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Internalizing the Closet: Concealment Heightens the Cognitive Distinction Between Public and Private Selves

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The present studies are the first in which social psychological methods were used to test the popular claim that the experience of concealing a stigmatized social identity leads to a “divided self.” For people with concealable stigmas, concealment in public settings makes the public–private dimension of self-expression particularly salient, leading them to organize self-relevant information along this dimension. The result is a strengthened cognitive distinction between public and private aspects of the self, what we have termed *public–private schematization*. We developed and tested a measure of the cognitive accessibility of the distinction between public and private self-schemas by measuring how quickly participants sorted trait attributes into *self-in-public* (e.g., self-at-work) and *self-in-private* (e.g., self-at-home). People with more accessible distinct public and private self-schemas should be faster at categorizing trait attributes into public- and private-self aspects than those with more integrated public and private self-schemas. Relative to people without such identities, people with concealable stigmas (Study 1a, sexual orientation; Study 1b, religiosity at a secular college), show greater public–private schematization. This schematization is linked to concealment (Study 2) and to the experimental activation of concealable versus conspicuous stigmatized identities (Study 3). Implications of distinct public and private self-schemas for psychological well-being are explored in Studies 4 and 5. Two different measures of distress—perceived social stress (Study 4) and depressive symptoms (Study 5)—provided evidence showing that the accessibility of the distinction between public and private self-schemas accounted for the association of concealment on heightened distress. Implications for research on concealment and self-structure are discussed.

Keywords: concealable stigma, self-schema, gay men, sexual orientation, self-suppression

For many gay men the break between public and private life is . . . imposed by structures of oppression. These structures define the contours of ways of being or ways of life that require a radical dissociation between one’s hidden self and one’s presentable self. (Eribon & Lucey, 2004, p. 104)

Do the efforts people make to conceal a stigmatized identity in their public lives alter the structure of their self-concepts? Scholars across

many disciplines speculate that a strong division of the world into a public sphere, where one conceals a stigmatized identity, and a private sphere, where one expresses that identity, becomes internalized in the form of an especially sharp distinction between public and private selves (Brekhus, 2003; D’Augelli & Grossman, 2001; Decena, 2011; Eribon & Lucey, 2004; Goffman, 1959; Gross, 2002). In short, a double life may lead to a divided self.

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The metaphor of a divided self is intriguing, yet quite familiar. It has been used by those coping with a gamut of stigmatized concealable identities, including people living with mental illness (Cockburn & Cockburn, 2011; Goffman, 1963), gay men in socially conservative workplaces (Johnson, 2011; McGreevey, 2006; Yoshino, 2007), female executives who conceal information about being parents (Hochschild, 2003), and so on. During the period of legalized segregation, some African Americans whose skin color was light enough to pass as Whites concealed their race in public to seek economic opportunities but lived privately as African Americans among their families. One legal scholar mused about how concealment highlighted this public–private distinction for her grandmother, a woman who passed as White:

Each evening, my grandmother, tired and worn, retraced her steps home, laid aside her mask, and reentered herself. Day in and day out she made herself invisible, then visible again . . . at a cost too precious to conceive. She left the job some years later, finding the strain too much to bear. (Harris, 1993, p. 1711)

While the description of the divided self is prevalent in both firsthand and scholarly accounts of concealment, the question of whether the divided self describes a psychological reality has not yet been answered. Furthermore, if concealment is associated with a distinctive self-concept structure, is it only of esoteric interest? Or might the divided self help explain the documented link between concealment and lower psychological well-being (DiClemente et al., 2001; Katon & Ciechanowski, 2002; Quinn & Chaudoir, 2009)? Personal accounts of concealment suggest that such a division could indeed come “at a cost too precious to conceive.” Thus, the present research builds on social psychological theories of the self to address two novel questions: (a) Does concealment of a stigmatized social identity have traceable effects on the organization and structure of the self-concept, and (b) if so, do these effects of concealment on self-concept structure explain its consequences on lower psychological well-being?

In this article, we test the proposition that concealment in public makes the public–private dimension of self-expression particularly salient for people with concealable stigmas, leading them to organize self-relevant information along this dimension. The result is a strengthened cognitive distinction between public and private aspects of the self. Indeed, this may be what scholars in other disciplines mean when they claim that concealment leads to a “divided self.” The social psychological conception of the self as a dynamic, multifaceted, situated construct (Markus & Kunda, 1986; Markus & Wurf, 1987; McGuire & McGuire, 1988; McGuire & Padawer-Singer, 1976; Ogilvie & Ashmore, 1991; Turner, 1999; Turner & Onorato, 1999) provides support and a theoretical framework for testing this hypothesis.

Internalizing the Boundary Between Public and Private Spheres of Life

The division of life into public and private spheres is a defining feature of modernity (Cosser, 1991; Giddens, 1991). Indeed, the premise that one’s life is organized around public and private social spheres is ubiquitous in the social sciences (Du Bois, 1903; Goffman, 1959; James, 1908; Mead, 1934; Rogers, 1959; Snyder, 1974) and may be fundamental to the organization of information

about the self. But how might these differentiated social spheres become internalized in the form of distinctive selves?

To understand the psychological boundary between public and private selves, we draw on the concept of *self-schemas*, knowledge structures about the self that organize and guide the processing of self-relevant information (Markus, 1977). Self-schemas form around important aspects of the self and reflect domains of enduring salience, investment, or concern (Markus, 1983; Rafaeli-Mor & Steinberg, 2002). Once formed, schemas tend to be organized hierarchically with more specific elements (e.g., feminine and masculine self-schemas) subsumed under more inclusive elements (e.g., the self; Cantor & Kihlstrom, 1987; Markus, 1977; Marsh & Shavelson, 1985). Although the self is capable of forming hierarchical structures, people strive toward the coherent integration of a unified self (Amiot, De La Sablonnière, Terry, & Smith, 2007; Donahue, Robins, Roberts, & John, 1993; Harter, 1999, 2003; Rafaeli-Mor & Steinberg, 2002).

Given this tendency toward integration, we reasoned that for people without a concealable stigmatized identity, the boundary between their public (e.g., self-at-work) and private (e.g., self-at-home) selves integrates over time. As people become comfortable in a given public context, the drive for an authentic self leads cognitive representations of the self-in-public and self-in-private to converge. Unless an event occurs that threatens one’s self-image in public (e.g., a professor writes a book that flops and thus reengages self-presentational strategies to show competence; Schlenker, 1980), or features of the public setting prevent the integration of public and private selves (e.g., long commutes to and from work; Nippert-Eng, 1996), or one contends with maladjusted personality characteristics (Donahue et al., 1993), integration of public–private selves is, over time, normative (Amiot et al., 2007; Nippert-Eng, 1996).

Possession of a Stigmatized Concealable Identity and Active Concealment Sharpens the Boundary Between Public and Private Selves

A concealable stigma is a socially marginalized characteristic not readily apparent to observers (Crocker, Major, & Steele, 1998; Frable, Platt, & Hoey, 1998; Goffman, 1959; Quinn, 2006; Quinn & Chaudoir, 2009) that is subsumed under a social identity—a part of a person’s self-concept derived from perceived membership in social groups (Tajfel & Turner, 1986; Turner, 1999). Examples of such identities include minority sexual orientation, undocumented immigration status, a history of mental illness, and marginalized political or religious beliefs.

People often express their stigmatized identities in private contexts, such as home, in which they feel safe to be themselves (Stevens, 2004). Yet, they conceal these same identities in public contexts, such as work, where they may be vulnerable to negative consequences if the stigma were to become public knowledge (Chrobot-Mason, Button, & DiClementi, 2001; Cole, 2006; Hewlett & Sumberg, 2011; Rostosky & Riggles, 2002). In the present research, *public contexts* are those where a person experiences some degree of constraint on self-expression due to a concealable stigma, while *private contexts* are those where a person experiences relative safety to express aspects of the self. We associate public settings with concealment, but this need not al-

ways be true (e.g., Decena, 2011), a point we return to in the General Discussion.

We posited that possessing a concealable stigma and actively concealing it in public should inhibit the integration of public and private selves, a phenomenon we have termed *public–private schematization*. Given that daily experiences of people with concealable stigmas often are structured by decisions about whether to conceal or disclose (Cole, 2006; Goffman, 1963; Quinn, 2006), concealment of the identity in public contexts should make the distinction between one’s public (e.g., self-at-work) and private (e.g., self-at-home) self-schemas more enduringly salient and, thus, more cognitively accessible.

Why might concealment make the cognitive distinction between public and private self-schemas more accessible? For one, people who contend with stigma are seen as lower status members of their societies; they are branded as somehow undesirable and are likely to be in positions of less social power. It is precisely in these circumstances that people suppress and conceal aspects of the self (Jones & French, 1984; London, Downey, Romero-Canyas, Rattan, & Tyson, 2012; Merton, 1938; Phillips, Rothbard, & Dumas, 2009; Vescio, Gervais, Heiphetz, & Bloodhart, 2009). This concealment entails active self-monitoring of the success of one’s efforts at concealment and vigilance for risks of self-exposure associated with public settings. As a consequence of this monitoring in public versus private contexts, the public setting, where the identity is concealed, becomes psychologically distinct from a more private setting, where expression of the stigmatized identity is less constrained.

Previous research has shown that concealment requires cognitive effort in monitoring identity expression across settings (Beals, Peplau, & Gable, 2009; Cain, 1991; Major & Gramzow, 1999; Mock, Sedlovskaya, & Purdie-Vaughns, 2010; Pachankis, 2007; Smart & Wegner, 1999). Concealment can also change the construal of actions within the setting in which it is concealed. For example, people perceive tasks as more physically burdensome when they perform them while simultaneously concealing an identity (Slepian, Masicampo, Toosi, & Ambady, 2012). Just like a sign posted on a running path can mark the transition from flat terrain to an uphill trail requiring more physical exertion, a cognitive marker, such as the distinction between public and private self-schemas, may serve to help one keep track of settings where effortful self-monitoring is and is not required.

In addition to a marker of effortful processing, we proposed that public–private schematization is a cognitive tool associated with the strategy of concealing in settings where a given identity is stigmatized. If this hypothesis is correct, then situational cues that remind people of the pressures to conceal their stigma should make that tool temporarily more accessible and bring public–private schematization on line. Examples of cues include disparaging remarks about religiosity at a secular university, office Christmas celebrations for non-Christians, and insurance policies that do not recognize benefits for same-sex partners. Such cues explicitly or implicitly remind people of risks and costs associated with disclosure. Accordingly, cues can lead to the situational, short-term activation of public–private schematization.

It is important to note that concealment involves control of information about the self; it is a different strategy from stigma management (Cook, Calcagno, Arrow, & Malle, 2011). Coping with a conspicuous stigma, such as a racial stigma, is also effortful

and also occurs in public. However, it is somewhat less effortful than concealment, in part because there is generally no choice in whether people in the public sphere will be aware of the stigma (Goffman, 1959). Thus, those with visible stigmas and those who choose to disclose a stigma that they could conceal should be less likely than those who conceal a stigmatized identity to show evidence of a marked boundary between public and private spheres of life and their self-schemas in those settings.

Assessing the relative degree to which public and private self-schemas are accessible was central to testing our hypotheses. Early self-concept research by Markus and Kunda (1986) suggested that response latency tasks are ideal for revealing how people calibrate the working self-concept in response to particular social situations (see also Bem, 1981; Markus, 1977; Markus, Crane, Bernstein, & Siladi, 1982; Markus & Nurius, 1986). Thus, our measure assesses the cognitive accessibility of the distinction between public and private self-aspects by measuring how quickly participants sort general trait attributes applicable to both settings into *self-in-public* (e.g., self-at-work) and *self-in-private* (e.g., self-at-home) categories. People with more accessible distinctions between their public and private self-schemas should be faster at categorizing trait attributes into public and private self-aspects than those with less accessible distinctions between their public and private self-schemas.

Public—Private Schematization Contributes to the Link Between Concealment and Psychological Distress

Our second aim in the present research was to explore whether a more accessible distinction between public and private selves affects psychological well-being. As a starting point, we investigated the relationship between accessibility of the public–private distinction and psychological distress, conceptualized as stress or anxiety and depressive symptoms (Hatzenbuehler, McLaughlin, & Nolen-Hoeksema, 2008; Quinn & Chaudoir, 2009; Szymanski, Kashubeck-West, & Meyer, 2008). Concealment is associated with heightened psychological distress among those who conceal their minority sexual orientation (Beals et al., 2009; Frable et al., 1998; Pachankis, 2007), HIV-positive status (Kalichman & Nachimson, 1999), mental illness (Link, Mirotznik, & Cullen, 1991), poverty (Frable et al., 1998), and history of an abortion (Major & Gramzow, 1999). However, only recently has research explored psychological processes that contribute to explaining the relation between concealing a stigmatized identity and distress (e.g., self-inhibition, Cole, 2006; emotion regulation, Hatzenbuehler et al., 2008; identity salience and cultural stigma, Quinn & Chaudoir, 2009).

We theorized that public–private schematization helps to explain decreased psychological well-being for people who conceal stigmatized identities for two reasons. First, as stated earlier, public–private schematization reflects effortful monitoring and identity suppression. Monitoring and suppression of stigmatized identities have been reliably shown to lead to psychological distress (Cole, 2006; Cook, Arrow, & Malle, 2011). This process of self-suppression is akin to self-silencing, the relational schema whereby people suppress and hide affect, attitudes, and beliefs that might result in conflict with close others, but which is also predictive of greater depression (Harper, Dickson, & Welsh, 2006; Jack & Dill, 1992) and psychopathology (Locker, Heesacker, & Baker, 2012). Thus, to the extent that a measure of the accessibility

of the public–private distinction captures variability in these effortful identity concealment processes, we expected our measure to predict psychological distress.

Alternative theories suggest distinct public and private self-schemas could be seen as a form of self-complexity that enables a person to respond adaptively to different role requirements. Self-complexity is defined as “having more self-aspects and maintaining greater distinctions among self-aspects” (Linville, 1987, p. 664). Research findings on self-complexity suggest that when people generate free descriptions of themselves in different roles that are distinct, it is less likely that domain or role-specific stress can undermine overall well-being (Linville, 1985, 1987; Renaud & McConnell, 2002). Thus, if public–private schematization is simply capturing self-complexity, it is possible that public–private schematization could buffer people against poor mental health outcomes. Testing the patterns of association between public–private schematization and distress thus allowed us to assess whether public–private schematization functions as a stressor or a buffer for people with concealable stigmas.

In sum, we hypothesized that one of the reasons concealment results in distress is that it motivates public–private schematization, which is cognitively taxing and results in distress in the public setting. Alternatively, when people with concealable stigmas experience distress in public contexts because of their stigma, they may be motivated to strengthen the public-private boundary, resulting in increased concealment behavior.

Overview of Studies

We carried out five studies to test the hypotheses and predictions we have outlined. The first hypothesis was that people with a stigmatized concealable identity would show evidence of a sharper distinction between their public and private self-schemas relative to people without such stigmas. A sharper boundary should be evident in greater accessibility (faster reaction times) when sorting attributes into self-in-public and self-in-private categories. Our second hypothesis was that among people with concealable stigmas, the distinction between their public and private selves should be stronger for people who *actively* conceal their stigma in public than it is for those who do not conceal their stigma. Our third hypothesis was that situational cues that activate the need for identity concealment should increase the accessibility of that tool and thus heighten distinctions between public and

private self-schemas. For our fourth hypothesis, we proposed that concealment of a stigmatized identity is different from management of a stigmatized conspicuous (visible) identity. Studies 1a–3 tested these hypotheses.

In Studies 4 and 5, we tested hypotheses pertaining to the implications of public–private schematization for psychological well-being. Given the strong association of concealment and distress, and given the posited association of public–private schematization with distress, our final hypothesis was that greater public–private schematization would help explain the relationship between concealment and psychological distress.

Study 1a

In Study 1a, we tested whether possessing a stigmatized concealable identity is associated with a greater accessibility in the distinction between public and private self-schemas. Minority sexual orientation is an identity often stigmatized in the workplace (Beatty & Kirby, 2006; Frable et al., 1998; Ragins, Singh, & Cornwell, 2007). Since women with a minority sexual orientation could experience stigma due to either concealable (sexual orientation) or conspicuous (gender) identities (Fitzgerald, 1993; Purdie-Vaughns & Eibach, 2008), recruitment criteria were restricted to gay men to avoid this potential confound. Gay men should be faster at categorizing trait attributes into *self-at-work* and *self-at-home* than heterosexual men, controlling for participants’ speed of response on a control task, thus suggesting that for gay men, relative to heterosexual men, separate public and private self-schemas are more readily accessible.

Method

Participants. Thirty participants were recruited at a bar frequented by gay and heterosexual individuals in a midsize city in the northeastern United States; they received \$5 for their participation. Table 1 presents the descriptive statistics for the samples for all studies in this article. All participants had work experience, reporting an average of 6.40 ($SD = 7.15$) years at their current occupation. There were no significant differences between gay and heterosexual participants in terms of their age, race, or years of work experience (all $ps \geq .05$).

Materials and procedure. Data were collected in a bar when it had special promotions for gay individuals in one part of the

Table 1

Descriptive Statistics Across All Studies, Including Mean Number of Words Excluded in Sorting Tasks

Study	N	Ethnicity						Age (years)		Mean no. of words excluded per participant (SD) for task ^a	
		A	B	C	D	E	F	Mean (SD)	Range	Public–private self	Control
1a	30	1	1	24	1	3	0	30.93 (9.92)	21–55	0.73 (1.20)	0.93 (1.57)
1b	32 ^b	3	7	19	0	3	0	19.03 (1.23)	18–24	0.63 (1.16)	0.94 (3.07)
2	44	4	0	35	4	0	1	37.86 (11.53)	22–61	0.45 (0.82)	na
3	85	85	0	0	0	0	0	35.92 (9.07)	21–62	0.47 (1.29)	0.64 (2.29)
4	38	2	1	28	5	3	0	37.53 (11.99)	22–69	0.50 (0.86)	0.84 (1.17)
5	34	4	2	22	4	2	0	40.03 (11.93)	21–70	0.41 (0.89)	0.24 (0.65)

Note. A = African/African American; B = Asian/Asian American; C = White; D = Hispanic/Latino; E = other; F = unreported; na = not applicable. ^a Words excluded per participant were those for which the participant’s response latency was more than 3 SD from the mean of that trial word. ^b Of these, 65.63% were women.

establishment. The experimenter (White heterosexual female) recruited participants near the entrance and conducted the study in a waiting area. This procedure allowed the experimenter to remain unaware of participants' sexual orientation. Participants were told that the study examined personality traits and work preferences.

Public-private schematization task. We operationalized public self as *at work* and private self as *at home* (Ragins, 2008). Participants were presented with a series of words appearing in the middle of the computer screen one at a time and asked to indicate as quickly as possible whether the word best described them "at work" or "at home" by pressing the appropriate computer key. Stimuli were presented as white words on a black background and consisted of 31 target words and 10 buffer words. On each trial, the trait attribute remained on the screen until the participant responded. After seven practice trials, study trials began. The sequence of presentation ensured that all buffer words were presented first. Within each stimulus type (i.e., buffer, target), the order of presentation was randomized for each participant. Shorter response latencies indicated greater accessibility of separate self-schemas for work and home, while longer response latencies indicated more difficulty distinguishing between work and home self-schemas, suggesting more integration.

Selection of trait attributes. Trait attributes were adapted from the Five Factor Model of Personality (e.g., optimistic; John, 1990). These traits were used because they reflect personality attributes across multiple domains and diverse individuals (Reid & Deaux, 1996). To ensure that the selected trait attributes were equally descriptive of participants, we asked a separate sample of gay ($N = 11$) and heterosexual ($N = 13$) participants to rate how well each of the 31 trait attributes, which represented the five dimensions of personality, described them on a scale ranging from 1 (*not at all*) to 7 (*extremely*). Results revealed that the only dimension more relevant to gay men ($M = 5.58$; $SD = 0.56$) than heterosexual men ($M = 5.01$; $SD = 0.55$) was "openness to experience," $t(22) = 2.50, p \leq .02$. This finding is consistent with past research on sexual orientation and personality traits (Schmitt, 2006). Excluding trait attributes on this dimension from our public-private schematization index in all subsequent analyses, however, did not change the results. All analyses included 31 trait attributes (see Appendix A).

Control task. The control task was identical to the public-private schematization task with one exception: participants were asked to indicate whether the trait attribute was "good" or "bad." The order of the two tasks was counterbalanced.

Demographics. Participants indicated their age, race, gender, sexual orientation, and work experience. We identified participants as gay or heterosexual on the basis of their self-reported sexual orientation.

Results and Discussion

Data from trials on which participants' response latencies were more than 3 standard deviations from the mean of that trial word were discarded (Devos & Banaji, 2003). The mean number of words excluded per participant was 0.73 ($SD = 1.20$) for the work-home task and 0.93 ($SD = 1.57$) for the control task. We used this same rule to clean the data across all studies in this article. For the sake of brevity, the statistics from cleaning procedures are included in Table 1. Outliers were distributed equally

across tasks and condition (all $ps > .05$). We averaged the latencies for all words from the work-home task to create an index for public-private schematization and all words from the control task to create a control measure.

Possessing a concealable stigma and public-private schematization. The measure of public-private schematization was submitted to a 2 (sexual orientation category: gay vs. heterosexual) \times 2 (work-home task order: first vs. second) analysis of covariance (ANCOVA), with response latencies on the control task as a covariate.

If possessing a concealable stigma is related to the maintenance of distinct public and private selves, then gay participants should be faster than heterosexual participants at the work-home categorization task. Results supported this prediction. Gay participants had significantly shorter response latencies ($M = 1,224.96$ ms, $SD = 286.89$) than heterosexual participants ($M = 1,673.90$ ms, $SD = 549.39$), $F(1, 25) = 6.02, p < .05, \eta_p^2 = .19$. This difference was not moderated by task order, $F < 1$. Gay ($M = 1,119.31$ ms, $SD = 344.25$) and heterosexual ($M = 1,212.34$ ms, $SD = 369.79$) participants did not differ in their response latencies on the control task, $F(1, 25) = 0.02, p \leq .89$.

Alternative explanations. It is possible that gay and heterosexual participants systematically differed in the content of their sorting judgments, and this difference explains the observed difference in response latencies. That is, gay participants may sort a given trait attribute, such as "optimistic," into the self-at-home category, while heterosexual participants sort this attribute into the self-at-work category. This was not the case. Chi-square tests performed for each of the 31 attributes, comparing gay and heterosexuals' sorting responses (work or home) showed no significant differences (all $ps \geq .05$; range from .25 to 1.00).

It is also possible that gay and heterosexual participants differed in which attributes they perceived as negative or positive and that this valence was systematically associated with work or home settings. To rule out this possibility, we computed the total number of attributes that participants classified as good or bad in the control task. For each participant, we then computed the proportion of words that they categorized as good that were also classified as "at home," as well as the proportion of words categorized as bad that were also classified as "at home." Gay and heterosexual participants did not significantly differ in the proportions of positive ($p \leq .70$) or negative ($p \leq .57$) attributes they sorted into the self-at-home category.

Another alternative explanation concerns potential differences between gay and heterosexual participants in the proportion of trait attributes they sorted into the self-at-work versus self-at-home categories. It is possible that gay participants were faster than heterosexual participants on the work-home task because they categorized more trait attributes into a single category, whereas heterosexual participants were more discriminating and, thus, slower in their judgments. This was not the case. We calculated the proportions of trait attributes that participants sorted into one particular category (e.g., a participant who sorted 15 out of 31 trait attributes into the self-at-work category received a score of .48) and averaged them for gay and heterosexual participants, respectively. Ruling out this alternative, an independent-samples t test revealed that gay ($M = 0.62, SD = 0.17$) and heterosexual ($M = 0.60, SD = 0.19$) participants did not differ in the degree of single category sorting preferences, $t(28) = 0.29, p \leq .77$.

The results provide initial support for the hypothesis of concealable stigmas and public–private schematization. Gay participants were faster than heterosexual participants at sorting trait attributes into self-at-work and self-at-home categories, a difference that remained significant after overall speed of response was controlled. Gay and heterosexual participants did not systematically differ in the content of their sorting judgments or in the mean proportion of traits they sorted into a single category. By analogy, given a task of tossing balls into red and blue bins, people who distinguish red bins from blue bins will sort faster than people who have difficulty making red–blue distinctions. Likewise, our participants were tasked with sorting trait attributes into public and private “bins”: individuals with concealable stigmas more clearly distinguished public from private “bins” than people without such stigmas. In other words, our task captured the accessibility of the distinction between public and private self-schemas.

Study 1b

Public–private schematization develops as a function of the stigma associated with risk or threat in the public context, but not in the private context. However, a social identity that is acceptable in one public context can carry heavy social and instrumental costs for people in a different public context (Crocker et al., 1998; Purdie-Vaughns, Steele, Davies, Ditlmann, & Crosby, 2008). In Study 1b, we explored this plasticity by testing whether the same cognitive boundary between public and private selves found in Study 1a among gay men could be found among religious college students, a group that is not stigmatized in society at large but that often feels devalued in elite, liberal academic settings (Quinn & Chaudoir, 2009; Smith, 2003). The secularization of American higher education (Smith, 2003) and the stereotypic association of religiosity with irrationality and superstition (Stark, 1963) may motivate students to conceal their religious identity at a secular university.¹ In Study 1b, religious and nonreligious students (determined via prescreening) completed an adapted version of the public–private schematization task. Religious students should be faster at categorizing traits into *self-at-school* and *self-at-home* than nonreligious students, even after speed of response is controlled.

Method

Participants. Participants were 17 religious and 15 nonreligious undergraduates who received credit in an introductory psychology course for participation (see Table 1 for demographics). No significant differences between religious and nonreligious participants were found based on race or gender (all $ps > .05$). Participants were identified as religious or nonreligious based on pretesting. All religious participants identified themselves as Christian.

Materials and procedure. During a mass pretesting session, all students responded to two questions from the Duke Religion Index (Koenig, Parkerson, & Meador, 1997), “How often do you attend church, synagogue, or other religious meetings?” and “How often do you spend time in private religious activities, such as prayer or meditation?” on a scale ranging from 1 (*never*) to 6 (*more than once a week*). Responses to these questions were combined ($\alpha = .77$), and participants scoring in the top and bottom

quartiles (identified as *religious* and *nonreligious*) were recruited 6 weeks after the pretesting to complete the study in the laboratory.

Materials and procedure were identical to those in Study 1a except that we operationalized public self as *at school* instead of *at work*. Private self remained as *at home*. The experimenter was unaware of participants’ religious identity throughout the study session.

Results and Discussion

Data from the schematization task was prepared as described in Study 1a (see Table 1).

Possessing a concealable stigma and public-private schematization. The measure of public–private schematization was submitted to a 2 (religious identity: religious vs. nonreligious) \times 2 (school–home task order: first vs. second) ANCOVA, with response latencies on the control task as a covariate.

As predicted, religious participants were faster ($M = 1,191.85$ ms, $SD = 350.42$) than nonreligious participants ($M = 1,558.29$ ms, $SD = 445.71$) at sorting trait attributes into self-at-school and self-at-home categories, $F(1, 27) = 5.82$, $p < .05$, $\eta_p^2 = .18$. The interaction between task order and religiosity was not significant, $F < 1$. As expected, the two groups also did not significantly differ in response latencies on the control task, $F < 1$.

Alternative explanations. Consistent with the results from Study 1a, the content of the self-at-school- and self-at-home categories did not differ between religious and nonreligious participants. Chi-square tests comparing participants’ sorting responses for each of the 31 trait attributes determined that the two groups did not differ in whether they sorted a given trait attribute into the self-at-school or self-at-home category (all $ps > .05$; range from .21 to 1.00). The two groups did not significantly differ in the proportions of positive ($p \leq .71$) and negative ($p \leq .65$) trait attributes they sorted into the self-at-home categories or in the mean proportion of trait attributes they sorted into a single category, $t(30) = -0.65$, $p \leq .52$.

The results of Study 1b suggest that an identity such as religiosity that is stigmatized in a particular context can be associated with stronger public–private schematization in that context, even though the identity is not generally stigmatized. By extending results of Study 1a to a different population, we demonstrated both the reliability of our response latency measure and the generalizability of the basic pattern of effects across two concealable stigmas. Given that students, regardless of their religiosity, perceive that religion on a secular campus is stigmatized (i.e., Footnote 1) and that religious students are more likely than nonreligious students to show a sharp distinction between public and private selves, there is likely some set of behaviors related to

¹ To test whether religious students perceived their religious identity as devalued on the college campus where Study 1b was conducted, 265 undergraduates (160 women, 105 men) were asked to respond to the following question on a scale from 1 (*not at all*) to 5 (*extremely*), “At [University Name], how likely is one to experience a discriminatory behavior, action, or event based on one’s religion?” The degree of participants’ religiosity was assessed with the Duke Religion Index (Koenig et al., 1997). A few participants did not complete the religiosity scale, which is reflected in the degrees of freedom. Results of regression analysis revealed that as students’ religiosity increased, their perceptions that religion was devalued on that campus also increased, $\beta = .30$, $t(254) = 5.05$, $p \leq .001$.

concealment that leads to public–private schematization. We investigate this question next.

Study 2

In Study 2, we sought to replicate the findings from Studies 1a and 1b and disentangle the effects of *possessing* a concealable stigma from the effects of *active concealment* on the distinction between public and private selves. This study was similar in design to Study 1a but included a measure that assessed the extent to which gay men concealed their sexual identity in public. As before, we predicted that gay participants would be faster at categorizing trait attributes into self-at-work and self-at-home categories than heterosexual participants. Unique to this study, we predicted that the more gay men reported concealing their sexual orientation in public, the shorter their response latencies would be on the public–private schematization task.

Method

Participants. Participants were 44 men recruited in public places during summer months in a resort town in the northeastern United States that has been historically accepting toward lesbian/gay/bisexual/transgender (LGBT) vacationers and caters to both LGBT and straight populations (Waitt & Markwell, 2006). This setting allowed us to generalize Study 1a findings to a gay population who varied on a range of concealment behaviors at work. Participants were paid \$5 for their participation. All participants had work experience, having worked on average 10.47 ($SD = 10.44$) years at their occupation. The two groups did not differ on age, race, or work experience (all $ps > .05$).

Materials and procedure. Materials, procedure, and experimenter were identical to those used in Study 1a, except that the control task was omitted from this study due to time constraints. The previous studies demonstrated that controlling for speed of response did not change the results reported.

Sexual identity concealment. Following the work–home task, participants completed the seven items from the Gay Identity Questionnaire (Brady & Busse, 1994), which assess the concealment of one’s gay identity in public (seven items; $\alpha = .64$; $M = 1.17$, $SD = 1.34$). All items were true-or-false statements. Four statements were worded in a pro-trait direction (e.g., “I live a homosexual lifestyle at home, while at work I do not want others to know about my lifestyle”) and three statements were worded in a counter direction (e.g., “I am openly gay around gays and heterosexuals”). Responses were coded so all higher scores indicated greater concealment. Because the experimenter was unaware of participants’ sexual orientation, both groups were directed to this measure upon completion of the work–home task. Sexual identity concealment scores were calculated only for gay participants.

Demographics. Participants completed a questionnaire in which they indicated their age, race, gender, sexual orientation, and work experience.

Results and Discussion

Data from the work–home task were prepared as in the previous studies. The mean number of words excluded per participant did

not significantly differ between gay or heterosexual participants ($p \geq .09$; see Table 1).

The public–private schematization index was submitted to an independent samples t test with sexual orientation (gay vs. heterosexual) as the independent variable. Gay participants ($M = 1,548.13$ ms, $SD = 509.03$) had significantly shorter response latencies than heterosexual participants ($M = 2,043.89$ ms, $SD = 448.99$) on the work–home task, $t(42) = -3.18$, $p \leq .01$, $\eta_p^2 = .19$.²

Active concealment and public–private schematization. We predicted that among gay men, efforts to actively conceal sexual orientation at work would be associated with stronger public–private schematization. To test this, we conducted a regression analysis for gay participants with response latencies on the work–home task as the criterion variable and scores on the sexual identity concealment measure (mean-centered) as the predictor. Of the 29 gay participants who completed the concealment scale, 11 participants scored 0, 10 participants scored 1, and eight participants scored between 2 and 5. To counteract this positive skew, we recoded all participants’ scores between 2 and 5 as 2. Without this recoding, the findings we describe in the following hold, although the slope is different. In addition, treating the three scores as distinct groups produces consistent results. As predicted, higher scores on the concealment measure were related to shorter response latencies on the work–home task, $b = -244.91$, $\beta = -.39$, $t(27) = -2.22$, $p \leq .04$.

Study 2 increased our confidence in the generalizability of results from Studies 1a and 1b in a different sample. Moreover, the results identify that beyond mere possession of a stigmatized concealable identity, active concealment is a process that leads to greater public–private schematization, supporting the hypothesis that such concealment is a cognitive marker of the boundary between social contexts and of spaces where people are motivated to conceal or express a stigmatized identity.

Study 3

While Studies 1a, 1b, and 2 are consistent with the hypothesis that stigma concealment leads to a greater distinction between public and private self-schemas, the effects could be a consequence of stigma more generally rather than of concealable stigma. We proposed that managing *visible* conspicuous identities entails less cognitive effort than does, for instance, the suppression of stigma-related traits in public contexts. In Study 3, we tested this by experimentally priming a conspicuous identity (race) or a concealable one (sexual orientation) in a population that possesses both identities: African American gay men. People with concealable stigmas manage information about the self, whereas people with visible stigmas manage the

² Chi-square tests comparing Study 2 participants’ sorting responses for each of the 31 trait attributes again confirmed that the two groups did not systematically differ in whether they sorted a given trait attribute into the self-at-work or self-at-home category (all $ps \geq .05$; range from .11 to 1.00). The two groups also did not differ in the mean proportion of trait attributes they sorted into a single category, $t(42) = -0.95$, $p = .35$.

situation in which they find themselves (Goffman, 1963; see also Cook, Cacagno, et al., 2011). Accordingly, concealing or attempting to hide a stigma in public should cause a stronger cognitive marker of the distinction between public and private selves than managing a stigma that others visibly perceive across public and private contexts.

An additional objective in Study 3 was to show that public-private schematization is not a fixed trait, but rather a self-structure activated by cues related to people's stigmatized concealable identities. Public and private schemas can be activated by stigma-relevant situational cues that explicitly or implicitly remind people of the risks of disclosure or of the contexts where it is costly to express their identity. Situational cues can activate schemas that facilitate schema-consistent information processing (e.g., Bargh & Chartrand, 2000; Higgins, 1996; Schwarz, 2007; Srull & Wyer, 1979) as well as schemas related to social identities (Sanchez-Burks, 2002) or stereotypes (Steele, 1997). Our priming manipulation tests whether activating a concealable stigma, but not a conspicuous one, brings public-private schematization on-line.

If the psychological boundary between public and private selves is dynamic, then the activation of public-private schematization should vary on the basis of the identity cued by our priming manipulation. Therefore, we expected that for African American gay participants, cuing their concealable sexual identity (i.e., gay) relative to a conspicuous racial identity (i.e., African American) or no identity at all should lead to faster work-home latencies. Based on the results of Study 2, we further expect that this distinction should emerge among African American gay participants who conceal their sexual identity a great deal (high concealers) compared with participants who conceal less (low concealers).

Method

Participants. Eighty-five African American gay men participated in the study and were paid \$5. Participants were recruited at a social event catering toward African American LGBT individuals held in a large urban city in the northeastern United States. Only men who identified as both African American and gay were part of the study. Participants had an average of 7.13 ($SD = 6.44$) years of work experience.

Materials and procedure. An experimenter (heterosexual White female) who was unaware of condition conducted the experiment in quiet locations near the social event. Participants were randomly assigned to the sexual identity prime, the racial identity prime, or the no-prime condition. In the sexual identity prime condition, participants provided open-ended responses to the following prompt: "In 2–4 sentences, please explain how (if at all) your sexual orientation impacts your daily experiences at work." The racial identity prime condition replaced the phrase *sexual orientation* with *racial identity*. In the no-prime condition, participants went straight to the next task. Next, all participants completed the public-private schematization task, followed by measures of sexual identity concealment and then by demographic questions. Participants were then debriefed and compensated for their participation.

Public-private schematization task. As in Study 1a, the control task was included, and the order of the two tasks was counterbalanced.

Sexual identity concealment. Participants completed the passing subscale of the Workplace Sexual Identity Management Measure (WSIMM; Anderson, Croteau, Chung, & DiStefano, 2001). This measure extended the assessment of concealment relative to the measure used in Study 2 by capturing specific behaviors associated with identity concealment at work (e.g., "I use pronouns of the other sex to refer to the person whom I am dating."). The WSIMM consisted of eight items on a fully anchored scale ranging from *never/seldom* to *almost always/always* (coded as 1–4; $\alpha = .69$; $M = 1.63$, $SD = 0.53$).

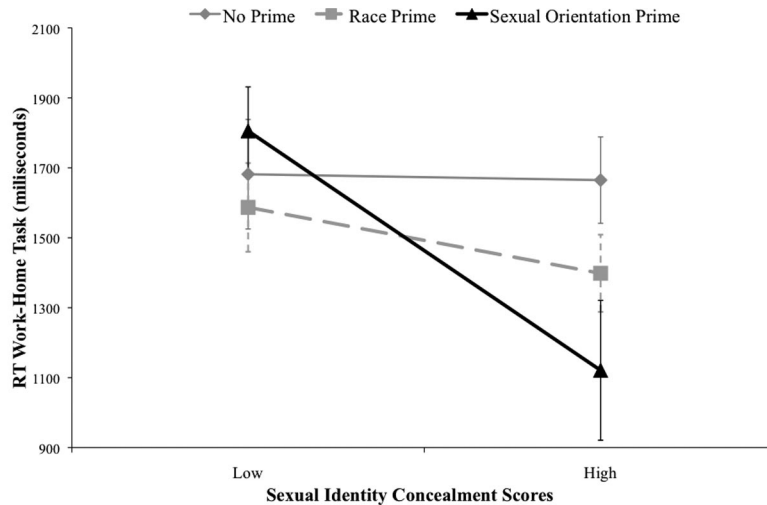
Results and Discussion

Statistics for trimming response latencies are reported in Table 1.

We hypothesized that for African American gay participants priming sexual identity should result in faster response times on the work-home task relative to priming racial identity or no identity at all. We further expected this effect to be found among African American gay participants who concealed their sexual identity a great deal (high concealers) compared with participants who concealed less (low concealers). To test this hypothesis, we regressed work-home latencies on concealment (WSIMM) scores (mean-centered), the sexual identity prime condition (coded 1 for this condition, else coded 0), the racial identity prime condition (coded 1 for this condition, else coded 0), and product terms representing interactions of concealment scores with each of these conditions. Response latencies on the control (good-bad) task (mean-centered) and task order (with one dummy variable) were included. This regression treated the no prime condition as the comparison group.

The Sexual Identity Prime \times Concealment (WSIMM) interaction was significant, $b = -630.67$, $\beta = -.23$, $t(77) = -2.07$, $p \leq .04$, but the Racial Identity Prime \times Sexual Identity Concealment (WSIMM) interaction was not, $b = -162.10$, $\beta = -.08$, $t(77) = -0.68$, $p \leq .50$.³ The association between concealing their sexual identity in the workplace and speed of response on the work-home task depended on whether participants had been reminded of their

³ Study 3 did not find a main effect of the sexual identity prime. Participants who were primed to focus on their sexual identity were not overall faster on the work-home categorization task, compared with participants who were primed to focus on their racial identity or were not primed. This nonsignificant effect is not inconsistent with our previous findings that gay men were faster than heterosexual men on the work-home categorization task for two reasons. First, our previous studies compared people with a concealable stigma to people without such stigma. Participants in the present study, however, possessed both concealable and conspicuous stigmas, which makes this sample and the samples from the previous studies incomparable. Second, in contrast to the first two studies, the present study accounted for the extent to which people actively concealed that identity. If active identity concealment, rather than simply possessing a concealable stigma, sharpens the public-private distinction, then the effect of possessing a concealable stigmatized identity should be indeed nonsignificant when individuals do not actively conceal this identity.



Simple Slopes
 No Prime: $b = -15.97, \beta = -.01, t(77) = -.09, p \leq .93$
 Race Prime: $b = -178.07, \beta = -.14, t(77) = -1.15, p \leq .26$
 Sexual Orientation Prime: $b = -646.64, \beta = -.50, t(77) = -2.63, p \leq .01$

Figure 1. Among participants in the sexual-identity-prime condition, but not in the racial-identity-prime condition or the no-prime condition, greater degree of sexual identity concealment (Workplace Sexual Identity Management Measure–Passing; Anderson, Croteau, Chung, & DiStefano, 2001) at work was associated with shorter response latencies on the work–home task, accounting for the response latencies on the control task and the order of the two tasks. Low level concealment corresponds to 1 standard deviation (SD) below the sample mean, and high level concealment corresponds to 1 SD above the sample mean. Error bars depict 1 standard error of the estimate above and below that predicted value. Values depicted are predicted values from regression models. RT = response time.

sexual identity or racial identity or had not been reminded of their identity.⁴

To examine whether participants primed for sexual identity concealment predicts public–private schematization, we conducted simple slopes analyses (Aiken & West, 1991). Dummy variables were recoded as established by Aiken and West (1991). For each condition, we tested the link between concealment and work–home latencies, with overall speed of response and task order controlled. Results indicate that only for sexual-identity-primed participants was concealment associated with faster work–home latencies.

As Figure 1 shows, for participants in the no-prime condition, concealment (WSIMM) was not associated with latencies on the work–home task, $b = -15.97, \beta = -.01, t(77) = -0.09, p \leq .93$. Similarly, for participants in the racial prime condition, concealment (WSIMM) was not associated with latencies on the work–home task, $b = -178.07, \beta = -.14, t(77) = -1.15, p \leq .26$. However, for participants in the sexual-identity-prime condition, the more they reported concealing their sexual identity at work, the faster their response latencies on the work–home task, $b = -646.64, \beta = -.50, t(77) = -2.63, p \leq .01$.

Finally, we performed contrasts focusing on participants with high concealment scores (1 SD above the mean) and low concealment scores (1 SD below the mean). Among high concealers, those primed to reflect about their sexual orientation at work were significantly faster on the work–home task than those in no-prime control condition, $b = -543.81, \beta = -.37, t(77) = -2.33, p \leq .02$. Among low concealers, no differences emerged between those in the sexual identity prime condition compared with those in the

no-prime control, $b = 123.69, \beta = .09, t(77) = 0.61, p \leq .55$. None of the other contrasts were significant among high ($ps \geq .11$) or low ($ps \geq .23$) concealers.

The results support the hypothesis that active inhibition in public of a concealable stigma marks a cognitive boundary between public and private selves. For participants who actively concealed their sexual orientation in public, cuing this concealable identity brought the public–private schema on-line, facilitating the distinction between self-at-work and self-at-home categories. However, participants whose concealable stigma was not activated (in the control and racial prime conditions) and participants who did not mark the difference between public and private spaces (low in identity concealment at work) did not make these distinctions as readily.

Study 3 demonstrates that the public–private schematization is responsive to Person \times Environment interaction. The combination of individual differences in concealment and social identity cues

⁴ People with a conspicuous stigmatized identity may still have more distinct public and private selves, compared to those without any stigmatized identities. Because participants in the present study simultaneously possessed both concealable and conspicuous stigmas, which allowed us to examine a causal relationship between identity concealment and the public–private distinction, we were unable to test this prediction. In this study, any effect of racial identity downplaying on the distinction between public and private selves may have been subsumed by sexual identity concealment. Yet, while this was not the objective of the present investigation, future research would benefit from a comparative analysis of the distinction between public and private selves for individuals with a concealable stigma, individuals with a conspicuous stigma, and the nonstigmatized.

activated public–private schematization, a fact that suggests that environmental factors can sharpen or attenuate the psychological boundary between public and private selves.

Study 4

Across three studies, we found consistent evidence that concealment of a stigmatized identity in public heightens the accessibility of the distinction between one’s public and private selves. In Studies 4 and 5, we tested whether public–private schematization contributes to explaining the well-documented link between stigmatized identity concealment and psychological distress (Beatty & Kirby, 2006; Clair, Beatty, & MacLean, 2005; Cramer, Gallant, & Langlois, 2005; Dibble & Swanson, 2000; Griffith & Hebl, 2002; Woods & Harbeck, 1992). As is consistent with other forms of self-silencing (Harper et al., 2006; Jack & Dill, 1992), the cognitive marker distinguishing public and private self-schemas may have a cost to psychological well-being. More generally, when the self is divided in some way, people experience greater distress (Donahue et al., 1993; McConnell et al., 2005).

In Study 4, we recruited employed gay men who completed the public–private schematization task, a measure of how much they concealed their sexual identity at work, and a measure of psychological distress. Psychological distress was operationalized as social stress (Cohen, Kamarck, & Mermelstein, 1983) experienced in public (i.e., work). We sought to test if a relation between public–private schematization and stress exists above and beyond the association between concealment and stress. We then tested the relations among concealment, public–private schematization, and psychological distress to determine whether public–private schematization mediates the relation between concealment and stress, while also testing other possible models that could explain the relation between these variables.

Method

Participants. Participants were 38 gay men recruited at gay lounges and restaurants in a midsize city in the northeastern United States (see Table 1). The establishments either were frequented predominantly by LGBT individuals or had special promotional nights. Participants received \$5 for their participation. All participants had work experience, reporting an average of 8.63 ($SD = 10.47$) years at their current occupation.

Materials and procedure. One experimenter (White heterosexual female) conducted the experiment in quiet areas around the gay lounges and restaurants. All procedures were similar to those described in Study 1a.

Public–private schematization task. Participants completed the work–home task and control tasks. The order of the two tasks was counterbalanced and controlled for in analyses.

Psychological distress: Work-related stress. Psychological distress was measured using the Perceived Stress Scale (PSS; Cohen et al., 1983), a widely used, well-validated measure of stress (Cohen, 1988; Linville, 1987; Riggs, Vosvick, & Stallings, 2007). It measures daily stressors rated on a fully anchored scale from *never* to *very often* (coded as 1–5; e.g., “In the last month, how often have you felt that you were unable to control important things?”). It was modified to measure stress in public by adding “at work” to each item. The final scale consisted of 10 items and only included questions related to stress at work ($\alpha = .62$; $M = 2.39$, $SD = 0.54$).

Sexual identity concealment. Participants completed the passing subscale of the WSIMM (coded as 1–4; $\alpha = .55$; $M = 1.50$, $SD = 0.46$) described in Study 3. The order in which participants completed the WSIMM was counterbalanced; half of the participants responded to this measure in the beginning of the study, while the other half completed the measure at the end of the study.

Demographics. This measure included questions about age, race, sexual orientation and years of work experience.

Results and Discussion

Statistics for trimming response latencies are reported in Table 1. Because of the age range and the probability that older participants grew up in environments more hostile toward gay men, which would motivate concealment and put them at greater risk for increased psychological distress (Hatzenbuehler, Keyes, & McLaughlin, 2011; Meyer, Dietrich, & Schwartz, 2008), we controlled for age in all analyses reported here. Unless noted, the models also controlled for the order of the computer task (work–home task order: first or second) and the order of the concealment measure (before or after computer tasks) as dummy variables.

For participants with a concealable stigmatized identity, does concealment predict greater psychological distress? To be consistent with the literature on the costs of concealment, concealment should be associated with heightened stress. To test this theory, we regressed participants’ work-related stress scores on sexual identity concealment (WSIMM), controlling for the order in which participants completed this measure (before or after computer tasks, with one dummy variable) and for age. As expected, the more participants reported concealing their sexual identity at work, the higher their levels of stress, $b = 0.51$, $\beta = .44$, $t(34) = 2.51$, $p \leq .02$.

For participants with a concealable stigmatized identity, is public–private schematization associated with psychological distress? We predicted that faster response times on the work–home task would be associated with greater psychological distress. Yet, we were particularly interested in whether this relation would hold when we accounted for the degree to which gay participants concealed their identity in public. Stepwise linear regression was used to test the unique effect of public–private schematization. The models are presented in Table 2. Introducing the work–home latencies into the model required that at

Table 2
Stepwise Regression Model of Work Stress Regressed on
Concealment (Workplace Sexual Identity Management Measure)
and Work–Home Latencies in Study 4

Predictors	ΔR^2	B	β	t	p	Partial	Part	Model R^2
Step 1								
Concealment		0.45	.39	2.18	.04	.36	.33	.25
Step 2	.12*							
Concealment		0.15	.13	0.67	.51	.12	.10	.37
Work–home latencies		–0.001	–.63	–2.41	.02	–.39	–.34	

Note. Controls: Age, order of concealment measure, control task latencies, and task order.

* $p \leq .05$.

each step we controlled for control response latencies (centered), task order (dummy coded), order of the questionnaires (before or after computer tasks, dummy coded), and age (centered). Step 1 tested if concealment (WSIMM) predicted stress with the controls. This was the case, $b = 0.45$, $\beta = .39$, $t(32) = 2.18$, $p \leq .04$. Step 2 added work-home latencies into the model, and they were significant predictors of stress, $b = -0.001$, $\beta = -.63$, $t(31) = -2.41$, $p \leq .02$.

As seen in Table 2, adding work-home latencies to the model resulted in a significant increase in variance explained, R^2 change = .12, $F(1, 31) = 5.79$, $p \leq .02$. In fact, work-home latencies explained a greater proportion of the variance for stress scores than did concealment (part coefficients: work-home latencies = $-.34$, concealment = $.10$). With work-home latencies in the model, concealment was no longer a significant predictor of stress, $b = 0.15$, $\beta = .13$, $t(31) = 0.67$, $p \leq .51$. These results support our hypothesis that the sharper the cognitive distinction between public and private selves, the more distress gay participants would report, even accounting for the effects of concealment. These results also suggest the possibility of mediation: the public-private schematization that results from participants' concealment is one of the mechanisms linking stigma concealment to heightened distress in the social context where the stigma must be concealed.

Does public-private schematization explain the association between concealment and psychological distress? Given the findings from Studies 2 and 3, we tested if concealment predicted public-private schematization with all the controls in the model. Concealment was associated with faster work-home latencies, $b = -483.924$, $\beta = -.40$, $t(32) = -3.64$, $p \leq .001$. Thus, we carried out mediation analyses as recommended by Baron and Kenny (1986), using bootstrapping techniques suited for relatively small samples (Shrout & Bolger, 2002). We tested the significance of the mediation at the 95% confidence interval (CI), examining the bias-corrected accelerated (BCa; see Efron, 1987; Shrout & Bolger, 2002) intervals after generating a bootstrap sample of 100,000 by randomly sampling observations with replacement. First, we tested if concealment leads to higher perceived social stress through public-private schematization. We then tested a model where stress predicted concealment through public-private schematization. Finally, we tested other alternatives, such as stress predicting public-private schematization with concealment as the mediator. The models are presented in detail in Figure 2.

If public-private schematization is a cognitive marker of the need for greater effortful processing in managing one's concealable stigma, then concealment should predict public-private schematization, and schematization should, in turn, be associated with heightened stress. Our first model tests this reasoning. For Model 1, concealment (WSIMM) was the initial variable (the predictor), stress the outcome, and work-home latencies the mediator. Speed of response on the work-home task reduced 66% of the total effect, making the association of concealment to stress nonsignificant. This model was significant at a 95% BCa CI [0.10, 0.61], suggesting mediation. For Model 2, we swapped the predictor and outcome variables. Stress was now the initial variable (the predictor) and concealment the outcome. Work-home latencies remained the mediator. Model 2 also showed a significant mediation pattern. Work-home

latencies reduced 68.97% of the total effect. This model was significant at the 95% BCa CI [0.05, 0.52]. Models 1 and 2 suggest that for gay men, public-private schematization mediates the relation between how much they conceal their sexual orientation at work and the psychological distress they experience at work, though the causal relation between concealment and distress is unclear.

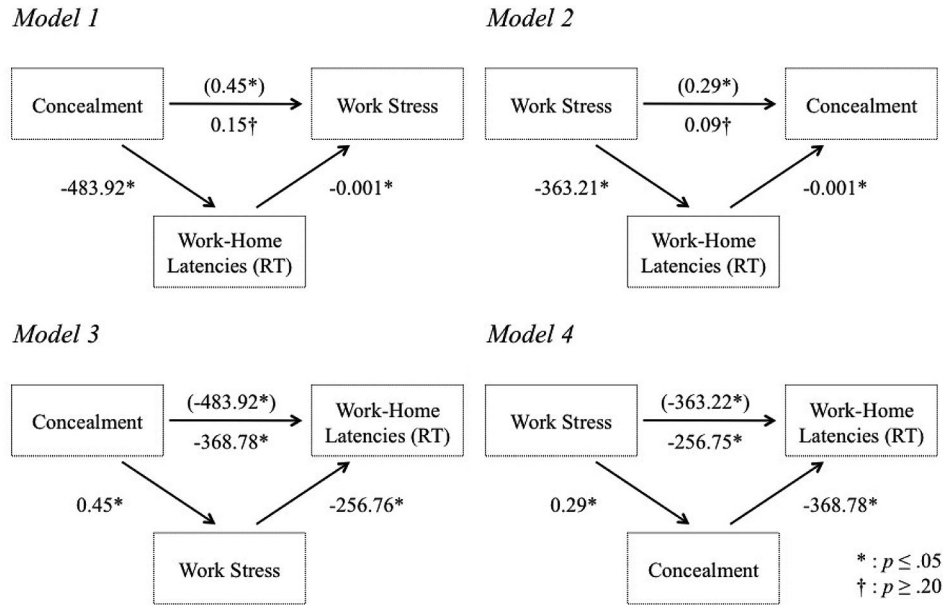
Models 3 and 4 were also significant, albeit with mediators accounting for less of the total effect than in Models 1 and 2. Models 3 and 4 are detailed in Figure 2 and in Appendix B. In these, the effect of the initial variable on the outcome was significantly reduced but remained significant after the mediator was introduced into the model. Two additional models (Models 5 and 6) were created with work-home latencies as the initial variable. However, in these models, the mediators were not significant predictors of the outcome.

To summarize, Study 4 replicated the findings of Studies 2 and 3 (greater concealment predicted greater public-private schematization) and also confirmed that the concealment-distress link documented in the literature holds among this sample. Mediation models were used to examine associations among public-private schematization, concealment, and distress. These models indicate that among gay men, public-private schematization mediates the relation between their concealment of their sexual orientation at work and the stress they experience in that context (i.e., Models 1 and 2). Although the causal relation between concealment and distress is unclear, both models are consistent with our reasoning that public-private schematization serves as a cognitive marker of processes, such as thought suppression or a deteriorated sense of identity cohesion, that are themselves predictive of distress.⁵

Study 5

Two objectives motivated our final study. Our first objective was to further test whether public-private schematization would account for the association between concealment and distress and clarify the direction of effects. One plausible reason why the paths among concealment, public-private schematization, and distress found in Study 4 are multidirectional is that concealment at work and social stress at work are linked through recursive processes and amplify each other in the same contexts: concealment in public leads individuals to monitor for signs of suspicion (Frale et al., 1998; Smart & Wegner, 1999), which, in turn, heightens perceptions of hostility and discrim-

⁵ Participants in Study 4 also completed the covering subscale of the WSIMM ($\alpha = .57$; $M = 1.51$, $SD = 0.47$). Covering behaviors are less extreme than passing behaviors and generally entail avoiding signaling one's sexual orientation (e.g., "Avoid contact with people known by others to be gay or lesbian in order to prevent suspicions that I am lesbian or gay"). We tested if covering was associated with distress and with accessibility of the distinctions between the public and private selves. With (or without) the controls described previously, covering was unrelated to work stress, $b = 0.22$, $\beta = .19$, $t(32) = 1.15$, $p \leq .26$, but it was associated with faster response times in the work-home task, $b = -362$, $\beta = -.30$, $t(31) = -2.90$, $p \leq .02$. This suggests that while both concealment tactics predict public-private compartmentalization, it is the active concealment of sexual orientation—pretending to be straight at work—that is associated with distinguishing the public and private selves in ways that result in higher distress.



Confidence Intervals for test of mediation (95% BCa)

Model	95% BCa	% of total effect explained by mediator
1	0.10, 0.61	66.00 %
2	0.05, 0.52	68.97 %
3	-343.80, -19.60	23.79 %
4	-303.20, -12.60	29.31 %

Figure 2. Mediation models for Study 4. RT = response time; BCa = bias-corrected accelerated intervals.

ination and increases one’s fear of disclosing one’s stigmatized identity (Ragins et al., 2007). This fear of disclosure creates stress, motivates greater concealment, and sharpens the distinction between public and private selves, which heightens stress, and so on. In Study 5, we used a measure of distress relevant across public and private settings: symptoms of depression. With correlational data, it is impossible to definitively determine direction of causality, but by assessing depressive symptoms, we could test our hypothesized mediation model using a measure that should be less susceptible to this recursion.

Our second objective in Study 5 was to test alternative explanations for the findings of our previous studies. First, it is possible that a discrepancy in the content of work and home selves may account for the relation between concealment and public-private schematization (Donahue et al., 1993). Previous research has linked self-concept differentiation to lower psychological well-being (Donahue et al., 1993; Showers, Abramson, & Hogan, 1998). Concealing may lead people to see themselves differently at work and at home (e.g., being reserved at work and outgoing at

home), with the resulting inconsistency producing both public-private schematization and the greater distress associated with it. Hence, in Study 5 we tested whether self-concept differentiation predicts public-private schematization. We did not expect self-concept differentiation to be associated with concealment. However, we did expect that as in our previous studies, concealment would predict public-private schematization.

A second alternative explanation concerns motivation for concealment. It is possible that in our samples of gay men, concealment might be associated with lower well-being because it is motivated by internalized homophobia, the negative feelings some gay men hold toward their sexual orientation (Herek, Cogan, Gillis, & Glunt, 1998). Perhaps in our samples, gay men who harbor negative feelings about their sexual identity are the ones who also show evidence of public-private schematization. Study 5 includes a measure of internalized homophobia to test this alternative explanation. We do not expect internalized homophobia to predict public-private schematization, although it should be associated with concealment (Herek et al., 1998).

Method

Participants. Participants were 34 gay men recruited at LGBT lounges in a different midsize city in the northeastern United States than the one in Study 4 (see Table 1). Establishments were either frequented by LGBT individuals or had special LGBT promotional nights. Participants were paid \$5. Participants reported an average of 9.11 (*SD* = 9.77) years of work experience.

Materials and procedure. One experimenter (White heterosexual woman) who was not the experimenter used in previous studies and who was unaware of the purpose of the study conducted the experiment in quiet areas in these establishments.

Public-private schematization task. Participants completed the work-home task and control tasks. The order of the two tasks was counterbalanced and controlled for in all analyses.

Psychological distress: Depressive symptoms. Following the work-home task, participants completed the Center for Epidemiological Studies-Depression Scale (CES-D; Radloff, 1977), a measure of depressive symptoms that has been used in past research linking stigma to health outcomes (Quinn & Chaudoir, 2009) and to self-structure and distress (McConnell et al., 2005). The CES-D assessed the extent to which participants felt each depressive symptom (e.g., “My sleep was restless”) during the previous week on a 4-point scale ranging from 1 (*rarely*) to 4 (*most or all of the time*; $\alpha = .91$; $M = 3.80$, $SD = 1.70$).

Sexual identity concealment. Participants completed the same measure of concealment used in Studies 3 and 4 ($M = 1.32$, $SD = 0.31$).

Self-concept differentiation. To assess the discrepancy in the content of participants’ work and home selves, we administered an adapted version of the Self-Concept Differentiation Measure (Donahue et al., 1993). Participants rated how characteristic each of 54 attributes (e.g., responsible) was for them “at work” on a scale ranging from 1 (*not at all*) to 8 (*extremely*) and how characteristic each of these same traits was for them “at home.” The order of the trait attributes and the order in which participants made the work and home ratings were randomized for each participant. To arrive at the self-concept differentiation score, we subtracted participants’ home ratings from their work ratings for each trait and averaged the absolute values of the resulting differences ($M = 1.02$, $SD = 0.41$).⁶

Internalized homophobia. Participants completed the Internalized Homophobia Scale (Martin & Dean, 1987), composed of nine items (e.g., “I have tried to stop being attracted to men in general”) on a 5-point scale ranging from 1 (*strongly disagree*) to 5 (*strongly agree*). Responses were averaged to obtain an index of internalized homophobia ($\alpha = .88$; $M = 1.51$, $SD = 0.85$).

Demographics. This measure included questions about age, race, sexual orientation, and years of work experience.

Results and Discussion

Statistics for trimming response latencies are reported in Table 1. In all analyses reported, unless noted, we controlled for age, speed of response on the control task, and task order (control task first or second).

For participants with a concealable stigmatized identity, is public-private schematization associated with psychological distress? As in Study 4, we were particularly interested in whether public-private schematization would predict symptoms of

Table 3
Stepwise Regression Model of Depressive Symptoms Regressed on Concealment (Workplace Sexual Identity Management Measure) and Work-Home Latencies in Study 5

Predictors	ΔR^2	<i>B</i>	β	<i>t</i>	<i>p</i>	Partial	Part	Model R^2
Step 1								
Concealment		0.59	.37	2.28	.03	.39	.36	.25
Step 2	.14*							
Concealment		0.25	.16	0.92	.37	.17	.13	.40
Work-home latencies		-0.001	-.57	-2.51	.02	-.43	-.37	
Step 3	.14**							
Concealment		0.34	.21	1.40	.18	.26	.18	.54
Work-home latencies		-0.001	-.45	-2.17	.04	-.39	-.28	
Self-concept differentiation		0.47	.39	2.87	.01	.48	.37	

Note. Controls: Age, control task latencies, and task order.
* $p \leq .05$. ** $p \leq .01$.

depression, even when concealment was considered. Stepwise linear regression was used; the resulting models are presented in Table 3. Introducing the work-home latencies into the model required us to control for age (mean-centered), control response latencies (centered), and task order (dummy coded) at each step. Step 1 tested if concealment (WSIMM) predicted depressive symptoms with each of these controls. This was the case, $b = 0.59$, $\beta = .37$, $t(29) = 2.28$, $p \leq .03$. Step 2 added work-home task latencies to the model, and these proved significant predictors of depressive symptoms, $b = -0.001$, $\beta = -.57$, $t(28) = -2.51$, $p \leq .02$.

As seen in Table 3, adding work-home latencies to the model resulted in a significant increase in variance explained, R^2 change = .14, $F(1, 28) = 6.98$, $p \leq .02$. In fact, work-home latencies explained a greater proportion of the variance for depressive symptom scores than did concealment (part coefficients: work-home latencies = $-.37$, concealment = $.13$). With work-home latencies in the model, concealment was no longer a significant predictor of depressive symptoms, $b = 0.25$, $\beta = .16$, $t(28) = 0.92$, $p \leq .37$. These results support our hypothesis that the greater the accessibility of the distinction between public and private selves, the more distress gay participants would report, even when the effects of concealment were taken into account.

Does public-private schematization mediate the association between concealment and psychological distress? We tested whether concealment predicted public-private schematization with all the controls in the model. Replicating Studies 2, 3, and 4, concealment was associated with faster work-home latencies, $b = -569.402$, $\beta = -.37$, $t(29) = -3.06$, $p \leq .005$. Thus, we carried out mediation analyses, using bootstrapping techniques (Shrout & Bolger, 2002) as we did in Study 4 to test if public-private schematization mediated the link between concealment and depressive symptoms. We also tested alternative models analogous to those outlined in Study 4.

For Model 1, concealment was the initial variable (the predictor), depressive symptoms the outcome, and work-home latencies

⁶ This is consistent with the scoring procedure used by Donahue et al. (1993, page 836), given that we were only comparing the self in two roles.

the mediator. As expected, work–home latencies reduced the total effect by 57.63%, making the association of concealment to depressive symptoms nonsignificant. The model was significant at the 95% BCa CI [0.06, 0.80]. This model is depicted in Figure 3. The other possible mediation models that we tested were not significant. They are detailed in Appendix B.

In sum, Study 5 replicates the findings of Studies 2 and 3 (greater concealment predicted greater public-private schematization) and Study 4 (greater public-private schematization predicted greater distress). Study 5 established that public-private schematization is one of the mechanisms that explain why people who actively conceal their stigmatized identity experience increased psychological distress more globally, not just in public, where the stigma is concealed.

Alternative hypotheses.

Does self-concept differentiation account for public-private schematization? We tested whether heightened public-private schematization might be due to greater self-concept differentiation. Our findings suggest this is not the case. We regressed concealment, work–home latencies, and depressive symptoms scores on self-concept differentiation scores, controlling for age, speed of response on the control task, and task order. Self-concept differentiation was not associated with concealment, $b = -0.02$, $\beta = -.03$, $t(29) = -1.63$, $p \leq .87$, or with public-private schematization, $b = -143.05$, $\beta = -.12$, $t(29) = -0.89$, $p \leq .38$. Consistent with past work (Donahue et al., 1993), self-concept differentiation was associated with higher levels of depressive symptoms, $b = 0.53$, $\beta = .43$, $t(29) = 2.81$, $p \leq .009$.

We retested the models linking concealment to depressive symptoms, adding self-concept differentiation as another predictor. Both self-concept differentiation and concealment predicted more symptoms of depression (self-concept differentiation: $b = 0.54$, $\beta = .44$, $t(28) = 3.18$, $p \leq .004$; concealment: $b = 0.51$, $\beta = .38$, $t(28) = 2.74$, $p \leq .01$). However, when work–home latencies were added as predictors, concealment was no longer a significant predictor, consistent with the mediation model in Figure 3, $b = 0.34$, $\beta = .21$, $t(27) = 1.40$, $p \leq .18$, but work–home latencies and self-concept differentiation remained statistically significant pre-

dictors (work–home latencies: $b = -0.001$, $\beta = -.45$, $t(27) = -2.17$, $p \leq .04$; self-concept differentiation; $b = 0.47$, $\beta = .39$, $t(27) = 2.87$, $p \leq .01$). This model is reflected in Step 3 of the regression analysis in Table 3. Adding self-concept differentiation as a predictor significantly increases the R^2 , but the effect does not weaken the relation of work–home latencies to depressive symptoms. These findings suggest that self-concept differentiation that results from people's perceptions that they have different personality traits at work and at home and public–private schematization that results from the organization of information about the self are both associated with more psychological distress. At least in our sample, only the organization/structural distinction of public and private selves was associated with concealment.

Is internalized homophobia associated with public-private schematization? A second alternative explanation for our findings is that internalized homophobia could motivate concealment and result in fragmentation of the self. Our findings suggest this is not the case. We regressed concealment, work–home latencies, self-concept differentiation, and depressive symptoms scores on internalized homophobia scores with all controls. We did not find associations between internalized homophobia and concealment, depressive symptoms, work–home task latencies, or self-concept differentiation, $p \geq .38$, ruling out the possibility that internalized homophobia accounts for public–private schematization and its deleterious psychological consequences.

In sum, the results of Study 5 are important for two reasons. First, the associations between concealment and depressive symptoms and between self-concept differentiation and depressive symptoms replicate previous research on gay men and distress (e.g., Hatzenbuehler, 2009; Herek et al., 1998; Meyer, 2003). Our samples are similar to those in other studies, bolstering our confidence that our public–private schematization effects generalize. Second, these results establish a novel link between public–private schematization and distress. Our findings are the first to provide a general framework for whether and how differentiation of identity expression across public and private settings—what we have termed *public–private schematization*—can contribute to the psychological distress that people with stigmatized concealable identities reliably report.

Model 1

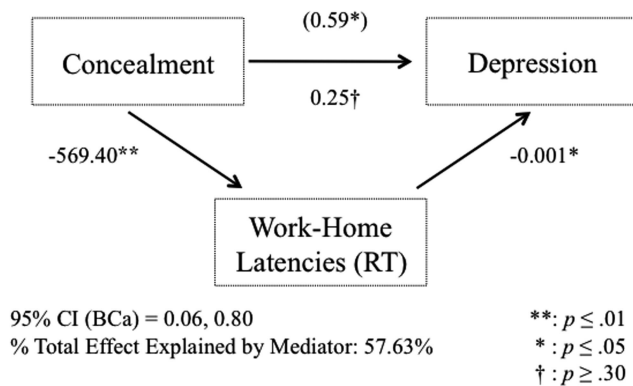


Figure 3. Mediation model (Model 1) for Study 5. Work–home latencies mediate the relation between concealment and symptoms of depression. RT = response time; CI = confidence interval; BCa = bias-corrected accelerated intervals.

General Discussion

The present studies are the first to use social psychological theory and methods to test popular claims that the experience of concealing a stigmatized social identity leads to a divided self. Studies 1a and 2 established that public–private schematization occurred among people who have stigmatized concealable social identities relative to people who do not. Studies 2–5 confirmed that among those who possessed a concealable stigma, the degree to which they reported concealing their stigma in everyday public settings (i.e., work) was associated with greater public–private schematization. Study 3 demonstrated that experimental manipulations highlighting the need for concealment (i.e., asking participants to reflect about their sexual identity at work) increased the accessibility of the distinction between public and private self-schemas. We confirmed that among only those highly motivated to conceal, priming their concealable identity (i.e., sexual orientation), but not their conspicuous identity (i.e., race), strengthened

the accessibility of the distinction between public and private self-schemas.

Building on these initial results, Studies 4 and 5 demonstrated the effect of public–private schematization on psychological distress. Using two different measures of distress—perceived social stress (Study 4) and depressive symptoms (Study 5)—among samples of employed gay men, we showed in Studies 4 and 5 that public–private schematization accounted for the association between concealment and heightened distress. Cumulatively, these studies support the hypothesis that for people with stigmatized social identities, routine concealment of these identities in public contexts is associated with a greater influence of public and private social contexts on the architecture of the self-concept, with costs for psychological well-being.

Public–Private Schematization: Evidence for Changes in Self-Concept Structure

We examined the efficiency of having study participants sort trait attributes into self-in-public and self-in-private categories to measure the cognitive accessibility of the distinction between public and private self-aspects. Schemas function as anticipatory cognitive structures that entail a readiness to search for and assimilate incoming information into schema-relevant terms (Bargh & Chartrand, 2000; Bem, 1981; Markus, 1977). This schematic processing is precisely what our response latency task was designed to capture. People with stigmatized concealable identities were faster at categorizing trait attributes into public and private self-aspects than those with less distinct public and private self-schemas (Studies 1a–2), and their speed was a function of the degree of identity concealment in public (Studies 2–5), which supports the claim that their self-concepts were organized more schematically along the public–private distinction. Consistent with research showing that people differ in the chronic accessibility of self-schemas (e.g., Bem, 1981; Oyserman & Lee, 2007) and that situational cues bring self-schemas on line (Oyserman & Lee, 2008), the degree of public–private schematization depended on whether participants were cued to think about their concealable stigma and whether they were motivated to conceal (Study 3).

A significant finding was that public–private schematization occurs independently of the content of the public-self and private self-categories. People with concealable stigmas were just as likely to sort any trait into self-in-public or self-in-private categories as individuals without concealable stigmas (Study 1). In addition, people who concealed and those who did not conceal did not differ in the degree of differentiation in the contents of their public versus private self-concepts (Study 5). These results indicate that stigma concealment influences self-concept structure, but not necessarily self-concept content.

The current research contributes to researchers' understanding of cognitive processes involved in stigma concealment and their relation to psychological well-being. Past research has focused on the effects of "acute concealment," such as rebound effects when a person is asked to suppress his or her concealable stigma (Smart & Wegner, 1999), or perspective-taking in interpersonal interactions (Frable, Blackstone, & Scherbaum, 1990). However, our research provides the first empirical evidence that chronic concealment can have long-term effects on the self.

Other Theories Relevant to Public–Private Schematization and Well-Being

Public–private schematization has potential implications for other psychological theories that explore self-concept structure and its impact on psychological functioning. Because the processes connecting public–private schematization to concealment and to well-being are likely driven by a multitude of factors, we review some of the other self-concept theories and speculate on their connections to the framework advanced in this article.

Self-complexity. Self-complexity is the degree to which people have more strongly differentiated self-aspects (Linville, 1985, 1987). Early studies supported the theory's buffering hypothesis: threats to one aspect of the self were less likely to impact other aspects of the self to the extent that a person was high in self-complexity. Therefore, researchers theorized a similar link between self-complexity and psychological adjustment and increased well-being. However, later research linked self-complexity to decreased well-being (McConnell et al., 2005; Rafaeli-Mor & Steinberg, 2002; Woolfolk, Novalany, Gara, Allen, & Polino, 1995).

Public–private schematization differs from self-complexity because it does not capture differences in content or the number of self-aspects that people believe they hold. However, to the extent that public and private selves can be regarded as broad self-aspects, our data are consistent with those that link self-complexity with decreased well-being (Rafaeli-Mor & Steinberg, 2002). In future work, the buffering hypothesis could be tested by exploring if public–private schematization moderates responses to discreet self-threats in either public or private contexts.

Self-concept differentiation. Combining theories by clinical and sociological theorists, Donahue et al. (1993) found that self-concept differentiation, the degree to which the contents of a person's self-concept vary across multiple social roles, was associated with vulnerability to depression (Donahue et al., 1993). By contrast, public–private schematization does not entail differences in the content of the self across different roles, but rather variability in the cognitive accessibility of distinctions between public and private selves that result from the need to differentially express aspects of the self associated with a stigmatized social identity. This entails responses to external pressure imposed by sociocultural values and norms that, in a sense, determine which identities carry stigma (Callahan & Vescio, 2011).

We did not expect the content of the public and private selves to be different among those who show public–private schematization. However, it is possible that in some situations or that for some stigmas, the distinction between the public and private selves produces differences in content. Such a difference in content is likely when concealment in public entails purposefully becoming "a different person." Over time, this may lead to not only public–private schematization but also heightened differences in personality characteristics in public versus private. This combination could further increase psychological distress, according to past research and to the results of Study 5.

Self-concept clarity. Defined as the degree to which self-knowledge is clearly defined, consistent, and stable across time and situations, self-concept clarity is associated with the organization of the self that is predictive of increased well-being (Campbell, 1990; Campbell, Assanand, & Paula, 2003). It is possible that greater public–private schematization could be predictive of less

self-concept clarity given that those who have a strong boundary between their public and private selves seem to be at risk for decreased well-being. On the other hand, greater awareness of the differential self-expression across public and private settings may entail a clearer sense of “the true self” that is being suppressed and therefore be associated with greater self-concept clarity. This would suggest that the mechanisms through which this public–private schematization compromise well-being are different than those that create the link between self-concept clarity and psychological distress. Preliminary data from ongoing work suggest support for the latter prediction (i.e., public–private schematization is associated with greater, not lesser, clarity of the self-concept; Purdie-Vaughns, Camp, Romero-Canyas, & Sedlovskaya, 2012).

Self-discrepancy theory. The differential expression of stigma-related aspects of the self across public and private contexts that gives rise to public–private schematization reflects an awareness of social norms that make expression of the stigma threatening in public. This idea relates to research on self-discrepancy theory (Higgins, 1987; Higgins, Bond, Klein, & Strauman, 1986; Moretti & Higgins, 1990). This line of research has shown that the degree to which one’s “actual self” differs from the “ideal self” (the self that one aspires to be) or the “ought self” (the self that one feels he or she ought to be based on duties and norms) is associated with decreased well-being.

For some people with concealable stigmas, suppression of their stigma in public contexts may be the product of perceiving a discrepancy between who they are and who they *ought* to be. Future work combining our theoretical framework with self-discrepancy theory could elucidate the costs of concealment and public–private schematization because the discrepancies of the actual self relative to the ought selves are theorized to make people vulnerable to distress.

Limitations and Issues for Future Research

It is worth noting the limitations in the present research. First, the studies that used sexual orientation as a concealable stigma were restricted to gay men. Possessing a conspicuous identity that is often devalued in work settings (being a woman) and a stigmatized, concealable identity should both motivate self-suppression (London et al., 2012; Purdie-Vaughns & Eibach, 2008). It would be difficult to tease apart the effects of the conspicuous and the concealable stigmas on self-structure across all experiments. Thus, when sampling LGBT groups, incorporating women will be essential in future studies.

A second limitation concerns the psychometric properties of the concealment measures. Our studies relied on established measures of sexual identity concealment among gay men because they have been shown to have predictive validity, particularly in studies of psychological distress (Herek et al., 1998). They also have face validity (Anderson et al., 2001). However, like past studies conducted with these measures, our research showed that the psychometric properties of these measures require improvement (Anderson et al., 2001; Szymanski et al., 2008). This evidences the need to develop better instruments to capture concealment and to experimentally manipulate concealment. In this article, this problem is balanced, we would argue, by the recognition that our results yielded consistent effects across a range of different samples.

A final limitation is that we did not explicitly measure if participants concealed in private contexts, such as at home. We measured concealment in public settings because past research has shown that concealment in public is both prevalent (Hewlett & Sumberg, 2011) and highly consequential for psychological well-being (Ragins, 2008). However, some stigmas are concealed at home; for example, revealing a minority sexual orientation to close others can produce great concern (Pachankis, Goldfried, & Ramrattan, 2008) and may be as costly as revealing that sexual identity at work. We suggest that concealment of a stigmatized identity in private contexts and expression in public places should produce effects similar to what we found in the present studies because concealment still involves the differentiation of identity expression across different social contexts. Taken together, each of these limitations provides fruitful avenues for future research.

Conclusion

At the outset of this article, we posed the question of whether the image of the divided self describes a psychological reality for people with stigmatized concealable identities. We have shown that, indeed, for people with concealable stigmas, the public and the private represent a meaningful axis that informs the architecture of their self-concept and, thus, influences their psychological functioning.

Concealment in public is ubiquitous. Although self-expression and the drive for authenticity are cornerstones of American individualism (Triandis, 1989), many legal policies, everyday practices, and cultural norms are based on the premise that the benefits of concealment outweigh the costs. Laws such as the U.S. military’s “Don’t Ask, Don’t Tell” policy (Policy Concerning Homosexuality in the Armed Services, 1993) presume that concealment at work provides protective interpersonal benefits to military personnel in the form of group cohesion; although this specific law has been repealed, its spirit pervades state laws and organizational policies that shape public life for gay and lesbian people (Badgett, Lau, Sears, & Ho, 2007; Hatzenbuehler, Keyes, & Hasin, 2009; Hewlett & Sumberg, 2011). Indeed, the pressure to conceal shapes a wide range of identities, from undocumented immigrants who face deportation should their status be discovered (Massey, Magaly, & Sánchez, 2010), to older adults who encounter employment discrimination (Berger, 2009).

Although scholars have argued that having access to a single private context, such as home, has protective benefits (Nippert-Eng, 2010), the construction of a self-concept that is segmented into private and public contexts may itself threaten a person’s well-being. It would be wrong to assume that choosing to conceal a stigmatized identity does not carry intrapsychic costs. Dostoyevsky is thought to have said, “Much unhappiness has come into the world because of . . . things left unsaid” (as cited in Zerubavel, 2006, p. 79). Drawing on the present research, we might add “. . . things left unsaid, and the social spaces where silence remains.”

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(Appendices follow)

Appendix A

Trait Attributes Adapted From the Five Factor Model of Personality

Imaginative	Adventurous
Artistic	Optimistic
Emotional	Trusting
Experimenting	Sincere
Intellectual	Altruistic
Tolerant	Compliant
Competent	Modest
Orderly	Sympathetic
Responsible	Anxious
Striving	Angry
Disciplined	Hostile
Deliberate	Moody
Warm	Self-conscious
Gregarious	Self-indulging
Assertive	Stressed
Active	

Appendix B

Explanation of Additional Mediation Analyses From Studies 4 and 5

Study 4

In Model 3, concealment (as determined by the Workplace Sexual Identity Management Measure) was the initial variable (the predictor), and work–home latencies the outcome, with stress as the mediator. Stress reduced the total effect by 23.79%. The model was significant at the 95% BCa CI [−343.8, −19.6]. For Model 4, we swapped the predictor and proposed mediator variables so that stress was the initial variable (the predictor), work–home latencies the outcome, and concealment the proposed mediator. The model was significant at the bias-corrected accelerated 95% confidence interval (95% BCa CI) [−303.2, −12.6]. Concealment reduced the total effect by 29.31%. In these two models, mediation was partial; the effect of the initial variable on the outcome was significantly reduced but remained significant after the mediator was introduced into the model. Two additional models (Models 5 and 6) were created with work–home latencies as the initial variable. However, these models showed no evidence of mediation, as the mediators were not significant predictors of the outcome with work–home latencies as the predictor.

Study 5

Study 5 tested five mediation models in addition to the model reported in the Results section. When people with concealable

stigmas experience depressive symptoms potentially because of their stigma, they may be motivated to strengthen the boundary between their public and private selves, and such strengthening may result in increased concealment behavior. We tested this reasoning in Model 2 by swapping the predictor and outcome variables. Depressive symptoms was now the initial variable (the predictor) and concealment the outcome. Work–home latencies remained the mediator. This model was not significant at the 95% BCa CI [−0.05, 0.33] or an interval higher than 90%.

We tested other possible mediation models where concealment or depressive symptoms were the initial variables, but these models were nonsignificant at the 95% BCa CI. Finally, when work–home latencies were the initial predictors of the outcome—whether that outcome was depressive symptoms or concealment—the mediator was not significantly associated with the outcome, so mediation models were not possible.

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