EXPERIENCES WITH CLASSISM AND MENTAL HELP-SEEKING ATTITUDES: THE

ROLES OF SHAME AND SELF-COMPASSION

by

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A dissertation submitted to the Graduate College of Radford University in partial fulfillment of

the requirement for the degree of Doctor of Psychology in Counseling Psychology in the

Department of Psychology

August 2024

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ABSTRACT

College is a pivotal time in identity development. Experiences of discrimination based on one's social class during this particularly formative time is known to affect a student's sense of belonging, overall well-being, and attitudes toward seeking psychological help from a mental health provider. Guided by the theoretical framework of the everyday prejudice and discrimination literature, this study examined the mediating role of shame within the relationship between experiences with classism and attitudes about seeking mental-health services and the moderating role of self-compassion within the relationship between experiences with classism and shame. A sample of 482 college students from a medium sized southeastern university completed an online survey. The hypotheses were partially supported. Experiences with classism did not significantly predict mental-health help seeking attitudes. Although the indirect effect of help-seeking attitudes through shame was significant, the effect was quite small and of limited theoretical value. Experiences with classism and self-compassion both uniquely and significantly predicted shame, the interaction between experiences with classism and self-compassion was not significant. Finally, the hypothesis that self-compassion would moderate the mediation effect was not supported. Overall, the unexpected results underscore the continued necessity for researchers and clinicians to expand their understanding of students' experiences on campus. In doing so, they can increase efforts to effectively design and implement strategies aimed at enhancing mental health support and promoting an academic environment supportive and inclusive of all students.

Keywords: College students, shame, classism, social class, help-seeking attitudes, self-compassion

DEDICATION

I would like to dedicate this dissertation to my parents. To my parents, Mom and Dad, you always told me that I could be anything I wanted to be and you encouraged me to follow my dreams, no matter where they led me. From a young age, you instilled in me a strong work ethic and taught me how to take pride in my work, while still remaining humble. You nurtured and instilled in me a passion for helping others that has undoubtedly shaped me to be the woman and clinician I am today. You made countless sacrifices to ensure that I had all I ever needed and more, and I feel forever indebted to you for giving me the life that I have today. Although there were many times that I doubted myself and my abilities, your faith in me never wavered. Your unconditional love, encouragement, and prayers have been the invisible armor that has guided and comforted me throughout this journey. Thank you for being my biggest cheerleaders and number one fans. You both have truly carried me through to this finish line and for that, I am eternally grateful.

"The times when you have seen only one set of footprints, is when I carried you."

(Mary Stevenson, *Footprints in the Sand*, 1939, stanza 4)

ACKNOWLEDGEMENTS

I am incredibly thankful for my family and all their support throughout this journey. To my grandparents, Nannie and Papa, my memories with you on the farm in Moneta, VA are some of my fondest and most precious memories. I have thought of them often as well as the encouraging conversations that we have had out on the sun porch. You never doubted my ability to accomplish all the things I hoped for and you made sure I knew that each time we talked. Nannie, I can't wait to spend more time with you now that I have completed this program! I know Papa is looking down on us with nothing but smiles! To my grandmother Grams, I have felt you every step of the way throughout this program and graduate school. We had a bond that was unlike any other, and I am so appreciative of the time that we had together. I hold close all the time spent at your house watching TV and daydreaming about what I wanted to be when I grew up. You made sure I knew that women could do anything and you embodied that sentiment whole heartedly. I know that every butterfly I see is a sign from you that you're looking down on me. To Sissy, I look up to you more than you know. You are one of the strongest and most intelligent women I've ever known. Thank you for reassuring me during all the times I thought I couldn't do it, and for always being just a phone call away. I can't wait to live closer to you and to come visit! To my aunts, uncles, cousins, and extended family that have uplifted me during this process, thank you! I couldn't have done it without all of you!

I would like to acknowledge the Psy.D. faculty that have played an influential role in my success with this dissertation. Dr. Pei-Chun Tsai, my advisor and mentor my first three years in the program, dedicated an abundance of time and effort to this project and was influential in the design of this study as well as the success of my proposal. Thank you, Dr. Tsai, for helping me to finally understand moderation and mediation, even after many times explaining it. I am

appreciative of all the work you put forth for this project. I would like to thank my current and previous committee members, Dr. Jenessa Steele, Dr. Ruth Riding-Malon, and Dr. Benjamin Biermeier-Hanson for their commitment and effort to seeing this project through to its final stage. I would also like to acknowledge and express my deepest gratitude to Dr. Jeffery Aspelmeier for taking this project on in my final year of the program. Dr. Aspelmeier's wisdom, calmness, and unwavering faith in me encouraged me to be able to believe in myself and to finish the project that often felt unachievable and out of reach. Dr. Aspelmeier, thank you for *all* that you sacrificed to assist me in completing this project. Thank you for the countless hours of energy, effort, and time that you poured into myself and this project. I am immensely grateful.

To my tribe of friends that have supported me throughout this long and winding journey (there are far too many of you to name), thank you. Thank you for the many texts, FaceTime calls, and hangouts full of love, encouragement, and wishes for success. Thank you for driving to me when I couldn't come to you, and for allowing me to ask for a "rain check" when I had too many assignments on my plate. You all have shown me what friendship is truly about and I'd be lost in this world without you. To my RU family, Erin (and company) and Dr. Hayes, thank you for taking in this Henry County girl and allowing her to barge into your offices, with tears or not, for a hug or just to chat. I treasure our dinner dates and walks to BT's so much. I would also like to thank my many clinical supervisors for their guidance and reassurance that this journey would be worth it in the end. Last but certainly not least, I could not have made it through without my incredible cohort members Aaron, Cheyenne, Emily, and Mandie, along with others in the Psy.D. program that mentored me and took me under their wing. To my cohort, what a ride it has been! I am so proud of us and all the things we've faced and overcome throughout our yeas at Radford. I can't wait to see where each of our passions take us!

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CHAPTER ONE: STUDY OVERVIEW

Experiences of classism on college campuses is a form of discrimination that is often overlooked in much of the counseling psychology literature (Smith, 2008). The relationship between discriminatory experiences and shame has been well-documented (Watts-Jones, 2002). However, the impact of experiences of classism on an individual's attitudes toward seeking mental health services has been sparsely studied (Choi & Miller, 2018). Furthermore, self-compassion has been shown to mitigate the impact of shame and discrimination (Neff, 2003; Swim et al., 1998). Still, the roles of shame and self-compassion in the experience of classism and mental help-seeking attitudes on college campuses has yet to be explored. This study utilizes the everyday prejudice and discrimination literature framework to explore the relationships between experiences of classism and mental help-seeking attitudes and the potential mediating role of shame and moderating role of self-compassion.

Review of Literature

What is Classism?

Classism is a form of prejudice and discrimination that has been found to be constant and recurrent in the lives of college students (Liu, 2011; Liu et al., 2004; Thompson & Subich, 2013). Classism specifically refers to unfair treatment as a result of one's social class (Liu, 2012). However, there are many inconsistent definitions within the literature and uncertainty within the field of psychology regarding the operational definition of classism (Liu et al., 2004). A prominent reason for the discrepancy in definitions is the practice of using of terms such as socioeconomic status (SES), social class, and inequality interchangeably to describe largely disparate constructs (Liu et al., 2004). As a result, the occurrence and experience of classism has

received notably less attention within the social-justice, prejudice and discrimination literature as well as within the larger field of counseling psychology (Smith, 2008).

It is necessary to differentiate between the terms of social class and classism. The term social class has been defined by Liu (2012) as "an economic group within which an individual belongs" (p. 8). Similarly, a prominent definition of classism has been suggested as an experience of prejudice and discrimination that results from someone's membership within a particular social class group (e.g., middle class, upper class; Liu et al., 2004). Similarly, Lott (2002) defined classism as resulting from "unequal class privilege and power" (p. 101). This definition may overlook the multiple types of classism that can occur, such as upward and lateral classism, and only depicts what is known as downward classism (Liu et al., 2004). To this end, the inconsistencies in definitions not only prompt researchers to draw on their own definitions of classism but further perpetuate the confusion among researchers within the field of psychology (Liu, 2012). As such, for the purpose of this study, classism is defined as "experiences with discrimination as a result of social class background" (Thompson & Subich, 2013, p. 143).

Everyday Prejudice and Discrimination Literature and Framework

The foundation for the experiences of classism among college students is supported theoretically by the everyday prejudice and discrimination literature. The everyday prejudice and discrimination literature posits that the frequent and common experiences of prejudice and discrimination occur in everyday settings and are experienced in a plethora of ways throughout an individual's life (Swim et al., 1998). Historically, this framework has been used to describe and explain the frequent occurrences of racism that are encountered by Black Americans (Feagin & Sikes, 1994). However, this framework has been extended to understand the experience of classism as an instance of discrimination and prejudice among college students (Ritz & Hyers,

2005; Smith, 2005; Thompson, 2013). The framework asserts that the frequent experiences of

prejudice, such as classism, result in the avoidance of situations in which the individual expects

that they might experience further discrimination (Swim et al., 1998). Further, as a result of the

frequent discrimination, individuals are continuously aware of their surroundings and actively

anticipate future discrimination (Swim et al., 1998). Still, the occurrence of consistent

experiences of discrimination lead to feelings of shame (Watts-Jones, 2002). As such, feelings of

shame related to the experience of discrimination further increase the avoidance of specific

situations in which discrimination may be present, such as within counseling services, thus

leading to more negative attitudes toward help-seeking (Carter & Forsyth, 2010). Theoretically, it

is assumed that shame as a result of the experiences of classism are associated with more

negative attitudes toward help-seeking for mental health issues. However, the framework

suggests that individuals who utilize internally focused psychological responses, such as

cognitive coping strategies, may be better able to reframe the negative experiences of

discrimination (e.g., classism; Swim et al., 1998). Therefore, if internal psychological responses

act as a buffer for the experience of discrimination, then it is also likely that self-compassion

would be beneficial in mitigating the experiences with classism (Swim et al., 1998). Taken

together, the everyday prejudice and discrimination literature serves as a framework and

rationale exemplifying how experiences of classism on college campuses can impact attitudes

about seeking mental health services and feelings of shame, while also considering the potential

mitigating factor of self-compassion.

Experiences of Classism and Help-Seeking Attitudes

The experience of classism by college students is particularly salient due to the diversity

and social aspects prevalent within university settings (Thompson, 2013). For instance, college is

a time of identity exploration and development, exposure to new groups of people, and crucial

decision-making regarding a student's future life decisions (Aries & Seider, 2005; Ostrove &

Cole, 2003). However, undergraduate students from low-income backgrounds experience a

decrease in sense of belonging (Chatman, 2008). Further, Saldaina (1994) found that students

from a lower socioeconomic background report higher levels of stress regarding their role as a

college student. Although these studies rely on socioeconomic status as a variable, they serve

illustrate the crucial role of social class in students' experiences within college. As such,

experiences of discrimination resulting from one's social class during an important time in

identity development have the potential to impact not only the student's current experiences on

campus, but also their future decisions as well, such as the occupation they choose and the

friendships and relationships they pursue.

Attitudes about seeking mental health services, or mental-health help-seeking attitudes,

refer to a person's evaluation, favorable or unfavorable, of the action of seeking services and

assistance from a mental health professional (Hammer et al., 2018). In addition, attitudes about

help-seeking have been found to be the most significant predictor of future help-seeking

intention (Hammer et al., 2018), and an individual's attitudes about seeking psychological help is

the most salient predictor of a person's future behaviors of seeking help from a mental health

professional (Cramer, 1999; Hammer et al., 2018; Li et al., 2014). Research reports that college

students do not seek psychological help for a variety of reasons, but help-seeking attitudes are

consistently at the forefront (e.g., Hubbard et al., 2018; Parnes et al., 2020). In addition, Kushner

and Sher (1991) suggested that an influential aspect of negative attitudes about help-seeking is

the fear of being judged negatively by others; still, it has been found that experiencing classism

is a form of psychological distress (Choi & Miller, 2018).

Despite the stress created by classism, Choi and Miller (2018) posited that students avoid seeking helping due to the fear of experiencing additional discrimination. A small body of studies report a negative relationship between experiences of classism among college students and help-seeking attitudes. For instance, Choi and Miller (2018) found that classism is significantly associated with attitudes toward seeking professional psychological help. Specifically, they found that classism and stigma were negatively related to help-seeking attitudes (Choi & Miller, 2018). Theoretically, the relationship between classism and help-seeking attitudes has also been established such that a person's social class group impacts their attitudes about seeking help (Choi & Miller, 2018; Liu et al., 2004). Specifically, individuals with higher education backgrounds and income levels are more eager to seek services than individuals from lower income and education level backgrounds (Gonzalez et al., 2011; Steele et al., 2007). Additionally, individuals from higher income and education levels regard mental health services as more acceptable than individuals from lower income and education levels (Gonzalez et al., 2011; Steele et al., 2007). Further, it has been suggested that underrepresented students are more hesitant to seek psychological help due to fear of confirmation of negative stereotypes about people from their social class background (Massey & Fischer, 2005). It has also been stated that the historically upper-middle class, White social norms of traditional counseling may also impact one's attitudes about help seeking (Choi & Miller, 2018; Lott, 2012; Smith, 2005). Specifically, other research has postulated that a person's attitudes toward help-seeking may likely be impacted by mistrust of the counseling system and an intention to avoid future situations of possible discrimination (Kushner & Sher, 1991; Partiali et al., 2013). For example, a student may avoid counseling services on campus because they are afraid of experiencing negative judgment or discrimination by the therapist as a result of their social class. Theoretically, it is assumed that

common experiences of classism by college students lead to an avoidance of situations in which there is a possibility of experiencing rejection. As such, it is likely that students experiencing more classism will have more negative attitudes about help-seeking due to fear of judgment by therapists based on their social class and the wish to avoid future instances of discrimination.

Shame as a Mediator

Shame has been studied heavily within the field of psychology as an influential affective state. The most prominent definition of shame posited that shame is an arduous experience because a person's whole self is being judged and evaluated (Lewis, 1971). Specifically, the experience of shame is focused on the evaluation of the self as being "bad" (Lewis, 1971). Further, the view of the self as "bad" results in the individuals seeing themselves as defective and worthless (Hastings et al., 2002). Ausubel (1955) first introduced shame as an increasingly public emotion. Notably, it has been found that the emotion of shame is a product that stems from a perceived shortcoming or wrongdoing that has been exposed to the public (Ausubel, 1955). An additional factor of the emotion of shame is the tendency to hide and to avoid encounters and experiences that perpetuate the shameful feeling (Hastings et al., 2002; Tangney et al., 1996). Also, "feeling diminished, powerless and exposed" (Hastings et al., 2002, p. 68) are part of experiencing shame. Taken together, perceptions of shame would seem to impact individuals' self-perceptions and interpretations of the environment around them (Baldwin et al., 2006; Hastings et al., 2002). Theoretically, this broad impact of shame is supported by the everyday prejudice and discrimination literature such that more frequent experiences of discrimination (e.g., classism) lead to greater/stronger feelings of shame.

The positive relationship between experiences of classism and shame have been empirically documented. Experiences of classism are associated with feelings of deep

embarrassment or shame (Liu, 2012; Liu et al., 2004). Within a community sample, perceived

classism is associated with broader feelings of inferiority, which included shame (Simons et al.,

2017).

The negative relationship between shame and help-seeking attitudes has been sparsely

documented within the literature, as most literature focuses on help-seeking behaviors

specifically. A study conducted by Rüsch et al. (2014) on an adult Swiss population found a

negative correlation between shame and attitudes about help-seeking. Also, it has been

documented that shame proneness was suggestive of negative attitudes about help-seeking within

a postnatal population of women (Dunford & Granger, 2017). Taken together, these results align

with the prejudice and discrimination literature such that experiences of discrimination are

associated with increased feelings of shame and in turn, may be negatively associated with one's

help-seeking attitudes. As such, the current study predicts that shame may mediate the negative

relationship between experiences of classism and help-seeking attitudes.

Self-Compassion as a Moderator

Self-compassion has been well-documented within the literature as a facet of

psychological well-being. Self-compassion involves six primary components (Neff, 2003),

including extending kindness and understanding to the self, the experience of feelings of caring

and kindness toward the self, and taking an attitude of understanding and nonjudgment about

one's inadequacies and failures in recognition that failure is part of the human experience (Neff,

2003). Similarly, the components of self-compassion are echoed in the subscales of self-kindness

versus self-judgment, common humanity versus isolation, and mindfulness versus over-

identification (Neff, 2003; Neff, 2011). The benefits of self-compassion within adults have been

shown to include emotional, behavioral, and physical benefits (Bluth & Neff, 2018; Marsh et al.,

2018; Neff, 2003). Perhaps the most documented benefit is self-compassion's impact on psychological well-being (Neff, 2016). For instance, self-compassion has been shown to specifically mitigate feelings of shame, self-judgment, and isolation (Neff, 2011). As previously mentioned, experiences of classism are associated with increased feelings of shame (Liu, 2002; Liu et al., 2004). Particularly, the experience of classism may induce feelings of unkindness, isolation, and self-judgement (Langhout et al., 2009). Perhaps, when classism is encountered by individuals, they may become disapproving of themselves and have feelings of inadequacy. Therefore, it is expected that individuals with more experiences of classism are increasingly likely to experience increased levels of shame, which in turn, may have a negative association with their attitudes toward help-seeking. However, self-compassion may help alleviate the experience of shame, and it is possible that higher levels of self-compassion may neutralize negative emotions, such as shame (Sedighimornani et al., 2019). As such, the present study predicts that self-compassion will moderate the relationship between experiences of classism and shame. Specifically, the negative association will be stronger for individuals with lower levels of self-compassion than individuals with higher levels of self-compassion.

It is likely that the expected moderation effect of self-compassion may be extended to the mediation effect. Specifically, it is predicted that self-compassion will moderate the mediation effect of shame on the relationship between experiences with classism and help-seeking attitudes. Congruent with the above rationale, it is expected that college students with less self-compassion may isolate more and be more judgmental of themselves when they encounter classism. Further, students with less self-compassion may overidentify with the experience of classism. Therefore, students with less self-compassion will likely experience increased feelings of shame, which may result in more negative attitudes toward help-seeking. It is predicted that the negative mediation

effect will be stronger for college students with lower levels of self-compassion than those with higher levels of self-compassion.

Study Hypotheses

In sum, the current study examines three main hypotheses.

Hypothesis 1: Mediation

H_1: Shame will mediate the negative association between experiences of classism and help-seeking attitudes. That is the negative association expected between experiencing classism and willingness to seek mental health services will be partially or completely attenuated when the effects of shame have been accounted for.

Hypothesis 2: Moderation

H_2: Self-compassion will moderate the association between experiences of classism and shame. Specifically, individuals with lower levels of self-compassion will be more vulnerable to the negative impact of the experiences of classism on shame compared to the individuals with higher levels of self-compassion.

Hypothesis 3: Moderated Mediation

H_3: Self-compassion will moderate the indirect effect of experiences with classism through shame on help-seeking attitudes. Specifically, the negative mediation effect will be stronger for college students with lower self-compassion than those with higher self-compassion.

Method

Power Analysis

To estimate the appropriate sample size needed to produce a significant and meaningful effect, a power analysis was conducted using G*Power 3.1.9.7 software (Faul et al., 2007, 2009). To estimate the number of participants needed, a significance level of .05 and a power of .80

were used for the analysis. Small, medium, and large effects were tested with the power analysis. To produce a small effect size ($f^2 = .02$), 395 participants were needed. To produce a medium effect size ($f^2 = .15$), 55 participants were needed. To produce a large effect size ($f^2 = .35$), 25 participants were needed. Considering social science studies typically focus on small to medium effect sizes (Cohen, 1992), this study attempted to recruit 350-400 participants.

Participants

To be included in the study, participants must have been at least 18 years old and enrolled as a student and taking classes at Radford University. Participants were recruited using Radford University's Student Research Participation (SONA) system. Participants were also recruited by outreach to general psychology courses. Participants who did not meet the age and enrollment criteria were not included in the data analyses. Exclusionary criteria for data analysis also included participants that spent less than 250 seconds on the survey, participants that completed less than 60% of the survey, and participants that had a response variability plus attention check score of three or higher. The response variability plus attention check score was calculated by summing the number scales for which participants had zero variability in their responses and failed the manipulation check. Possible scores ranged from zero to four. Participants who met the exclusionary criteria were excluded from data analysis. The sample size prior to exclusion was 550 participants. Sixty-eight participants were excluded from data analysis. The final sample size after excluding cases was 482.

Procedure

After receiving approval from the Radford University Institutional Review Board, the participants were recruited from the Psychology Department Participant Pool using SONA (Sona Systems Ltd., Tallin, Estonia) and through classroom outreach. To be eligible to participate in

this survey, participants must have been enrolled in at least one psychology course as an undergraduate student at Radford University. Participants must also have been at least 18 years old. Participants were recruited via in-person classroom announcements, and flyers were utilized for classes that did not use SONA (see Appendix A). The classroom announcements were conducted using separate scripts for classes that did and did not utilize the SONA system (see Appendix B). Course instructors also e-mailed the scripts utilized to their classes. An optional raffle was available for students where who were not eligible to receive SONA credit. The raffle was a chance to receive one of five $20 Amazon gift certificates. This incentive was funded by the researcher's receival of the Eleanor E. Kemp Memorial Research Fund Award, provided by the Radford University Center for Gender Studies. To enter the raffle after completion of the study, participants were redirected to a separate survey link at the end of the survey, where they provided their name and email address for contact if selected for the gift certificate . Participants were informed that the separate Qualtrics link was not associated or linked to the data they previously submitted. Students recruited through psychology courses were informed that they could receive one SONA credit for the completion of the survey. Students were able to receive course credit, extra credit, or both upon completing the survey. This was dependent on the course instructor's preference. Participants recruited through undergraduate psychology courses signed up for the study through the SONA system and were directed to click on a link to the survey, which was administered via Qualtrics (Qualtrics Inc., Provo, UT). Participants recruited via classroom outreach utilized a QR code linked to the Qualtrics survey. Once the participants were directed to the survey, they read one of two informed consent forms before agreeing to participate (see Appendix C), as there were separate informed consent forms for students recruited via SONA and the QR code (see Appendix C). After participants read the informed

consent and agreed to participate, they were asked to indicate their consent by clicking an arrow button to continue the survey. Participants who did not wish to complete the survey were asked to exit the survey. Participants who chose to respond to the survey were asked to answer a questionnaire that consisted of demographic information, the Experiences with Classism Scale (EWCS), State Shame Scale (SSS), Mental Help Seeking Attitudes Scale (MHSAS), and Self-Compassion Scale (SCS). The survey included an attention check item to insure integrity of the data. Upon completion of the survey, participants were redirected to one of two debriefing forms (see Appendix D) as there were separate debriefing forms for students recruited via SONA and the QR code. The debriefing form included information regarding mental health and crisis resources that could be accessed, should participants encounter negative impacts from the survey. The average survey completion time was approximately ten minutes.

Instruments

Demographic Questionnaire

Participants were asked to complete a demographic questionnaire at the beginning of the survey (see Appendix E). Demographic questions included age, gender, year in school, first-generation student, sexual orientation, and social class. Participants were also asked to indicate their average combined household income while growing up, the importance of cost of attendance (tuition and living expenses) when making the decision to attend Radford University, and the importance of amount of financial aid (need and merit aid) offered when making the decision to attend Radford University.

Experiences with Classism

The Experiences with Classism Scale (EWCS; Thompson & Subich, 2013) is a 25-item scale that measures participants' experiences with classism in the past year by asking about

prejudicial or discriminatory experiences that occurred from being a member of a specific social

class (Thompson & Subich, 2013; see Appendix F). Participants rated each item using 6-point

scale frequency of occurrence, ranging from 1 ("never happened to you") to 6 ("happened

almost all of the time"). Sample items for EWCS-systemic included "how many times have you

been treated unfairly in the past year by teachers and professors because of your social class" and

"how many times have you been treated unfairly in the past year by people that you thought were

your friends because of your social class." Sample items for EWCS-personal included "how

often do you feel like you have been treated differently in the past year on the basis of your

physical appearance [clothing, type of bag/purse you carried, and shoes]"and "how often have

you felt frustrated with all of the steps that you had to take with the financial aid office or banks

in order to have access to money for school." Scores were formed by averaging items such that

higher scores were indicative of greater experiences of classism. The construct validity of the

EWCS was supported by a significant positive association with stigma for receiving

psychological help and perceptions of stigmatization by others for seeking help (Choi & Miller,

2018) and a significant negative association with the attitudes about seeking professional

psychological help among college students (Choi & Miller, 2018).

Shame

Participants' shame was measured using The State Shame and Guilt Scale (SSGS;

Marschall et al., 1994). The State Shame subscale (SSS) was a 5-item self-rating scale that

assesses participants' current feelings of shame (see Appendix G). Participants rated each item

using a 5-point rating scale ranging from 1 ("not feeling this way at all) to 5 ("feeling this way

very strongly"). Example items included "I want to sink into the floor and disappear" and "I feel

like I am a bad person" (Marschall et al., 1994). Total scores were formed by averaging across

items, such that higher scores were indicative of greater feelings of shame. The construct validity

of the shame subscale of the SSGS was supported by a significant positive association with the

need to belong and a significant negative association with adult attachment security among

college students (Chen et al., 2015).

Self-Compassion

The Self-Compassion Scale (SCS; Neff, 2003) is a well-established measure that assessed

how an individual acts toward themselves during difficult times. The SCS consists of 26 items

(see Appendix H). Participants rated each item using a 5-point rating scale of frequency, ranging

from 1 ("almost never") to 5 ("almost always"). Example items included "when I see aspects of

myself that I don't like, I get down on myself" and "when I fail at something important to me I

try to keep things in perspective" (Neff, 2003). Higher scores were indicative of greater self-

compassion. The construct validity of the SCS was supported by significant positive associations

with adaptation to college (Scott & Donovan, 2021) and resilience (Shebuski et al., 2020). A

total score was formed by averaging across items such that a higher score indicated greater self-

compassion. The construct validity was also supported by significant negative associations with

perceived stress and depression among college students (Ko et al., 2018). The coefficient alpha

was .91 among college students (Mehr & Adams, 2016).

Help-Seeking Attitudes

The Mental Help Seeking Attitudes Scale (MHSAS; Hammer et al., 2018) assessed

participants' attitudes toward seeking help from a mental health professional. The MHSAS

(Hammer et al., 2018) is a semantic differential scale comprised of nine semantic pairs (see

Appendix I). Items "Important/Unimportant," "Good/Bad," "Healing/Hurting,"

"Satisfying/Unsatisfying," and "Desirable/Undesirable" were reverse scored before totaling the

item scores and dividing by the total number of items answered . Responses were averaged

across items (scores ranged between 1 and 7) after reverse-scoring items to ensure that higher

scores indicated a more favorable attitude toward seeking help. The construct validity of the

MHSAS was supported by significant positive associations with mental help seeking intentions

and working alliance (Seidman et al., 2022) as well as significant negative associations with

social stigma for receiving psychological help and self-stigma of seeking help among college

students (Seidman et al., 2022). The coefficient alpha ranged from 0.88 to 0.89 among college

students (Seidman et al.,2022).

Results

Data Screening

Prior to data analysis, three data screening rules were implemented to identify

problematic responses within the data set. The three exclusion criteria were utilized to pinpoint

the issues most likely to skew the data. Multiple participants met multiple exclusionary criteria.

The first rule excluded any cases that completed less than 60% of the survey. Zero cases were

excluded as a result of this rule. The second rule excluded cases that were completed in less than

250 seconds (about four minutes), as the survey was approximated to take 15-25 minutes. This

rule excluded 50 cases. The final rule was based on the number of measures that participants had

no variability in their responses and on the number attention check items they failed. Variability

in responses (*SD*) was assessed for the four main variables that utilized reversed scored items

(Experiences with Classism Scale, State Shame Scale, Mental Help-Seeking Attitudes Scale, and

Self-Compassion Scale), such that a participant who answered every question within a given

measure in exactly the same way would have a score of 0. An additional variable was created

from the sum of the four response variability score variables and the two attention check scores,

where a higher score indicated a greater number of measures on which participants had no

response variability or failed the attention check. Possible scores range between 0 and 5. Any

case with a score of three or higher on this variable was excluded, and 34 cases were excluded as

a result of this rule. In total, 68 cases were excluded from the data after applying exclusion

criteria. The final sample consisted of 482 participants.

Descriptive Analyses

For descriptive purposes, frequency analyses were conducted on the main demographic

variables. Participant ages ranged from 17 to 40-years-old, with an average age of approximately

19-years-old. The majority of the sample was female (74.9%). Seventeen participants identified

as non-binary or transgender. The sample was comprised of 356 freshmen students (73.9%), and

183 students (38%) reported being a first-generation college student. A majority of the sample

reported being Caucasian/White. Heterosexual was the highest endorsed sexual orientation. Of

the participants who chose "other" as their identity, the majority (19) reported being pansexual,

13 participants wrote in "straight," 3 reported being "queer," 1 reported being "questioning," 1

reported being "omnisexual," and 1 reported being "unlabeled." Regarding social class, the

majority of participants (43.9%) identified with middle class, and a majority (32.9%) indicated a

combined household income of $50,000-$100,000 while growing up. When asked about the

importance of cost of attendance (tuition and living expenses) when choosing Radford

University, the majority of participants indicated that this was "Very Important" (37.2%) or

"Fairly Important" (28.1%). Participants were also asked about the importance of financial aid

(need and merit aid) offered when making the decision to attend Radford University. The

majority indicated financial aid as "Very Important" or "Fairly Important" (25.4%).

Also, for descriptive purposes, Table 1.1 reports the means and standard deviations for the main variables as well as correlations between the main variables. Cronbach's alphas are depicted on the diagonal, and each measure had moderate to high reliability (cut-off .70 or higher). Participants' self-reported experience of shame and their experiences with classism were significantly and positively correlated, indicating that students with higher levels of shame tend to have more frequent experiences of classism on campus. Participants' reports of shame were significantly and negatively correlated with mental-health help-seeking attitudes. This shows that students with more feelings of shame tend to have less positive attitudes toward seeking mental health treatment, though the effect size is relatively small. Self-compassion was significantly and negatively correlated with experiences with classism, which indicates that students with higher levels of self-compassion tend to report fewer experiences with classism on campus, though the effect size was relatively small. Self-compassion and attitudes toward seeking mental health were significantly and positively correlated. This demonstrates that students with higher levels of self-compassion tend to report more favorable attitudes toward seeking mental health care. The effect size was quite small. Self-compassion was significantly and negatively correlated with participants' self-report of shame. The more self-compassion someone reports, the lower their report of shame. This effect was large. The relationships between mental help-seeking attitudes and self-compassion and between mental help-seeking attitudes and experiences with classism were not significant.

Table 1.1

Zero Order Correlations and Descriptive Data for Experiences with Classism, Mental Help-Seeking Attitudes, Shame, and Self-Compassion

	1	2	3	4
1. EWCS	**.93**			
2. MHSAS	-.07	**.92**		
3. SSS	.31***	-.17***	**.88**	
4. SCS	-.15***	.09*	-.55***	**.90**
Mean	1.65	5.50	1.85	2.79
SD	.64	1.23	.95	.65
Range	3.72	6.00	4.00	3.80
n	473	465	474	468

Note. * $= p \leq .05$, ** $= p \leq .01$, *** $= p < .001$. Degrees of freedom range between 472 and 463. Cronbach's Alpha appears on the diagonal.
EWCS = Experiences with Classism Scale
MHSAS = Mental Help-Seeking Attitudes Scale
SSS = State Shame Scale
SCS = Self-Compassion Scale

Demographic Analyses

Upon completion of preliminary analyses, a mixture of Independent Samples *t*-Tests, One-Way ANOVAs, and correlations between the demographic variables and a main variable (mental help-seeking attitudes) were conducted to assist with identification of potential covariates. The demographic variables analyzed were age, gender, year in school, ethnicity, sexual orientation, and first-generation student status. Specifically, a Person's correlation was conducted to analyze whether age was associated with mental-help seeking attitudes. Age is not a significant predictor of one's mental-health help-seeking attitudes, $r(441) = .07$, $p = .138$. An Independent Samples *t*-Test was conducted to compare mental help-seeking attitudes for first-generation students and continuing-generation students. There was not a significant difference in

mental-health help-seeking attitudes among first-generation student ($M = 5.59$, $SD = 1.18$) and continuing-generation students ($M = 5.43$, $SD = 1.26$) ; $t(462) = 1.33$, $p = .183$, $d = .13$ This indicates that first-generation student status is not a covariate.

Five One-Way ANOVAs were conducted to examine whether mental help-seeking attitudes varied as a function of gender, year in school, ethnicity, sexual orientation, and social class. None of the variables of interest, excluding sexual orientation, were significantly associated with mental help-seeking attitudes. There were no significant differences in help-seeking attitudes between the five gender groups (Male, Female, Transgender, Non-Binary, and Other), $F(4, 460) = 1.64$, $p = .163$, $\eta^2 = .01$. Similarly, there were no significant differences between the year in school group means, $F(4, 460) = 1.44$, $p = .221$, $\eta^2 = .01$. A third one-way ANOVA revealed that there were no significant differences between the ethnicity group means, $F(7, 457) = 1.98$, $p = .056$, $\eta^2 = .03$. Additionally, there were no significant differences between the social class group means, $F(5, 458) = 0.19$, $p = .968$, $\eta^2 = .002$.

Sexual orientation was the lone demographic variable that yielded a significant result from the one-way ANOVA analyses. Sexual orientation was significantly associated with mental help-seeking attitudes, $F(5, 454) = 2.75$, $p = .019$, $\eta^2 = .03$. Specifically, there was a significant difference between heterosexual ($M = 5.40$, $SD = 1.27$) and bisexual sexual orientation ($M = 5.71$, $SD = 1.07$) groups, $t(454) = 1.97$, $p = .049$, $d = -.26$. The effect size for this analysis, was small.

Main Analyses

Mediation Analysis

A mediation analysis was conducted using a series of multiple regression analyses (see Table 1.2) and confirmed using model 4 of the PROCESS macro (Hayes, 2013) to test whether

shame would mediate the negative association between experiences with classism and mental

help-seeking attitudes (hypothesis 1). The total effect, or C path, tested the total influence of

experiences with classism on mental help-seeking attitudes. Specifically, the total effect is the

combined influence of the direct effect between experiences with classism and mental help-

seeking attitudes and the indirect effect flowing through the mediator (shame). The C path was

marginally significant and very small. The A path, which tests the impact of experiences with

classism on shame, was significant, showing a medium sized positive association between

experiences with classism and shame. The B path tests the influence of shame on mental help-

seeking attitudes, when the influence of experiences with classism is accounted for and was

significant. The direct effect, also known as the C' path, tested the influence of experiences of

classism on mental help-seeking attitudes in the presence of shame (mediator) and was not

significant. The significance of the indirect path was tested using a bootstrapping procedure

(Model 4 in PROCES), where a total of 5,000 bootstraps were used to estimate error terms and

construct 95% Confidence Intervals (CI). If the 95% CI did not include zero, the effect was

deemed to be statistically significant at the .05 level. The indirect effect (A*B path) of

experiences with classism on mental help seeking attitudes through shame was significant [b = -

.09, SE = .04, β = -.05, 95% CI (-.1789, -.0173)]. It should be noted that although the indirect

effect is significant, the size of the effect is very small and of very limited theoretical value.

Table 1.2

Test of the Mediation of Shame on the Experiences with Classism and Mental Help Seeking

Attitudes

	R^2	b	*SE*	β	Zero Order Correlation	Semipartial Correlation
Step 1 – c path	-					
EWCS > MHSAS		-.15	.09	-.08†	-	
Step 2 – a path	-					
EWCS > Shame		.47	.07	.31***	-	
Step 3 – c' and b paths	.03**					
EWCS > MHSAS		-.06	.09	-.03	-.08	-.03
Shame > MHSAS		-.19	.06	-.15**	-.16	-.15

Note. $^{\dagger} p < .10,$ $^{*} p \le .05,$ $^{**} = p \le .01,$ $^{***} = p < .001.$
EWCS = Experiences with Classism Scale
MHSAS = Mental Help-Seeking Attitudes Scale
Shame = State Shame Scale

Moderation Analysis

A moderation analysis was conducted utilizing the Aiken and West (1991) model of multiple regression to test whether self-compassion would moderate the negative association between experiences of classism and shame (hypothesis 2). Specifically, experiences with classism was positively associated with shame. Self-compassion was negatively associated with shame, indicating self-compassion may serve as a protective factor. Together, experiences of classism and self-compassion accounted for 35% of the variance in participants' reported shame (see Table 1.3). However, the interaction between experiences with classism and shame was not significant. There was no support for the hypothesis that self-compassion moderates the relationship between experiences with classism and shame.

Table 1.3

Test of Self Compassion as a Moderator of the Relationship between Experiences with Classism and Shame.

	$R^2\Delta$	β	Zero Order Correlation	Semipartial Correlation
Model 1				
Step 1	.35***			
df (1, 462)				
EWCS		.24***	.31	.23
SCS		-.51***	-.55	-.51
Step 2	.002			
Df (1, 461)				
EWCS		.22***	.31	.21
SCS		.51***	-.55	-.51
Interaction		-.05	-.09	-.04

Note. † $p < .10$, * $p \le .05$, ** = $p \le .01$, *** = $p < .001$.
EWCS = Experiences With Classism Scale
SCS = Self-Compassion Scale

Moderated Mediation Analysis

A moderated mediation analysis was not completed for multiple reasons. First, there was no meaningful main effect of experiences with classism on mental-health help-seeking attitudes. Next, the significant indirect effect of experiences of classism on mental help-seeking attitudes, through shame, is too small to be theoretically meaningful. Finally, the interaction between experiences with classism and self-compassion, when predicting shame, is not significant. Therefore, testing the moderated mediation model would not be meaningful.

General Discussion

The present study tested associations between experiences with classism, shame, self-compassion, and attitudes toward seeking mental health services. Specifically, it was expected

that shame would mediate the negative association between classism experiences and help-seeking attitudes and that self-compassion would moderate the positive association between classism experience and shame. These hypotheses were only partially supported.

Shame as a Mediator

The first hypothesis predicted that shame would explain the established negative relationship between experiences with classism and mental help-seeking attitudes. This hypothesis was not supported y. Specifically, the association between experiences with classism and help-seeking attitudes was not significant and the effect was very small. Although the indirect effect was significant, the magnitude of the effect was quite small and of limited theoretical importance. This unexpected result may be interpreted in many ways. First, it is possible that the current results are indicative of the convenience sample utilized and the results are unique to this study. There is sparse literature documenting the experiences of classism on college campuses. However, previous studies utilizing convenience sampling produced more diverse samples regarding age and education level than the current study (Langhout et al., 2007; Ostrove & Long, 2007; Thompson & Subich, 2013). Specifically, Ostrove and Long (2007) had a sample that included a balance of both upperclassmen (e.g., juniors and seniors) and lowerclassmen (e.g., freshmen and sophomores), whereas the current study had a sample of predominantly freshman (73.9%). Langhout and colleagues (2007) had similar findings, noting an even distribution across years in college (e.g., first year through fourth year) as well as an average age of 20 years old; the current study produced an average age of 18.88 years old. Further, Thompson and Subich (2013) reported an average age of 22 years old within their sample. It is possible that a sample of college students representing more than predominantly freshman students around the age of 19 years old may show the predicted relationship between

experiences with classism and attitudes toward help-seeking. It is also possible that students with more experience in college, and in the world in general, may have more life experiences both on and off campus to assist in the recognition of classism and to shape their attitudes towards help-seeking. That is, it is possible that the first-year students in the present study did not have enough familiarity with experiences with classism to reflect the expected association.

In addition, it is possible that the use of the Mental Help-Seeking Attitudes Scale (MHSAS) did not accurately capture the intended measure of help-seeking attitudes, as it was shown to be weakly associated with the other study measures. The use of a different measure to evaluate mental help-seeking attitudes may allow for the expected results. Further, social desirability may have played a role in participants' responses. It is possible that participants were engaging in impression management and did not want to present a negative view of themselves to the researcher. Also, it is possible that stigma surrounding mental health may have distorted participants' willingness to report their attitudes toward seeking mental health services. For example, Mojtabai and colleagues (2002) found that participants who reported embarrassment surrounding mental health treatment were less inclined to identify a need for mental health services. Additionally, Radford University is situated in a rural area and research has shown that students in rural areas report that stigma is a significant barrier to seeking mental health services (Calloway et al., 2012). Although the current survey inquired about attitudes toward seeking mental health services rather than the action of seeking services, it is reasonable to conclude that one's stigma surrounding mental health may have influenced their self-reported attitudes toward mental help-seeking. Finally, qualitative research has posited stoicism as a prominent attitudinal barrier to help-seeking within rural communities (Cheesmond et al., 2019). Specifically, research noted a tendency for rural individuals to cope with mental stressors (e.g., feelings of shame)

silently (Cheesmond et al., 2019). As such, it is plausible that stoicism and reluctance to report distress in any capacity also impacted participants' reports of shame within the study, which may have further obscured associations between experiences with classism and seeking help for mental-health issues.

Self-Compassion as a Moderator

The second hypothesis proposed that self-compassion would moderate the negative relationship between experiences of classism and shame. In other words, it was predicted that individuals with low self-compassion would be more vulnerable to the impact of experiences of classism and shame than those with high self-compassion. Similarly, it was predicted that the relationship between experiences with classism and shame would be weaker among individuals exhibiting high self-compassion, indicating self-compassion serves as a buffer between classism and shame. This hypothesis was not supported. Although, both experiences with classism and self-compassion uniquely and significantly predicted shame (together accounting for 35% of the variance in shame), the interaction between shame and self-compassion was not significant. This unanticipated result may be interpreted in various ways. As mentioned previously, these results may be specific to the obtained sample of the study.

The non-significant results of this hypothesis may be explained partly by the demographic make-up of the sample. A meta-analysis by Yarnell and colleagues (2015) found that men had slightly higher levels of self-compassion than women. It is possible that, given the predominantly female sample (74.9%), the self-reported levels of self-compassion reported by participants' that identified as female may have impacted the moderation analysis. Other demographic variables such as race, ethnicity, and sexual orientation have been examined within previous studies to determine if levels of self-compassion differ among various groups; however,

no differences have been found to be significant (Lockard et al., 2014). Alternatively, it is

possible that the overall moderation hypothesis of the present study was simply incorrect.

Although self-compassion has been documented to have beneficial physiological, psychological,

and neurobiological effects (Stutts, 2022) and has been shown to moderate perceived stress and

depression within a college student sample (Stutts et al., 2018), self-compassion may not

meaningfully impact the relationship between experiences with classism and shame.

Self-Compassion as a Moderator for the Mediation Effect

The third hypothesis proposed that self-compassion would moderate the mediation effect

of the experiences with classism, through shame, to mental help-seeking attitudes. Put simply, it

was predicted that the effect of shame on the relationship between experiences with classism and

mental help-seeking attitudes would differ as a result of an individual's degree of self-

compassion (e.g, high or low). This hypothesis was not supported by the results of this study, as

evidenced by the absence of meaningful mediation of the association between experiencing

classism and attitudes about seeking mental health services and the absence of an interaction

between experiences with classism and self-compassion when predicting shame. The analyses

for this hypothesis were not conducted.

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Clinical Implications

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As mentioned in chapter two, sparse quantitative research has been conducted examining

experiences with classism among college students in a university setting. The current study seeks

to answer the call to further integrate social class and socioeconomic status into future

psychological research (Saegert et al., 2007). The current study and its unanticipated findings

emphasize the imperative need for other researchers within the psychology community to

explore and investigate the nuances of classism and its presence and impact within academic settings and culture as a whole.

Despite the non-significant results of the main hypotheses of the present study, clinicians providing services to college students should be attuned to some of the key findings. First, the significant and positive correlation between students' self-reported experiences with classism and feelings of shame are suggestive that students experiencing higher levels of shame have more frequent experiences of classism on campus. As such, clinicians providing services to college students should be aware of the influence that a student's feelings of shame, particularly surrounding experiences of classism, may have on their overall mental health and well-being. Literature has documented the harmful effects of shame and its capability to heighten feelings of worthlessness, inferiority, and powerlessness (Hastings et al., 2002; Simons et al., 2017; Tangney & Dearing, 2002). Still, literature has found that students with diverse identities (e.g., race and gender) are more prone to shame after experiences of discrimination on campus, which has been shown to double rates of anxiety and depression among college students of African, Latinx, and Asian descent (Stone-Sabali et al., 2023). Further, research has posited that long-term effects of shame, as well as the inability to regulate feelings of shame, is a risk factor among various populations for the onset and reoccurrence of mental health disorders such as anxiety (Fergus et al., 2010), depression (Kim et al., 2011), post-traumatic stress disorder (Cunningham et al., 2019), eating disorders (Duarte & Pinto-Gouveia, 2017), and substance use (Potter-Efron & Carruth, 2014), to name a few. As such, clinicians providing services to students should regularly assess and evaluate feelings of shame as well as experiences of discrimination in any form on campus. In addition, it may be beneficial for clinicians to begin treatment by providing psychoeducation on the negative impacts of shame. However, it should be noted that literature

has found reluctance for individuals to report their feelings of shame, especially in rural areas (Robinson et al., 2012). Therefore, it is essential that clinicians build a foundation of rapport and unconditional positive regard with their clients, as distrust for providers may hinder clients from being forthcoming and continually engaging in care (Chipp et al., 2011).

An additional notable finding from the present study was a significant and negative correlation between students' reports of shame and mental-health help-seeking attitudes. This suggests that students with stronger feelings of shame have less positive attitudes toward seeking help from a mental health provider, though the effect was small. This finding bolsters the scarce empirical literature positing a negative relationship between shame and attitudes toward help-seeking among a postnatal population of women (Dunford & Granger, 2017). As a person's attitudes toward seeking mental health services is the greatest predictor of future help-seeking behaviors (Cramer, 1999; Hammer et al., 2018; Li et al., 2014), and feelings of shame and self-stigma are known barriers to individuals seeking help from a mental health professional (Corrigan, 2004; Rüsch et al., 2014), clinicians in university settings should aim to increase engagement and knowledge of counseling services within the study body. Facilitation of outreach events and open houses along with expanding the presence of counseling centers on university campuses may be particularly beneficial in decreasing students' assumptions and preconceived notions about seeking help from a mental health-provider. Still, as is supported by literature and the everyday prejudice and discrimination framework (Swim et al., 1998), individuals avoid situations in which they fear they may be negatively judged by others (Kushner & Sher, 1991), and social norms of traditional counseling has also been shown to impact an individual's attitudes toward mental help-seeking (Choi & Miller, 2018; Lott, 2012; Smith, 2005). Taken together, this study's findings, along with previous literature, underscores the

necessity for clinicians and counseling centers as a whole to implement practices and to develop programs targeted at decreasing the mystique behind counseling services as a way to encourage and support student engagement in mental health services.

The present study explored the relationships between self-compassion and the variables of shame, experiences with classism, and mental-health help-seeking attitudes. The data showed that self-compassion acts as a buffer against experiences with classism and feelings of shame and also plays a role in producing more positive attitudes toward help-seeking. This is especially significant for clinicians such that self-compassion interventions may be useful in treating and dismantling patterns of thinking driven by shame and experiences with classism. Further, research has shown that other treatment modalities, particularly mindfulness-based and third wave interventions (MBTW), may be valuable in instilling clients with empowerment and increasing their overall quality of life (Stynes et al., 2022). Particularly, clinicians should consider the use of Acceptance and Commitment Therapy (ACT) and compassion-based interventions aimed at increasing a client's psychological flexibility to assist in decreasing a client's distress and increasing their usage of self-compassion when faced with adversity (Marta-Simões & Ferreira, 2019; Stynes et al., 2022).

Limitations

Consistent with many psychological research studies, the present study has limitations that should be considered when interpreting the results of the study. One potential limitation of the study is the use of convenience sampling. Convenience sampling is often used in research and entails the use of student volunteers as study participants (Bornstein et al., 2013). Known potential disadvantages of convenience sampling include decreased generalizability (external validity) and small numbers of underrepresented demographic groups (Bornstein et al., 2013).

Similarly, the underrepresentation of demographic groups produces little variation within the sample and may be responsible for why research shows relationships in some settings but not in others (Bornstein et al., 2013). In the current study, the sample was overwhelmingly female (74.9%), Caucasian (66.2%), heterosexual (71.5%), freshman (73.9%), and middle class (43.9%). It is likely that the experiences of participants in the present study are not indicative of the experiences of all students on campus. Specifically, research has shown that individuals identifying within the middle class have less experiences with classism on campus and are more likely to inflict classism upon other students identifying in the lower or lower middle class (Langhout et al., 2007). As such, the demographically narrow sample in the current study may have obscured associations between the main variables that may be observed within more diverse samples.

A second probable limitation in the current study is social desirability. Social desirability is a type of bias that refers to a response pattern in which a participant aims to portray themselves in a way that would be viewed more favorably by others (Krumpal, 2013). Prior to engaging in the study, participants were informed of the intention and purpose of the survey. As such, it is possible that participants responded in a way that was congruent with the researcher's stated goals. In addition, the survey items asked participants sensitive questions surrounding their household income, social class, experiences of classism, attitudes toward seeking mental health treatment, and feelings of shame towards oneself. As a result of the impact of social desirability, it is possible that participants were less likely to answer truthfully to items indicating experiences of classism and feelings of shame.

A third probable limitation is the correlational nature of the data collected in this study. Correlational studies attempt to determine whether differences in a population are dependent on

exposure to an event or variable of interest within a specific setting. Correlational studies are unique in that the researcher does not use comparison groups or random assignment for intervention and rather defines a set of variables pertaining to an outcome of interest and tests for the relationships hypothesized within the identified variables. Perhaps one of the most noted advantages of the correlational design within social sciences research is the ability to determine the nature and degree of a relationship between two specified variables (Asamoah, 2014), which was the aim of the current study. However, a distinct and notable drawback of a correlational design is the inability to determine causality (Asamoah, 2014). In other words, the correlational design does not permit for changes in one variable to be solely attributed to changes in a second variable (Asamoah, 2014). The current study produced meaningful associations; however, causal inferences cannot be drawn due to the correlational methodology employed.

The limitations identified for the current study should be accounted for when generalizing the findings to a larger population. Still, regardless of the limitations discussed in this chapter, the present study provides valuable data that contributes to understanding of the relationships between experiences with classism, mental help-seeking attitudes, shame, and self-compassion within academic settings.

Recommendations for Future Research

The current study provides various avenues for future research. First, future studies interested in examining the relationship between experiences with classism and mental help-seeking attitudes should aim to recruit a more diverse sample of college students, specifically regarding year in school, age, gender, and race. A wider sample of college students from various universities across the United States may elicit a sample that displays the hypothesized results. A more diverse sample would also provide increased generalizability of the results.

Utilization of diversified recruitment strategies may be beneficial to future researchers in gathering samples more indicative of the larger university population. Future researchers may benefit from employing a different methodological approach, such as mixed methods, to gather data. A mixed research method approach would allow future researchers to explore participants' first-hand experiences of classism on campus and would allow for a more detailed picture of students' experiences on campus. Further, utilization of a mixed method approach may allow for the flexibility to explore unanticipated responses or themes of the variables that may be relevant to interpreting and understanding of the quantitative data (Wasti et al., 2022).

Future research should also consider use of other scales to measure the variables shame and mental help-seeking attitudes. Although the measures selected for the current study demonstrated adequate validity throughout empirical literature, it is likely that the measures did not accurately capture the intended variables of interest. For example, the Mental Help-Seeking Attitudes Scale (MHSAS) utilized to measure students' attitudes toward seeking mental health treatment was only weakly associated with the other measures in the study. It is possible that use of a different measure, or addition of qualitative methodology to assess for participants' attitudes more organically, may be more fruitful and accurate in measuring students' attitudes. Further, although the State Shame Scale (SSS) utilized to measure students' experiences of shame on campus was associated with experiences of classism and self-compassion as expected, it may be helpful to include an additional measure of shame. The State Shame Scale asked participants to rate their feelings of shame in the moment (e.g., when taking the survey), rather than when they were experiencing classism on campus (Marschall et al., 1994). It is possible that additional measures specifically targeting participants' feelings of shame when experiencing classism may provide a more authentic and detailed picture of students' feelings of shame.

CHAPTER TWO: LITERATURE REVIEW

This literature review discusses the experiences of classism in college and university settings and highlights the negative impact of experiences of classism on college students. The everyday prejudice and discrimination literature is used as a conceptual framework for this study to examine the following three main hypotheses. First, this study introduces the role of shame as a possible mediator of the negative association between experiences of classism and attitudes toward help-seeking. Second, this study introduces self-compassion as a moderator of the negative association between experiences of classism and shame. Third, this study examine self-compassion as a moderator of the mediating effect of experiences of classism, through shame, on help-seeking attitudes.

Social Class and Classism

It is important to differentiate between the terms of social class and classism. Social class, as defined by Liu (2012), refers to a group of individuals who share similar economic positions in society. The hierarchy of these economic groups have been widely portrayed through terms such as upper class, middle class, and lower class (Liu, 2012). However, the definition of classism suggested by various researchers is inconsistent. For example, Lott (2002) defined classism as disparities in privilege and power that arise from social class differences. However, Liu and colleagues (2004) point out the limitation of Lott's (2002) definition of classism, which may imply that the discriminatory behaviors are only occurring from the higher social classes to the lower social classes (denoted as downward classism). Liu and colleagues (2004) argued that in addition to downward classism, there are other types of classism. For example, classism literature asserted that classism can also occur from lower social classes to higher social classes, which is known as upward classism (Liu et al., 2004). Additionally, classism can occur within

the same social class, such as middle class to middle class, which is known as lateral classism. As a result, Liu and colleagues (2004) further described classism as an experience of prejudice and discrimination that occurs because of a person's membership within a particular social class group (e.g., middle class, upper class). A primary reason for the many inconsistent definitions of classism is a result of various terms being used interchangeably to describe vastly different constructs (Liu et al., 2004). For example, much of the research surrounding classism has used terms such as social class, socioeconomic status (SES), inequality, and economic background interchangeably to describe the same construct (Liu et al., 2004). As a result, terms such as classism have received less attention from the field of counseling psychology and are notably absent in much of the prejudice and discrimination literature as well as the social justice literature (Smith, 2008). The inconsistent definitions of classism have caused researchers to draw on their own experiences of social class and classism to form their own definitions (Liu, 2011). This not only adds to the conflicting definitions of classism but provides confusion among researchers and the field of psychology as a whole. For the purpose of the present study, classism is defined as experiences with discrimination and prejudice specifically linked to an individuals' social class (Thompson & Subich, 2013).

Everyday Prejudice and Discrimination Literature and Framework

The everyday prejudice and discrimination framework focuses on the frequent occurrence of prejudice and discrimination by discussing its relevance in anticipating, avoiding, and responding to the encounters of prejudice and discrimination in an individual's everyday life (Swim et al., 1998). Historically, Feagin and Sikes (1994) asserted that Black Americans face instances of prejudice and discrimination daily due to their race, and they suggest that the instances of racism often occur in everyday settings and take place in the form of blatant

microaggressions. Swim and colleagues (1998) note that people avoid situations when they feel that they are not adequately prepared to cope with the situation (Swim et al., 1998).

It appears that classism is consistently overlooked within discussions about prejudice and discrimination. However, research shows classism is a form of discrimination and prejudice that operates similarly to racism, but with some unique characteristics (Ritz & Hyers, 2005; Smith, 2005; Thompson, 2013). Further, the everyday experience of classism by college students is prominent and recurrent (Langhout et al., 2007). Still, the experience of classism on college campuses is not isolated and is dependent upon and influenced by everyday interactions with prejudice and discrimination (Swim et al., 1998). In general, encounters with prejudice and discrimination are not infrequent, occur within familiar settings, and can be explicit or implicit interactions (Swim et al., 1998). Examples of daily prejudice and discrimination may include microaggressions—whether intentional or unintentional—by professors, classmates, or those who work at the university (Swim et al., 2003). Due to the frequent experience of prejudice, individuals experiencing prejudice are constantly aware of their environment and are frequently anticipating future discrimination (Swim et al., 1998). Specifically, the constant anticipation of prejudice on college campuses has been shown to influence the opportunities students choose to pursue, the relationships they choose to form, and the services that they choose to utilize. Literature has shown that consistent experiences of prejudice and discrimination, such as racism, lead to feelings of shame (Watts-Jones, 2002). As such, these feelings of shame may further cause the individual to avoid situations in which they experience discrimination (Carter & Forsyth, 2010). Due to the experience of classism on college campuses, students may try to prevent the effects of the stressor (e.g., classism; Swim et al., 1998). Examples of this may include abstaining from joining certain organizations, avoiding campus events, and foregoing

counseling center resources. Specifically, in relation to classism, a student may avoid joining a specific club or organization due to experiencing shame because of their lack of ability to attend events due to needing to keep a part-time job to pay for their education. In addition, research has shown that experiences with racism lead to negative attitudes toward seeking psychological help (Kim et al., 2016). For example, Kim et al., (2016) found that the experience of racism, particularly those stemming from systemic and institutional structures, led to more negative help-seeking attitudes such that a person's experience of racism was generalized through an overall wariness and mistrust of "mainstream" (p. 19) services, such as mainstream psychological services. Similarly, it is possible that experiences with classism also lead to more negative attitudes about seeking psychological help because of an overall mistrust and suspicion of psychological services due to the expectation of experiencing classism within the counseling system. Further, the everyday discrimination literature framework posits that individuals avoid situations of potential rejection due to the stress of the experience of discrimination (Swim et al., 1998). For instance, research has demonstrated that people have more negative attitudes about mental health help-seeking, specifically around topics that they fear may be judged negatively by others (Kushner & Sher, 1991). Conceptually, it would also stand to reason that students who experience classism would also have more negative attitudes about help-seeking because of their own fears of being judged negatively by the therapist due to their social class. For example, a student experiencing academic troubles may be hesitant to see a therapist for fear that having to work a part-time job in order to pay for college may be looked down upon and may be attributed to their academic difficulties. However, the way an individual responds to the experience of discrimination (e.g., classism) has been shown to impact their psychological outcomes (Swim et al., 1998). For instance, Swim et al., (1998) asserted that internally-focused psychological

responses (e.g., shame) to experiences of discrimination, such as cognitive coping strategies, may be impactful in reframing the negative experience of the individual. Therefore, it is reasonable to consider that if internal psychological responses are a potential mitigating factor for the experience of discrimination, then self-compassion, a known cognitive coping strategy, would also be beneficial. Overall, classism is not well-studied within the prejudice and discrimination literature and much of the rationale is built upon what is known about other forms of discrimination, such as racism. To this end, the everyday prejudice and discrimination literature will serve as a theoretical framework for this study and exemplifies how the variables of interest are intertwined through the continued experiences of classism on college campuses.

Experiences of Classism and College Students

The occurrence of classism within the university setting is particularly salient for a multitude of reasons. First, college is a diverse time in a student's life and it is often the first time that many young adults experience the world on their own without the familiarity of home (Thompson, 2013). For instance, many students are moving hours from home, finding themselves far away from their established friendships and the comfort of their support systems, which likely making them vulnerable and fragile to adversities, such as classism. Second, college represents a phase of life transition that is unique and full of new experiences (Thompson, 2013). With these new experiences come exposure to many different groups of people, including individuals from a variety of social classes. Social class is an aspect of social identity that is especially prevalent in college, as it is a time of identity discovery, development, and integration (Aries & Seider, 2005; Ostrove & Cole, 2003). As previously mentioned, social class is an essential component of the experience of classism, as the experience of classism is a result of unjust treatment due to an individual's social class (Liu, 2012). Finally, college is a time in which

one's identity is developing and is often internalized (Thompson, 2013). To support this, research

by Waterman (1985) has posited that considerable advances in one's identity development often

occur during college. Further, college is a time in which individuals make crucial decisions

regarding life domains such as occupations, friendships, romantic relationships, and political

beliefs (Waterman & Archer, 1990). Thus, experiences of discrimination based on one's social

class during a particularly formative time in one's identity development impacts not only a

student's present experience but their future as well.

Further, much of the past empirical research regarding social class in the university

setting has used socioeconomic status, or SES, as an indicator of students' experience of distress

related to their social class (Chatman, 2008; Saldaina 1994; Walpole, 2003). For example,

Chatman (2008) found that undergraduate students who identified as low income or poor had a

decreased sense of belonging on campus in comparison to their peers who were of higher-class

status. Empirically, research has shown that college students of lower SES backgrounds tend to

work more, be less involved in extracurricular activities, and have lower grades than their

classmates of higher socioeconomic status (Langhout et al., 2007). Finally, Saldaina (1994)

found that a student's socioeconomic status was highly correlated with their levels of stress.

Specifically, they found that students from lower socioeconomic backgrounds reported higher

levels of stress related to their role as a college student (Saldaina, 1994). It is important to

recognize that although socioeconomic status is not a variable in the present study, SES is

present in much of the existing classism research. This body of research serves to showcase the

role of social class as a component in students' differing experiences within college. Despite the

sparse empirical research related to social class and classism in educational settings, college

students may experience two primary types of classism: personal classism and systemic classism (Langhout et al., 2009; Thompson & Subich, 2013).

Personal Classism

As previously stated, classism is defined as experiences with discrimination based on an individual's social class status (Thompson & Subich, 2013). However, Thompson and Subich (2013) have also suggested that college students may experience two types of classism: personal classism and systemic classism. Personal classism, or interpersonal classism as it is referenced in some literature, includes a student's individualized experience with discrimination based on their social position (Thompson & Subich, 2013). Further, a hallmark of personal classism is that an individual's ability to acquire resources or opportunities, both societal and financial, that may result in further exclusion, thus perpetuating a cycle of disadvantage (Allan et al., 2016). Examples of personal classism include being treated unfairly by professors, bosses, or other authority figures, being treated unfairly by people in helping jobs (e.g., doctors, nurses, psychiatrists), and being called derogatory names (e.g., poor, welfare recipient, hobo, ghetto, poor white trash; Thompson & Subich, 2013). In summary, personal experiences of classism pertain to a student's unique experience of discrimination based on one's place, or assumed place, in society.

Systemic Classism

The second type of classism, systemic classism, references a student's experiences with classism, including prejudicial or discriminatory experiences as a result of the way the larger system, or university, is structured (Thompson & Subich, 2013). Specifically, systemic experiences of classism consist of being treated differently due to physical appearance (e.g., clothing, shoes, type of bag/purse carried); being treated differently by service persons (e.g.,

waiters/waitresses, cashiers) when paying the bill because of the items purchased; experiencing

flaunting or "show off" behaviors by friends, roommates, and/or classmates ability to buy nice

things go on vacations, and drive nice cars; and having difficulty getting everything needed for

school due to delayed financial aid (e.g., unable to buy used books at the bookstore because by

the time financial aid check came all of the used copies were sold out; Thompson & Subich,

2013). .

Impact of the Experiences with Classism on College Students

Academic and Psychosocial Impacts

Discrimination based on social class, also known as classism, is pervasive among college

students and has sizable academic and psychosocial impacts on students. To begin, classism has

historically been a part of educational institutions such that a person's social class has defined

who fits into what university (Ostrove & Long, 2007). Additionally, it has been suggested that

the environment of higher education actually perpetuates the class hierarchy, rather than leveling

it (Cattaneo et al., 2019). Specifically, admission to specific colleges, such as private colleges or

liberal arts universities may be partially based on social class status (Domhoff, 1983). For

instance, college students with less economic support experience greater systemic discrimination

due to their social class (Langhout et al., 2007). Further, research has shown that social class

impacts where students decide to attend college (Hossler et al., 1999). For example, a student

from a low social class may decide to attend one university versus another because they feel that

they "belong" at a certain school (Hossler et al., 1999). Or, a student may choose a state-

supported university versus a private university because of more affordable tuition or a larger

financial aid package. In addition, research has shown that expectations of rejection or

discrimination due to social class is related to poorer performance academically among college students from a lower social class (Rheinschmidt & Mendoza-Denton, 2014).

The psychosocial impacts of the experience of classism in college students have been well documented (Barney et al., 1984; Langhout et al., 2007; Liu, 2011). Walters (2015) reported that college students from a lower socioeconomic status tend to have increased levels of anxiety and depression due to financial struggles and the failure or inability to meet the demands or expectations of the economic culture, such as being a member of certain campus groups or not having to work a part-time job for financial support. Similarly, social class has been linked to variables such as poor mental health, higher rates of depression and suicide, increased psychopathology, and poorer psychological services (Barney et al., 1984; Liu, 2011). Further, research has shown that an impact of the experience of classism may be less positive attitudes about mental health help-seeking due to fear of being stereotyped or judged (Walters, 2015). For example, Walters (2015) suggested that people avoid seeking help due to fear of being blamed or misjudged for their financial circumstances. The experience of classism is also influenced and heightened within the university setting through the presence of diverse social backgrounds (Cattaneo et al., 2019; Jones, 2003). Specifically, the joining of multiple intersecting identities of marginalized people, such as social class status, race, immigration status, and first-generation status, magnifies and exacerbates the experience of classism on college campuses (Cattaneo et al, 2019; Jones, 2003). Langhout et al. (2009) found that students who experienced classism had higher rates of feeling isolated and increased difficulty adjusting to their university environment. In addition, another study completed by Langhout et al. (2007) found that social class impacts students' adjustment to and experiences within their institution. Specifically, it was found that students who experienced classism had an increased desire to leave the university and had more

difficulty adjusting to the academic demands of college (Langhout et al. 2007). Taken together, the experience of classism on college campuses impacts students' mental health, academic work, and attitudes toward help-seeking.

Help-Seeking Attitudes

Mental health help-seeking attitudes, or attitudes about help-seeking, pertain to a person's opinions, whether positive or negative, regarding the action of seeking professional mental health support from a provider (Hammer et al., 2018). The literature has suggested that in combination with subjective norms (e.g., societal pressure from others) and behavioral control (e.g., perceived efficacy), attitudes toward help-seeking predict one's help-seeking behaviors (Hammer et al., 2018). Put simply, one's attitudes about help-seeking are believed to be one of the strongest predictors of a person's future help-seeking intentions (e.g., going to see a mental health professional; Cramer, 1999; Hammer et all., 2018; Li et al., 2014).

Experiences of Classism and Help-Seeking Attitudes

The university environment is a stressful aspect of many college students' lives and an array of stressors often impact the mental health of students (Hubbard et al., 2018). Common stressors include finances, coursework, relationships, and sleep difficulties (Hubbard et al., 2018). Due to the increased stressors that college students face, students need social and emotional support, especially those students who are underrepresented (Parnes et al., 2020). The degree to which college students feel supported is heavily influenced by the usage of mental health services, particularly when students are experiencing increased psychological distress (Eisenberg et al., 2007). One such occurrence of increased psychological distress is experiences with classism (Langhout et al., 2007). Cheng et al. (2013) found that among racial and ethnic minority students, the experience of classism increased psychological distress (e.g., depression

anxiety, academic distress), which further heightened the experience of classism. Put simply, the experience of classism was further intensified by the psychological distress because, as a result of the increased distress, students' concerns regarding being stigmatized for seeking psychological help was increased (Cheng et al., 2013).

Experiences of classism have been shown to be significantly associated with attitudes toward seeking professional psychological help (Choi & Miller, 2018). Empirically, Choi and Miller (2018) found that classism and stigma were negatively related to attitudes toward seeking psychological help. The literature has supported the idea that many students do not seek help in order to avoid potential experiences of discrimination and prejudice (Choi & Miller 2018) and to avoid drawing attention to academic challenges or confirming their negative belief that they are unable to be successful in academic environments (Parnes et al., 2020). In the same vein, underrepresented students may be hesitant to seek help for fear that they may confirm negative stereotypes about people from their social class background (Massey and Fischer, 2005). Further, research has shown that help-seeking attitudes are impacted by the anticipated benefits and risks of seeking help as well as the possibility public stigma (Nam et al., 2013). For instance, research suggests that an influential factor in one's help-seeking attitudes is the fear of negative judgment by others (Kushner & Sher, 1991). Additionally, traditional counseling methods may contribute to classism because they are typically based on middle-class and upper-middle-class, White social norms (Choi & Miller, 2018; Lott, 2012; Smith, 2005). As a result of the historically upper-middle-class reflection of the counseling system, students may develop a mistrust of the counseling system due to their everyday experiences of classism on campus and thus may display more negative help-seeking attitudes (Kushner & Sher, 1991; Partiali et al., 2013). Theoretically, this relates to the aforementioned framework such that college students who

experience the common occurrence of classism are expected to avoid situations in which they may experience potential rejection from therapists or others when seeking psychological help. Therefore, it is likely that students experiencing more classism will have more negative attitudes toward help-seeking due to fear of being judged by others and the wish to avoid future instances of discrimination.

Shame as a Mediator

Shame is an affective state that has been heavily studied within the field of psychology. Shame, as reconceptualized and defined by Lewis (1971), is a particularly arduous experience because it is the person's whole self that is being evaluated and judged. Specifically, shame is an experience focused on the self and on the self-scrutiny of a "bad" self (Lewis, 1971). Further, a result of the view of a "bad" self is that the self of the shamed individual is seen as worthless and defective (Hastings et al., 2002) A notable aspect of shame that was first introduced by Ausubel (1955) indicated shame as an increasingly public emotion. Specifically, researchers have posited that shame is an emotion that emerges from a shortcoming or wrongdoing being exposed to the public (Ausubel 1955). In relation to the current study, it is likely that feelings of shame are more prevalent when students face classism, especially if these experiences are public. As a result of the feelings of shame, people who experience shame are often compelled to hide and avoid the experiences and encounters that perpetuate that feeling (Hastings et al., 2002; Tangney, 1996). In addition, the experience of shame may leave individuals "feeling diminished, powerless, and exposed" (Hastings et al., 2002, p. 68). Put simply, a person's perception of shame impacts how they interact and interpret the environment around them and how they view themself (Baldwin et al., 2006; Hastings et al., 2002). Theoretically, this is supported by the prejudice and discrimination framework such that more experiences of discrimination lead to further feelings

of wanting to hide and avoid future experiences of discrimination. To this end, it is evident that shame has the potential to be incredibly devastating and exhausting when encountered and experienced on a regular basis, such as experiencing classism within the university setting (Tangney, 1996).

Theoretically, classism has been shown to be associated with feelings of shame (Liu, 2002; Liu et al., 2004). Specifically, classism has been pointed out as a likely component in the experience of men's shame, depression, and anger (Liu, 2002). Individuals who have internalized their experience of classism, which was discussed previously as a possible impact of experiencing classism within the college setting, have also been shown to have feelings of deep embarrassment or shame (Liu, 2012). Similarly, shame has been listed as a prevalent emotion associated with social class (Liu et al, 2004). Empirically, Simons et al. (2017) found that perceived classism was associated with feelings of inferiority (e.g., shame) such that participants in a community sample indicated feelings of shame related to their financial situation. In addition, participants that indicated perceived classism had a significantly higher likelihood of indicating feelings of shame (Simons et al., 2017).

The relationship between shame and help-seeking attitudes among various populations has been prominent throughout the literature. A study conducted by Rüsch et al. (2014) on Swiss adults found that there was a positive association between shame and negative attitudes toward help seeking. In a postnatal population of women in the United Kingdom, shame proneness was indicative of negative attitudes toward help-seeking (Dunford & Granger, 2017). The literature supporting the relationship between shame and help-seeking attitudes is sparse and two of the preceding studies were completed on populations other than college students in the United States. However, it is empirically reasonable to consider that these findings could be generalized

to college students. Taken together, these results support the theoretical framework associated with everyday prejudice and discrimination literature such that experiences of classism may induce negative feelings, such as shame, which in turn, will have a negative association with help-seeking attitudes.

Self-Compassion as Moderator

Self-compassion is an aspect of psychological well-being that is well-documented within the literature (Neff, 2003; Neff, 2016; Neff et al., 2019). There are six primary components of self-compassion, including self-kindness verses self-judgment, common humanity verses isolation, and mindfulness verses over-identification (Neff et al., 2019). Self-kindness reflects an attitude of warmth and understanding toward oneself while recognizing that difficulties in life, such as suffering, being imperfect, and failing, are unavoidable and common (Neff, 2016). Self-judgment captures self-criticism, anger, and ignoring one's pain while blaming oneself for their perceived shortcomings and inadequacies (Neff, 2016). Common humanity represents the fundamental aspects of being human and recognition that every human is imperfect, mortal, and vulnerable and will eventually succumb to suffering and inadequacy at some point in their life (Neff, 2016). In contrast, isolation reflects one's perceptions of feeling that they are alone in their suffering and believing that they are the only person who makes mistakes (Neff et al., 2019). Mindfulness urges one to acknowledge and be aware of their negative thoughts and emotions while approaching them with openness and clarity (Neff et al., 2019). Additionally, mindfulness represents a non-judgmental state in which the individual neither suppresses or denies their natural feelings (Neff, 2003). Inversely, over-identification references putting one's own situation into a larger view such that it perpetuates negative reactivity while also causing an individual to become absorbed in their own thoughts and feelings (Neff, 2003).

Self-compassion has been shown to offer a plethora of benefits, including emotional, behavioral, and physical health benefits in adults, to name a few (Bluth & Neff, 2018; Neff, 2003; Marsh et al. 2018). The physical benefits of self-compassion have recently been documented. For instance, Arch and colleagues (2016) found that following a brief self-compassion meditation training, participants' sympathetic nervous system response and subjective anxiety response were suppressed following exposure to a social stress test. Similarly, in a sample of patients experiencing chronic health conditions such as persistent pain, self-compassion was found to influence pain adjustment, such that individuals with higher self-compassion had lower levels of pain catastrophizing, negative affect, and pain disability as well as higher levels of positive affect and pain self-efficacy (Wren et al., 2012). Further, a meta-analysis regarding the impact of self-compassion on health behaviors found that self-compassion has a positive impact on self-regulation of behaviors such as overeating, smoking cessation, self-care, physical activity, and eating disorder symptomology (Biber & Ellis, 2019).

In the same vein, one of the most documented and researched benefits of self-compassion is the positive impact of self-compassion on psychological well-being in adults (Neff, 2016). A meta-analysis completed by MacBeth and Gumley (2012) found that self-compassion is associated with decreased psychopathology, specifically anxiety, depression, and stress. Similarly, they also found that mental health symptoms, such as anxiety and depression, were lower when higher levels of self-compassion were present (MacBeth & Gumley, 2012). Further, empirical evidence has suggested that self-compassion is positively correlated with positive affect (Leary et al., 2007; Neely et al., 2009). Further, self-compassion interventions have also been found to specifically ameliorate feelings of isolation, self-judgment, and shame (Neff, 2011).

Experiences with classism is a construct heavily tied to feelings of shame (Liu. 2002; Liu et al., 2004). However, self-compassion may be beneficial in mitigating the negative association between classism and shame (Sedighimornani et al., 2019). Recent literature has shown that self-compassion has the potential to neutralize negative emotions, including shame (Sedighimornani et al., 2019). Perhaps, for individuals with lower levels of self-compassion, as they encounter classism, they may be increasingly disapproving of themselves and have increased feelings of inadequacy. As a result, these individuals are likely to experience increased levels of shame. Empirically, self judgement was shown to moderate the association between discrimination and psychological distress among ethnic minority college students (Browne et al., 2022). As such, it is hypothesized that self-compassion will moderate the relationship between experiences of classism and shame. Specifically, individuals with lower levels of self-compassion will be more vulnerable to the negative impact of the experiences of classism on shame compared to individuals with higher levels of self-compassion.

The expected moderation effects of self-compassion could be extended to the mediation effect. Specifically, it is hypothesized that self-compassion will moderate the mediation effect of shame on the relationship between experiences with classism and help-seeking attitudes. Similar to the above rationale, college students with less self-compassion may be more judgmental of themselves and may isolate more when they encounter classism. Further, students with low self-compassion may overidentify with the experience of classism. Thus, they will likely experience increased feelings of shame, which may result in more negative attitudes toward help-seeking. It is expected that the negative mediation effect will be stronger for college students with lower levels of self-compassion than those with higher levels self-compassion.

Study Hypotheses

The current study will work to examine three main hypotheses.

Hypothesis 1: Mediation

H1: Shame will mediate the negative association between experiences of classism and help-

seeking attitudes (see Figure 2.1).

Figure 2.1

The Conceptual Model for the Mediation Hypothesis: Shame as a Mediator for the Relationship

Between Experiences of Classism and Help-Seeking Attitudes

Hypothesis 2: Moderation

H2: Self-compassion will moderate the association between experiences of classism and shame

(see Figure 2). Specifically, individuals with lower levels of self-compassion will be more

vulnerable to the negative impact of the experiences of classism on shame compared to the

individuals with higher levels of self-compassion (see Figure 3).

Figure 2.2

The Conceptual Model for the Moderation Hypothesis: Self-Compassion as a Moderator for the

Relationship Between Experiences of Classism and Shame
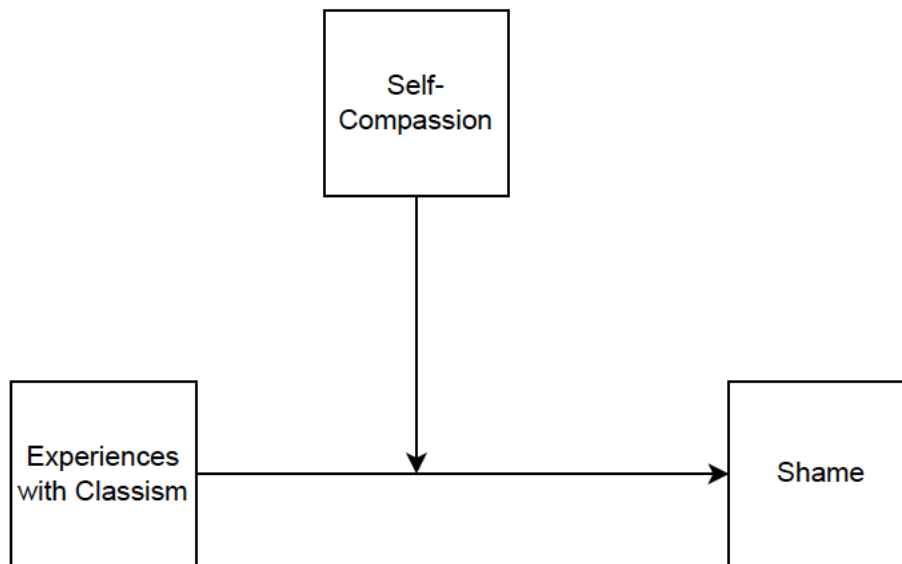
Figure 2.3

The Hypothesized Moderation Model: The Interaction Effects of Self-Compassion on

Experiences with Classism and Shame at High Versus Low Levels of Self-Compassion
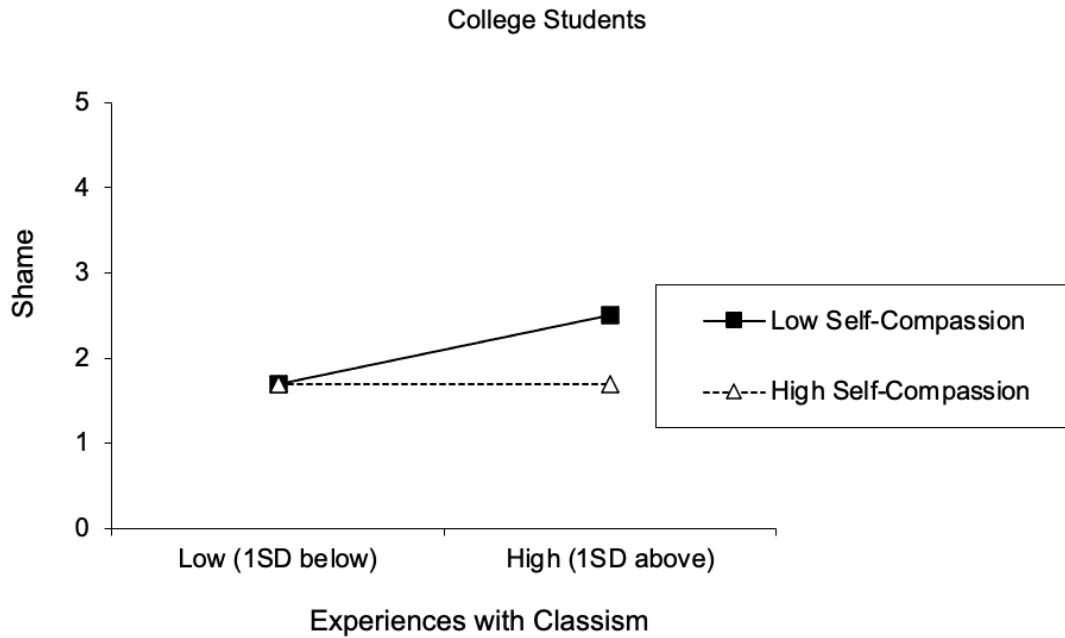
Hypothesis 3: Moderated Mediation

H3: Self-compassion will moderate the mediation effect of experiences with classism, through

shame, to help-seeking attitudes. Specifically, the negative mediation effect will be stronger for

college students with lower self-compassion than those with higher self-compassion (see Figure

4).

Figure 2.4

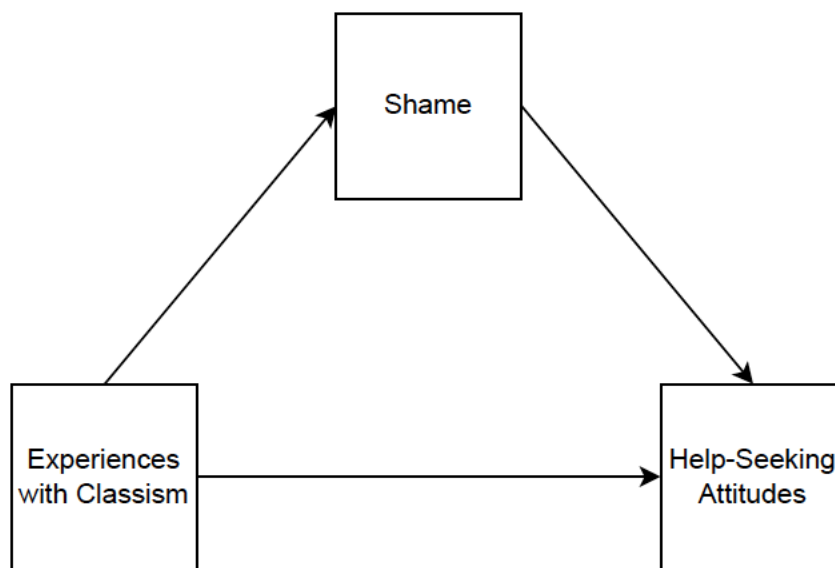*The Conceptual Model for the Moderated Mediation Hypothesis: Self-Compassion as a*

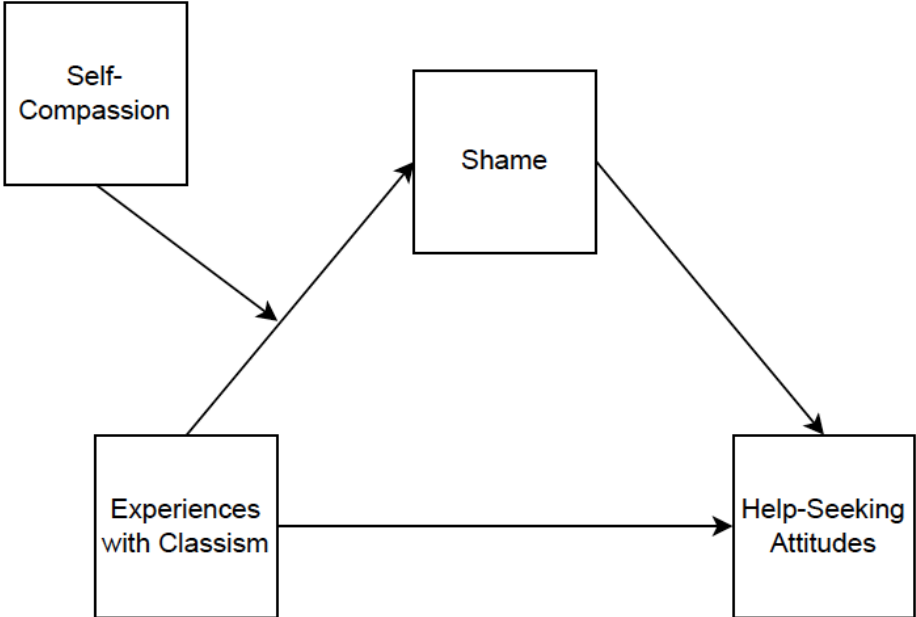*Moderator of the Mediation Effect of Experiences with Classism, through Shame, to Help-*

Seeking Attitudes

CHAPTER THREE: METHOD

Power Analysis

To estimate the appropriate sample size needed to produce a significant and meaningful effect, a power analysis was conducted using G*Power 3.1.9.7 software (Faul et al., 2007, 2009). To estimate the number of participants needed, a significance level of .05 and a power of .80 were used for the analysis. Small, medium, and large effects were tested with the power analysis. To produce a small effect size ($f^2 = .02$), 395 participants were needed. To produce a medium effect size, ($f^2 = .15$), 55 participants were needed. To produce a large effect size, ($f^2 = .35$), 25 participants were needed. Considering social science studies typically focus on small to medium effect sizes (Cohen, 1992), this study attempted to recruit 350-400 participants.

Participants

To be included in the study, participants must have been at least 18 years old and enrolled as a student and taking classes at Radford University. Participants were recruited using Radford University's Student Research Participation (SONA) system. Participants were also recruited by outreach to general psychology courses. Participants who did not meet the age and enrollment criteria were not included in the data analyses. Exclusionary criteria for data analysis also included participants that spent less than 250 seconds on the survey, participants that completed less than 60% of the survey, and participants that had a response variability plus attention check score of three or higher. The response variability plus attention check score was calculated by summing the number scales for which participants had zero variability in their responses and failed the manipulation check. Possible scores ranged from zero to four. Participants who met the exclusionary criteria were excluded from data analysis. The sample size prior to exclusion was

550 participants. Sixty-eight participants were excluded from data analysis. The final sample size after excluding cases was 482.

Procedure

After receiving approval from the Radford University Institutional Review Board, the participants were recruited from the Psychology Department Participant Pool using SONA (Sona Systems Ltd., Tallin, Estonia) and through classroom outreach. To be eligible to participate in this survey, participants must have been enrolled in at least one psychology course as an undergraduate student at Radford University. Participants must also have been at least 18 years old. Participants were recruited via in-person classroom announcements, and flyers were utilized for classes that did not use SONA (see Appendix A). The classroom announcements were conducted using separate scripts for classes that did and did not utilize the SONA system (see Appendix B). Course instructors also e-mailed the scripts utilized to their classes. An optional raffle was available for students who were not eligible to receive SONA credit. The raffle was a chance to receive one of five $20 Amazon gift certificates. This incentive was funded by the researcher's receival of the Eleanor E. Kemp Memorial Research Fund Award, provided by the Radford University Center for Gender Studies. To enter the raffle after completion of the study, participants were redirected to a separate survey link at the end of the survey, where they provided their name and email address for contact if selected for the gift certificate. Participants were informed that the separate Qualtrics link was not associated or linked to the data they previously submitted. Students recruited through psychology courses were informed that they could receive one SONA credit for the completion of the survey. Students were able to receive course credit, extra credit, or both upon completing the survey. This was dependent on the course instructor's preference. Participants recruited through undergraduate psychology courses signed

up for the study through the SONA system and were directed to click on a link to the survey,

which was administered via Qualtrics (Qualtrics Inc., Provo, UT). Participants recruited via

classroom outreach utilized a QR code linked to the Qualtrics survey. Once the participants were

directed to the survey, they read one of two informed consent forms before agreeing to

participate (see Appendix C), as there were separate informed consent forms for students

recruited via SONA and the QR code (see Appendix C). After participants read the informed

consent and agreed to participate, they were asked to indicate their consent by clicking an arrow

button to continue the survey. Participants who did not wish to complete the survey were asked

to exit the survey. Participants who chose to respond to the survey were asked to answer a

questionnaire that consisted of demographic information, the Experiences with Classism Scale

(EWCS), State Shame Scale (SSS), Mental Help Seeking Attitudes Scale (MHSAS), and Self-

Compassion Scale (SCS). The survey included an attention check item to ensure integrity of the

data. Upon completion of the survey, participants were redirected to one of two debriefing forms

(see Appendix D) as there were separate debriefing forms for students recruited via SONA and

the QR code. The debriefing form included information regarding mental health and crisis

resources that could be accessed, should participants encounter negative impacts from the survey.

The average survey completion time was approximately ten minutes.

Instruments

Demographic Questionnaire

Participants were asked to complete a demographic questionnaire at the beginning of the

survey (see Appendix E). Demographic questions included age, gender, year in school, first-

generation student, sexual orientation, and social class. Participants were also asked to indicate

their average combined household income while growing up, the importance of cost of

attendance (tuition and living expenses) when making the decision to attend Radford University, and the importance of amount of financial aid (need and merit aid) offered when making the decision to attend Radford University.

Experiences With Classism

The Experiences With Classism Scale (EWCS; Thompson & Subich, 2013) is a 25-item scale that measures participants' experiences with classism in the past year by asking about prejudicial or discriminatory experiences that occurred from being a member of a specific social class (Thompson & Subich, 2013; see Appendix F). Participants rated each item using 6-point scale frequency of occurrence, ranging from 1 ("never happened to you") to 6 ("happened almost all of the time"). Sample items for EWCS-systemic included "how many times have you been treated unfairly in the past year by teachers and professors because of your social class" and "how many times have you been treated unfairly in the past year by people that you thought were your friends because of your social class." Sample items for EWCS-personal included "how often do you feel like you have been treated differently in the past year on the basis of your physical appearance [clothing, type of bag/purse you carried, and shoes]" and "how often have you felt frustrated with all of the steps that you had to take with the financial aid office or banks in order to have access to money for school." Score were formed by averaging items such that higher scores were indicative of greater experiences of classism. The construct validity of the EWCS was supported by a significant positive association with stigma for receiving psychological help and perceptions of stigmatization by others for seeking help (Choi & Miller, 2018) and a significant negative association with the attitudes about seeking professional psychological help among college students (Choi & Miller, 2018).

Shame

Participants' shame was measured using The State Shame and Guilt Scale (SSGS; Marschall et al., 1994). The State Shame subscale (SSS) was a 5-item self-rating scale that assesses participants' current feelings of shame (see Appendix G). Participants rated each item using a 5-point rating scale ranging from 1 ("not feeling this way at all) to 5 ("feeling this way very strongly"). Example items included "I want to sink into the floor and disappear" and "I feel like I am a bad person" (Marschall et al., 1994). Total scores were formed by averaging across items, such that higher scores were indicative of greater feelings of shame. The construct validity of the shame subscale of the SSGS was supported by a significant positive association with the need to belong and a significant negative association with adult attachment security among college students (Chen et al., 2015).

Self-Compassion

The Self-Compassion Scale (SCS; Neff, 2003) is a well-established measure that assessed how an individual acts toward themselves during difficult times. The SCS consists of 26 items (see Appendix H). Participants rated each item using a 5-point rating scale of frequency, ranging from 1 ("almost never") to 5 ("almost always"). Example items included "when I see aspects of myself that I don't like, I get down on myself" and "when I fail at something important to me I try to keep things in perspective" (Neff, 2003). Higher scores were indicative of greater self-compassion. The construct validity of the SCS was supported by significant positive associations with adaptation to college (Scott & Donovan, 2021) and resilience (Shebuski et al., 2020). A total score was formed by averaging across items such that a higher score indicated greater self-compassion. The construct validity was also supported by significant negative associations with perceived stress and depression among college students (Ko et al., 2018). The coefficient alpha was .91 among college students (Mehr & Adams, 2016).

Help-Seeking Attitudes

The Mental Help Seeking Attitudes Scale (MHSAS; Hammer et al., 2018) assessed participants' attitudes toward seeking help from a mental health professional. The MHSAS (Hammer et al., 2018) is a semantic differential scale comprised of nine semantic pairs (see Appendix I). Items "Important/Unimportant," "Good/Bad," "Healing/Hurting," "Satisfying/Unsatisfying," and "Desirable/Undesirable" were reverse scored before totaling the item scores and dividing by the total number of items answered. Responses were averaged across items (scores ranged between 1 and 7) after reverse-scoring items to ensure that higher scores indicated a more favorable attitude toward seeking help. The construct validity of the MHSAS was supported by significant positive associations with mental help seeking intentions and working alliance (Seidman et al., 2022) as well as significant negative associations with social stigma for receiving psychological help and self-stigma of seeking help among college students (Seidman et al., 2022). The coefficient alpha ranged from 0.88 to 0.89 among college students (Seidman et al.,2022).

Data Analysis Plan

Preliminary Analysis

The means, standard deviations, and correlations between the main variables of interest were calculated. To identify potential covariates, the outcome variable, help-seeking attitudes, was assessed to determine whether it varied as a function of the demographic variables. Specifically, Pearson's correlation was used to analyze whether age was associated with help-seeking attitudes. A *t*-test was conducted to analyze whether help-seeking attitudes varied as function of first-generation student status. One-Way ANOVAs were conducted to examine whether help-seeking attitudes varied as a function of gender, year in school, ethnicity, sexual

orientation, and social class demographic variables. If the outcome variable varied as a function of the demographic variables, then that particular demographic variable(s) was examined as a covariate in the subsequent data analysis.

Mediation Analysis

The mediation hypothesis predicted that shame would mediate the negative association between experiences of classism and help-seeking attitudes (Hypothesis 1). The mediation hypothesis was analyzed using a series of multiple regression analyses and confirmed utilizing the Hayes (2013) PROCESS software and PROCESS model 4 (Hayes, 2013). An alpha level of .05 was used to establish significance. A total of 10,000 bootstrap samples were used to estimate the standard error of the indirect effects and produce a 95% confidence interval (Preacher & Hayes, 2008). The indirect effect of the mediation was considered significant at the .05 alpha level if the 95% confidence interval did not include a zero.

Moderation Analysis

The moderation hypothesis predicted that self-compassion would moderate the negative association between experiences of classism and shame (Hypothesis 2). Specifically, individuals with low self-compassion would be more vulnerable to the impact of the experiences of classism on shame. Conversely, the relationship between the experiences of classism and shame would be weaker for individuals with high self-compassion.

The moderation hypothesis was tested utilizing the Aiken and West (1991) procedures for testing interactions in a hierarchical multiple regression framework. The predictor variables (experiences with classism and self-compassion) were centered and the product of the centered variables was used as the interaction term. Within the hierarchical regression, the centered predictors were entered in the first step and the interaction term was entered in the second step.

Moderation is demonstrated when the R squared change in step two of the model is statistically significant. A significant interaction would be probed using a series of simple slop analyses where retrospective predictors are then recentered one standard deviation above the mean and one standard deviation below the mean.

Moderated Mediation Analysis

The moderated mediation hypothesis predicted that self-compassion would moderate the mediation effect of experiences with classism, through shame, to help-seeking attitudes (Hypothesis 3). Specifically, the indirect effect would be stronger for college students with lower self-compassion than those with higher self-compassion. The moderated mediation hypothesis was analyzed using Hayes (2013) PROCESS software and PROESS model 7 (Hayes, 2013). If the index of moderated mediation was significant at an alpha level of .05, this suggested that the indirect effect was significantly different among people with low self-compassion compared to people with high self-compassion.

CHAPTER FOUR: RESULTS

Data Screening

Prior to data analysis, three data screening rules were implemented to identify problematic responses within the data set. The three exclusion criteria were utilized to pinpoint the issues most likely to skew the data. Multiple participants met multiple exclusionary criteria. The first rule excluded any cases that completed less than 60% of the survey. Zero cases were excluded as a result of this rule. The second rule excluded cases that were completed in less than 250 seconds (about 4 minutes), as the survey was approximated to take 15-25 minutes. This rule excluded 50 cases. The final rule was based on the number of measures that participants had no variability in their responses and on the number attention check items they failed. Variability in responses (*SD*) was assessed for the four main variables that utilized reversed scored items (Experiences with Classism Scale, State Shame Scale, Mental Help-Seeking Attitudes Scale, and Self-Compassion Scale), such that a participant who answered every question within a given measure in exactly the same way would have a score of 0. An additional variable was created from the sum of the four response variability score variables and the two attention check scores, where a higher score indicated a greater number of measures on which participants had no response variability or failed the attention check. Possible scores ranged between 0 and 5. Any case with a score of three or higher on this variable was excluded, and 34 cases were excluded as a result of this rule. In total, 68 cases were excluded from the data after applying exclusion criteria. The final sample consisted of 482 participants.

Descriptive Analyses

For descriptive purposes, frequency analyses were conducted on the main demographic variables (see Table 4.1 below). Participant ages ranged from 17 to 40 years old, with an average

age of approximately 19 years old. The majority of the sample was female (74.9%). Seventeen

participants identified as non-binary or transgender. The sample was comprised of 356 freshmen

students (73.9%), and 183 students (38%) reported being a first-generation college student. A

majority of the sample reported being Caucasian/White. Heterosexual was the highest endorsed

sexual orientation. Of the participants who chose "other" as their identity, the majority (19)

reported being pansexual, 13 participants wrote in "straight," three reported being "queer," one

reported being "questioning," one reported being "omnisexual," and one reported being

"unlabeled." Regarding social class, the majority of participants (43.9%) identified with middle

class, and a majority (32.9%) indicated a combined household income of $50,000-$100,000

while growing up. When asked about the importance of cost of attendance (tuition and living

expenses) when choosing Radford University, the majority of participants indicated that this was

"Very Important" (37.2%) or "Fairly Important" (28.1%). Participants were also asked about the

importance of financial aid (need and merit aid) offered when making the decision to attend

Radford University. The majority indicated financial aid as "Very Important" or "Fairly

Important" (25.4%).

Table 4.1

Sample Demographics

	Frequency/M (%/SD) Total $N = 482$
Age ($n = 460$)	18.88 (2.00)
Gender ($n = 482$)	
Male	103 (21.4%)
Female	361 (74.9%)
Transgender	2 (.4%)
Non-binary	15 (3.1%)
Other	1 (.2%)

	Frequency/M (%/SD) Total $N = 482$
First-Generation Status ($n = 481$)	
Yes	183 (38%)
No	298 (62%)
Year in School ($n = 482$)	
Freshman	356 (73.9%)
Sophomore	74 (15.4%)
Junior	31 (6.4%)
Senior	18 (3.7%)
Other	3 (.6%)
Ethnicity ($n = 482$)	
Caucasian/White	319 (66.2%)
African American	85 (17.6%)
Asian American	8 (1.7%)
Latino/a American	24 (5%)
Native American	2 (.4%)
Multi-racial American	29 (6%)
International Student	2 (.4%)
Other	13 (2.7%)
Sexual Orientation ($n = 477$)	
Heterosexual	341 (71.5%)
Gay	5 (1%)
Lesbian	12 (2.5%)
Bisexual	76 (15.9%)
Asexual	2 (.4%)
Other	41 (8.6%)
Social Class ($n = 481$)	
Lower	22 (4.6%)
Lower Middle	123 (25.6%)
Middle	211 (43.9%)
Upper Middle	116 (24.1%)
Upper	6 (1.2%)
Other	3 (.6%)
Household Income ($n = 480$)	
Less than $25,000	34 (7.1%)
$25,000 - $50,000	95 (19.8%)
$50,000 - $100,000	158 (32.9%)

	Frequency/M (%/SD) Total $N = 482$
$100,000 - $200,000	98 (20.4%)
More than $200,000	21 (4.4%)
I prefer not to say	74 (15.4%)
Cost of Attendance Importance ($n = 481$)	
Not at all important	30 (6.2%)
Slightly important	63 (13.1%)
Neutral	74 (15.4%)
Fairly Important	135 (28.1%)
Very Important	179 (37.2%)
Financial Aid Importance ($n = 481$)	
Not at all Important	46 (9.6%)
Slightly Important	43 (8.9%)
Neutral	57 (11.9%)
Fairly Important	122 (25.4%)
Very Important	213 (44.4%)

Also, for descriptive purposes, Table 4.2 reports the means and standard deviations for the main variables as well as correlations between the main variables. Cronbach's alphas are depicted on the diagonal, and each measure had moderate to high reliability (cut-off .70 or higher). Participants' self-reported experience of shame and their experiences with classism were significantly and positively correlated, indicating that students with higher levels of shame tend to have more frequent experiences of classism on campus. Participants' reports of shame were significantly and negatively correlated with mental-health help-seeking attitudes. This shows that students with more feelings of shame tend to have less positive attitudes toward seeking mental health treatment, though the effect size is relatively small. Self-compassion was significantly and negatively correlated with experiences with classism, which indicates that students with higher levels of self-compassion tend to report fewer experiences with classism on campus, though the effect size was relatively small. Self-compassion and attitudes toward seeking mental health were

significantly and positively correlated. This demonstrates that students with higher levels of self-compassion tend to report more favorable attitudes toward seeking mental health care. The effect size was quite small. Self-compassion was significantly and negatively correlated with participants' self-report of shame. The more self-compassion someone reports, the lower their report of shame. This effect was large. The relationships between mental help-seeking attitudes and self-compassion and between mental help-seeking attitudes and experiences with classism were not significant.

Table 4.2

Zero Order Correlations and Descriptive Data for Experiences With Classism, Mental Help-Seeking Attitudes, Shame, and Self-Compassion

		1	2	3	4
1. EWCS		**.93**			
2. MHSAS		-.07	**.92**		
3. SSS		.31***	-.17***	**.88**	
4. SCS		-.15***	.09*	-.55***	**.90**
	Mean	1.65	5.50	1.85	2.79
	SD	.64	1.23	.95	.65
	Range	3.72	6.00	4.00	3.80
	n	473	465	474	468

Note. * $= p \leq .05$, ** $= p \leq .01$, *** $= p < .001$. Degrees of freedom range between 472 and 463. Cronbach's Alpha appears on the diagonal.
EWCS = Experiences with Classism Scale
MHSAS = Mental Help-Seeking Attitudes Scale
SSS = State Shame Scale
SCS = Self-Compassion Scale

Demographic Analyses

Upon completion of preliminary analyses, a mixture of Independent Samples *t*-Tests, One-Way ANOVAs, and correlations between the demographic variables and a main variable

(mental help-seeking attitudes) were conducted to assist with identification of potential

covariates. The demographic variables analyzed were age, gender, year in school, ethnicity,

sexual orientation, and first-generation student status. Specifically, a Person's correlation was

conducted to analyze whether age was associated with mental-help seeking attitudes. Age is not a

significant predictor of one's mental-health help-seeking attitudes, $r(441) = .07$, $p = .138$. An

Independent Samples t-Test was conducted to compare mental help-seeking attitudes for first-

generation students and continuing-generation students. There was not a significant difference in

mental-health help-seeking attitudes among first-generation student ($M = 5.59$, $SD = 1.18$) and

continuing-generation students ($M = 5.43$, $SD = 1.26$); $t(462) = 1.33$, $p = .183$, $d = .13$. This

indicates that first-generation student status is not a covariate.

Five One-Way ANOVAs were conducted to examine whether mental help-seeking

attitudes varied as a function of gender, year in school, ethnicity, sexual orientation, and social

class. None of the variables of interest, excluding sexual orientation, were significantly

associated with mental help-seeking attitudes. There were no significant differences in help-

seeking attitudes between the five gender groups (Male, Female, Transgender, Non-Binary, and

Other), $F(4, 460) = 1.64$, $p = .163$, $\eta^2 = .01$. Similarly, there were no significant differences

between the year in school group means, $F(4, 460) = 1.44$, $p = .221$, $\eta^2 = .01$. A third one-way

ANOVA revealed that there were no significant differences between the ethnicity group means,

$F(7, 457) = 1.98$, $p = .056$, $\eta^2 = .03$. Additionally, there were no significant differences between

the social class group means, $F(5, 458) = 0.19$, $p = .968$, $\eta^2 = .002$.

Sexual orientation was the lone demographic variable that yielded a significant result

from the one-way ANOVA analyses. Sexual orientation was significantly associated with mental

help-seeking attitudes, $F(5, 454) = 2.75$, $p = .019$, $\eta^2 = .03$. Specifically, there was a significant

difference between heterosexual and bisexual sexual orientation groups. The effect size for this

analysis, measured by Cohen's d, was $d = -0.26$, indicating a small effect (see Table 4.3 below).

Table 4.3

Average MHSAS Scores for Sexual Orientation Groups

	Sexual Orientation							
	Heterosexual ($n = 334$)	Gay ($n = 5$)	Lesbian ($n = 12$)	Bisexual ($n = 70$)	Asexual ($n = 2$)	Other ($n = 37$)	F (df)	η^2
MHSAS Average Score	5.40$_a$ (1.27)	6.47 (.87)	6.07 (.87)	5.71$_a$ (1.07)	7.00 (.00)	5.61 (1.13)	2.75 (5, 459)	.03

Note. $^\dagger = p \leq .10$, $^* = p \leq .05$, $^{**} = p \leq .01$, $^{***} = p \leq .001$.
Standard deviations appear in parentheses below mean.
Means within rows with same subscript are significantly different at the $p \leq .05$ level using
Fisher's LSD post hoc tests.
MHSAS = Mental-Health Help-Seeking Attitudes Scale

Main Analyses

Mediation Analysis

A mediation analysis was conducted using a series of multiple regression analyses (see

Table 4.4 below) and confirmed using model 4 of the PROCESS macro (Hayes, 2013) to test

whether shame would mediate the negative association between experiences with classism and

mental help-seeking attitudes (Hypothesis 1). The total effect, or C path, tested the total influence

of experiences with classism on mental help-seeking attitudes. Specifically, the total effect is the

combined influence of the direct effect between experiences with classism and mental help-

seeking attitudes and the indirect effect flowing through the mediator (shame). The C path was

marginally significant and very small. The A path, which tests the impact of experiences with

classism on shame, was significant, showing a medium sized positive association between

experiences with classism and shame. The B path tests the influence of shame on mental help-

seeking attitudes, when the influence of experiences with classism is accounted for and was

significant. The direct effect, also known as the C' path, tested the influence of experiences of classism on mental help-seeking attitudes in the presence of shame (mediator) and was not significant. The significance of the indirect path was tested using a bootstrapping procedure (Model 4 in PROCES), where a total of 5,000 bootstraps were used to estimate error terms and construct 95% Confidence Intervals (CI). If the 95% CI did not include zero, the effect was deemed to be statistically significant at the .05 level. The indirect effect (A*B path) of experiences with classism on mental help seeking attitudes through shame was significant [b = -.09, SE = .04, β = -.05, 95% CI (-.1789, -.0173)]. It should be noted that although the indirect effect is significant, the size of the effect is very small and of very limited theoretical value.

Table 4.4

Test of Shame as a Mediator on the Experiences With Classism and Mental Help Seeking Attitudes

	R^2	b	SE	β	Zero Order Correlation	Semipartial Correlation
Step 1 – c path	-					
EWCS > MHSAS		-.15	.09	-.08†	-	
Step 2 – a path	-					
EWCS > Shame		.47	.07	.31***	-	
Step 3 – c' and b paths	.03**					
EWCS > MHSAS		-.06	.09	-.03	-.08	-.03
Shame > MHSAS		-.19	.06	-.15**	-.16	-.15

Note. † $p < .10$, * $p \leq .05$, ** = $p \leq .01$, *** = $p < .001$.
EWCS = Experiences with Classism Scale
MHSAS = Mental Help-Seeking Attitudes Scale
Shame = State Shame Scale

Moderation Analysis

A moderation analysis was conducted utilizing the Aiken and West (1991) model of multiple regression to test whether self-compassion would moderate the negative association between experiences of classism and shame (Hypothesis 2). Specifically, experiences with classism was positively associated with shame. Self-compassion was negatively associated with shame, indicating self-compassion may serve as a protective factor. Together, experiences of classism and self-compassion accounted for 35% of the variance in participants' reported shame (see Table 4.5 below). However, the interaction between experiences with classism and shame was not significant. There was no support for the hypothesis that self-compassion moderates the relationship between experiences with classism and shame.

Table 4.5

Test of Self Compassion as a Moderator of the Relationship Between Experiences With Classism and Shame

	$R^2\Delta$	β	Zero Order Correlation	Semipartial Correlation
Model 1				
Step 1	.35***			
df (1, 462)				
EWCS		.24***	.31	.23
SCS		-.51***	-.55	-.51
Step 2	.002			
Df (1, 461)				
EWCS		.22***	.31	.21
SCS		.51***	-.55	-.51
Interaction		-.05	-.09	-.04

Note. $^\dagger p < .10,$ $^* p \le .05,$ $^{**} = p \le .01,$ $^{***} = p < .001.$
EWCS = Experiences with Classism Scale
SCS = Self-Compassion Scale

Moderated Mediation Analysis

A moderated mediation analysis was not completed for multiple reasons. First, there was no meaningful main effect of experiences with classism on mental-health help-seeking attitudes. Next, the significant indirect effect of experiences of classism on mental help-seeking attitudes, through shame, is too small to be theoretically meaningful. Finally, the interaction between experiences with classism and self-compassion, when predicting shame, is not significant. Therefore, testing the moderated mediation model would not be meaningful.

CHAPTER FIVE: DISCUSSION

The purpose of this study was to examine the relationships among experiences with classism, mental-health help-seeking attitudes, shame, and self-compassion among a sample of college students. The previous chapter analyzed the results of the statistical analyses conducted to address the hypotheses postulated. Partial support was found for the hypotheses. Chapter five discusses the results of the current study within the larger literature and outlines limitations and strengths of the study. Future directions for research and practical clinical implications are offered within the context of the study results.

General Discussion

Shame as a Mediator

The first hypothesis proposed that shame would mediate the negative relationship between experiences of classism and mental help-seeking attitudes. Put simply, it was predicted that shame would explain the established negative relationship between experiences with classism and mental help-seeking attitudes. This hypothesis was not supported by the results of this study. Specifically, the association between experiences with classism and mental help-seeking attitudes was not significant and the effect was very small. Although the indirect effect was significant, the magnitude of the effect was quite small and of limited theoretical importance. This unexpected result may be interpreted in many ways. First, it is possible that the current results are indicative of the convenience sample utilized and the results are unique to this study. There is sparse literature documenting the experiences of classism on college campuses. However, previous studies utilizing convenience sampling produced more diverse samples regarding age and education level than the current study (Langhout et al., 2007; Ostrove & Long, 2007; Thompson & Subich, 2013). Specifically, Ostrove and Long (2007) had a sample that

included a balance of both upperclassmen (e.g., juniors and seniors) and lowerclassmen (e.g., freshmen and sophomores), whereas the current study had a sample of predominantly freshman (73.9%). Langhout and colleagues (2007) had similar findings, noting an even distribution across years in college (e.g., first year through fourth year) as well as an average age of 20 years old; the current study produced an average age of 18.88 years old. Further, Thompson and Subich (2013) reported an average age of 22 years old within their sample. It is possible that a sample of college students representing more than predominantly freshman students around the age of 19 years old may show the predicted relationship between experiences with classism and attitudes toward help-seeking. It is also possible that students with more experience in college, and in the world in general, may have more life experiences both on and off campus to assist in the recognition of classism and to shape their attitudes towards help-seeking. That is, it is possible that the first-year students in the present study did not have enough familiarity with experiences with classism to reflect the expected association.

In addition, it is possible that the use of the Mental Help-Seeking Attitudes Scale (MHSAS) did not accurately capture the intended measure of help-seeking attitudes, as it was shown to be weakly associated with the other study measures. The use of a different measure to evaluate mental help-seeking attitudes may allow for the expected results. Further, social desirability may have played a role in participants' responses. It is possible that participants were engaging in impression management and did not want to present a negative view of themselves to the researcher. Also, it is possible that stigma surrounding mental health may have distorted participants' willingness to report their attitudes toward seeking mental health services. For example, Mojtabai and colleagues (2002) found that participants who reported embarrassment surrounding mental health treatment were less inclined to identify a need for mental health

services. Additionally, Radford University is situated in a rural area and research has shown that students in rural areas report that stigma is a significant barrier to seeking mental health services (Calloway et al., 2012). Although the current survey inquired about attitudes toward seeking mental health services rather than the action of seeking services, it is reasonable to conclude that one's stigma surrounding mental health may have influenced their self-reported attitudes toward mental help-seeking. Finally, qualitative research has posited stoicism as a prominent attitudinal barrier to help-seeking within rural communities (Cheesmond et al., 2019). Specifically, research noted a tendency for rural individuals to cope with mental stressors (e.g., feelings of shame) silently (Cheesmond et al., 2019). As such, it is plausible that stoicism and reluctance to report distress in any capacity also impacted participants' reports of shame within the study, which may have further obscured associations between experiences with classism and seeking help for mental-health issues.

Self-Compassion as a Moderator

The second hypothesis proposed that self-compassion would moderate the negative relationship between experiences of classism and shame. In other words, it was predicted that individuals with low self-compassion would be more vulnerable to the impact of experiences of classism and shame than those with high self-compassion. Similarly, it was predicted that the relationship between experiences with classism and shame would be weaker among individuals exhibiting high self-compassion, indicating self-compassion serves as a buffer between classism and shame. This hypothesis was not supported. Although, both experiences with classism and self-compassion uniquely and significantly predicted shame (together accounting for 35% of the variance in shame), the interaction between shame and self-compassion was not significant. This

unanticipated result may be interpreted in various ways. As mentioned previously, these results

may be specific to the obtained sample of the study.

The non-significant results of this hypothesis may be explained partly by the

demographic make-up of the sample. A meta-analysis by Yarnell and colleagues (2015) found

that men had slightly higher levels of self-compassion than women. It is possible that, given the

predominantly female sample (74.9%), the self-reported levels of self-compassion reported by

participants' that identified as female may have impacted the moderation analysis. Other

demographic variables such as race, ethnicity, and sexual orientation have been examined within

previous studies to determine if levels of self-compassion differ among various groups; however,

no differences have been found to be significant (Lockard et al., 2014). Alternatively, it is

possible that the overall moderation hypothesis of the present study was simply incorrect.

Although self-compassion has been documented to have beneficial physiological, psychological,

and neurobiological effects (Stutts, 2022) and has been shown to moderate perceived stress and

depression within a college student sample (Stutts et al., 2018), self-compassion may not

meaningfully impact the relationship between experiences with classism and shame.

Self-Compassion as a Moderator for the Mediation Effect

The third hypothesis proposed that self-compassion would moderate the mediation effect

of the experiences with classism, through shame, to mental help-seeking attitudes. Put simply, it

was predicted that the effect of shame on the relationship between experiences with classism and

mental help-seeking attitudes would differ as a result of an individual's degree of self-

compassion (e.g., high or low). This hypothesis was not supported by the results of this study, as

evidenced by the absence of meaningful mediation of the association between experiencing

classism and attitudes about seeking mental health services and the absence of an interaction

between experiences with classism and self-compassion when predicting shame. The analyses

for this hypothesis were not conducted.

Clinical Implications

As mentioned in chapter two, sparse quantitative research has been conducted examining

experiences with classism among college students in a university setting. The current study seeks

to answer the call to further integrate social class and socioeconomic status into future

psychological research (Saegert et al., 2007). The current study and its unanticipated findings

emphasize the imperative need for other researchers within the psychology community to

explore and investigate the nuances of classism and its presence and impact within academic

settings and culture as a whole.

Despite the non-significant results of the main hypotheses of the present study, clinicians

providing services to college students should be attuned to some of the key findings. First, the

significant and positive correlation between students' self-reported experiences with classism and

feelings of shame are suggestive that students experiencing higher levels of shame have more

frequent experiences of classism on campus. As such, clinicians providing services to college

students should be aware of the influence that a student's feelings of shame, particularly

surrounding experiences of classism, may have on their overall mental health and well-being.

Literature has documented the harmful effects of shame and its capability to heighten feelings of

worthlessness, inferiority, and powerlessness (Hastings et al., 2002; Simons et al., 2017; Tangney

& Dearing, 2002). Still, literature has found that students with diverse identities (e.g., race and

gender) are more prone to shame after experiences of discrimination on campus, which has been

shown to double rates of anxiety and depression among college students of African, Latinx, and

Asian descent (Stone-Sabali et al., 2023). Further, research has posited that long-term effects of

shame, as well as the inability to regulate feelings of shame, is a risk factor among various populations for the onset and reoccurrence of mental health disorders such as anxiety (Fergus et al., 2010), depression (Kim et al., 2011), post-traumatic stress disorder (Cunningham et al., 2019), eating disorders (Duarte & Pinto-Gouveia, 2017), and substance use (Potter-Efron & Carruth, 2014), to name a few. As such, clinicians providing services to students should regularly assess and evaluate feelings of shame as well as experiences of discrimination in any form on campus. In addition, it may be beneficial for clinicians to begin treatment by providing psychoeducation on the negative impacts of shame. However, it should be noted that literature has found reluctance for individuals to report their feelings of shame, especially in rural areas (Robinson et al., 2012). Therefore, it is essential that clinicians build a foundation of rapport and unconditional positive regard with their clients, as distrust for providers may hinder clients from being forthcoming and continually engaging in care (Chipp et al., 2011).

An additional notable finding from the present study was a significant and negative correlation between students' reports of shame and mental-health help-seeking attitudes. This suggests that students with stronger feelings of shame have less positive attitudes toward seeking help from a mental health provider, though the effect was small. This finding bolsters the scarce empirical literature positing a negative relationship between shame and attitudes toward help-seeking among a postnatal population of women (Dunford & Granger, 2017). As a person's attitudes toward seeking mental health services is the greatest predictor of future help-seeking behaviors (Cramer, 1999; Hammer et al., 2018; Li et al., 2014), and feelings of shame and self-stigma are known barriers to individuals seeking help from a mental health professional (Corrigan, 2004; Rüsch et al., 2014), clinicians in university settings should aim to increase engagement and knowledge of counseling services within the study body. Facilitation of

outreach events and open houses along with expanding the presence of counseling centers on university campuses may be particularly beneficial in decreasing students' assumptions and preconceived notions about seeking help from a mental health-provider. Still, as is supported by literature and the everyday prejudice and discrimination framework (Swim et al., 1998), individuals avoid situations in which they fear they may be negatively judged by others (Kushner & Sher, 1991), and social norms of traditional counseling has also been shown to impact an individual's attitudes toward mental help-seeking (Choi & Miller, 2018; Lott 2012; Smith 2005). Taken together, this study's findings, along with previous literature, underscores the necessity for clinicians and counseling centers as a whole to implement practices and to develop programs targeted at decreasing the mystique behind counseling services as a way to encourage and support student engagement in mental health services.

The present study explored the relationships between self-compassion and the variables of shame, experiences with classism, and mental-health help-seeking attitudes. The data showed that self-compassion acts as a buffer against experiences with classism and feelings of shame and also plays a role in producing more positive attitudes toward help-seeking. This is especially significant for clinicians such that self-compassion interventions may be useful in treating and dismantling patterns of thinking driven by shame and experiences with classism. Further, research has shown that other treatment modalities, particularly mindfulness-based and third wave interventions (MBTW), may be valuable in instilling clients with empowerment and increasing their overall quality of life (Stynes et al., 2022). Particularly, clinicians should consider the use of Acceptance and Commitment Therapy (ACT) and compassion-based interventions aimed at increasing a client's psychological flexibility to assist in decreasing a

client's distress and increasing their usage of self-compassion when faced with adversity (Marta-Simões & Ferreira, 2019; Stynes et al., 2022).

Limitations

Consistent with many psychological research studies, the present study has limitations that should be considered when interpreting the results of the study. One potential limitation of the study is the use of convenience sampling. Convenience sampling is often used in research and entails the use of student volunteers as study participants (Bornstein et al., 2013). Known potential disadvantages of convenience sampling include decreased generalizability (external validity) and small numbers of underrepresented demographic groups (Bornstein et al., 2013). Similarly, the underrepresentation of demographic groups produces little variation within the sample and may be responsible for why research shows relationships in some settings but not in others (Bornstein et al., 2013). In the current study, the sample was overwhelmingly female (74.9%), Caucasian (66.2%), heterosexual (71.5%), freshman (73.9%), and middle class (43.9%). It is likely that the experiences of participants in the present the study are not indicative of the experiences of all students on campus. Specifically, research has shown that individuals identifying within the middle class have less experiences with classism on campus and are more likely to inflict classism upon other students identifying in the lower or lower middle class (Langhout et al., 2007). As such, the demographically narrow sample in the current study may have obscured associations between the main variables that may be observed within more diverse samples.

A second probable limitation in the current study is social desirability. Social desirability is a type of bias that refers to a response pattern in which a participant aims to portray themselves in a way that would be viewed more favorably by others (Krumpal, 2013). Prior to engaging in

the study, participants were informed of the intention and purpose of the survey. As such, it is possible that participants responded in a way that was congruent with the researcher's stated goals. In addition, the survey items asked participants sensitive questions surrounding their household income, social class, experiences of classism, attitudes toward seeking mental health treatment, and feelings of shame towards oneself. As a result of the impact of social desirability, it is possible that participants were less likely to answer truthfully to items indicating experiences of classism and feelings of shame.

A third probable limitation is the correlational nature of the data collected in this study. Correlational studies attempt to determine whether differences in a population are dependent on exposure to an event or variable of interest within a specific setting. Correlational studies are unique in that the researcher does not use comparison groups or random assignment for intervention and rather defines a set of variables pertaining to an outcome of interest and tests for the relationships hypothesized within the identified variables. Perhaps one of the most noted advantages of the correlational design within social sciences research is the ability to determine the nature and degree of a relationship between two specified variables (Asamoah, 2014), which was the aim of the current study. However, a distinct and notable drawback of a correlational design is the inability to determine causality (Asamoah, 2014). In other words, the correlational design does not permit for changes in one variable to be solely attributed to changes in a second variable (Asamoah, 2014). The current study produced meaningful associations, however causal inferences cannot be drawn due to the correlational methodology employed.

The limitations identified for the current study should be accounted for when generalizing the findings to a larger population. Still, regardless of the limitations discussed in this chapter, the present study provides valuable data that contributes to understanding of the relationships

between experiences with classism, mental help-seeking attitudes, shame, and self-compassion within academic settings.

Recommendations for Future Research

The current study provides various avenues for future research. First, future studies interested in examining the relationship between experiences with classism and mental help-seeking attitudes should aim to recruit a more diverse sample of college students, specifically regarding year in school, age, gender, and race. A wider sample of college students from various universities across the United States may elicit a sample that displays the hypothesized results. A more diverse sample would also provide increased generalizability of the results.

Utilization of diversified recruitment strategies may be beneficial to future researchers in gathering samples more indicative of the larger university population. Future researchers may benefit from employing a different methodological approach, such as mixed methods, to gather data. A mixed research method approach would allow future researchers to explore participants' first-hand experiences of classism on campus and would allow for a more detailed picture of students' experiences on campus. Further, utilization of a mixed method approach may allow for the flexibility to explore unanticipated responses or themes of the variables that may be relevant to interpreting and understanding of the quantitative data (Wasti et al., 2022).

Future research should also consider use of other scales to measure the variables shame and mental help-seeking attitudes. Although the measures selected for the current study demonstrated adequate validity throughout empirical literature, it is likely that the measures did not accurately capture the intended variables of interest. For example, the Mental Help-Seeking Attitudes Scale (MHSAS) utilized to measure students' attitudes toward seeking mental health treatment was only weakly associated with the other measures in the study. It is possible that use

of a different measure, or addition of qualitative methodology to assess for participants' attitudes more organically, may be more fruitful and accurate in measuring students' attitudes. Further, although the State Shame Scale (SSS) utilized to measure students' experiences of shame on campus was associated with experiences of classism and self-compassion as expected, it may be helpful to include an additional measure of shame. The State Shame Scale asked participants to rate their feelings of shame in the moment (e.g., when taking the survey), rather than when they were experiencing classism on campus (Marschall et al., 1994). It is possible that additional measures specifically targeting participants' feelings of shame when experiencing classism may provide a more authentic and detailed picture of students' feelings of shame.

Summary

The current study evaluates the relationships between experiences with classism, mental help-seeking attitudes, shame, and self-compassion within a college student population. Unanticipated results demonstrated a need for continued research on the topic of classism its impact on mental-health help-seeking as well as research on the negative impact of shame and protective qualities of self-compassion on mental-health help-seeking. The findings of this study add to the empirical literature by replicating the finding that experiences with discrimination on college campuses can exacerbate feelings of shame. The present findings highlight the necessity for clinicians and researchers to broaden their understanding of students' experiences on university campuses. In doing so, clinicians are better equipped to identify factors affecting students' mental health and can develop effective support strategies. Overall, enhancing this understanding may lead to improved mental health among students and a more encouraging and safer environment on college campuses.

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Appendix A

Classroom Announcement Flyer

RADFORD UNIVERSITY

Research Study Participants Needed

Tell us about your experience on campus!

The purpose of this study is to examine the roles of shame and self-compassion in the relationship between experiences with classism (discriminatory experiences due to being from a particular social class background) and mental help-seeking attitudes among college students.

https://radford.co1.qualtrics.com/jfe/form/SV_em36W1Vvco6ZeFE

✓ You must be at least 18 years old and a student at Radford University

✓ Takes 15-25 minutes to complete

Compensation

You can choose to be entered into a drawing to receive one of five $20 Amazon gift cards

Confidential

Participation in this study is completely voluntary and your responses are kept confidential

Contact Person

Allison Love
aplove@radford.edu

Appendix B

Classroom Announcement Script (SONA)

College of Humanities and Behavioral Sciences
Department of Psychology

Recruitment Script

<u>Invitation Email for SONA Participants</u>

Hi, my name is Allison Love, and I am a third year doctoral student here at Radford in the Counseling Psychology PsyD program. I am conducting my dissertation research under the supervision of my advisor, Dr. Tsai. My research examines the roles of shame and self-compassion on the relationship between experiences with classism and mental help-seeking attitudes among college students. Please consider taking 15-25 minutes to fill out my dissertation research survey. Your participation in this survey is completely voluntary. You will not be monetarily compensated for participating in the study. However, you will receive one research credit toward your psychology class for participating in this study. IP addresses will not be recorded.
I invite you to participate in my research if you are at least 18 years old and are currently a college student at Radford University.
If you are interested in this study, please access it through the SONA system.
This study has been approved by the Radford University Committee for the Review of Human Subjects Research (IRB# 2023-040) and they can be reached at <u>irb-iacuc@radford.edu</u>. If you have questions about this research, feel free to contact me (aplove@radford.edu) or Dr. Pei-Chun Tsai (ptsai3@radford.edu).

Your help is greatly appreciated. Thank you!

Classroom Announcement Script (Non-SONA)

College of Humanities and Behavioral Sciences
Department of Psychology
Recruitment Script

<u>Invitation Email for Non-SONA Participants</u>

Hi, my name is Allison Love, and I am a third year doctoral student here at Radford in the Counseling Psychology PsyD program. I am conducting my dissertation research under the supervision of my advisor, Dr. Tsai. My research examines the roles of shame and self-compassion on the relationship between experiences with classism and mental help-seeking attitudes among college students. Please consider taking 15-25 minutes to fill out my dissertation research survey. Your participation in this survey is completely voluntary. After completing the survey, you can voluntarily enter into a raffle for a chance to win one of five $20 Amazon gift cards. If you choose to participate in the drawing, you will be given a separate Qualtrics link to provide your name and email address so that there is no way your name and email address will be connected to your responses on the survey.

I invite you to participant in my research if you are at least 18 years old and are currently a college student at Radford University.

If you are interested in this study, please click the link below:
https://radford.co1.qualtrics.com/jfe/form/SV_em36W1Vvco6ZeFE

This study has been approved by the Radford University Committee for the Review of Human Subjects Research (IRB# 2023-040) and they can be reached at <u>irb-iacuc@radford.edu</u>. If you have questions about this research, feel free to contact me (aplove@radford.edu) or Dr. Pei-Chun Tsai (ptsai3@radford.edu).

Your help is greatly appreciated. Thank you!

Appendix C

Informed Consent (SONA)

RADFORD UNIVERSITY College of Humanities and Behavioral Sciences
Department of Psychology

You are invited to participate in a research survey, entitled "Experiences with Classism and Mental Help-Seeking Attitudes: The Roles of Shame and Self-Compassion." The study is being conducted by Allison Love, M.A., aplove@radford.edu and Dr. Jeffery Aspelmeier, jaspelme@radford.edu in the Psychology Department of Radford University, 801 E. Main St Radford, VA, 24142.

The purpose of this study is to examine the roles of shame and self-compassion in the relationship between experiences with classism (i.e., discriminatory experiences due to being from a particular social class background) and mental help-seeking attitudes among college students.

Eligible participants need to be 18 years old or older college students. We estimate that it will take about 15-25 minutes of your time to complete the questionnaire.

Your participation in this survey is completely voluntary. You may decline to answer any question and you have the right to withdraw from participation at any time without penalty. Risks to participants are considered minimal. You will not be monetarily compensated for participating in the study. However, you will receive one research credit toward your psychology class for participating in this study. Also, a limited number of research team members will have access to the data, or the answers to survey questions, during data collection. Data will be anonymous and your IP addresses will not be recorded.

You may contact the student researcher, Allison Love, M.A. via email (aplove@radford.edu) to discuss any questions you may have regarding the questionnaire. You can request a copy of the consent form from Allison Love.

This study was approved by the Radford University Committee for the Review of Human Subjects Research. If you have questions or concerns about your rights as a research subject or have complaints about this study, you should contact Dr. Jeanne Mekolichick, Institutional Official and Associate Provost for Research, Faculty Success, and Strategic Initiatives, Radford University, jmekolic@radford.edu, 540-831-6504.

If you agree to participate, please press the arrow button at the bottom right of the screen. Otherwise, use the X at the upper right corner to close this window and disconnect.

Thank you.

Informed Consent (Non-SONA)

RADFORD UNIVERSITY *College of Humanities and Behavioral Sciences*
Department of Psychology

You are invited to participate in a research survey, entitled "Experiences with Classism and Mental Help-Seeking Attitudes: The Roles of Shame and Self-Compassion." The study is being conducted by Allison Love, M.A., aplove@radford.edu and Dr. Jeffery Aspelmeier, jaspelme@radford.edu in the Psychology Department of Radford University, 801 E. Main St Radford, VA, 24142.

The purpose of this study is to examine the roles of shame and self-compassion in the relationship between experiences with classism (i.e., discriminatory experiences due to being from a particular social class background) and mental help-seeking attitudes among college students.

Eligible participants need to be 18 years old or older college students. We estimate that it will take about 15-25 minutes of your time to complete the questionnaire.

Your participation in this survey is completely voluntary. IP addresses will not be recorded. You may decline to answer any question and you have the right to withdraw from participation at any time without penalty. Risks to participants are considered minimal. A limited number of research team members will have access to the data during data collection. At the end of the survey, you will choose whether you would like to be entered into a drawing to win one of five, $20 Amazon gift cards. An online generator will be used by the researcher to randomly select a winner. If 200 participants use the Qualtrics link, the odds of winning the drawing are 5%. If you would like to be entered into the drawing, there will be a separate Qualtrics link provided so your name and email address are not connected to your responses on the survey. Whether or not you choose to be in the drawing, your IP addresses will not be recorded.

You may contact the student researcher, Allison Love, M.A. via email (aplove@radford.edu) to discuss any questions you may have regarding the questionnaire. You can request a copy of the consent form from Allison Love.

This study was approved by the Radford University Committee for the Review of Human Subjects Research. If you have questions or concerns about your rights as a research subject or have complaints about this study, you should contact Dr. Jeanne Mekolichick, Institutional Official and Associate Provost for Research, Faculty Success, and Strategic Initiatives, Radford University, jmekolic@radford.edu, 540-831-6504.

If you agree to participate, please press the arrow button at the bottom right of the screen. Otherwise, use the X at the upper right corner to close this window and disconnect.

Thank you.

Appendix D

Debriefing Form (SONA)

Debriefing Form

Thank you for your participation. The study you just participated in was designed to better understand how experiences with classism (i.e., discriminatory experiences due to being from a particular social class background) and mental help-seeking attitudes are associated with the relationship between shame and self-compassion among college students.

If you have questions, you may contact the student researcher, Allison Love, via email at aplove@radford.edu. If completion of these questionnaires raised personal issues for you that you would like to talk about, please contact the Radford University Student Counseling Services, Tyler Hall, Lower Level, 540-831-5226. If you have questions or concerns about your rights as a research subject or have complaints about this study, you should contact Dr. Jeanne Mekolichick, Institutional Official and Associate Provost for Research, Faculty Success, and Strategic Initiatives, Radford University, jmekolic@radford.edu, 540-831-6504.

Debriefing Form (Non-SONA)

Debriefing Form

Thank you for your participation. The study you just participated in was designed to better understand how experiences with classism (i.e., discriminatory experiences due to being from a particular social class background) and mental help-seeking attitudes are associated with the relationship between shame and self-compassion among college students.

If you have questions, you may contact the student researcher, Allison Love, via email at aplove@radford.edu. If completion of these questionnaires raised personal issues for you that you would like to talk about, please contact the Radford University Student Counseling Services, Tyler Hall, Lower Level, 540-831-5226. If you have questions or concerns about your rights as a research subject or have complaints about this study, you should contact Dr. Jeanne Mekolichick, Institutional Official and Associate Provost for Research, Faculty Success, and Strategic Initiatives, Radford University, jmekolic@radford.edu, 540-831-6504.

If you would like to exit the survey without entering the drawing, you may close this browser at any time.

If you would like to be entered into a drawing to win one of five, $20 Amazon gift cards, please click the link below:

https://radford.co1.qualtrics.com/jfe/form/SV_6XquSCD3GX7CdpA

Appendix E

Demographics Questionnaire

1. Age: _____

2. Do you identify as a first-generation student (the first member of your family to ever attend college)?
      1 = Yes
      2 = No

3. Gender:
      1 = Male
      2 = Female
      3 = Transgender
      4 = Non-binary
      5 = Other (please specify) _____

4. Year in school:
      1 = Freshman
      2 = Sophomore
      3 = Junior
      4 = Senior
      5 = Other (please specify) _____

5. Please indicate your ethnicity:
      1 = Caucasian/White
      2 = African American
      3 = Asian American
      4 = Latino/a American
      5 = Native American
      6 = Multi-racial American
      7 = International Student
      8 = Other (please specify) _____

6. Please indicate your sexual orientation:
      1 = Heterosexual
      2 = Gay
      3 = Lesbian
      4 = Bisexual
      5 = Asexual
      6 = Other (please specify) _____

7. Please indicate the social class that you most identify with:
      1 = Lower
      2 = Lower Middle

     3 = Middle

     4 = Upper Middle

     5 = Upper

     6 = Other (please specify) _____

8. To your knowledge, while you were growing up, what was the average, combined household income for your family? An estimate is fine.

     1 = Less than $25,000

     2 = $25,000-$50,000

     3 = $50,000-$100,000

     4 = $100,000-$200,000

     5 = More than $200,000

     6 = I prefer not to say

9. How importance was Cost of Attendance (Tuition + Living Expenses) when making the decision to attend Radford University?

     1 = Not at all important

     2 = Slightly important

     3 = Neutral

     4 = Fairly Important

     5 = Very Important

10. How importance was the amount of Financial Aid (Need + Merit Aid) offered to you when making the decision to attend Radford University?

     1 = Not at all important

     2 = Slightly important

     3 = Neutral

     4 = Fairly Important

     5 = Very Important

Appendix F

Experiences with Classism Scale (EWCS; Thompson & Subich, 2013)

We are interested in your experiences with classism (prejudicial or discriminatory experiences due to being from a particular social class background). As you answer the questions below, please think about the PAST YEAR. For each question, please choose the number that best captures the things that have happened to you.

1 = If this has NEVER happened to you
2 = If this has happened ONCE IN A WHILE (less than 10% of the time)
3 = If this has happened SOMETIMES (10-25% of the time)
4 = If this has happened A LOT (26%-49% of the time)
5 = If this has happened MOST OF THE TIME (50%-70% of the time)
6 = If this has happened ALMOST ALL OF THE TIME (more than 70% of the time)

1	2	3	4	5	6
Never happened to you	Once in a while	Sometimes	A lot	Most of the time	Happened almost all of the time

1. How many times have you been treated unfairly in the past year by teachers and professors because of your social class?
2. How many times have you been treated unfairly by your employers, bosses, and supervisors in the past year because of your social class?
3. How many times have you been treated unfairly by your coworkers, fellow students, and colleagues in the past year because of your social class?
4. How many times have you been treated unfairly by people in service jobs (store clerks, waiters, bartenders, bank tellers, and others) in the past year because of your social class?
5. How many times have you been treated unfairly in the past year by strangers because of your social class?
6. How many times have you been treated unfairly in the past year by people in helping jobs (doctors, nurses, psychiatrists, case workers, dentists, school counselors, therapists, social workers, and others) because of your social class?
7. How many times have you been treated unfairly in the past year by neighbors because of your social class?
8. How many times have you been treated unfairly in the past year by institutions (schools, universities, law firms, the police, the courts, the Department of Social Services, the Unemployment Office and others) because of your social class?

9. How many times have you been treated unfairly in the past year by people that you thought were your friends because of your social class?

10. How many times have you been accused or suspected of doing something wrong (such as stealing, cheating, not doing your share of the work, or breaking the law) in the past year because of your social class?

11. How many times in the past year have people misunderstood your intentions and motives because of your social class?

12. How many times did you want to tell someone off for being classist but did not say anything in the past year?

13. How many times have you been really angry about something classist that was done to you in the past year?

14. How many times were you forced to take drastic steps (such as filing a grievance, filing a lawsuit, quitting your job, moving away, and other actions) to deal with some classist thing that was done to you in the past year?

15. How many times have you been called a name like poor, welfare recipient, hobo, poor white trash, ghetto, or other names in the past year?

16. How many times have you gotten into an argument or a fight about something classist that was done to you or done to somebody else in the past year?

17. How many times have you been made fun of, picked on, pushed, shoved, hit, or threatened with harm because of your social class in the past year?

18. How often do you feel like you have been treated differently in the past year on the basis of your physical appearance (clothing, type of bag/purse you carried, and shoes)?

19. How often, in the past year, do you feel like you have had service persons (e.g., waiters/waitresses, cashiers, etc.) treat you differently when paying your bill based on what you purchased?

20. How many times have you been treated differently in the past year by your friends because of your social class?

21. How often in the past year have you had difficulty getting everything you needed for school in place because you were waiting for financial aid to provide you with your check? (e.g., you were unable to buy used books at the bookstore because by the time your financial aid check came, all of the used copies were sold out)

22. How often have you felt frustrated with all of the steps that you had to take with the financial aid office or banks in order to have access to money for school?

23. How often in the past year have you felt that your social class was easily identifiable because of steps you were required to take on campus? (e.g., having to stand in a separate line for those needing financial aid or waiting for financial aid checks or paying dues required to be involved in a sorority or fraternity on campus)?

24. How often in the past year did you feel that friends, roommates, and/or classmates ''showed off'' their ability to buy nice things, go on vacations, and drive nice cars?

25. How often in the past year did you feel that you were treated differently because you brought your lunch to school/work rather than buying it?

Appendix G

State Shame Scale (SSS; Marschall et al., 1994)

The following are some statements which may or may not describe how you are feeling right now. Please rate each statement using the 5-point scale below. Remember to rate each statement based on how you are feeling right at this moment.

1	2	3	4	5
Not feeling this way at all		Feeling this way somewhat		Feeling this way very strongly

1. I want to sink into the floor and disappear.
2. I feel small.
3. I feel like I am a bad person.
4. I feel humiliated, disgraced.
5. I feel worthless, powerless.

Appendix H

Self-Compassion Scale (SCS; Neff, 2003)

HOW I TYPICALLY ACT TOWARDS MYSELF IN DIFFICULT TIMES

Please read each statement carefully before answering. For each item, indicate how often you behave in the stated manner, using the following 1-5 scale. Please answer according to what really reflects your experience rather than what you think your experience should be.

1	2	3	4	5
Almost never				Almost always

1. I'm disapproving and judgmental about my own flaws and inadequacies.
2. When I'm feeling down I tend to obsess and fixate on everything that's wrong.
3. When things are going badly for me, I see the difficulties as part of life that everyone goes through.
4. When I think about my inadequacies, it tends to make me feel more separate and cut off from the rest of the world.
5. I try to be loving towards myself when I'm feeling emotional pain.
6. When I fail at something important to me I become consumed by feelings of inadequacy.
7. When I'm down, I remind myself that there are lots of other people in the world feeling like I am.
8. When times are really difficult, I tend to be tough on myself.
9. When something upsets me I try to keep my emotions in balance.
10. When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.
11. I'm intolerant and impatient towards those aspects of my personality I don't like.
12. When I'm going through a very hard time, I give myself the caring and tenderness I need.
13. When I'm feeling down, I tend to feel like most other people are probably happier than I am.
14. When something painful happens I try to take a balanced view of the situation.
15. I try to see my failings as part of the human condition.
16. When I see aspects of myself that I don't like, I get down on myself.
17. When I fail at something important to me I try to keep things in perspective.
18. When I'm really struggling, I tend to feel like other people must be having an easier time of it.
19. I'm kind to myself when I'm experiencing suffering.
20. When something upsets me I get carried away with my feelings.
21. I can be a bit cold-hearted towards myself when I'm experiencing suffering.
22. When I'm feeling down I try to approach my feelings with curiosity and openness.

23. I'm tolerant of my own flaws and inadequacies.

24. When something painful happens I tend to blow the incident out of proportion.

25. When I fail at something that's important to me, I tend to feel alone in my failure.

26. I try to be understanding and patient towards those aspects of my personality I don't like.

Appendix I

Mental Help-Seeking Attitudes Scale (MHSAS; Hammer et al., 2018)

For the purposes of this survey, "mental health professionals" include psychologists, psychiatrists, clinical social workers, and counselors. Likewise, "mental health concerns" include issues ranging from personal difficulties (e.g., loss of a loved one) to mental illness (e.g., anxiety, depression).

Please mark the circle that best represents your opinion. For example, if you feel that your seeking help would be extremely useless, you would mark the circle closest to "useless." If you are undecided, you would mark the "0" circle. If you feel that your seeking help would be slightly useful, you would mark the "1" circle that is closer to "useful."

If I had a mental health concern, seeking help from a mental health professional would be...

	3	2	1	0	1	2	3	
Useless	○	○	○	○	○	○	○	Useful
Important	○	○	○	○	○	○	○	Unimportant
Unhealthy	○	○	○	○	○	○	○	Healthy
Ineffective	○	○	○	○	○	○	○	Effective
Good	○	○	○	○	○	○	○	Bad
Healing	○	○	○	○	○	○	○	Hurting
Disempowering	○	○	○	○	○	○	○	Empowering
Satisfying	○	○	○	○	○	○	○	Unsatisfying
Desirable	○	○	○	○	○	○	○	Undesirable