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Migration, Stigma, and Lived Experiences

A Conceptual Framework for Centering Lived Experiences

San Juanita García, Tomás R. Jiménez,
Seth M. Holmes, Irena Kogan, Anders Vassenden,
Lawrence H. Yang, and Min Zhou

Abstract

This chapter explores the lived experiences of immigrants, the stigma processes they confront, and the response mechanisms that they use to counteract and challenge stigma. It introduces a multilevel conceptual framework to further understanding of the lived experience of and resistance to stigma among immigrant groups. Drawing heavily on migration studies, which often highlight lived experiences of stigma without referencing the concept by name, it is argued that the stigma concept can enrich our understanding of immigrants' lived experiences. The stigma literature provides abundant examples of how members of diverse and minoritized groups experience stigmatization and the consequences this creates for people's life chances (e.g., mental health, physical health, education, employment, housing segregation). A typology is created to highlight how immigrants become aware of, respond to, and affect stigmatization. This typology is then incorporated into macro and meso frameworks to emphasize the multiple forces that act upon stigma among immigrant groups. Focusing on immigrants' lived experiences enables us to understand how immigrants confront and challenge stigma.

The understanding [*Verstehen*] of other persons and their expressions of life is based upon both the lived experience [*Erlebens*] and understanding of oneself, and their continual interaction. —Wilhelm Dilthey (1927:123)

Introduction

To cultivate *Verstehen*, or an understanding of others, requires us to focus on actual lived experiences; only then can we make sense of how people

understand themselves and their social universe. To put oneself in the shoes of others, to gain an understanding from others' perspectives, is what Wilhelm Dilthey (1927) argued is the foundation needed to advance the "human sciences." Dilthey advocated for experiencing the lives of others and interpreting the meaning of how people make sense of their lived experiences. Applying that lens to the lived experience of immigrants helps us to appreciate not only their humanity but the value which they bring to receiving countries (Haney-López 2018; Johnson 2004). Centering immigrants' lived experiences highlights the multifaceted reasons for emigrating, how immigrants make sense of their lives in new contexts, and how immigrants share with others what they have learned from their own triumphs and struggles at all phases of their immigration and integration journeys. Learning from immigrants' lived experiences also shows how the receiving society, including dominant groups, government policies, and social institutions, sometimes stigmatize immigrant and minoritized communities. Centering immigrants' lived experiences brings into relief the stigma processes that they confront. Asking which immigrants are welcomed, which are deported and excluded, provides a few emblematic examples of who is deemed "deserving" to join the receiving society.

A key aspect of the lived experience concerns stigma, or the "the co-occurrence of labeling, stereotyping, separation, status loss, and discrimination" (Link and Phelan 2001:363). Drawing upon our own research and reading of the literatures on migration and stigma, which often speak past each other, we develop a multilevel conceptual framework and create a typology of the lived experience of stigma and resistance to stigma among immigrant groups. Further, we explore how strategies of resistance may act on stigma itself. The frameworks that we develop make explicit the processes to which migration scholars allude to, but seldom articulate. By delineating these processes, we hope to provide a set of conceptual and theoretical tools for social scientists to better understand the lived experience of immigrants.

Stigma and the Lived Experience

The "lived experience" of immigrants, or any group for that matter, can be thought of as "the felt flow of engagements in a local world" (Yang et al. 2007:1528). Local worlds are the realms of human experience where dominant and subordinate groups interact and where moral standing is sought or lost (Kleinman and Hall-Clifford 2009). In the context of migration, a local world refers to a circumscribed domain within which the everyday life activities of immigrants take place. This could be a tight knit social network or neighborhood community by which immigrants arrive to the receiving society. Daily life matters and is deeply held by participants of local worlds. What defines all local worlds, including those of immigrants, is the fact that something is gained or lost, such as status, money, health, good fortune, a job, or relationships. This

feature of daily life (what Kleinman calls “moral experience”) refers to how people assign meaning and value to “what matters most” or “what is most at stake” (Kleinman 1999, 2006; Kleinman et al. 1997). For example, among a sample of primarily undocumented Chinese immigrants with psychosis, engaging in employment as a strategy to perpetuate the lineage reflected achievement of “what matters most” in this cultural group (Yang et al. 2014). These everyday lived experiences can be used to identify what is most valued within particular immigrant groups. We argue that the importance of lived experience within local moral worlds is of primary concern for understanding the process of stigmatization and its diverse experiences among immigrant groups—both of stigmatizing and of being stigmatized.

Stigma is central to local moral worlds. Goffman’s (1963) classic formulation of stigma as “an attribute that is deeply discrediting” (p. 3) emphasizes that stigma is a concept “between an attribute and a stereotype” (p. 4). To understand immigrants’ lived experiences of stigma, we view stigma beyond a “mark,” “stain,” or “blemish” on an individual’s character, as Goffman (1963) originally conceptualized. Instead, we understand stigma as a social process involving “the co-occurrence of labeling, stereotyping, separation, status loss, and discrimination” (Link and Phelan 2001:363). Link and Phelan (2001) conceptualize stigma as an “umbrella concept” that encapsulates interrelated processes within contexts of power.¹ Exerting power, or “the capacity to keep people down, in and/or away,” through stigma-related processes (Link and Phelan 2014:30) exposes those with power as having an ability to stigmatize others. By power, Link and Phelan (2014) refer to people’s ability to exercise their will, regardless of any resistance they may encounter. The role power plays in stigma shifts attention from individual attributes toward critically asking how stigma is produced, by whom, and for what purposes (Tyler and Slater 2018).

As we focus on immigrants’ lived experiences, we recognize the role stigma power plays in keeping immigrants down, in, and away as they navigate life in new host countries. The stigma domains identified by Link and Phelan can also be seen to relate to “what matters most,” or the core daily engagements that are most at stake for a particular immigrant group. Yet to our knowledge, the complex interrelationships between differing components of stigma, immigration processes, and the lived experience of being in an immigrant group have yet to be fully elucidated. We argue that spotlighting power in the exertion of stigma processes is an opportunity to center immigrants’ lived experiences beyond micro-level (individual/interactional) stigma processes. This moves us toward connecting immigrants’ lived experiences to the role that institutional

¹ Goffman conceptualized three main stigmas: (a) physical disfigurements, (b) “blemishes of individual character,” and (c) “tribal stigma of race, nation, and religion, these [3] being stigmas that can be transmitted through lineages and equally contaminate all members of a family” (Goffman 1963:14).

and discursive frameworks play in shaping immigrants' lived experiences of stigma and their responses to stigma.

Migration and the Lived Experiences of Stigma: A Conceptual Framework

Notwithstanding that many authors have used Goffman's stigma theory in studies in migration contexts (e.g., Handulle and Vassenden 2021; Harris and Karimshah 2019), stigma, as a concept, has been applied more widely to psychology, and to stigmatized conditions generally, than to the study of international migration (Schuster and Majidi 2015). In the initial stages of stigma research, this literature often emphasized micro-level interactions among groups or individuals. In fact, this literature was commonly criticized as being too individually focused and as overlooking structural processes undergirding the links between stigma, stereotyping, prejudice, and discrimination, which have since been addressed in subsequent conceptualizations of stigma (Link and Phelan 2001).

In migration studies, the host society in a migrant receiving country is largely defined by the "context of reception" (Portes and Zhou 1993), which shapes processes of integration. The context of reception is made up of multilayered policies, institutions, and public attitudes toward newcomers in host societies and intersects with individual characteristics to influence immigrants' everyday lived experiences. The context of reception affects how immigrants fare culturally and socioeconomically as well as how they respond to, resist, and overcome adversity associated with immigrant disadvantages (Zhou 1997).

Contemporary stigma research takes a complementary perspective in examining the structural processes that impinge upon the individual's experience and life chances. Stigma encompasses not only perceptions and attitudes but also how laws, policies, and practices may lead to systematic disadvantage for groups (Hatzenbuehler 2016). Insights from both the migration and stigma literatures deepen our understanding of the lived experiences of immigrants. Drawing on these, we construct macro- and meso-level frameworks that form the basis of a typology of the lived experience of immigrants and their responses to stigma.

Macro-Level Processes

Figure 5.1 lays out our proposed conceptual framework of the lived experiences of stigma among immigrant groups and individual members within the structure of the host society (Figure 5.1, bottom). This structure is embedded in the receiving country's social class and racial hierarchies that define the contexts of reception, or multilevel institutions and cultural milieus (Portes and Rumbaut 2014). At the macro level are the economy (the labor market) and

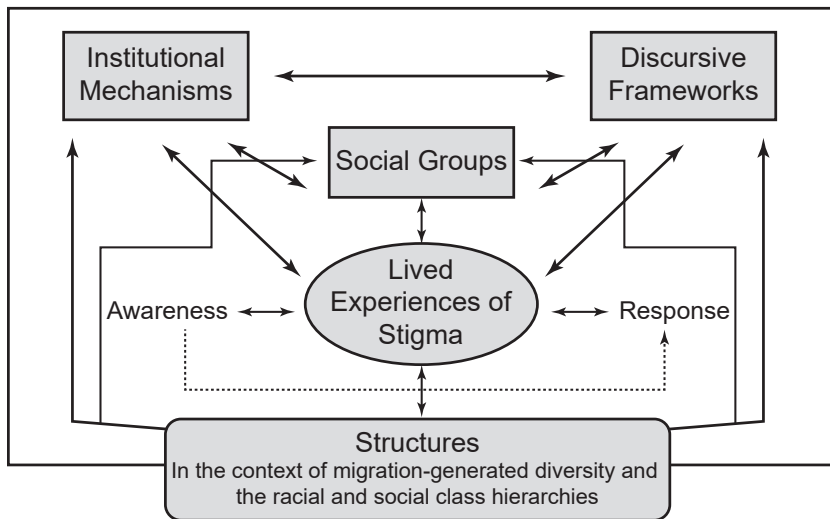


Figure 5.1 The lived experiences of stigma in context.

the state (immigration and integration policies, education, welfare, health care, and criminal justice systems). At the meso level are civil society institutions and established existing ethnic communities. At the micro level are expressions of prejudice toward immigrants and patterns of intergroup interactions. The context of reception is unique to an immigrant group and shared by all members of the group, regardless of their individual socioeconomic characteristics, leading to varied modes of incorporation and divergent socioeconomic outcomes of different immigrant groups.

Group-based stereotypes affect the “lived experiences” of immigrant group members differently. Hatzenbuehler’s (2016) formulation of structural stigma describes the ways that stigmatization is produced or inflected by broader institutional mechanisms (Figure 5.1, top left), or institutions and structures. Hatzenbuehler (2016:742) defines structural stigma as “societal-level conditions, cultural norms, and institutional policies that constrain the opportunities, resources, and well-being of the stigmatized.” For Hatzenbuehler there are two primary types of mechanisms through which structural stigma affects outcomes in health, well-being, and socioeconomic status. The first set of mechanisms are resource focused and may relate to education, labor market position, and access to specific resources (e.g., health care). Each mechanism, in turn, affects the daily lived experience of stigmatized individuals regarding their options for “making a livable life,” supporting their family, improving the conditions in which they live and work, and their ability to engage in everyday life activities (i.e., “what matters most”). The second set of mechanisms relates to appraisal; that is, how aware someone is that the group to which they belong

or into which they are interpolated as belonging (Althusser 1971) is stigmatized (Figure 5.1, lower left). In response to this appraisal (Figure 5.1, lower right), a person may experience self-stigma, social isolation, hypervigilance, and concealment. These specific experiences of stigmatization lead to negative outcomes in health, well-being, and socioeconomic status.

Importantly, each of these experiences becomes part of a person's "lived experiences of stigma" (Figure 5.1, center) and is associated with variation on awareness and response, including "discursive frameworks" for identity, or characteristics by which social groups may be constructed (Figure 5.1, top right, defined further below). Of particular interest is the empirical finding that people who are aware of their own identity's stigma may respond by concealing it. For instance, in surveys, people so stigmatized may report lower levels of interpersonal experiences of discrimination, even when their actual outcomes suggest possible negative effects of discrimination (Portes and Rumbaut 2001). It is important to keep in mind that discrimination, one component of stigma, and stigma itself operate not only at the interpersonal level, but also at an intrapersonal level (leading to internalization), an intergroup level, and at structural and institutional levels.

Meso-Level Processes

In our proposed framework, social groups are at the center of meso-level processes (Figure 5.2, center). Defined as networks of people who interact and rely on each other, social groups enact "what matters most" in their everyday lives and interactions (Yang et al. 2014). Social groups may or may not form around identity categories or statuses (e.g., ethnicity, religion, race, nationhood, culture), which we refer to as "discursive frameworks of identity" (Figure 5.2, far right). How people view themselves in regard to these statuses influences their local social worlds, although often not in ways that outsiders might anticipate. How groups are defined by others also draws from the same discursive frameworks of identity. Prejudice and stereotypes of specific groups, which may be positive or negative in value and lend themselves to stigmatization, draw from a collective "pool" of discursive ideas about statuses. Here, concealability factors are profound. In various situations, immigrants may be able to avoid classification, whereas others will not. Examples of dimensions that determine concealability include race, (visible) religious characteristics, language, and names.

Discursive frameworks of identity differ cross-nationally. In the United States, against a backdrop of distinct racial hierarchies, race is the primary classificatory scheme through which newcomers and established social groups will be defined by others (and come to see themselves). In Europe, race is a dominant factor, but religion constitutes a more important boundary than in the United States. Identifications and classifications form in a discursive landscape

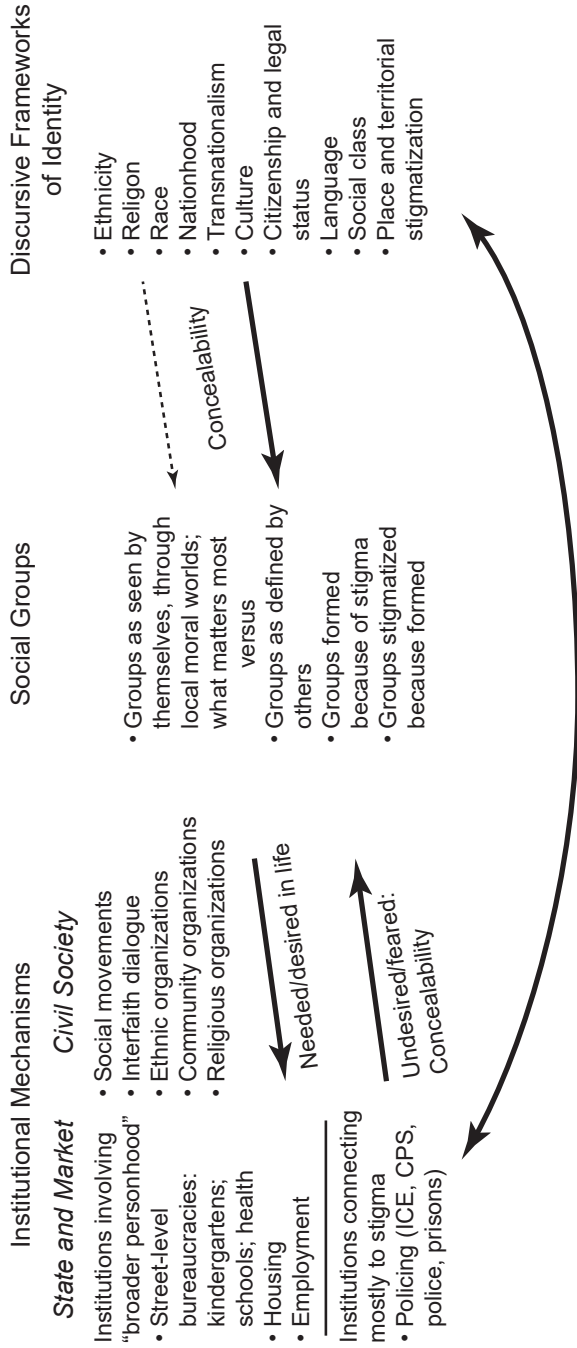


Figure 5.2 Meso-level framework for migration and the lived experiences of stigma. From discursive frameworks of identity to social groups, the dotted arrow indicates indirect influence between how social groups define themselves and how others define groups, and the solid arrow indicates direct influence between how groups define themselves and how others define groups.

where secular mainstream is pitted against Muslim “others” (for a discussion on these differences, see Alba 2005; Alba and Foner 2015).

To understand the dynamics of how and why social groups emerge and reproduce, we acknowledge that some groups may form as a response to stigmatization and other social groups may be stigmatized merely for belonging to a group. The “raw material” for stigmatization comes from the discursive frameworks of identity (Figure 5.2, far right). Some groups may form because they are stigmatized whereby groups unite, support, and validate each others’ experiences. Meanwhile other groups are stigmatized merely for existing, whereby those in power impose stigmatizing labels on the group. As immigrants strive to adapt, and if they are victims of discrimination and rejection, some may engage in “minority ethnic social capital” (e.g., shared language). Minority ethnic social capital has implications for immigrants’ abilities to cope (Anthias 2007). Groups which form because they are stigmatized align with Goffman’s category of “the own:” those who share the stigma and with whom a stigmatized person can seek refuge (Goffman 1963:32). Few groups rarely fall into a single type. Most stigmatized groups exist through some form of two-way identification (cf. the social mirror of how we see ourselves and how others see us; Suárez-Orozco 2000). Still, we view the “formed because stigmatized” versus “stigmatized because formed” as a useful analytical distinction.

Institutional mechanisms (Figure 5.2, far left; see also Figure 5.1, top right) surround the lived experience. On the far left are the institutions of public sector and private markets. Public institutions are those that people need and desire in their lives and which involve “broader life domains” (e.g., health care, schools, housing for families, and employment). Public institutions also include those with varying degrees of coercive power that connect mostly to stigmas (e.g., police, courts, child welfare institutions, prisons). They are typically undesired, even feared. How individuals and groups encounter, and their treatment in navigating these institutions, is connected to both social groups (Figure 5.2, center) and to discursive frameworks (Figure 5.2, far right). The latter frameworks and statuses, and how an individual or a group is defined with respect to them, fuels discrimination in housing and employment (e.g., class, language, religion), and (tacitly) informs teachers’ and caseworkers’ decisions about children and families (e.g., which child should pursue a specific education track or which child will be placed in English as a Second Language class). In Germany, for instance, there is a higher rate of teacher recommendations for Turkish-background children to attend the lowest track in Germany’s tracked secondary education (Sprietsma 2013). In the United States, Valenzuela’s (1999) study with Mexican immigrant and U.S.-born Mexican youth in a Houston, Texas, public school illustrates what she describes as “subtractive schooling,” whereby a process of de-Mexicanization takes place in which Mexican culture and language are stripped away. One example of subtraction is inscribed in the school’s curriculum, which feeds students into two dominant tracks: the “regular” English-only track and the

English as a Second Language (ESL) track. Labeling ESL youth as “limited English proficient” instead of as “Spanish dominant” classifies Spanish as a barrier and not an asset.²

As these examples suggest, when immigrants encounter the institutions of their receiving societies, it is primarily through interactions with street-level bureaucrats, rather than distant state agencies. Coined by Lipsky (1980), street-level bureaucrats are frontline professionals charged with implementing policy, while also holding varying degrees of discretion in casework and professional practice. Typical examples are teachers and social workers. As with employers and lessors in private markets, the work of these street-level bureaucrats will be informed by the discursive frameworks of identity.

The other type of institution that produces stigma and impacts immigrants’ lived experiences are branches of the state, which exerts coercive power over the decisions of professionals (street-level bureaucrats or higher-level) and impact people’s lives directly, arguably in more immediate and consequential ways than other institutions. Two examples are Child Protective Services (CPS) and state agencies charged with immigration control and deportation. Although these agencies differ in nature, with child welfare operating with a dual role of support and discipline, they provide two contrasting heuristic tools to understand different institutional mechanisms. Moreover, a concept like “mass deportability” (Asad 2020; De Genova 2002) may apply more specifically to the United States than many other parts of the Global North. Regardless, both types of agencies generate fear within certain immigrant and minority groups that lead to the cultivation of skills to manage stigma. In the case of CPS, some parents will relate with hesitancy toward adjacent or connected agencies where professionals are mandated reporters (like schools). The fear of having children removed from the home has been shown by U.S. researchers to generate both systems avoidance and “selective visibility” vis-à-vis public institutions (e.g., schools, the health system) by immigrant, ethnic minority, and poor parents, in an effort to avoid CPS referrals (Fong 2019). The latter has also been shown in Norwegian studies of immigrant parents (Handulle and Vassenden 2021). In this sense, the coercive power of some institutions can lead immigrants to cultivate the portrayal of identities that conform with majority norms vis-à-vis adjacent or connected institutions like schools to avoid exposure to the feared institutions (Handulle and Vassenden 2021). Alternatively, they may take measures to avoid system contact altogether, such as refraining from

² Another example is when Black teachers in the United States promote White students to higher tracks because of anticipatory insights from structural factors (including aggregated norms) with concern that White parents might be more likely to complain and to be taken more seriously by the administration if they complain (Lewis and Diamond 2015). This also means that Black students and other students are not promoted to higher tracks. Therefore, the White and Black students have different experiences of schooling as well as different educational, labor market, social class, and health outcomes.

seeking medical assistance (Fong 2019). The same has been shown regarding fears of deportation (Asad 2020; García 2018).

Another vital role that institutions play in stigmatization relates to the stigma concept of labeling (Link and Phelan 2001). Formal institutions such as the state (including federal, state, regional, provincial, and municipal governments), schools, and social services are particularly powerful in labeling immigrants. The state, for example, classifies immigrants' legal status, which then dictates their access to rights, resources, and institutions. These legal labels, however, also become the premise for social identities that inform stereotypes and lead to interpersonal and institutional discrimination (i.e., structurally based stigma). In addition, schools attach formal labels to immigrant children. These labels come in the formal academic tracks and linguistic designations applied to immigrant children (Valenzuela 1999), in the legal categories that form the basis for stigmatization, as well as in destigmatizing social categories (Abrego 2008).

Civil society organizations mediate between stigmatized groups and individuals and state and market institutions (Figure 5.2, left). Social movements and ethnic and immigrant organizations may, for instance, channel grassroots organizing and social activism in response to the state and state agencies' treatment of groups and individuals. Ethnic and community organizations may also provide guidance, advice, and a sense of solidarity to individuals and families sharing insights on how to engage schools, housing, employment, as well as the police. Civil society and ethnic institutions may thus be important moderators (or "buffers") of the lived experiences of stigmatization. These are meso-level institutions, including neighborhood-based organizations, nonprofit social service providers, immigrant rights groups, and ethnic-based community organizations. These institutions may alleviate some of the negative effects of structurally based stigmatization but may also increase stigmatization inadvertently. For example, some ethnic-based organizations in immigrant communities support educational achievement of their children through an ethnic system of supplementary education (Zhou and Li 2003). The resulting school success among immigrant children leads teachers to believe that these immigrant children, as opposed to others, are high achievers and worthy students. This contributes to the racialized formation of "stereotype promise," or the process of being understood through the lens of positive stereotypes which, in turn, leads individuals to behave in ways that conform to the positive stereotype (Lee and Zhou 2015). Such stereotype promise may become part of the enactment of a mechanism of stigmatization, allowing schools and teachers to promote certain groups of students but not others based on the racialized categories to which they belong as opposed to their capacities. Civil society organizations and social movements may also serve as collective platforms for responding to stigma, including possibilities of renegotiation, re-representation, rejection, distancing, and overcompensating (discussed below).

The Lived Experiences of Stigma: A Typology

To illustrate the relationship between migration and stigma in the lived experiences of immigrants, it is important to outline responses to stigma and their potential effect (Figure 5.3). The precursor to the response and effect is an awareness of stigma that operates at the intrapersonal, interpersonal, and collective levels. This typology brings us into conversation with the chapter by Castañeda and Holmes (this volume), in which they center lived experiences of Latinx undocumented youth. Castañeda and Holmes illustrate how Latinx undocumented youth resist stigma by creating and embracing counternarratives that empower them and directly challenge stigmatized narratives surrounding undocumented youth. Collectively, Figures 5.1, 5.2, and 5.3 illustrate our interest in centering lived experiences, beyond individual and micro-level stigma processes, toward connecting immigrants' lived experiences within structural contexts that can be highly racialized, classed, and nativist. Our goal is to make explicit contributions to both migration and stigma research by bridging these two rich literatures to profile how structural conditions shape the lived experiences of immigrants and their responses and effects on stigma.

Types of Stigma

With its focus on immigrants' lived experiences and stigmatization processes, Figure 5.2 elucidates three mechanisms that shape immigrants' lived experiences of stigma: (a) how and where stigma is produced, (b) who the stigmatizers are, and (c) how stigma processes shape the lived experiences of those with family or social ties to immigrant communities. These mechanisms are not mutually exclusive and illustrate a relational approach to the study of stigma. They are shaped by a social context in which immigrants are embedded and which varies across their life course.

Immigrants are often stigmatized and are thus on the receiving end of stigma, but not all immigrants are treated equally. In the United States, for instance, White European undocumented migrants are not perceived to be undocumented and thus experience their undocumented status in ways that are different to undocumented Latinx immigrants. Mexican immigrants and Mexican Americans born in the United States, regardless of citizenship or generation status, often continue to be racialized and treated as undocumented migrants (García 2017). Even among undocumented Latinx immigrants, those with lighter skin can “legally pass” and may confront less discrimination (García 2019). We recognize that individuals who are stigmatized may also shift into a stigmatizing role, despite being stigmatized themselves. For example, a male undocumented Mexican immigrant who experiences stigma in his workplace (e.g., by being ostracized, ridiculed, or overworked without compensation) may engage in stigmatizing his Black and Indigenous coworkers. Put simply, the same person who is stigmatized may actively engage in stigmatizing others. A final

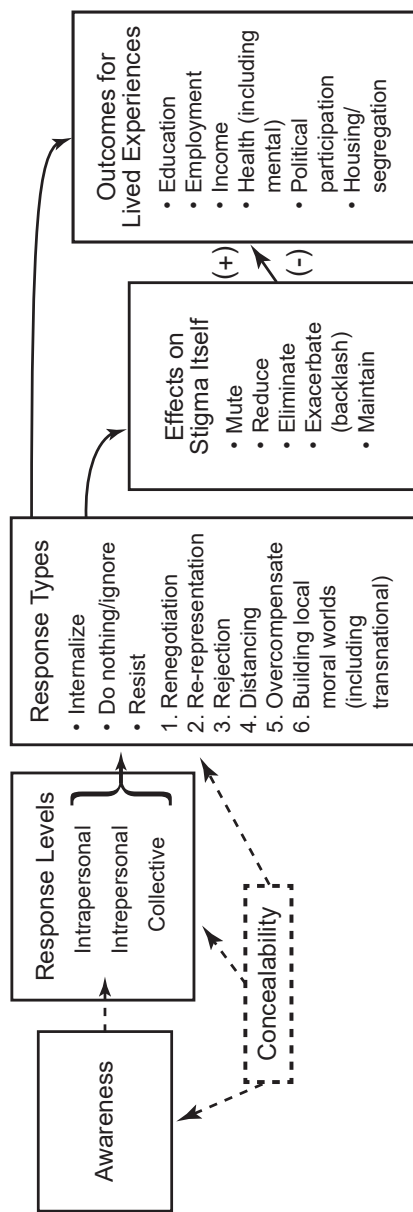


Figure 5.3 Lived experiences of stigma: a typology.

way in which stigma manifests itself is through vicarious stigma; that is, when stigma processes spillover impacting the lives of family, friends, or those in the circle of caring of the stigmatized. An example of vicarious stigma can be seen within mixed-status families (or families composed of different citizenship and legal statuses) whereby family members with legal statuses continue to bear the brunt of stigmatizing processes meant to target their undocumented family members (Castañeda 2019). Vicarious stigma closely relates to courtesy stigma, or stigma by association, whereby the stigma is also felt by those closely associated with the stigmatized (Goffman 1963).

Potential concealability of one's immigrant status is an important moderating factor in the lived experience of stigma. For instance, the degree to which one's immigrant status is concealable shapes the potential repertoire of an individual's responses to stigma (Figure 5.3, step 3). Choosing to conceal one's immigrant status can avert direct person-to-person discrimination, but it can also lead to higher concern about one's status being discovered and associated mental health consequences, such as elevated stress (Valentín-Cortés et al. 2020). Potential concealability may also modify consequences of being aware (or unaware) of stigma or affect an individual's experience of stigma, which in turn would modify response at intrapersonal, interpersonal, and collective levels (Figure 5.3, steps 1 and 2).

Awareness

There are some contexts in which stigmatization occurs because the structural factors of oppression and exploitation are not visible or appraised (i.e., an immigrant remains "unaware" of the source of structural stigma). For example, Fanon writes about the context of Algeria under French colonization (Fanon 2003). An Algerian who experiences hunger does not necessarily associate French colonization with the cause of their hunger. Instead, they are more likely to label the French shop owner (who sells but does not share food products) as selfish or cruel. Inversely, the shop owner does not view French colonization as the cause of hunger but instead labels the Algerian who attempts to steal bread from their shop as selfish, cruel, or lazy. As another example, consider Korean shop owners in the United States who are situated in Black neighborhoods, where those neighborhoods may experience something similar (Lee 2006). Each group is unlikely to be aware of the context of exploitation enacted by racial capitalism that affects them both. Instead, each group tends to focus on the nearest out-group. The Black community may label and stigmatize the Korean shop owners not only as selfish but also as noncitizen outsiders, while the Korean shop owner may label and stigmatize members of the Black community as poor, lazy, or unsuccessful (Min 1996).

Awareness of the stigma that affects an individual or their group has implications for potential responses. Some responses (e.g., forms of active resistance) may require some level of awareness. Others may be possible with or without

awareness of stigmatization. Power—the ability to exercise one’s will, regardless of any resistance that one may encounter from another (Link and Phelan 2014)—is critical here. Stigma functions as a form of power by explicitly turning attention to how stigma is produced, by whom, and for what purposes (Tyler and Slater 2018). Returning to the Algerian and Korean shop owner examples, each group is unaware of the structural forces that shape their everyday life experiences. The power at work in these examples shifts attention to larger structural forces (e.g., French colonization, racial capitalism) and shapes social relations between the respective groups. Indeed, stigma is a form of power. Yet regardless of how aware an individual is of stigmatizing processes, the precursor to the response and effect is an awareness of stigma that operates on three levels: intrapersonal (i.e., or within an individual or groups, such as self-stigma), interpersonal (i.e., across or between individuals and groups), and collective (i.e., individuals or groups that share a collective social identity).

Response Levels

Intrapersonal stigma occurs within an individual and shapes their attitudes, thoughts, beliefs, emotions, or ideologies. In response, individuals enact cognitive, affective, and behavioral processes. Intrapersonal responses may manifest as concealment, internalized stigma, self-stigma (i.e., where individuals internalize negative and devalued views about one’s group), or stigma consciousness (i.e., the extent to which people expect to be stereotyped) (Pinel 1999). For example, undocumented immigrants often navigate when and to whom they will conceal or reveal their undocumented status.

Interpersonal stigma refers to the prejudice and discrimination that is expressed between groups (i.e., the stigmatized and the stigmatizer). At an interpersonal level, stigma can unfold whereby negative feelings and biases toward stigmatized groups are prevalent and lead to discrimination and unfair treatment. Interpersonal stigma includes intergroup processes, which can help inform interpersonal interactions and lead to stigmatization of certain groups or individuals on the basis of class, race and ethnicity, citizenship status, gender, and sexuality, among other types of classifications. Interpersonal stigma can occur through overt actions, such as hate crimes targeting immigrants, or covert actions, such as treating and perceiving immigrants (regardless of citizenship and legal status) as undocumented based on stereotypes conflating race, legal status, and national origin.

Collective stigma underscores the relational nature of stigma, as it captures the far-reaching effects that stigma has beyond individuals (e.g., targets of stigma) into social groups (e.g., stigma by association) (Aranda et al. 2023). Collective stigma refers to stigma applied to a category of people who share a stigmatizing “mark” (Crocker et al. 1998). This mark and the associated stigmatization become a collective social identity (Dovidio et al. 2000). Similar to Figure 5.2, collective stigma may push social groups to form because of

their shared and collective stigmatized experiences (i.e., “formed because stigmatized”). Others may be “stigmatized because formed,” like individuals that experience vicarious stigma as these people may experience stigma by association with a stigmatized group. Collective stigma helps illustrate how stigma transfers across linkages and social connections between the targets of stigma, those associated with them, and the relationships that occur between them (Aranda et al. 2023).

Types of Responses

As immigrants navigate stigmatizing processes, they respond to stigma at intrapersonal, interpersonal, and collective levels. As a first potential response, immigrants may internalize notions of what it means to be labeled with a “stigmatized” status, in this case being identified as belonging to a particular immigrant group. Consider a model of internalized stigma (see Link et al. 1989), originally formulated for use with mental illness, which identifies how “labeled” individuals become at risk for negative consequences. We adapt this model to illustrate how stigma processes related to labeling and awareness of societal conceptions toward immigrants apply to immigrant groups. First, how a society may come to think about a particular immigrant group is constructed by socialization with family, school, community, media, and social media. Globalization, social media, and transnationalism facilitate an awareness of societal conceptions toward immigrants and impact socialization processes for immigrants across borders. Second, labeling occurs through being identified as a member of a particular immigrant group by members of the receiving society; this which can occur via intermediary structural processes, such as schools, articulated earlier (e.g., Figure 5.2). At this point, beliefs about how the community will treat a person of a particular immigrant group become personally relevant. Shaping the likelihood of being labeled as coming from an immigrant group, certain immigrant statuses may not be as readily concealable (due to phenotypes such as darker skin complexion or distinctive garb associated with a religious affiliation), whereas other statuses may be better concealed (e.g., undocumented status).

A crucial aspect of internalization takes place when labeled individuals anticipate treatment based on how a society thinks about their particular immigrant group; for example, undocumented individuals being treated as “undeserving” or as “unfairly benefiting from society’s resources” (Holmes et al. 2021). Because beliefs about a particular immigrant group become personally relevant, individuals may thus anticipate (and actually experience) unfair treatment after they are identified as belonging to an immigrant group. Fear of being labeled shapes the decision of undocumented immigrants to conceal their status, thus protecting as well as empowering them to participate in society without bringing attention to themselves. In the case of a potentially concealable immigrant status (e.g., undocumented status), the individual anticipates

negative responses from others, following disclosure of their immigrant status (Patler 2018b), and adopts strategies to conceal this status. If individuals from a particular immigrant group anticipate unfair treatment from others, they may pursue a strategy of secrecy by concealing their immigrant status from friends, families, dating partners, prospective employers, and colleagues. Another potential coping strategy includes withdrawal or restricting social contact to people who accept one's status. Other potential strategies include denying or ignoring one's immigrant identity when relating with others.

While potentially protecting the immigrant from negative person-to-person discrimination, these coping strategies can also elicit negative outcomes. In the United States, for instance, undocumented youth in educational settings must decide whether to conceal or reveal their legal status when they interact with teachers, counselors, and administrators (Patler 2018b). The political and social contexts surrounding undocumented youth as well as the perceived support from their co-ethnic social networks play a role in these decisions. First-person accounts among people who have concealed their undocumented status in the United States reveal how shame leads to reduced social connections. Furthermore, loss of relationships (e.g., being broken up with by a romantic partner) have been reported following actual disclosure of being undocumented (see Castañeda and Holmes, this volume). In addition, teasing and harassment at school has also been commonly reported by undocumented Mexican youth in the United States (see Castañeda and Holmes, this volume).

A related process of internalization of stigma or “self-stigma” may occur when an immigrant becomes aware of and believes in a social stereotype (e.g., immigrants are not hard workers). Internalization of the stereotype leads to negative consequences (Figure 5.3) and may be exacerbated by the absence of stigmatized group members in high-status social, political, and economic roles. The absence of a relevant role model may cause group members to conclude that “I am not a leader,” “I’m not good enough to attend college,” or “people will not view me as a leader or college material, so I should choose a different path” (Debrosse et al. 2020). Self-stigma necessitates buying into the stereotypes and is coupled with a lack of representation from people that share similar characteristics in important social roles, leading to negative consequences.

Do Nothing

When individuals become aware of negative stereotypes associated with their immigrant group, they may choose a coping response to “do nothing” (see Figure 5.3). In one version of “do nothing,” an immigrant may give up efforts in accordance with a stereotyped characteristic (e.g., stops trying to succeed academically in line with societal perceptions of one's group possessing poor scholastic ability). This “why try” effect has been applied to mental illness stereotypes (Corrigan et al. 2009). It delineates relationships between negative stereotypes of a group (i.e., how the general public conceives of and reacts to

members of an immigrant group), which may lead to internalized stigma and result in a loss of self-esteem, self-efficacy, and empowerment. Impacts on these psychosocial outcomes can lead to maladaptive behaviors, such as no longer participating in important life goals and activities.

In a second version of “do nothing,” immigrant groups may feel obligated to isolate and disengage from society to avoid bringing attention to themselves. Others may disengage or “do nothing” for their own self-preservation, as a form of self-protection from the harmful and damaging effects associated with stigmatizing processes. For example, undocumented immigrants may decide not to engage in activism to avoid bringing attention to themselves. Another version of this is to demonstrate one’s subscription with the mainstream, majority culture, as has been shown in “strategies of normalization” taken by young Australian Muslims (Harris and Karimshah 2019:624), which include performing ordinary Australianness or acting like what Goffman (1963:37) described as “heroes of adjustment” (Harris and Karimshah 2019:627). As a form of self-preservation, undocumented immigrants may consciously decide not to engage (i.e., do nothing) to counter stigmatizing views of their group because they understand the negative and injurious consequences that stigma induces. These forms of disengagement have negative consequences for the stigmatized, as they may become even more isolated, preventing them from forming strong social bonds and social connections with other stigmatized immigrants. Yet, disengaging or to “do nothing” as a form of self-preservation may circumvent the negative and injurious consequences that stigma induces because individuals may choose not to engage and thus do not ruminate on negative stigmatizing views of immigrants, despite a level of awareness of stigmatizing views. Others may “do nothing” as a form of self-preservation, but constantly ruminate on the negative stigmatizing views of immigrants, and thus are negatively impacted by the injurious consequences that stigma produces. To “do nothing” is a decision one makes that disadvantages stigmatized groups and incurs an advantage for the stigmatizers because stereotypes remain alive and not challenged. In other words, the status quo remains, ultimately privileging the stigmatizers.

Resist

By confronting stigma head-on immigrants may follow a strategy to resist stigma discursively. Below we describe six strategies that can be understood through Gramsci’s conceptualization of the “war of position”: different groups fight over meanings and representations to reach goals, pursue interests, and vie for power. As evinced by the following examples, the efficacy of a strategy depends on both historical context and the power the stigmatized group holds.

The first strategy responds to labels through renegotiation, which involves taking labels applied to them in a denigrating way and embracing them to create new meanings. In the United States, this may involve slogans such

as “Undocumented and Unafraid.” Examples of allyship across stigmatized groups include the slogan “Coming Out Undocumented,” in which LGBTQ+ groups and immigrant groups share metaphors in relation to one another (De Genova and Peutz 2010; Terriquez 2015).

The second strategy that involves labels is known as re-representation: novel words, phrases, or actions are used to construct and enforce counter-narratives. In the United States, examples include the terms “Dreamers” and “DACamented.” These terms create new understandings of a group that runs counter to the stigmatizing tropes. Some produce new forms of belonging, such as “Oaxacalifornia,” a term utilized by Oaxacan people in California to denote their identity as both Oaxacan and Californian and their belonging in a place that is culturally hybrid. Policy changes can also provide new labels that immigrants adopt to resist stigma. Such labels may stem from more inclusive policies, such as the California Assembly Bill 540 (AB 540), which allows any high school student who has attended three years of high school in California to pay in-state tuition at the state’s public colleges and universities (Abrego 2008). Undocumented students used the title of the law AB540 as the basis for a positive label (“AB 540 students”) to counter the stigmatizing label (“illegal”) created by the federal government. A similar phenomenon happened with Deferred Action for Childhood Arrivals, an executive order signed by President Obama in 2012 that gave some undocumented immigrant young adults reprieve from deportation (U.S. Citizenship and Immigration Services 2022). Here, the same institution that labeled some immigrants as “illegal” offered select immigrants a new legal label (“DACamented”) that has more positive valence.

The third sociolinguistic strategy involves rejection or the annulment of a label as opposed to proposing another. This strategy, seen in many languages and sociodemographic locations around the world, may best be exemplified by the slogan “No Human Being is Illegal.” Other groups may collectively engage in rejecting a host society’s stigma by separating themselves from the stigma through co-ethnic community building or even ethnic exclusion. Rejection is likely most effective when undertaken collectively.

The fourth strategy is distancing. Here, immigrants’ distance themselves from the meaning of a label attached to their group, by avoiding contact (spatially or socially) with their group or dressing and speaking differently from its members. In Scandinavia, for instance, refugees from the Middle East may perform counternarratives that demonstrate “Scandinavian-ness” or show that they do not fit the labels they are given (Bygnes 2022). In the United States, lighter-skinned Mexican immigrants may distance themselves from the stigmatization that affects darker-skinned or Indigenous Mexican immigrants; they may even engage in stigmatizing groups to avoid being stigmatized themselves (Holmes 2013).

The fifth strategy involves overcompensation. An immigrant may work deliberately to achieve a specific goal that runs counter to a specific label or

stereotype that deems them unlikely to achieve that goal. For example, Asian Americans face blocked opportunities (a “bamboo ceiling”) in leadership positions because of negative stereotypes about their abilities as leaders. In response, some might double their efforts to get into leadership positions as a means of pushing back against the stereotype (Lee and Zhou 2015). Inversely, an immigrant may work extra hard to achieve a specific goal because a label indicates that they should strive to achieve this goal. In this way, stigmatization can lead to overcompensation in everyday life. Borrowing again from the example of Asian Americans, stereotypes related to their abilities in math and science might drive individuals inclined to follow other career paths to nonetheless pursue a career in math and science because the stereotype prescribes it (Lee and Zhou 2015).

The sixth strategy involves building local moral worlds of resistance. This strategy may be enacted through local community building, such as through ethnic-focused organizations, institutions, or social ties. Participation in these local communities or networks (i.e., “local worlds”) can provide a sense of acceptance and worth (or locally recognized, full-fledged “personhood”), which can be used to ward off stigma from outside societal structures. In addition, this strategy may be complemented through “transnational compensation,” in which an immigrant group may focus on “what matters most” in a transnational context (e.g., sending back remittances to families abroad, thus achieving recognition within one’s local network or community) to avoid the negative effects of outside stigmatization in one specific society, community, or region.

Effect of These Strategies on Stigma

Do these strategies have an effect on stigma? Individual and collective responses to stigma can shape the severity or salience of the stigma. We conceptualize intrapersonal, interpersonal, and collective responses to stigma by migrants as having five nonmutually exclusive effects on stigma—mute, reduce, eliminate, exacerbate, and maintain (Figure 5.3, step 4)—which extend the responses to stigma described above.

The first response is to *mute* the stigma, thereby temporarily reducing or making it irrelevant. Muting does not eliminate the stigma; it situates individuals or groups in insulating situations. For example, in interpersonal interactions, individuals can conceal characteristics associated with the stigmatized category (discussed above). Examples include later-generation Mexican Americans overcompensating by initiating casual conversations with White Americans to mute associations between Mexican ancestry and foreignness (Jiménez 2009). This does not conceal an individual’s association with the stigmatized category (Goffman 1963) but rather mitigates parts of the stigmatized characteristic while the individual remains associated with the stigmatized category. Likewise, undocumented immigrants may distance themselves from the stigmatized category by adjusting their style of dress to signal a class

standing not normally associated with undocumented immigrants (García 2019). Collective forms of responses to stigma can likewise mute stigma. Organizations on college campuses in the United States create communities of support with other undocumented students, thus allowing undocumented individuals to temporarily mute the stigma associated with legal status and even invert the valence of the status so that it becomes a positive source of identity (Abrego 2008). Importantly, in all these examples, stigma remains outside of the muting situation.

Responses to stigma can also *reduce* the severity and salience of the stigma in multiple realms of life. Though short of eliminating the stigma, reduction is wider in scope and less fleeting than muting. Stigma reduction is more likely to result from group-level processes, including collective action aimed at the stigma itself or processes that incidentally affect stigma. An example of the former is ethnic civic organizations in Canada that promote the political and social advancement of a particular ethnic group, increasing the likelihood that group members participate in civil society more broadly and mitigating any impacts of structural stigma toward this ethnic group (Bloemraad 2006). An example of the latter is the upward mobility of Muslims in the United States. Here, upward mobility likely stems from the relatively high socioeconomic status of Muslim immigrants and the pursuit of economic aspirations once in the United States. Upward mobility leads to greater contact with non-Muslims, and a resulting reduction in stigma.

Responding to stigma may also *eliminate* it altogether. This most likely occurs due to collective and larger societal processes that transpire over extended periods, perhaps even generations whereby stigmatized categories become subsumed into the larger societal mainstream. For example, in the mid-1800s in the United States, Irish immigrants (and later, Southern and Eastern European immigrants) were stigmatized because they were Catholic. Fears regarding potential papal influence receded as immigrants and their subsequent generations integrated socially, politically, and economically, and today, Catholicism is no longer a stigmatized category in the United States. The elimination of Catholicism as a stigmatized category was the result of deliberate collective action as well as group-level changes in socioeconomic status (Alba and Nee 2003).

Responding to stigma does not always act on the stigma in ways that might be beneficial to the stigmatized group. Collective responses may *exacerbate* stigma, making it more salient and thus consequential in multiple areas of life. Examples abound of immigrants advocating for rights, resources, and access to institutions that often heightens stigma. For instance, in the early 2000s in the United States, immigrants participated in nationwide demonstrations against restrictive federal immigration policies and in favor of immigrant rights. The southern United States, an area with a more recent history of immigrant settlement, saw widespread protests that caused a social and political backlash and made Latino immigrants a more identifiable and stigmatized category in the eyes of long-residing Southerners (Jones 2019).

Finally, resistance may do little to alter stigma, which may *maintain* its relevance despite a group's actions. Stigma maintenance is more likely to result from internalization and do-nothing responses on the part of immigrants. It can, however, also result from power differentials between immigrants and established communities or institutional arrangements. Resistance does not immediately change the status quo.

Outcomes for Lived Experiences of Stigma

Immigrants experience stigma in their lives differently: some are impacted directly by stigma, others shift into the role of stigmatizing, still others experience stigma indirectly. These diverse lived experiences are relational and context dependent. They are interspersed at individual, meso-institutional, and macrosystemic levels, yielding divergent and cumulative effects on the individual immigrant and/or the immigrant group being stigmatized. How one responds to stigmatizing processes shapes the direction, magnitude, and impact that stigma has on immigrants lived experiences (Figure 5.3, step 5). Many outcomes have been highlighted in existing research to demonstrate that anti-immigration stigma, racial discrimination, and stereotyping bear directly on disparate outcomes in physical and mental health, access to educational, housing, labor market opportunities, and socioeconomic attainment. People who report, for example, discrimination on the basis of race are more likely than others to have high blood pressure, hypertension, as well as chronic cardiovascular, respiratory, and pain-related issues (Chae et al. 2010; Gee et al. 2007; Mays et al. 2007). People who experience discrimination and hate, because they “look like” foreigners and are thus treated as outsiders, are more likely than others to suffer from anxiety, depression, and sleep disorders (Armenta et al. 2013; Lee and Waters 2021). Internalized racism by marginalized racial groups has been found to damage self-esteem and reinforce self-doubt and powerlessness of stigmatized group members (Jones 2001). Systemic racism and discriminatory policies, regulations, and practices that result include redlining, residential segregation, deportation, and detention (Massey and Denton 1993; Morey 2018).

Capturing the Lived Experience

Our framework provides a conceptual map for migration and stigma processes, but implementing the map requires a range of methodological instruments. In providing new insights into the lived experience of immigrants and stigma, we have relied on a rich set of largely qualitative studies for illustration. Advancing research on migration and stigma using ethnographic methods, according to the concepts or frameworks described here, would be a straightforward approach. However, using our model in large-scale quantitative migration

research requires a substantial expansion of existing approaches. Here we present some of the main challenges to and opportunities for doing so.

Studies using such large-scale, survey approaches tend to rely on existing secondary data, which despite overall large sample sizes are hardly able to provide sufficient power to “zoom into” the lived experiences of single ethnic minority groups, particularly if these groups are relatively small in size. A second issue in quantitative survey research is that origin categories for immigrants and their descendants have to be meaningfully defined; this is a challenging task due to the diverse experiences of ethnic minority groups. Whereas for first-generation immigrants, countries of origin and/or citizenship may serve as a basis for classification, for the descendants of immigrants the task of classification becomes more challenging. This is particularly true given the growing proportion of immigrant descendants that are born into interethnic, binational, or biracial families, where one parent belongs to the charter population and another to a minority group (Kalter and Heath 2018). The categorization of mixed ancestry (i.e., children of parents who occupy distinct positions on the migration generation line or with regard to ethnic origin) can never do justice for both sides of the ancestral lineage. Pragmatically taken, classification decisions to treat a person who happens to have one parent born outside the host country as a second-generation migrant or as belonging to a certain ethnic minority group could itself lead to labeling and potentially (unintended) stigmatization.

To further complicate matters, in secondary data sources, certain origin categories are predefined and grouped based on geography in pan-geographical categories. This would probably not be an issue if the experiences of minorities within the categories concur, but this is often not the case, as we have learned from in-depth qualitative and quantitative studies. Creating overly broad categories that capture people with diverging experiences might again lead to labeling and stereotyping (and potentially stigmatization). As a result, potential disadvantages or prejudice toward a single origin group within a pan-geographical category can be transmitted to immigrants who originate in other countries also categorized as belonging to this group. Moreover, in comparative studies, the composition of the very same pan-geographic groups might differ. For example, the bulk of Eastern Europeans in Germany are from Poland and the countries of the former Soviet Union, whereas in Sweden, countries of the former Yugoslavia dominate. Still, researchers might compare the Eastern Europeans as a group, as if these were comparable. The practice of treating immigrants from the earlier existing and then disintegrated national entities (e.g., the former Yugoslavia, the former Soviet Union) as homogeneous groups might be misleading and even erroneous, as very often the successor countries (and their people) follow entirely different paths in terms of societal, economic, and cultural development and identities (e.g., Russia, Belarus, and Ukraine).

Objective classification uncertainties require a good deal of pragmatism, as data often do not leave many options for meaningful analyses. Yet quantitative

migration researchers might utilize stigma research prior to collecting their own data or drafting questionnaire modules for large-scale data collections (e.g., European Social Survey). A first important issue to consider is that labeling categories are not necessarily formed around individuals' countries of origin; instead, using country of origin might conceal certain Indigenous cultural and ethnic minorities (e.g., Assyrians and Kurds in Turkey, Roma or Jews in many European countries) or long-standing subnational groups, such as Scots in the U.K., Catalans in Spain (Heath et al. 2016), or Biafrans in Nigeria. Particularly if some of these minority groups are stigmatized in some contexts but not others, migration research runs the danger of missing systematic disadvantages caused by group stigmatization. A second lesson to be learned from stigma research is to give a stronger voice to the research participants in defining their group identities. Deviations between the respondents' subjective interpretations of their identities and group boundaries set by researchers, based on a set of objectively defined criteria, might be meaningful and a topic of research in itself, as they might indicate a group's responses toward stigmatization. Finally, critically asking ourselves to grapple with our own lived experiences, coupled with the privileging of hegemonic Western ways of designing and conducting research, is desperately needed in both migration and stigma-related research. Doing so will provide us a way to place more attention to "how our culture-specific inner eyes shape and limit how we, as researchers/scholars/analysts see, name, frame and go about our research" (Lukate 2023:66).

Conclusion

Scholars and literatures analyzing stigma, those investigating migration, and those theorizing lived experience often do not overlap. This gap in the literature leads to missed opportunities, insights, and responses from all three communities. Theoretical insights, analytical clarity, and ideas for solidarity, advocacy, and policy can be gained if we consider the lived experience of stigma processes in contexts of migration. In our consideration of the nexus of these, often separate, topics and literatures, we find especially compelling the diversity of responses to stigma processes in the everyday lives of immigrant communities. These responses, both individual and collective, include resistance that takes different forms. These responses affect not only the stigma processes of these individuals and communities but also their lived experience on multiple levels. We call on scholars of stigma, migration, and lived experience to consider these responses in their research and conceptualization as well as in their more public-oriented policy and solidarity work. At this intersection lies one of the most critical issues in our world today: stigma processes that affect immigrant communities under different social, political, and geographic contexts.

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