prejudice was activated to a greater extent when the ad featured a Black target ($M = 6.05$) relative to a White target ($M = 5.44$), $F(1, 145) = 3.11, p < .08$, Cohen's $f = .15$. Note that there was no significant three-way interaction between race of target depicted in the ad, group membership and motivation to control prejudiced reactions, $F(1, 145) = .01$, *ns.*, Cohen's $f = .01$ (see Table 14). Thus, consistent with the alternative prediction, regardless of motivation level, Black targets evoked somewhat more negative reactions than White targets.

Motivation to Control Prejudiced Reactions	Race of Target		Group Membership: Non Doctor	Group Membership: Doctor
Low Motivation	Black	*M*	6.50	6.00
		SD	2.59	1.76
		N	14	19
	White	*M*	5.50	5.00
		SD	2.81	1.77
		N	22	15
High Motivation	Black	*M*	5.76	5.95
		SD	1.76	1.88
		N	25	20
	White	*M*	5.59	5.67
		SD	2.09	2.06
		N	17	21

Note: Higher numbers are indicative of greater implicit prejudice activation.

Table 14: The effect of race of target, group membership, and motivation to control prejudiced reactions on implicit prejudice activation

Activation of stereotypes about Blacks as a function of race of target in ad, group membership, and individual differences in motivation to control prejudiced reactions. It was predicted that the pattern of results for the activation of stereotypes about Blacks would be consistent with predictions for implicit prejudice as described above. Thus, either a two-way interaction between motivation to control prejudiced reactions and race of target) or a main effect of race of target were expected.

To test these predictions, 2(race of target featured in the ad: Black vs. White) X 2(group membership: no additional information about group membership other than race of target vs. depiction of target as belonging to a positively valued group [doctor]) X 2 (motivation to control prejudiced reactions: high vs. low) ANOVA was conducted on the stereotype activation measure. More negative difference scores are indicative of greater activation of stereotypes about Blacks. The two-way interaction between race of target and motivation to control prejudiced reactions was not significant, F (1, 145) = .39, *ns.*, Cohen's f = .05. Thus, the activation of stereotypes about blacks did not differ as a function of race of target and motivation to control prejudiced reactions (see Table 15). However, a marginal three-way interaction between motivation level, race of target, and group membership emerged, F (1, 145) = 3.62, $p < .06$, Cohen's f = .16. For participants low in motivation to control prejudiced reactions, those exposed to an ad featuring a target that was not depicted as a doctor did not differ in activation of stereotypes about Blacks as a function of target race (Black M = -134.85, White M = -114.06), t (145) = -.32, *ns.* Similarly, those exposed to an ad featuring a target that was depicted as a doctor did not differ in activation of stereotypes about Blacks as a function of target race (Black M = -47.35, White M = 17.28), t (145) = -.98, *ns.* For participants high in motivation to

control prejudiced reactions, those exposed to an ad featuring a target that was not depicted as a doctor experienced greater stereotype activation about Blacks when the ad featured a Black target (M = -139.72) than a White target (M = 38.77), t (145) = -2.99, p < .05. However, those exposed to an ad featuring a target that was depicted as a doctor did not differ in activation of stereotypes about Blacks as a function of target race (Black M = -12.81, White M = -105.96), t (145) = -.98, *ns*. In summary, Black targets evoked more negative reactions than White targets for participants high in motivation to control prejudiced reactions that were exposed to an ad in which the target was not depicted as a doctor. In addition, a significant main effect of group membership emerged such that stereotypes about Blacks were activated to a greater extent when participants were exposed to an ad in which the target was not depicted as a doctor (M = -106.85) than when participants were exposed to an ad in which the target was depicted as a doctor (M = -37.21), F (1, 145) = 4.96, p < .03, Cohen's f = .18. This finding is somewhat puzzling.

Motivation to Control Prejudiced Reactions	Race of Target		Group Membership: Non Doctor	Doctor
Low Motivation	Black	*M*	-134.85	-47.35
		SD	192.86	145.66
		N	14	19
	White	*M*	-114.06	17.28
		SD	171.28	194.42
		N	22	15
High Motivation	Black	*M*	-139.72	-12.81
		SD	231.32	171.90
		N	25	20
	White	*M*	-38.77	-105.96
		SD	223.99	170.38
		N	17	21

Note: Negative numbers are indicative of greater stereotype activation.

Table 15: The effect of race of target, group membership, and motivation to control prejudiced reactions on stereotype activation about Blacks

Activation of stereotypes about doctors as a function of race of target in ad, group membership, and individual differences in motivation to control prejudiced reactions. It was predicted that regardless of race of target or motivation to control prejudiced reactions, participants exposed to an advertisement featuring the target depicted as a doctor would be more likely to experience the activation of stereotypes about doctors than those exposed to an advertisement that did not feature the target depicted as a doctor.

To test these predictions, a 2(race of target featured in the ad: Black vs. White) X 2(group membership: no additional information about group membership other than race of target vs. depiction of target as belonging to a positively valued group [doctor]) X

2 (motivation to control prejudiced reactions: high vs. low) ANOVA was conducted on the stereotype activation measure. More negative difference scores are indicative of greater activation of stereotypes about doctors. A marginal main effect of group membership did emerge, $F(1, 145) = 2.67, p < .10$, Cohen's $f = .14$. Thus, the activation of stereotypes about doctors was somewhat greater when the target featured in the ad was depicted as a doctor ($M = -91.73$) than when the target featured in the ad was not depicted as a doctor ($M = .86$). Thus, consistent with predictions, stereotypes about doctors were activated to a somewhat greater extent when participants were exposed to an ad featuring a target depicted as a doctor.

Negative affect as a function of race of target in ad, group membership, and individual differences in motivation to control prejudiced reactions. It was predicted that the pattern of results for the activation of negative affect would be consistent with predictions for implicit prejudice and stereotype activation about Blacks as described above. Thus, either a two-way interaction between motivation to control prejudiced reactions and race of target) or a main effect of race of target were expected.

To test these predictions, a 2(race of target featured in the ad: Black vs. White) X 2(group membership: no additional information about group membership other than race of target vs. depiction of target as belonging to a positively valued group [doctor]) X 2 (motivation to control prejudiced reactions: high vs. low) ANOVA was conducted the negative affect measure. Contrary to predictions, the two-way interaction between motivation level and race of target or the main effect of race of target did not approach significance, $F(1, 145) = .02$, *ns.*, Cohen's $f = .01$, and $F(1, 145) = .31$, *ns.*, Cohen's $f = .05$; respectively. However, a significant two-way interaction between race of target and

group membership emerged, F (1, 145) = 4.83, p <.03, Cohen's f = .18. Participants exposed to an ad featuring a Black target that was depicted as a doctor experienced slightly greater negative affect (M = 2.39) than when the Black target was not depicted as a doctor (M = 2.01), t(145) = 1.88, p < .10. In contrast, although the difference was not significant, participants exposed to an ad featuring a White target experienced somewhat less negative affect when the White target was depicted as a doctor (M = 2.15) than when the White target was not depicted as a doctor (M = 2.41), t(145) = 1.26, *ns*. The three-way interaction between race of target, group membership, and motivation to control prejudiced reactions was not significant, F (1, 145) = .18, *ns*., Cohen's f = .03 (see Table 16). Thus, somewhat inexplicably, it seems that exposure to Black doctors or exposure to White nondoctors evokes greater negative affect than exposure to either Black nondoctors or White doctors.

Motivation to Control Prejudiced Reactions	Race of Target		Group Membership: Non Doctor	Doctor
Low Motivation	Black	*M*	1.91	2.50
		SD	.69	1.13
		N	14	19
	White	*M*	2.31	2.29
		SD	.86	.85
		N	22	15
High Motivation	Black	*M*	2.11	2.29
		SD	.87	1.04
		N	25	20
	White	*M*	2.59	2.00
		SD	.95	.64
		N	17	21

Note: Higher numbers are indicative of greater negative affect.

Table 16: The effect of race of target, group membership, and motivation to control prejudiced reactions on negative affect

Attitudes toward the ad as a function of race of target in ad, group membership, and individual differences in motivation to control prejudiced reactions. It was predicted that individuals low in motivation to control prejudiced reactions would have more favourable attitudes toward the ad when the ad features a White nondoctor than when the ad features a Black nondoctor. Individuals low in motivation to control prejudiced reactions were expected to have equally favourable attitudes toward an ad featuring a Black doctor and an ad featuring a White doctor. In contrast, individuals high in motivation to control prejudiced reactions were predicted to have more positive attitudes, or equally favourable attitudes, toward the ad when the ad featured a Black nondoctor rather than a White nondoctor. It was also predicted that individuals high in

motivation to control prejudiced reactions would have equally or more favourable attitudes toward the ad when the ad featured a Black doctor rather than a White doctor. Note, however, that if the alternative hypothesis concerning aversive racism holds true, it remained a possibility that participants high in motivation to control prejudiced reactions would express greater negativity toward the ad featuring a stigmatised group member depicted as belonging to a positively valued group. Presumably, in this instance, aversive racists (high in motivation to control prejudiced reactions) might justify or rationalize their prejudiced actions in terms of nonprejudiced explanations. That is, these individuals may attribute their negative attitudes toward the ad to aspects of the ad other than the model's race. Perhaps they might find fault with other aspects of the ad and attribute their negative reactions to the belief that the company is engaging in manipulative tactics by featuring a doctor in the ad. Alternatively, they may view the presence of a Black doctor in the ad as tokenistic. In either predicted scenario, a three-way interaction between motivation level, race of target, and group membership of some form was predicted.

To test these predictions, a 2(race of target featured in the ad: Black vs. White) X 2(group membership: no additional information about group membership other than race of target vs. depiction of target as belonging to a positively valued group [doctor]) X 2 (motivation to control prejudiced reactions: high vs. low) ANOVA was conducted on the attitude toward the ad index. Consistent with predictions, a significant three-way interaction between race of target, group membership, and prejudice level emerged, F (1, 145) = 6.96, $p < .01$, Cohen's $f = .22$ (see Table 17). Results for those participants low in motivation to control prejudiced reactions were consistent with predictions. Those

participants exposed to an ad featuring a target that was not depicted as a doctor expressed more negative attitudes toward the ad when the target was Black ($M = 4.71$) than when the target was White ($M = 3.73$), $t(145) = 1.99$, $p < .05$. In contrast, those participants exposed to an ad featuring a target that was depicted as a doctor did not differ in attitudes toward the ad as a function of the target's race (Black doctor $M = 4.16$, White doctor $M = 4.27$), $t(145) = -.22$, *ns*.

Results for participants high in motivation to control prejudiced reactions exposed to an ad in which the target was not depicted as a doctor were also consistent with predictions. Participants exposed to an ad featuring a target that was not depicted as a doctor did not differ in attitudes toward the ad as a function of target race (White $M = 4.24$, Black $M = 3.91$), $t(145) = .73$, *ns*. Consistent with the alternative hypothesis, however, participants exposed to an ad featuring a target that was depicted as a doctor expressed more negative attitudes toward the ad when the target was a Black doctor ($M = 4.25$) than when the target was a White doctor ($M = 3.18$), $t(145) = 2.38$, $p < .05$. It should also be noted that a marginal main effect of race of target emerged such that participants expressed more negative attitudes toward the ad when the ad featured a Black target (M = 4.26) than when the ad featured a White target ($M = 3.85$), $F(1, 145) = 2.94$, $p < .09$. Thus, results supported the prediction that motivation level and group membership play a moderating role in the effect of target race on attitudes toward the ad. Furthermore, results seem to support the alternative prediction concerning aversive racism: Individuals high in motivation to control prejudiced reactions revealed negative attitudes toward ad featuring a Black doctor relative to a White doctor.

Motivation to Control Prejudiced Reactions	Race of Target		Group Membership Non Doctor	Doctor
Low Motivation	Black	*M*	4.71	4.16
		SD	1.50	1.34
		N	14	19
	White	*M*	3.73	4.27
		SD	1.38	1.36
		N	22	15
High Motivation	Black	*M*	3.91	4.25
		SD	1.58	1.53
		N	25	20
	White	*M*	4.24	3.18
		SD	1.43	1.35
		N	17	21

Note: Higher numbers are indicative of negative attitudes.

Table 17: The effect of race of target, group membership, and motivation to control prejudiced reactions on attitudes toward the ad

Attitudes toward the product as a function of race of target in ad, group membership, and individual differences in motivation to control prejudiced reactions. Predictions for attitudes toward the product paralleled those expected to emerge on attitudes toward the ad. Thus, a three-way interaction between motivation level, race of target, and group membership was expected. To test these predictions, a 2(race of target featured in the ad: Black vs. White) X 2(group membership: no additional information about group membership other than race of target vs. depiction of target as belonging to a positively valued group [doctor]) X 2 (motivation to control prejudiced reactions: high vs. low) ANOVA was conducted on the Attitude Toward the Product/Brand Scale. As expected, a significant three-way interaction between race of target, group membership,

and prejudice level emerged, F (1, 145) = 3.78, $p < .05$, Cohen's $f = .16$ (see Table 18). Results for those participants low in motivation to control prejudiced reactions were consistent with predictions. Those participants exposed to an ad featuring a target that was not depicted as a doctor expressed more negative attitudes toward the product when the target was Black ($M = 4.32$) than when the target was White ($M = 3.31$), $t(145) = 2.16$, $p < .05$. In contrast, those participants exposed to an ad featuring a target that was depicted as a doctor did not differ in attitudes toward the product as a function of the target's race (Black doctor $M = 3.73$, White doctor $M = 3.62$), $t(145) = .21$, *ns*. Results for participants high in motivation to control prejudiced reactions exposed to an ad in which the target was not depicted as a doctor were also somewhat consistent with predictions. Participants exposed to an ad featuring a target that was not depicted as a doctor did not differ in attitudes toward the product as a function of target race (White $M = 3.85$, Black $M = 3.50$), $t(145) = .83$, *ns*. Consistent with the results of attitudes toward the ad, however, although the difference was not significant, participants exposed to an ad featuring a target that was depicted as a doctor expressed slightly greater negative attitudes toward the ad when the target was a Black doctor ($M = 3.69$) than when the target was a White doctor ($M = 3.23$), $t(145) = 1.09$, *ns*. Thus, the pattern of results paralleled those that emerged on the attitudes toward the ad measure.

Motivation to Control Prejudiced Reactions	Race of Target		Group Membership Non Doctor	Doctor
Low Motivation	Black	*M*	4.32	3.73
		SD	.97	1.36
		N	14	19
	White	*M*	3.31	3.62
		SD	1.38	1.28
		N	22	15
High Motivation	Black	*M*	3.50	3.69
		SD	1.34	1.20
		N	25	20
	White	*M*	3.85	3.23
		SD	1.65	1.44
		N	17	21

Note: Higher numbers are indicative of negative attitudes.

Table 18: The effect of race of target, group membership, and motivation to control prejudiced reactions on attitudes toward the product

Purchase intent as a function of race of target in ad, group membership, and individual differences in motivation to control prejudiced reactions. Predictions for attitudes toward the product paralleled those expected to emerge on attitudes toward the ad and attitudes toward the product. Thus, a three-way interaction between motivation level, race of target, and group membership was expected.

To test this prediction, a 2(race of target featured in the ad: Black vs. White) X 2(group membership: no additional information about group membership other than race of target vs. depiction of target as belonging to a positively valued group [doctor]) X 2 (motivation to control prejudiced reactions: high vs. low) ANOVA was conducted on the purchase intent index. A significant three-way interaction between race of target, group

membership, and prejudice level emerged, F (1, 145) = 3.80, $p < .05$, Cohen's $f = .16$ (see Table 19). Results for those participants low in motivation to control prejudiced reactions were consistent with predictions. Those participants exposed to an ad featuring a target that was not depicted as a doctor expressed slightly greater purchase intent when the target was White ($M = 2.67$) than when the target was Black ($M = 1.93$), $t(145) = 1.56$, *ns*. In contrast, those participants exposed to an ad featuring a target that was depicted as a doctor did not differ in purchase intent as a function of the target's race (Black doctor $M = 2.81$, White doctor $M = 2.53$), $t(145) = .58$, *ns*. Results for participants high in motivation to control prejudiced reactions exposed to an ad in which the target was not depicted as a doctor were also somewhat consistent with predictions. Although the difference was not significant, participants exposed to an ad featuring a target that was not depicted as a doctor expressed slightly greater purchase intent when the target was Black ($M = 2.97$) than when the target was White ($M = 2.47$), $t(145) = 1.15$, *ns*. Consistent with the alternative hypothesis and in keeping with the results of attitudes toward the ad and attitudes toward the product, however, participants exposed to an ad featuring a target that was depicted as a doctor expressed slightly decreased purchase intent when the target was a Black doctor ($M = 3.08$) than when the target was a White doctor ($M = 3.35$). However, this difference was not significant, $t(145) = .62$, *ns*. It should also be noted that a marginal main effect of group membership emerged such that participants expressed greater purchase intent when the ad featured a doctor ($M = 2.94$) than when the ad did not feature a doctor ($M = 2.51$), F (1, 145) = 3.61, $p < .06$, Cohen's $f = .16$. In addition, a significant main effect of motivation to control prejudiced reactions revealed that participants high in motivation to control prejudiced reactions

expressed greater purchase intent ($M = 2.97$) than participants low in motivation to control prejudiced reactions ($M = 2.48$), $F(1, 145) = 4.52$, $p < .04$, Cohen's $f = .18$. Thus, the overall pattern of results was somewhat consistent with those obtained on the previous two measures.

Motivation to Control Prejudiced Reactions	Race of Target		Group Membership: Non Doctor	Doctor
Low Motivation	Black	*M*	1.93	2.81
		SD	.91	1.49
		N	14	19
	White	*M*	2.67	2.53
		SD	1.31	1.13
		N	22	15
High Motivation	Black	*M*	2.97	3.08
		SD	1.50	1.65
		N	25	20
	White	*M*	2.47	3.35
		SD	1.44	1.34
		N	17	21

Note: Higher numbers are indicative of greater purchase intent.

Table 19: The effect of race of target, group membership, and motivation to control prejudiced reactions on purchase intent

Overall attitude as a function of race of target in ad, group membership, and individual differences in motivation to control prejudiced reactions. Predictions for overall attitudes paralleled those expected to emerge on attitudes toward the ad and attitudes toward the product and purchase intent. Thus, a three-way interaction between motivation level, race of target, and group membership was expected.

To test these predictions, a 2(race of target featured in the ad: Black vs. White) X 2(group membership: no additional information about group membership other than race of target vs. depiction of target as belonging to a positively valued group [doctor]) X 2 (motivation to control prejudiced reactions: high vs. low) ANOVA was conducted on the overall attitude index. Keep in mind that higher numbers are indicative of more favourable attitudes on this index. A significant three-way interaction between race of target, group membership, and prejudice level emerged, F (1, 145) = 4.37, $p < .04$, Cohen's $f = .17$ (see Table 20). Results for those participants low in motivation to control prejudiced reactions were somewhat consistent with predictions. Those participants exposed to an ad featuring a target that was not depicted as a doctor expressed slightly greater negative attitudes when the target was Black (M = -.46) than when the target was White (M = -.13), t(145) = -1.07, *ns*. In contrast, those participants exposed to an ad featuring a target that was depicted as a doctor did not differ in attitudes as a function of the target's race (Black doctor M = .07, White doctor M = -.21), t(145) = -.91, *ns*. Consistent with predictions, participants high in motivation to control prejudiced reactions exposed to an ad featuring a target that was not depicted as a doctor expressed slightly more negative attitudes when the target was White (M = .02) than when the target was Black (M = -.29), t(145) = 1.11, *ns*. Consistent with the alternative hypothesis, however, participants exposed to an ad featuring a target that was depicted as a doctor expressed slightly greater negative attitudes toward the ad when the target was a Black doctor (M = -.003) than when the target was a White doctor (M = .31). However, this difference was not significant, t(145) = -.75, *ns*. It should also be noted that a marginal main effect of group membership emerged such that participants expressed

more negative attitudes when the ad featured a target that was not depicted as a doctor (M = -.21) than when the ad featured a target that was depicted as a doctor (M = .04), F (1,145) = 3.02, $p < .09$. In summary, the overall pattern of results was somewhat consistent with those obtained on the attitudes toward the ad, attitudes toward the product, and purchase intent measures.

Motivation to Control Prejudiced Reactions	Race of Target		Group Membership: Non Doctor	Doctor
Low Motivation	Black	*M*	-.46	.07
		SD	.60	1.03
		N	14	19
	White	*M*	-.13	-.21
		SD	.71	.84
		N	22	15
High Motivation	Black	*M*	.02	-.003
		SD	.95	1.02
		N	25	20
	White	*M*	-.29	.31
		SD	1.03	.88
		N	17	21

Note: Higher numbers are indicative of favourable attitudes.

Table 20: The effect of race of target, group membership, and motivation to control prejudiced reactions on overall attitudes

Purchase behaviour as a function of race of target in ad, group membership, and individual differences in motivation to control prejudiced reactions. Predictions for purchase behaviour paralleled those expected to emerge on attitudes toward the ad and attitudes toward the product, purchase intent, and overall attitudes. Thus, a three-way interaction between motivation level, race of target, and group membership was expected.

To test these predictions, a 2(race of target featured in the ad: Black vs. White) X 2(group membership: no additional information about group membership other than race of target vs. depiction of target as belonging to a positively valued group [doctor]) X 2 (motivation to control prejudiced reactions: high vs. low) ANOVA was conducted on the coupon preference measure. The three-way interaction between race of target, group membership, and prejudice level did not approach significance, F (1, 145) = .01, *ns.*, Cohen's f = .01 (see Table 21). However, a marginal two-way interaction between race of target and motivation to control prejudiced reactions emerged, F (1, 145) = 4.24, $p <$ .04, Cohen's f = .17. Participants low in motivation to control prejudiced reactions expressed greater interest in receiving a coupon for the target product when the target featured in the ad was White (M = 4.59) than when the target featured in the ad was Black (M = 3.46), t(145) = 2.06, $p < .05$. In contrast, interest in receiving a coupon for the target product did not differ as a function of race of target for participants high in motivation to control prejudiced reactions (Black M = 3.84 and White M = 3.41), t(145) = .85, *ns.*

Motivation to Control Prejudiced Reactions	Race of Target		Group Membership: Non Doctor	Doctor
Low Motivation	Black	*M*	3.29	3.63
		SD	1.73	2.43
		N	14	19
	White	*M*	4.05	5.13
		SD	2.42	2.00
		N	22	15
High Motivation	Black	*M*	3.92	3.75
		SD	2.08	2.40
		N	25	20
	White	*M*	3.06	3.76
		SD	2.51	2.51
		N	17	21

Note: Higher numbers are indicative of increased purchase behaviour.

Table 21: The effect of race of target, group membership, and motivation to control prejudiced reactions on intended purchase behaviour

Source evaluation as a function of race of target in ad, group membership, and individual differences in motivation to control prejudiced reactions. Predictions for source evaluation paralleled those expected to emerge on attitudes toward the ad and attitudes toward the product, purchase intent, overall attitudes, and purchase behaviour. Thus, a three-way interaction between motivation level, race of target, and group membership was expected.

To test this prediction, a 2(race of target featured in the ad: Black vs. White) X 2(group membership: no additional information about group membership other than race of target vs. depiction of target as belonging to a positively valued group [doctor]) X 2 (motivation to control prejudiced reactions: high vs. low) ANOVA was conducted on the

source evaluation index. The three-way interaction between race of target, group membership, and prejudice level did not approach significance, F (1, 145) = .001, *ns.*, Cohen's f = .003 (see Table 22). Thus, results show no differences in source evaluation as a function of race and motivation to control prejudiced reactions.

Motivation to Control Prejudiced Reactions	Race of Target		Group Membership Non Doctor	Doctor
Low Motivation	Black	*M*	3.98	3.53
		SD	.68	1.13
		N	14	19
	White	*M*	3.90	3.53
		SD	1.13	1.23
		N	22	15
High Motivation	Black	*M*	3.80	3.64
		SD	1.15	1.12
		N	25	20
	White	*M*	3.71	3.61
		SD	1.12	1.21
		N	17	21

Note: Higher numbers are indicative of negative evaluations.

Table 22: The effect of race of target, group membership, and motivation to control prejudiced reactions on source evaluation

Subsidiary Analyses. Separate regression analyses (each using the centered motivation to control prejudice index, race of target (dummy coded), group membership of target (dummy coded), and pertinent interaction terms (see Aiken and West, 1991) were conducted on the dependent measures. For the most part, these analyses replicated the findings reported using ANOVA. Again, there were only a few exceptions. First, a

marginal two-way interaction between group membership and motivation to control prejudiced reactions emerged on the overall mood index, $b = .30$; $p < .04$. This interaction indicates that individuals low in motivation to control prejudiced reactions experienced greater negative affect when exposed to a doctor rather than a nondoctor. In contrast, individuals high in motivation to control prejudiced reactions experienced greater negative affect when exposed to a nondoctor rather than a doctor. Second, a significant main effect of motivation to control prejudiced reactions emerged on the Black stereotype activation measure, $b = -.17$; $p < .04$. Individuals high in motivation to control prejudiced reactions experienced greater activation of the Black stereotype than individuals low in motivation to control prejudiced reactions. Second, significant two-way interactions emerged between group membership and motivation to control prejudiced reactions on the attitudes toward the ad index, $b = -1.26$; $p < .01$, attitudes toward the product index, $b = -.91$; $p <. 03$, purchase intent index, $b = .80$; $p < .06$, and the overall attitude index, $b = .55$; $p < .05$. The results of these interactions all revealed that individuals low in motivation to control prejudiced reactions did not differ in attitudes when exposed to an ad featuring a doctor or a nondoctor. In contrast, individuals high in motivation to control prejudiced reactions expressed more negative attitudes when exposed to an ad featuring a nondoctor than when exposed to an ad featuring a doctor.

Discussion

The results of Study 2 revealed that, in general, individuals experienced the activation of implicit prejudice to a somewhat greater extent when exposed to an advertisement featuring a Black target than when exposed to an advertisement featuring a

White target regardless of group membership and prejudice level. Furthermore, the results of Study 2 provided evidence that the presence of stigmatised group members in advertising can affect consumers' attitudes toward the ad, attitudes toward the product, purchase intent, and purchase behaviour. Specifically, individuals low in motivation to control prejudiced reactions exposed to an ad featuring a target that was not depicted as a doctor tended to express greater negativity in attitudes toward the ad, attitudes toward the product, and purchase intent when the target was Black than when the target was White. In contrast, individuals low in motivation to control prejudiced reactions exposed to an ad featuring a target that was depicted as a doctor did not differ in negativity as a function of the target's race. Individuals high in motivation to control prejudiced reactions exposed to an ad in which the target was not depicted as a doctor expressed slightly greater negativity when the target was White than when the target was Black – a reverse discrimination type of effect. However, participants high in motivation to control prejudiced reactions exposed to an ad featuring a target that was depicted as a doctor expressed greater negativity toward the ad when the target was a Black doctor than when the target was a White doctor – results that are consistent with reactions expected to be demonstrated by aversive racists.

General Discussion

Considerable past research has documented stereotype and implicit prejudice activation as a result of exposure to stigmatised group members (e.g., Devine, 1989; Dovidio et al., 1986; Fazio et al., 1995; Lepore & Brown, 1997; Macrae et al., 1995; Wittenbrink et al., 1997). Furthermore, stereotype and implicit prejudice activation has been found to result in negative consequences – affecting judgments of and behaviours

toward stigmatised group members (e.g., Bargh et al., 1996; Chen & Bargh, 1997; Fazio et al., 1995; Word et al., 1974). The main objective of the proposed research was to examine the role that stereotype activation or implicit prejudice and the potential resulting negative affect play in determining reactions to ads featuring stigmatised group members. It was predicted that ads featuring stigmatised group members would automatically activate stereotypes about the stigmatised group compared to ads that do not feature stigmatised group members. This was particularly likely to occur for high prejudice individuals (or individuals low in motivation to control prejudiced reactions). Furthermore, it was hypothesized that this automatic activation of stereotypes would have detrimental consequences for attitudes toward the ad, attitudes toward the product, purchase intent, and purchase behaviour.

The results of the current research offer some support for the notion that stereotypes or implicit prejudice will be activated in the presence of stereotype-related material. In Study 1, results revealed that high prejudice individuals exposed to an existing ad featuring a stigmatised group member experienced somewhat greater activation of implicit prejudice than those exposed to an existing ad featuring a nonstigmatised group member. In contrast, low prejudice individuals exposed to an existing ad featuring a stigmatised group member experienced the activation of implicit prejudice to a somewhat lesser extent than those exposed to an existing ad featuring a nonstigmatised group member. The results of Study 1 are consistent with evidence suggesting that individual differences exist in the activation of stereotypes (or implicit prejudice) (e.g., Lepore & Brown, 1997; Locke et al., 1994; Wittenbrink et al., 1997). However, in Study 1, the activation of implicit prejudice did not have detrimental

consequences for consumer behaviour. Furthermore, there was no evidence that motivation to control prejudiced reactions played a moderating role in the activation of stereotypes and any resulting negative consequences of such activation.

Study 2 did not replicate the finding that prejudice level plays a moderating role in the activation of implicit prejudice. Instead, it was found that, regardless of prejudice level or motivation to control prejudiced reactions, individuals experienced marginally greater activation of implicit prejudice following exposure to an ad featuring a Black target than an ad featuring a White target. Furthermore, although individual differences in prejudice level did not moderate the effect of viewing stigmatised group members in ads on consumer behaviour, Study 2 provided evidence in support of the theory that motivation to control prejudiced reactions plays a moderating role in the effect of the presence of a stigmatised group member in advertising on subsequent attitudes and behaviour. Individuals low in motivation to control prejudiced reactions exposed to an ad featuring a target that was not depicted as a doctor tended to express more negative attitudes toward the ad, more negative attitudes toward the product, decreased purchase intent, and decreased purchase behaviour when the target was Black than when the target was White (i.e., they engaged in a "discrimination" like effect). Individuals low in motivation to control prejudiced reactions exposed to an ad featuring a target depicted as a doctor did not differ in reactions as a function of the target's race. In contrast, individuals high in motivation to control prejudiced reactions exposed to an ad featuring a target that was not depicted as a doctor tended to express more negative attitudes toward the ad, more negative attitudes toward the product, decreased purchase intent, and decreased purchase behaviour when the target was White than when the target was Black

(i.e., they engaged in a "reverse discrimination" like effect). However, individuals high in motivation to control prejudiced reactions exposed to an ad featuring a target depicted as a doctor tended to express more negative attitudes toward the ad, more negative attitudes toward the product, decreased purchase intent, and decreased purchase behaviour when the target was Black than when the target was White (i.e., they engaged in a "discrimination" like effect). This result is consistent with Gaertner and Dovidio's (1986) concept of the aversive racist as someone who is motivated to avoid prejudiced reactions due to espoused egalitarian standards. Yet, the aversive racist has underlying negative attitudes toward Blacks and, given the opportunity to justify his or her actions in terms of nonprejudiced explanations, will demonstrate attitudes or actions consistent with discrimination.

Stereotype and Implicit Prejudice Activation

Unfortunately, the findings of the current research do not clarify the role of individual differences in prejudice associated with stereotype or implicit prejudice activation. Some researchers have documented stereotype activation or implicit prejudice effects regardless of individual differences in prejudice (e.g., Devine, 1989; Dovidio et al., 1986; Fazio et al., 1995; Macrae et al., 1995). However, a growing body of literature seems to suggest that individual differences in stereotype activation exist such that stereotype activation is more likely to occur for high prejudiced individuals than for low prejudiced individuals. Although stereotypes about Blacks were not activated in either study, implicit prejudice was activated. Using existing ads, the findings of Study 1 were consistent with an individual difference perspective. That is, high prejudice participants experienced somewhat greater activation of implicit prejudice upon exposure to an ad

featuring a Black target than an ad featuring a White target. Low prejudice participants, alternatively, experienced the activation of implicit prejudice to a somewhat lesser extent upon exposure to an ad featuring a Black target than an ad featuring a White target. However, Study 2 did not replicate these results. Rather, Study 2 yielded evidence suggesting that the activation of prejudice occurs for all individuals in the presence of stigmatised group members – regardless of explicit prejudice level, participants exposed to an ad featuring a Black target experienced the activation of implicit prejudice to a somewhat greater extent than those exposed to an ad featuring a White target. Thus, the mixed results across the current two studies only add to the debate concerning the role of individual differences in the activation of negativity in the presence of stigmatised group members.

Interestingly, the results of Study 2 suggest that when a stigmatised group member (i.e., Black individual) is depicted in a manner that highlights his or her inclusion in a positively valued group (i.e., doctor), both underlying negativitiy associated with the stigmatised group and positive stereotypes associated with the positively valued group can be activated simultaneously. Previous research has found that given motivation or salience of the category one stereotype can be activated while the other is inhibited (Macrae et al., 1995; Sinclair & Kunda, 1999). However, past research has not allowed for the simultaneous activation of prejudice and positive stereotypes.

Relating the Current Findings to Past Research Investigating the Impact of the Presence of Stigmatised Group Members in Advertising on Consumer Behaviour

Past research examining the effects of stigmatised group members in advertising has yielded inconsistent results (e.g., Appriah, 2001; Barban, 1969; Barban & Cundiff, 1964; Brumbaugh, 2002; Bush et al., 1974; Bush et al., 1979; Cagley & Cardozo, 1971; Guest, 1970; Muse, 1971; Perkins et al., 2000; Schlinger & Plummber, 1972; Whittler, 1991; Whittler, 1989; Whittler & DiMeo, 1991). The results of Study 1 revealed that there were no differences in attitudes toward the ad, attitudes toward the product, purchase intent, or purchase behaviour as a function of the presence of a stigmatised group member in an advertisement. This lack of negative consequences following the activation of implicit prejudice should be interpreted with caution. Recall that Study 1 relied on existing ads – ads that participants likely had prior exposure to (especially in the case of the Got Milk? Ads). Furthermore, one set of ads (Got Milk?) featured celebrities and the other set of ads featured attractive models (Kswiss). Thus, any effect of the presence of a stigmatised group member in an advertisement could have been tempered by the fact that the stigmatised group member also belonged to a positively valued group (i.e., celebrity or attractive person). Note, however, that a marginal effect of the presence of a stigmatised group member as a function of prejudice level was obtained on the implicit prejudice measure despite the celebrity or attractiveness factor. Yet, consumer attitudes and purchase behaviour were not affected. Given the nature of the ads used in Study 1, greater emphasis on the results of Study 2 seems warranted.

There has been a trend toward greater inclusion of stigmatised group members in advertising campaigns. These individuals are often portrayed as belonging to additional positively valued groups. For example, a recent Mac computer advertisement featured a

Black woman depicted as a lawyer. Social psychological research suggests that, when stigmatised group members are portrayed as belonging to additional positively valued groups, positive stereotypes about that additional group and negative stereotypes about the stigmatised group may be activated simultaneously. Furthermore, the activation of positive stereotypes associated with the additional group may negate the impact of the activation of negative stereotypes (e.g., Sinclair & Kunda, 1999). The results of Study 2 demonstrated the positive impact of featuring stigmatised group members in ways that highlight membership in a positively valued group – but only for individuals low in motivation to control prejudiced reactions. In contrast, the stigmatised group member's inclusion in a positively valued group seemed to give individuals high in motivation to control prejudiced reactions an excuse to engage in discrimination (i.e., to attribute their negativity to non race related features of the ad – perhaps that they were being manipulated by the "advertiser" because the ad featured a doctor) and any negativity that arose from the presence of a stigmatised group member in an ad transferred to attitudes and behaviour. For individuals high in motivation to control prejudiced reactions, inclusion of the stigmatised group member in a positively valued group seemed to backfire. That is, rather than evoking favourable reactions, the inclusion of the Black target in a positively valued group (i.e., doctor) resulted in somewhat greater negativity in attitudes and behaviour. Interestingly, these results are in line with research suggesting that individuals high in motivation to control prejudiced reactions are, potentially, aversive racists (e.g., Gaertner & Dovidio, 1986; Son Hing et al., 2002). Son Hing et al. (2002) define aversive racists as individuals who are low in explicit prejudice (i.e., they experience themselves to be non prejudiced and espouse egalitarian standards) and yet

score high in implicit prejudice (i.e., have underlying negativity toward Blacks as indicated on implicit measures of prejudice).[4]

Potential Mechanisms: Mood Congruency or the Spreading Attitude Effect

It seemed possible that the presence of stigmatised group members in advertising would activate stereotypes or implicit prejudice as well as any accompanying negative affect. This negative affect was predicted to, in turn, negatively impact consumer attitudes and behaviour. This prediction was based on prior research documenting mood congruency effects (e.g., Forgas, 1995; Schwarz & Clore, 1996) as well as the literature suggesting that mood can impact product evaluations (e.g., Ciarrochi & Forgas, 2000; Forgas & Ciarrochi, 2001; Gorn et al., 1994). Unfortunately, however, mood was not affected by the presence of stigmatised group members in advertising in the current research. Thus, there was no evidence to support the prediction that stereotype activation would affect mood ratings and that mood would, in turn, affect attitudes toward the advertised product along with consumer behaviour.

The spreading attitude effect offers a potential alternative explanation for how the activation of negative stereotypes or implicit prejudice might affect consumer attitudes and behaviour (Walther, 2002). It was predicted that, if individuals have negative attitudes toward stigmatised group members, those attitudes may transfer or spread to the ad or product being advertised and decrease the likelihood of purchase intent or purchase behaviour. Given the lack of evidence concerning the role of affect in affecting reactions to the presence of stigmatised group members in advertising, it seems warranted to examine the alternative potential mechanism – whether it is possible that the spreading attitude effect may account for the current findings. However, the pattern of results on

the stereotype activation and implicit prejudice activation indexes do not match the pattern of results obtained on the main attitudes toward the ad and attitudes toward the product measures.

Thus, on the surface, the results do not seem to support the spreading attitude effect as a potential mechanism by which the activation of negativity about Blacks might affect consumer attitudes and behaviour. However, it may be the case that certain people engaged in controlled processing and were able to stop the spreading of negative attitudes towards Blacks. For example, perhaps individuals high in motivation to control prejudiced reactions may have stopped the spreading of negative attitudes towards Blacks upon exposure to a Black nondoctor in comparison to a White nondoctor relative to their low motivation counterparts. However, when exposed to an ad featuring a doctor, it may be the case that high motivation participants were unable to stop the spreading of negative attitudes. Perhaps given their vigilance in attempting not to appear prejudiced, their cognitive resources were allocated to processing other reasons for not liking the ad and their underlying negativity towards Blacks emerged.

Given that implicit prejudice was activated, it seemed warranted to examine the possibility that such activation mediated the effects of the presence of a stigmatised group member in an ad on consumer attitudes and behaviour. In particular, moderated mediation was tested using the method of analysis proposed by Baron & Kenny (1986). The notion that implicit prejudice activation would mediate the effect of the presence of a stigmatised group member on consumer judgments and behaviour for individuals low in motivation to control prejudiced reactions exposed to nondoctors or individuals high in

motivation to control prejudiced reactions exposed to doctors was tested. However, results did not support implicit prejudice as the mechanism underlying the results.

Alternative Accounts

The findings of the Study 2 offer support for the role of motivation to control prejudiced reactions in determining consumer reactions to ads featuring stigmatised group members depicted as nondoctors or doctors. These results appear to be consistent with the aversive racism interpretation. First, underlying negativity was activated for all individuals exposed to a Black target – even those individuals high in motivation to control prejudiced reactions. Second, high motivation participants exposed to a nondoctor demonstrated equally favourable attitudes (i.e., "egalitarianism") toward ads featuring either a Black target or a White target – perhaps going out of their way to show that they are nonprejudiced. In contrast, high motivation folks "discriminated" against the Black doctor relative to a White doctor – perhaps they found justifications for demonstrating prejudice consistent with their previously activated negativity. Third, the findings are consistent with the notion that aversive racists demonstrate more subtle forms of discrimination. Rather than revealing an anti-Black bias, aversive racists often show a pro-White bias (Gaertner & Dovidio, 1986). Upon closer examination of the data for high motivation individuals, it appears that a pro-White bias did in fact occur. That is, evaluations of the White doctor are considerably more favourable than those of the White nondoctor. Yet, evaluations of the Black doctor do not differ from evaluations of a Black nondoctor.

Given that implicit prejudice activation was ruled out as a mechanism by mediation analyses, it is perhaps warranted to consider the possibility of an alternative

explanation for the pattern of results obtained in the current research. It remains a possibility that the current results can be explained in terms of the transfer of negative attitudes associated with a stigmatised group member to the ad and product with which it has been paired. Skowronski et al. (1998) posit that spontaneous trait transference can occur such that a communicator is perceived to possess the very negative traits he or she describes others to possess. Extending this notion, Walther (2002) suggests that this negativity can transfer to others associated with the communicator. Although not fully tested in the current research paradigm, it is possible that the Black target was associated with negativity (as evidenced by the implicit prejudice activation results) and that pairing a product with a negatively valued target led participants to associate the product with negativity in memory. Thus, low motivation participants exposed to nondoctors were unable to stop the spontaneous transfer of negativity from the target to the ad and product. In contrast, low motivation participants exposed to Black doctors were able to stop the transfer of negativity. This was also true for high motivation participants exposed to nondoctors. Yet, high motivation participants exposed to doctors were unable to stop the spreading of negativity from the target to the ad and product. Perhaps their cognitive resources were depleted due to their vigilance in attempting to appear nonprejudiced and, hence, controlled processing was interrupted. Interestingly, Walther (2002) found the spreading attitude effect to occur to a greater extent under cognitive load.

Limitations of the Current Research

Although the current research yielded some interesting findings – particularly in Study 2, the current research is not without limitations. The use of existing ads in Study 1 lends a certain realism to the research. However, these ads are somewhat problematic. First, it is likely that participants had been exposed to the ads prior to participating in the current research. Both sets of ads used in Study 1 were featured in magazines. Furthermore, the Got Milk? ads were part of a large scale campaign in magazines and billboards. Even though every effort was made to select ads from this campaign that were not likely to be the most popular or widely featured ads, participants likely had exposure to these ads – or, at the very least, were familiar with the campaign. Second, the ads used in Study 1 featured attractive models (and in some cases celebrities). Although the presence of a stigmatised group member in an ad had some impact on the activation of implicit prejudice for high prejudice participants, this activation had no further impact on consumer attitudes and behaviour in Study 1. It could be that, although some negativity was activated when high prejudice participants were exposed to an ad featuring a Black target, positive feelings about the attractive, or celebrity, model could have also been activated simultaneously. Thus, any result of the activation of negativity about Blacks may have been diluted by the simultaneous activation of positivity about that same target individual. This is an interesting possibility -- and one that was explored in Study 2. However, the activation of positivity was not assessed in the first study. Thus, one can only speculate about the lack of findings on the attitudinal and behavioural measures that followed the activation of implicit prejudice measure.

Although some attempt was made to generalize the findings of Study 1 across more than one product category (e.g., milk and runners), there was no such attempt made to generalize the findings of Study 2 across multiple product categories. Rather, due to costs associated with the creation of the ads, one product (i.e., a fruit and vegetable drink) was created and selected as the target product. Admittedly, this product is likely to be one with which consumers have a very low level of involvement (Zaichkowsky, 1994). Therefore, it would be more informative to determine examine whether the results of Study 2 can be replicated across product categories as well as across products of varying levels of involvement. One might expect that any potentially negative effect of featuring an stigmatised group member in an ad might dissipate when consumers are highly involved with a given product. Furthermore, in Study 2, only a single positive group (i.e., doctor) was included in the research design. Thus, it remains unclear as to whether the findings would generalize to other positively valued groups.

Another limitation of the current research pertains to the collection of the key outcome measures – particularly attitudes toward the ad, attitudes toward the product, and purchase intent. Although it is reasonable to expect a consistent pattern of results across each of the three measures as obtained in Study 2, the potential for order effects exists in the current research. It is possible that attitudes toward the ad influenced attitudes toward the product and purchase intent as the order of these measures was not counterbalanced.

A somewhat surprising result obtained in the manipulation check limits the interpretation of the current findings. Other researchers have included a similar manipulation check in their research (e.g., Whittler & DiMeo, 1991). Results of past research suggest that participants were fairly accurate at identifying the race of the target

featured in the ad. Thus, this measure was expected to yield similar results in the current research. For the most part, results of the manipulation check across the two current studies suggest that participants were paying attention to the race of the target featured in the ad. However, results of Study 2 revealed some errors in identifying the model's race. In particular, many participants mistakenly identified the Black target as East Indian. Thus, in retrospect, it would have been ideal to have photographed several models and conduct a pre-test in which participants are asked to identify the race of the model. The target would then be selected on the basis of this measure.[5]

Finally, although the results of Study 2 are consistent with an aversive racism interpretation, process measures (i.e., measures examining how participants processed the ads) were not obtained in the current research. If, in fact, high motivation participants rationalized their dislike of the ad featuring a Black doctor in terms of non race-related factors, it would have been informative to examine participants' justifications for their attitudes and behaviour.

Future research directions

Although neither mood nor the spreading attitude effect were found to be mechanisms by which any effects of the presence of stigmatised group members in ads exerts an effect on consumer attitudes and behaviour, future research could directly assess the potential mediating role of the spreading attitude effect using a methodology similar to the one used by Walther (2002) or Skowronski et al (1998). Furthermore, although the ads used in the current research activated implicit prejudice, the ads did not result in the activation of negative stereotypes about stigmatised group members. Thus,

future research could experimentally manipulate stereotype activation to determine its impact on consumer behaviour.

The current research focused on reactions to Black target individuals. However, future research could attempt to generalize the findings to other target groups that are perhaps more relevant to Canadians – specifically Vancouverites (e.g., Native Canadians, Indo-Canadians). Also, future research could attempt to generalize the findings to other, non-racial or non-ethnic minorities such as the physically disabled, mentally ill, or the elderly. These groups are often featured in advertisements – particularly those soliciting donations to social programs or charities or those aimed at destigmatisation. Thus, it would be interesting to determine the impact of featuring these groups in advertisements.

In both of the current studies, motivation to control prejudiced reactions was measured. However, in order to further elucidate the causal role of motivation to control prejudiced reactions in moderating the effect of stigmatised group members in advertising, motivation to control prejudiced reactions can be manipulated in future research. For example, in order to increase motivation to control prejudiced reactions, participants could be reminded of how their actions could be interpreted as prejudiced and the importance of not appearing prejudiced to others (or to oneself). Perhaps an illustrative example or case in which someone reaps social benefits for not engaging in actions that could be interpreted in a prejudicial light can be provided. Alternatively, to decrease motivation to control prejudiced reactions, participants could be reminded of the importance of not being overly concerned with how one's actions will be interpreted by others (i.e., emphasizing how it may be detrimental to be overly concerned with appearing nonprejudiced). To parallel the high motivation condition, perhaps an

illustrative example or case highlighting the social benefits or positive repercussions of not demonstrating such concern can be provided.

Gaertner and Dovidio (1986) suggest that the aversive racist is highly motivated to respond without prejudice and yet will engage in discrimination when such actions can be justified in terms of nonprejudiced explanations. Thus, future studies could examine participants' justifications for their actions. For example, participants could be asked to provide reasons for why they like or dislike a certain ad or product or why they would or would not purchase the advertised product. These reasons could then be coded for race related justifications (i.e., "I didn't like the ad because it featured a Black individual") or non race related justifications (i.e., "I didn't like the ad because the advertiser was trying to manipulate me by featuring a doctor in the ad"). Alternatively, such justifications can be subject to manipulation. For example, participants can select among various reasons for why they like or dislike an ad and/or product. Two different lists of justifications would be provided for different sets of participants. One list would contain only race related justifications. The other list would contain race unrelated justifications. Their actual purchase behaviour (or a close approximation of this) can then be assessed.

Finally, it would also be interesting to examine the role of pre-existing attitudes toward the brand. Such attitudes could be measured in the case of existing ads or manipulated in the case of fictitious brands. It is not difficult to imagine that, if participants have positive pre-existing attitudes toward a product or brand, they will be less affected by the model's race.

Broader Implications of the Current Research for Marketing

Although the pattern of results that emerged from the current research raises some intriguing issues, the implications of the current research for marketing are somewhat complex. First, based on the results of Study 1, it seems that featuring attractive Black models or celebrities may activate some negativity for high prejudice individuals but this negativity does not affect consumer judgments or behaviour.

Based on more "average" looking targets in Study 2, however, it would appear that featuring Black targets in advertisements results in the activation of negativity regardless of how the target is depicted in the ad and individuals' prejudice level. Yet, the resulting impact of this underlying negativity seems to depend on an individuals' motivation to control prejudiced reactions. For individuals low in motivation to control prejudiced reactions, those exposed to an ad featuring a nondoctor tended to "discriminate" against the Black target (i.e., they viewed the ad and product more negatively than when the ad featured a White target). Thus, their underlying negativity seemed to bias their judgments of an ad featuring a Black target. Yet, when the target was depicted as a doctor, any negativity that was previously activated seemed to get wiped out – resulting in both ads featuring a Black doctor or a White doctor being rated equally. Therefore, in targeting ads to individuals low in motivation to control prejudiced reactions, it seems that highlighting a stigmatised group member's inclusion in a positively valued group will negate any underlying negativity toward the stigmatised group.

When targeting ads to individuals who are highly motivated to control prejudiced reactions, it seems the opposite strategy may be successful. When exposed to an ad

featuring a nondoctor, any underlying negativity that had been previously activated did not seem to affect evaluations of the ad or product. Both the ad and the product were evaluated equally favourably when the ad featured either a Black nondoctor or White nondoctor. However, when highly motivated participants were exposed to an ad featuring a doctor, they evaluated an ad featuring a Black doctor more negatively than an ad featuring a White doctor. Thus, it seems that in this case, the inclusion of a stigmatised group member in a positively valued group backfired and allowed the previously underlying negativity to surface in consumer judgments. Thus, marketers must identify their target market (or manipulate motivation to control prejudiced reactions within the context of their ads) and adjust their advertising campaigns accordingly. What will be a successful strategy for some consumers may backfire for others.

ENDNOTES

1 Recent studies in the social psychological literature on persuasion have also focused on whether messages are more persuasive coming from stigmatised or nonstigmatised group members. In two studies, Petty, Flemming, and White (1999) exposed high and low prejudiced recipients to a communication from either a stigmatised or a nonstigmatised source (African American or White in Study 1; homosexual or heterosexual in Study 2) who presented either strong or weak arguments in favour of an advocacy that was not relevant to either of stigmatised or nonstigmatised groups. Results from Study 1 revealed that low prejudice white participants were more influenced by the quality of the arguments of the message when the source was Black than when the source was White. High prejudice white participants were more influenced by the quality of the arguments in the message when the source was White than when the source was Black. Results from Study 2 revealed that low prejudiced participants were influenced more by the quality of arguments presented by a homosexual than a heterosexual source. Thus, the authors concluded, the least prejudiced individuals are those who engage in the most enhanced message scrutiny from stigmatised sources. High prejudiced individuals may show equal or less processing from stigmatised sources.

2 Researchers often provide time frames when using purchase intent measures. (e.g., Bemmaor, 1995; Fitzsimons & Morwitz, 1996). Therefore, I decided to add a purchase intent measure that specified one year as a time frame.

3 This analysis revealed a marginal interaction between product and prejudice level, $F(1, 136) = 3.17$, $p < .08$. There were no differences in activation of implicit prejudice for high prejudice participants exposed to an ad for milk ($M = 5.18$) and high prejudice participants exposed to an ad for KSwiss running shoes ($M = 5.52$), $t(136) = -.75$, *ns.* In contrast, implicit prejudice was activated to a somewhat greater extent for low prejudice

participants exposed to an ad for milk ($M = 5.75$) than for low prejudice participants exposed to an ad for KSwiss running shoes ($M = 4.92$), $t(136) = 1.74$, $p < .10$.

4 This possibility was explored further. In the current research, individuals were categorized as low prejudice (i.e., scores on implicit prejudice were less than or equal to the median and scores on the MRS were less than or equal to the median), aversive racists (i.e., scores on implicit prejudice were greater than the median and scores on the MRS were less than or equal to the median), and high prejudice (i.e., scores on both implicit prejudice and the MRS were greater than the median). Separate 2 (race of target: Black vs. White) X 2(additional group membership: nondoctor vs. doctor) X 3(prejudice level: low prejudice vs. aversive racist vs. high prejudice) ANOVAs were conducted on the attitudes toward the ad, attitudes toward the product, purchase intent, purchase behaviour, source evaluation, and overall attitude indexes. For the most part, these analyses did not reveal any significant three-way interactions (all F's < 1). However, there was one exception. A marginal three-way interaction between race of target, group membership, and prejudice level emerged on the attitudes toward the product index, F (1, 87) = 2.17, $p < .12$. Although the number of participants in each condition is low and none of the contrasts approached significance (all t's < 1.45), the pattern of results follows.

For low prejudice participants, individuals exposed to an ad featuring a nondoctor expressed slightly greater negative attitudes toward the product when the ad featured a White target ($M = 4.00$, n = 13) than when the ad featured a Black target ($M = 3.46$, n = 12). In contrast, individuals exposed to an ad featuring a doctor expressed somewhat greater negative attitudes when the ad featured a Black target ($M = 3.48$, n = 8) than when the ad featured a White target ($M = 2.97$, n = 12).

For aversive racists, individuals exposed to an ad featuring a nondoctor expressed somewhat greater negative attitudes toward the product when the ad featured a Black target ($M = 3.68$, n = 9) than when the ad featured a White target ($M = 2.98$, n = 11). In contrast, individuals exposed to an ad featuring a doctor expressed somewhat more negative attitudes toward the product when the ad featured a White target ($M = 4.18$, n = 5) than when the ad featured a Black target ($M = 3.19$, n = 8).

For high prejudice participants, individuals exposed to an ad featuring a nondoctor expressed somewhat more negative attitudes toward the product when the ad featured a Black target ($M = 4.25$, n = 5) than when the ad featured a White target ($M = 3.88$, n = 2). Similarly, individuals exposed to an ad featuring a doctor expressed somewhat more negative attitudes toward the product when the ad featured a Black target ($M = 3.75$, n = 11) than when the ad featured a White target ($M = 2.92$, n = 13).

Thus, at first glance, the results of these analyses do not offer much support for the theory that aversive racism (at least in the way it was measured in this research) is playing a role in the reactions of the participants in the current study. However, these latest results are based on only a very small sample of participants and thus need to be interpreted cautiously.

5 Additional analyses including only those participants who correctly identified the race of the model featured in the ad were conducted. However, the overall pattern of results was essentially the same as the pattern of results obtained when all participants were included in the analyses.

APPENDICES

Appendix A

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March 15, 2004

Ms. Celeste Alvaro
Graduate Student
Department of Psychology

Dear Ms. Alvaro:

Re: Stereotype Activation in Advertising

The above-titled ethics application has been granted approval by the Simon Fraser Research Ethics Board, at its meeting on January 17, 2003 in accordance with Policy R 20.01, "Ethics Review of Research Involving Human Subjects".

Sincerely,

Dr. Hal Weinberg, Director
Office of Research Ethics

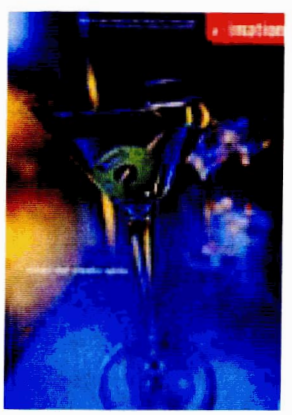
Appendix B

ADVERTISEMENTS FOR STUDY 1

Got Milk? Ads:

KSwiss Running Shoe Ads:

Filler Ad (Imation Cds):



Appendix C

ATTITUDE TOWARD THE PRODUCT

The following scales are designed to assess your feelings about various products. Please complete all items. Click on the number on each scale that best represents the direction and intensity of your judgement.

Now please indicate your feelings about _____:

good	1 : 2 : 3 : 4 : 5 : 6 : 7	bad
dislike very much	1 : 2 : 3 : 4 : 5 : 6 : 7	like very much (r)
pleasant	1 : 2 : 3 : 4 : 5 : 6 : 7	unpleasant
poor quality	1 : 2 : 3 : 4 : 5 : 6 : 7	high quality (r)
disagreeable	1 : 2 : 3 : 4 : 5 : 6 : 7	agreeable (r)
unsatisfactory	1 : 2 : 3 : 4 : 5 : 6 : 7	satisfactory (r)
harmful	1 : 2 : 3 : 4 : 5 : 6 : 7	beneficial (r)
favourable	1 : 2 : 3 : 4 : 5 : 6 : 7	unfavourable
negative	1 : 2 : 3 : 4 : 5 : 6 : 7	positive (r)
distinctive	1 : 2 : 3 : 4 : 5 : 6 : 7	common
useful	1 : 2 : 3 : 4 : 5 : 6 : 7	useless
desirable	1 : 2 : 3 : 4 : 5 : 6 : 7	undesirable
nice	1 : 2 : 3 : 4 : 5 : 6 : 7	awful
important	1 : 2 : 3 : 4 : 5 : 6 : 7	unimportant
worthless	1 : 2 : 3 : 4 : 5 : 6 : 7	valuable (r)
inferior	1 : 2 : 3 : 4 : 5 : 6 : 7	superior (r)
pleasing	1 : 2 : 3 : 4 : 5 : 6 : 7	annoying
interesting	1 : 2 : 3 : 4 : 5 : 6 : 7	boring

Appendix D

Participant #72: Responses to attitudinal questionnaire

1. Over the past few years, the government and news media have shown more respect to Blacks than they deserve

1 2 3 4 (5)

strongly disagree strongly agree

2. It is easy to understand the anger of Black people in Canada.

(1) 2 3 4 5

strongly disagree strongly agree

3. Discrimination against Blacks is no longer a problem in Canada.

1 2 3 4 (5)

strongly disagree strongly agree

4. Over the past few years, Blacks have gotten more economically than they deserve.

1 2 3 4 (5)

strongly disagree strongly agree

5. Blacks have more influence upon school desegregation plans than they ought to have.

1 2 3 (4) 5

strongly disagree strongly agree

6. Blacks are getting too demanding in their push for equal rights.

1 2 3 4 (5)

strongly disagree strongly agree

7. Blacks should not push themselves where they are not wanted.

1 2 3 4 (5)

strongly disagree strongly agree

Appendix E

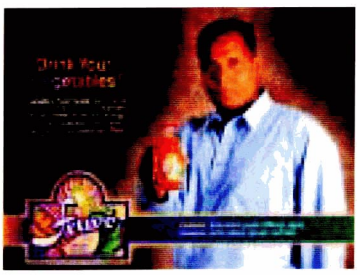
MODERN RACISM SCALE ITEMS

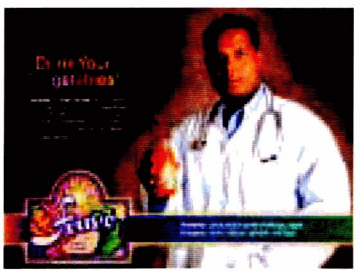
1. Over the past few years, the government and news media have shown more respect to Blacks than they deserve.
2. It is easy to understand the anger of Black people in America.
3. Discrimination against Blacks is no longer a problem in the United States.
4. Over the past few years, Blacks have gotten more economically than they deserve.
5. Blacks have more influence upon school desegregation plans than they ought to have.
6. Blacks are getting too demanding in their push for equal rights.
7. Blacks should not push themselves where they are not wanted.

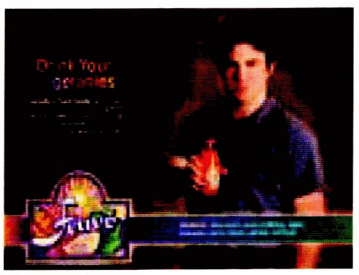
Note: Items will be reworded so that they are relevant to Canadians. Items will be assessed on a 5-point Likert scale (1= strongly disagree; 5= strongly agree). Items will be recoded when necessary such that higher numbers are indicative of more negative attitudes.

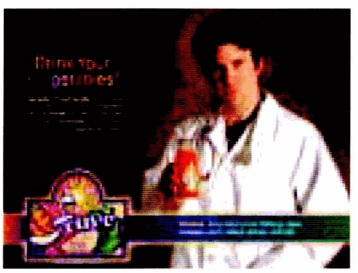
Appendix F

ADVERTISEMENTS FOR STUDY 2

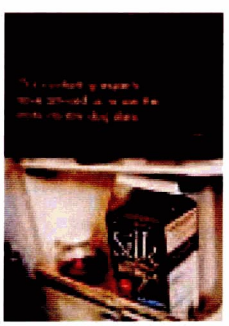








Filler Ad:



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