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Master's Thesis of Sociology

“Does This Count as  
Discrimination?”:  
An Analysis of Foreign Residents’  
Responses to Differential  
Treatment in South Korea

국내 거주 외국인의 인종 차별 경험 및 대응  
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Graduate School of Social Sciences  
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“Does This Count as  
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# Abstract

Previous studies regarding differential treatment and/or discrimination of foreigners in South Korea have demonstrated the reality and magnitude of these problems. However, prior scholarship has largely had an explanatory focus on examining how South Korean natives' attitudes about foreigners are shaped and the consequences of differential treatment on foreigners' health and psyche. Comparatively, there is a significant gap in research literature which overlooks the importance of how South Korean foreign residents react to, identify, rationalize, understand, and/or internalize experiences of perceived differential treatment. The current study is based on thematic analysis of 25 in-depth interviews of foreign residents of South Korea who have experienced at least 1 episode of perceived differential treatment during their period of residency in South Korea and is a pilot attempt in investigating foreign residents' cognitive and behavioral responses to differential treatment. The results of this study highlight the complexity of the processes in which South Korean foreign residents utilize several cognitive strategies and coping mechanisms to make sense of their experiences of differential treatment, both while actively responding to instances of differential treatment and in the aftermath of experiences of differential treatment. Results also indicate that members of different racial groups implement different strategies when processing their experiences, pointing to the existence of an interplay between responses to differential treatment and race.

**Keywords:** differential treatment, discrimination, foreign residents, cognitive appraisal, coping mechanisms

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# Table of Contents

<b>Chapter 1. Introduction.....</b>	<b>1</b>
1.1 Study Background	
1.2 Purpose of Research	
<b>Chapter 2. Literature Review.....</b>	<b>7</b>
2.1 Understanding Differential Treatment through Cognitive Appraisal	
2.2 Discrimination and Perception	
2.3 Responses to Differential Treatment as Coping Mechanisms	
<b>Chapter 3. Methods .....</b>	<b>18</b>
3.1 Procedure and Participants	
3.2 Data Collection	
3.3 Analysis	
<b>Chapter 4. Results .....</b>	<b>21</b>
4.1 Participant Demographics	
4.2 Types of Reported Differential Treatment	
4.3 The Question of Fairness: “Does This ‘Count’ as Discrimination?”	
4.4 How Foreign Residents Make Sense of Differential Treatment: Exploring the Process of Cognitive Appraisal	
4.5 The Aftermath of Cognitive Appraisal: A Culture of Silence	
4.6 The Impact of Language Ability on Foreign Residents’ Perception of Differential Treatment	
4.7 The Detrimental Effects of Differential Treatment on Foreign Residents’ Well-being: Revealing A Need for Change	
<b>Chapter 5. Discussion and Conclusion.....</b>	<b>43</b>
<b>Bibliography .....</b>	<b>50</b>
<b>Appendix .....</b>	<b>57</b>
<b>Abstract in Korean .....</b>	<b>67</b>

# Chapter 1. Introduction

## 1.1. Background

The challenge of studying racial discrimination in South Korea is an exceedingly complicated task. As South Korea has primarily existed as a homogenous nation-state, South Korean concepts of race and ethnicity, as well as laypeople's conceptions of what constitutes as racial discrimination, differ substantially from those of countries that have had longer periods of exposure to racial heterogenization, such as the United States. Attempting to contextualize racial discrimination in South Korea, contemporary scholars have largely attributed instances of racially motivated discrimination in the country as unfortunate consequences of an othering practice derived from a long history of this ethnic homogeneity. (Kyung-Koo, 2007) Though anti-discrimination laws do not currently exist in South Korea, interest groups are currently advocating for legislation that would illegalize "direct and indirect discrimination based on gender, disability, medical history, age, origin, ethnicity, race, skin color, physical condition, marital status, sexual orientation and gender identity" nationwide. (Ko, 2021) At first glance, such legislation would be advantageous to South Korean foreign residents wanting to report or take legal actions against acts they deem racially discriminatory. However, discourse surrounding racial discrimination in South Korea too often omits the discussion of a question with important political implications: What "counts" as racial discrimination in South Korea?

Central to any dilemma involving racial discrimination is the question of first knowing how exactly to define the phenomenon, as well as what forms and what degree of race-based differential treatment qualifies as discriminatory behavior. (National Research

Council, 2004) For example, is the element of “intention” necessary for an act to be deemed discriminatory? (Tran, 2022) In other words, if one is not consciously intending to treat a member of a racial group differently than another racial group, can any act that individual commits truly be classified as discrimination? What specifically distinguishes “differential treatment,” “racial discrimination,” and “racism”? The answers to these conundrums are subject to continued scholarly debate, and for good reason, as how we define racial discrimination necessarily informs how social and political actors are held accountable for their acts of differential treatment.

In the case of South Korea, ensuring the implementation of any anti-discrimination law or a promotion of an anti-discriminatory social atmosphere is complicated in practice due to the absence of an official definition of racial discrimination. Additionally, traditionally Western standards of discrimination cannot be haphazardly applied due to South Korea’s unique history of ethnic homogeneity. The combination of these two realities makes it a near-impossible task to implement concrete standards delineating what is and is not legally discriminatory.

Take the question of intention, for example. Certain cases, such as the use of racial slurs, might be easy to pinpoint as intentionally slanderous and discriminatory. Yet, what about cases that are not overtly malicious, such as public staring, making excessive comments about skin tone, or a general sense of social rejection based on one’s race? Some may make the argument that these behaviors are simply an inevitable result of South Korea’s long history of ethnic homogeneity and absent of intention cannot be justifiably classified as unethical behavior. At best, attempts to pin down a concrete definition on what does or does not constitute racial discrimination in South Korea based on purely theoretical arguments ends in a standstill.

As the issue of what constitutes racial discrimination in South Korea is highly controversial, foreigners in South Korea may have difficulty making sense of their experiences of differential treatment. In some cases, they may struggle to reconcile emotions that arise from being subject to such treatment with their uncertainty on whether they feel justified in claiming such experiences are unjust.

## 1.2. Purpose of Research

Though studies on race and discrimination are relatively scarce in Korean academic literature when compared to the body of literature available in Western countries, there has been a concerted effort by contemporary scholars to address the reality of race-based differential treatment of foreigners in South Korea and its negative emotional, somatic, and psycho-social effects on their well-being. (Lee et. al., 2016, Kim, 2021). Critical Race Theory (CRT), a framework of analyzing race as a social construct, as well as the roles of institutional power and individual affect experiences of the oppressed, (Ladson-Billings and Tate, 1995) has also been utilized in South Korean studies of race to explain why certain racial groups may receive certain forms of differential treatment than others. For example, explanations have been offered that frame the formation anti-Black sentiment in South Korea as an unfortunate outcome of intertwining Korean nationalism and White supremacy originating from the West. (Nelson, 2021) Similarly, prior research has also taken a comparative approach through the CRT framework in looking at how Koreans' understanding of race and power affects Korean natives' attitudes, and consequently their modes of treatment, towards foreigners, has noted that since South Korea itself has experienced a



meteoric economic rise relatively recently, it tends to treat foreigners “according to economic standard of their countries of origin,” and thus Westerners, whose home countries have predominantly been among the ones most economically successful, are treated better than non-Westerners. Broadly, Westerners and most notably white foreigners have been found to be typically perceived by Koreans as individuals with “superior knowledge and skills,” compared to their non-white counterparts. (Froese, 2010).

Despite increasing knowledge on the reality of the dangers of race-based differential treatment in South Korea as well as CRT-supported findings that offer explanations as to why Korean natives may treat different racial groups differently, there currently exists a dearth in research about how South Korean foreign residents react to differential treatment both *cognitively* and *behaviorally*. These internal methods of processing and responding to incidents of perceived differential treatment is critical in gaining more nuanced insight about the potentially harmful effects of differential treatment, even when such treatment cannot be formally classified as overt racial discrimination.

This research is a pilot attempt in understanding how South Korean foreign residents choose certain cognitive and behavioral strategies to make sense of instances of race-based differential treatment. It aims to offer explanations as to why foreigners may often choose certain strategies to respond to differential treatment that may be superficially seen as contradictory, such as why some may choose to keep silent about their experiences instead of speaking up, even though such experiences may cause them emotional distress. Furthermore, it attempts to gather more qualitative data on how incidents of differential treatment create long-term emotional,

affective, and behavioral impacts on foreign residents' well-being.

At its forefront, this study contributes to existing bases of knowledge about differential treatment of foreigners in South Korea by choosing as its research group foreigners who are subject to differential treatment, rather than perpetrators of acts of differential treatment. It is guided by the following research questions:

1. How do foreign residents react to, identify, rationalize, understand, and/or internalize experiences of differential treatment in South Korea?
2. How do these responses vary depending on foreign residents' racial backgrounds?

This research stresses a cross-racial approach in examining responses to differential treatment. There is not one universal "foreigner experience," as any individual's methods of interpreting and responding to differential treatment are necessarily shaped by demographic factors of which race, gender, and age make up only a few explanatory variables. Though this study chooses to focus on race as the driving factor to categorically analyze research participants' responses, it recognizes that cross-sectional demographic factors may contribute to different experiences in making sense of differential treatment even within populations belonging to the same racial group.

Having a clearer understanding of the mechanisms behind foreigners' reactions to instances of differential treatment, and how different racial groups may react differently to differential treatment, will ultimately aid in understanding how to create and implement anti-discriminatory policies and social strategies that are in foreign residents' best interests. In addition, regardless of the observed

results of this qualitative research on its own, this study hopes to serve as a springboard for future research that analyzes differential treatment of foreigners from an internal processing standpoint not only in South Korea, but in other countries abroad as well. Given that the trend of globalization stands only to rise in the future, bringing with it the prediction of greater heterogenization of traditionally homogenous cultures, it is essential that more research effort is put into investigating how individuals understand and internally make sense of incidents of differential treatment.

## Chapter 2. Literature Review

### 2.1. Understanding Differential Treatment through Cognitive Appraisal

Cognitive appraisal is the process in which individuals interpret and determine how to respond to situations based on their cognitive evaluation of its threat level and their ability to cope with it (Lazarus and Folkman, 1984). Though originally the concept was adopted as a broad psychological concept, since its conception, numerous studies in sociology and social psychology have illustrated the role of cognitive appraisal in the process of interpreting acts of differential treatment and discrimination. When faced with certain types of treatment, individuals consciously and unconsciously weigh a variety of different factors in “appraising” the treatment to determine their chosen method of response. (Outlaw, 1993, King, 2005, Patel et. al. 2014)

This research uses the framework of cognitive appraisal to analyze foreign residents’ reactions to instances of differential treatment in South Korea because many of the common types of differential treatment are difficult to pinpoint as overt acts of discrimination, such as bureaucratic differentiation between Koreans and foreigners in the enforcement of rules, (Wagner, 2009), social rejection (Lee, 2017), and the hyper-visibility of foreigners leading to experiences of social staring and excessive comments on race and skin tone. (Bento, 2020) Thus, we propose that when foreign residents undergo such experiences, they undergo a process of cognitive appraisal in which the experiences are analyzed as to whether they are unfair or discriminatory (in which cases attribution is given to

“discrimination” or “unjustified behavior” on the part of the person or persons who committed the act of differential treatment), not unfair (in which cases attribution is given to causes other than “discrimination,” such as a failure of the self to adapt or understand cultural differences), or indeterminable.

Closely related to the idea of cognitive appraisal is that of “attributional ambiguity.” Crocker and Major (1989) proposed that when disadvantaged or underrepresented social groups are faced with certain acts of positive or negative treatment from advanced or overrepresented groups, they undergo a cognitive evaluation process to determine how to make sense of the act. In this cognitive process, actors decide to whom or to what to attribute the perceived differential treatment, and whether the treatment is a discriminatory act, or rather a reflection of a shortcoming in oneself not tied to one’s race at all.

In the analysis of attributional ambiguity by Crocker and Major (1989), it was hypothesized that disadvantaged social groups use attribution to discrimination as a “self-protection” mechanism in order to preserve their self-worth. In other words, by making the cognitive judgment that an act perceived to be negative was an act of discrimination and therefore not attributable to a failure or mishap on the part of the individual, disadvantaged individuals are able to internally process the act in such that damage to their self-esteem, identity, and emotional state is limited. Crocker and Major (1989) further make the prediction that this “self-protection” mechanism is activated even when the act of perceived differential treatment is deemed as positive; in these cases, they argue, individuals have incentive to believe that the act was motivated by discrimination because doing so allows them to make the conclusion that they have made a personal triumph even when facing a discriminatory act.

Studies that have utilized the original framework of attributional ambiguity have yielded a variety of results that ultimately illustrate the complexities involved in the attribution process. For example, Ruggiero and Taylor (1995)'s study on how women perceived potentially discriminatory acts suggested that "situational ambiguity" is a critical factor that determines how disadvantaged groups interpret acts of differential treatment. In their study, women were informed that they may or may not have been discriminated against after receiving negative feedback on a task. Their results showed that when discrimination was "certain," women attributed their failure to discrimination; however, when the discrimination was "ambiguous," they were more likely to attribute their failure to personal shortcomings. (Ruggiero and Taylor, 1995) Scholars have also called to attention the role of race in the execution of attributional ambiguity; for instance, in a study that compared the responses of white and Black participants to instances of social acceptance, only Black participants were shown to exhibit "threat responses." To explain this phenomenon, researchers suggested that because Black people have historically had exposure to significantly greater levels of systemic and social prejudice and discriminatory, their cognitive experience of attributional ambiguity may involve more complexities in which individuals are hyper-sensitive to the fact that any act, positive or negative, has a significant chance of harboring racial biases. (Mendes et. al., 2008) Comparisons of cognitive responses to negative feedback of White and Latino individuals revealed similar results: Latino individuals were more likely than White individuals to perceive instances of receiving negative feedback as resultant from discrimination rather than personal failings. (Hoyt et. al., 2007) Interestingly, this study also gave evidence in support of the

hypothesis that traditionally stigmatized individuals (in this case, Latinos) were more likely than non-stigmatized individuals to have higher levels of well-being despite receiving negative feedback. According to Hoyt et. al. (2007), this finding can be explained by the self-protective function of attributional ambiguity in which stigmatized individuals are able to protect their feelings of self-worth more effectively. Attributing perceived negative feedback to discrimination takes the responsibility for their negative feedback, lessening the emotional impact on the self. It is important to note here that the stigmatization of certain racial groups does not occur in a vacuum; in other words, the stigmatization of Black and Latino individuals in the studies above is closely linked to the broader social context in which these groups have systematically been subject to discrimination in the United States, where the studies were conducted. This is not to say that racial groups are only aware of and subject to the effects of stigmatization if they are a minority group in their own country; in fact, scholars have called attention to “global racism” in which ideals of the glorification of Whiteness and the stigmatization of non-white racial groups is a globalized phenomenon. (Bhattacharyya et. al., 2016) However, it is critical to acknowledge that studying attributional ambiguity in the context of South Korea is complicated by the fact that foreign residents come from a variety of different countries each with their own socio-political background and cultures of racial hierarchy, privilege, and systemic discrimination. Foreign residents’ understanding and ways of cognitively processing episodes of differential treatment is shaped by the interplay of racial identity in the context of racial discourse in one’s country of origin, global racism, as well as other cross-sectional aspects of their own identity.

Another factor that may come into play when foreign residents

cognitively appraise their experiences of differential treatment is the idea of internal-external locus of control. Lefcourt (1991) defines locus of control as “assumed internal states that explain why certain people actively, resiliently, and willingly try to deal with difficult circumstances, while others succumb to a range of negative emotions.” Two kinds of locus of control have mainly been identified and studied by researchers: internal locus of control and external locus of control. Individuals who display a greater tendency to rely on an internal locus of control verses external tend to attribute failure or negative experiences to personal failings, whereas individuals with an external locus of control attribute similar failings to environmental causes. (Davis and Davis, 1972, Phares et. al. 1971) The model of internal-external locus of control has been actively applied in the context of perceived racial discrimination, as studies have shown that people are more likely to perceive racial discrimination when they have an external locus of control, rather than an internal locus of control. (Valentine, 1999) Furthermore, experiences of perceived racial discrimination have a higher likelihood of leading to decreased emotional well-being when individuals have an external rather than internal locus of control. (Lu and Wang, 2021)

Though external-internal locus of control may be partially a matter of personal disposition in that one’s genetics plays a role in whether one tends to have an external or internal locus of control (Mosing et. al., 2012), environmental factors may alter one’s innate predisposition towards one or the other; in particular, when one is repeatedly subject to an act or treatment and is not able to exert his or her agency to stop the act from happening, their perception of their locus of control may be altered. (Hiroto, 1974) In the context of perceived racial discrimination, some studies have given support to



the idea that prolonged exposure to systemic racism may rob individuals of their sense of an internal locus of control and adopt a state of “learned helplessness” in which a primarily external locus of control is adopted. (Fogler et. al., 2022) The concept of learned helplessness may be particularly relevant to the case of racial discrimination in South Korea because, in many cases, foreign residents are subject to prolonged periods of differential treatment, in many cases for the very first time in their lives.

## 2.2. Discrimination and Perception

Crocker and Major’s (1989) studies on attributional ambiguity on advantaged and disadvantaged social groups is intrinsically linked to sociological studies on discrimination and perception. The phenomenon of racial discrimination does not have a widely agreed-upon definition, but generally refers to “unequal treatment of persons or groups on the basis of their race or ethnicity.” (Pager and Shepherd, 2008) In practice, however, the process of identifying certain practices or behaviors as racially discriminatory is often hard to prove, both from an institutional standpoint and from a personal standpoint when individuals are subject to a particular manner of treatment. Furthermore, individuals largely have difficulties identifying when instances of perceived differential treatment equate to instances of discrimination, and this process of interpretation is highly moderated by demographic factors—most notably race.

Multiple studies have supported the contention that race majorly influences how individuals perceive instances of differential treatment, and most studies have focused on how this internalized process takes place among stigmatized individuals in Western contexts.

Studies have shown that white individuals, for example, are less likely than Black individuals to both report more instances of perceived discrimination (Williams et. al., 2008; Schmitt and Branscombe, 2002) and perceived instances of differential treatment as discriminatory (Brewster et. al., 2014; Suarez-Balcazar, 2003). Furthermore, similar trends have been identified among non-white individuals (not just Black individuals), and non-white individuals tend to be more likely than white individuals to perceive instances of discrimination in similar settings. (Jemal et. al., 2019) One study, for example, found that identification as a minority group is sufficient to produce higher levels of perceived discrimination; individuals identifying as African American, Asian American, and Hispanic American were found to experience similar levels of perceived discrimination as consumers in the marketplace. (Bennett et. al., 2015) Acknowledging that the foreign resident population in South Korea consists of both white and non-white people, both of which may be subject to differential treatment, it will be of importance to investigate how one's racial group might play a role in individual's interpretation of their experiences of differential treatment. Furthermore, studies in CRT, white studies, and ethnic studies have recently called to attention the phenomenon of "white privilege," which does not have a specified definition but generally refers to the "having greater access to power and resources than people of color [in the same situation] do." (Kendall, 2012) Some make the claim that because, historically, white people have never been systematically disadvantaged on any institutional level, any act of differential treatment aimed towards them is not discriminatory nor racist, whether malicious intention is present in the act. (Pincus, 2003) In conducting this research, both whiteness and white privilege will be noted as potential factors that might moderate how foreign residents

perceive instances of differential treatment.

Another factor that may play a part in individuals' processes of perceiving and interpreting instances of differential treatment is internalized racial oppression, otherwise referred to as internalized racism. Internalized racism or internalized racial oppression refers to the "individual inculcation of the racist stereotypes, values, images, and ideologies perpetuated by the White dominant society about one's racial group, leading to feelings of self-doubt, disgust, and disrespect for one's race and/or oneself." (Pyke, 2010) Research into this concept has largely been focused on Black populations and how Black individuals feel the "need to prove ourselves—that we are legitimate, acceptable, as good as" because of internalizing structures of national and global structures of oppression and anti-Blackness. (Watts-Jones, 2002) However, internalized racism has also been identified among other populations of ethnic minorities. For example, 2nd generation Asian Americans in the U.S. may themselves inadvertently contribute to the perpetuation of racial discrimination against Asian Americans by placing themselves within the internalized confines of racism and believe such discrimination is somehow warranted. (Trieu, 2018) From this we might hypothesize that non-white foreigners living in South Korea who have historically been oppressed in their home countries may respond to experiences of racial discrimination differently than white foreigners. They may, for example, perceive such discrimination as either warranted or not to a level of hostility that would require active protest.

Language proficiency has also been shown to play a role in individuals' experience of acculturation and perception of experiences of discrimination. One study conducted on immigrant youth in Australia, for example, found that individuals were able to better socio-culturally

and psychologically adapt to their new social environments with higher levels of English language proficiency. (Buchanan et. al., 2018) Furthermore, a link was identified between language proficiency in the form of English accent among Chinese American adolescents in the United States; individuals who were unable to fully adopt American English accents were more likely than individuals with American English accents to express that they were perceived as “perpetual foreigners,” which indicates that higher language proficiency (which encompasses both ability to speak English as well as miscellaneous factors such as accent) may cause individuals to experience less instances of perceived discrimination, or be less likely to perceive certain ambiguous experiences of differential treatment as discriminatory. (Kim et. al., 2011) There is a dearth of studies, however, linking language proficiency and perceived discrimination in non-Western contexts, so this study will attempt to examine how this phenomenon may corroborate or differentiate from these previous, Western-focused studies in the contexts of foreign residents in South Korea.

### **2.3. Responses to Differential Treatment as Coping Mechanisms**

Essential in the cognitive appraisal process is the assessment of the feasibility of coping with distressful situations. In understanding how South Korean foreign residents respond to instances of differential treatment, it is also paramount to examine how coping mechanisms traditionally play a role in mitigating individual’s emotional distress in response to perceived discrimination or differential treatment and what coping mechanisms might be available

or limited as resources to foreign residents.

Lazarus and Folkman (1984) originally offered a theoretical framework with two main kinds of coping strategies: problem-focused coping (“managing or altering the problem causing the distress”) and emotion-focused coping (“regulating emotional responses to the problem”). “Avoidant-type” coping was later introduced as an additional sub-group in the categorization of coping styles. (Endler and Parker, 1994)

Prior research into how stigmatized groups cope with instances of perceived discrimination has pointed at the critical role of social support in mitigating psychological damage and heightening people’s resilience in the face of discriminatory acts. (Foster, 2000, Wang et. al. 2018) Individuals look to friends, family members, or other trusted sources to express emotions, worries, and fears related to differential treatment. Studies conducted among foreign South Korea immigrant populations have corroborated these findings; ethnic support (referring to the availability of foreign South Korean immigrants to access communities with same-race group members) provided a moderating effect on perceived discrimination’s effect on depressive symptoms, (Ra et. al., 2019) and social support was associated with decreased levels of acculturation stress among marriage migrant women in Busan, South Korea. (Im et. al., 2013) In this context, it is potentially troubling that a great number of foreign residents in South Korea may experience a sudden decrease in the breadth of social support available to them, in particular foreigners who move to South Korea alone. Although foreign residents can maintain certain levels of social support through utilizing home-country SNS services, (Park and Noh, 2018) their capacity to receive in-person social support is limited to newly acquired friends they meet

while abroad, with whom they will tend to have lower levels of comfortability and trust in comparison to family members and longtime friends.

Willingness and/or tendency to choose certain types of coping strategies in response to differential treatment is also strongly affected by one's race. For example, Asian Americans with a strong sense of ethnic identity are more likely to choose approach-type strategies (e.g., problem solving, seeking information) when confronted with situations of perceived racial discrimination (Yoo and Lee et. al., 2005), and African Americans are particularly likely to use strategies of logical analysis and cognitive avoidance. (Sanders Thompson, 2005)

## Chapter 3. Methods

### 3.1. Procedure and Participants

Recruitment for this study was conducted through online postings on Facebook groups targeted towards foreigners living in Korea. Potential subjects interested in participating were asked to contact the researcher directly through either phone or email.

The study selection criteria limited research participation to subjects who were adults, 18 or older who have lived in South Korea for a minimum of one year and experienced at least one instance of differential treatment based on their foreigner status and/or race while residing in South Korea. Since this research is conducted in English, interested individuals were also required to have a working level of English proficiency to participate in this research.

Using this set of criteria, foreign residents were selected to participate in the study. Final participants were selected to target the following demographic distribution: white foreign residents, Hispanic or Latino foreign residents, Black foreign residents, Indonesian foreign residents, Chinese foreign residents, and Korean heritage foreign residents (made up of four Korean adoptees and one individual who was born in Korea but was raised in the United States and personally identifies as a foreigner).

The subjects were divided into six groups to analyze the differences in response to experiences of differential treatment, acknowledging that racial groups may experience different kinds of reactions to differential treatment.

### 3.2. Data Collection

Semi-structured qualitative interviews were conducted as the main method of data collection for this study. Additionally, prior to each interview, each participant filled out a pre-interview survey with seven items indicating basic demographic information as follows: racial background, gender, age, occupation, country of origin, period of residence in South Korea, and self-assessed level of Korean language proficiency.

Interviews were conducted both in-person and online using the online conference tool Zoom, depending on each research participant's preferences. At the site of each interview, research participants were first asked to fill out a consent form detailing the research process. While discussing the consent form with participants, the researcher asked for consent for audio recording the content of the interviews. In the cases that consent was not given for audio recording was, the content of the interviews was recorded through real time transcription.

After completing the consent form, participants completed the pre-interview survey. Following this, interviews were conducted using five interview questions or prompts. (Table 1) Because interviews were semi-structured, the flow of each interview varied and additional questions to the original five were asked depending on the individual responses of each participant.



Table 1. Semi-structured Interview Questions

QUESTION #	INTERVIEW QUESTION/ PROMPT
1	To the extent that you are comfortable, please describe your personal experience(s) involving differential treatment in South Korea.
2	How do you usually respond to differential treatment in South Korea? Do you: Accept it as a fact of life? Try to do something about it? (adapted from Krieger, 1990)
3	And when you have experienced differential treatment in South Korea, do you: Talk to other people about it? Keep it to yourself? (adapted from Krieger, 1990)
4	How have your experience(s) of differential treatment in South Korea affected you emotionally, or in any terms of sense of identity or self-esteem?
5	Do you think the way you are treated in South Korea as a foreigner is fair? Do you feel that you should be treated differently? Please expand upon your thoughts.

### 3.3. Analysis

After completing the interviews, the researcher transcribed the contents of each audio-recorded interview for preparation for analysis along with the live transcriptions from non-audio-recorded interviews. The interview transcripts were analyzed using thematic analysis through the text analysis platform NVivo. After creating a coding dictionary with several themes, each transcript was independently analyzed, and sub-sections of the transcripts were coded that aligned with corresponding themes. In particular, the interview transcripts were organized by racial groups to identify possible salient themes and patterns that emerge between different racial groups. The themes used in the coding dictionary were drawn from both the researcher's initial manual overview of the interview transcripts, as well as from sources in the literature review.

## Chapter 4. Results

### 4.1. Participant Demographics

The final demographic make-up of the research participants was as follows: Group 1 (five White people), Group 2 (three people of Black or African descent), Group 3 (three Hispanic or Latino people), Group 4 (five people of Chinese descent), Group 5 (four people of Southeast Asian descent), and Group 6 (five people of Korean descent. (Table 1)

The vast majority of participants fell into the age bracket of 20–29 years old, with three participants falling into the age bracket of 30–34. Furthermore, most participants identified their occupation as “student,” (n=20) with only four participants reporting a different occupation, employed (n=2) and unemployed (n=2). Participants’ reported period of residency in South Korea varied, but the most commonly reported length was one to two years. Two participants reported a significantly longer length of residency in South Korea that exceeded ten years. Results also varied in response to the question about participants’ self-assessed level of Korean language proficiency, with the average participant reporting a low to high intermediate level of proficiency.

Most interviews were conducted through the online video conference platform, Zoom (n=21), with a minority of interviews conducted in-person (n=3). The length of the interviews varied slightly, but the average interview length was 32 minutes.

Table 2. Participant Demographic Make-up

Group 1 (A-E): White

Group 2 (A-C): Hispanic or Latino

Group 3 (A-C): Black or African descent

Group 4 (A-D): Southeast Asian

Group 5 (A-E): Chinese

Group 6 (A-E): Korean descent

Subject #	Gender	Age Bracket	Occupation	Country of Origin	Period of Residence in Korea	Korean Language Proficiency
1A	Female	25-29	Student	Sweden	1-2 years	Elementary
1B	Female	20-24	Student	USA	1-2 years	Elementary
1C	Male	25-29	Student	UK	3-5 years	Low intermediate
1D	Female	20-24	Student	UK	1-2 years	Low advanced
1E	Female	25-29	Student	Italy	1-2 years	High intermediate
2A	Male	25-29	Student	Peru	5-10 years	High intermediate
2B	Female	20-24	Student	Mexico/ USA	1-2 years	Beginner
2C	Female	20-24	Student	Brazil	1-2 years	Low advanced
3A	Female	25-29	Student	Namibia/ Kenya	Over 10 years	High intermediate
3B	Female	25-29	Student	USA	5-10 years	Beginner
3C	Female	20-24	Student	Nigeria/ Spain/ USA	1-2 years	Low intermediate
4A	Female	25-29	Student	Indonesia	1-2 years	Beginner
4B	Female	20-24	Student	Indonesia	1-2 years	Low advanced
4C	Female	20-24	Student	Indonesia	1-2 years	Low intermediate
4D	Female	20-24	Student	Indonesia	1-2 years	Low advanced
5A	Female	25-29	Student	China	3-5 years	High advanced
5B	Female	20-24	Student	China	1-2 years	High advanced
5C	Male	25-29	Student	China	3-5 years	Beginner
5D	Female	20-24	Student	China	1-2 years	High advanced
5E	Female	20-24	Student	China	1-2 years	High intermediate
6A	Male	20-24	Employed	S. Korea/ USA	1-2 years	Low intermediate
6B	Female	25-29	Student	S. Korea/ USA	1-2 years	Low intermediate
6C	Female	30-34	Unemployed	S. Korea/ USA	1-2 years	Low intermediate
6D	Male	30-34	Employed	S. Korea/ USA	5-10 years	Low intermediate
6E	Female	30-34	Unemployed	S. Korea/ USA	Over 10 years	Low intermediate

## 4.2. Types of Reported Differential Treatment

Respondents reported a variety of types of differential treatment as shown below. (Table 3) It should be considered, however, that a failure to report an instance of a certain type of differential treatment does not equate to a confirmation of never experiencing said type of differential treatment. This record reflects only the types and instances of differential treatment respondents chose to share in the interview process and does not necessarily reflect all the types and instances of differential treatment respondents actually experienced.

Table 3. Types and Instances of Reported Differential Treatment

Type of Differential Treatment	White	Hispanic or Latino	Black or African descent	Indonesian	Chinese	Korean descent
Being denied service or entry at establishments	4/5	3/3	3/3	2/4	1/5	N/A
Different institutional rules for foreigners (bank account limits, paperwork, etc.)	2/5	N/A	N/A	2/4	2/5	1/5
Excessive comments on skin tone	N/A	1/3	3/3	N/A	N/A	N/A
Romantic fetishization or rejection	2/5	N/A	1/3	N/A	N/A	1/5
Verbal microaggressions	4/5	3/3	3/3	4/4	5/5	3/5
Staring in public	4/5	3/3	3/3	4/4	N/A	N/A
Unwanted physical touch	N/A	N/A	2/3	N/A	N/A	N/A
Being told not to speak a foreign language	1/5	1/3	N/A	1/4	N/A	1/5
Experiencing a sudden change in treatment after revealing country of origin	N/A	1/3	1/3	N/A	1/5	N/A
Social rejection or nonacceptance	5/5	3/3	3/3	3/4	4/5	5/5
Religious discrimination	N/A	N/A	N/A	1/4	N/A	N/A
Race-based Cyberbullying	N/A	N/A	N/A	N/A	1/5	N/A
Neglectful or rushed treatment	4/5	2/3	2/3	2/4	3/5	2/5

### 4.3. The Question of Fairness: “Does This ‘Count’ as Discrimination?”

Table 4. Distribution of Responses to Question, “Do you think the way you are treated in South Korea as a foreigner is fair?”

	White	Latino or Hispanic	Black or African descent	Indonesian	Chinese	Korean descent
Fair	0%	0%	0%	25% (1/4)	0%	0%
Unfair	0%	33% (1/3)	100% (3/3)	0%	20% (1/5)	20% (1/5)
Mixed feelings	100% (5/5)	66% (2/3)	0%	75% (3/4)	4/5 (80%)	20% (1/5)

One of the most striking findings of this study was that most interviewees had considerable difficulty answering the final interview question: “Do you think the way you are treated in South Korea as a foreigner is fair?” As a whole, 24% of participants clearly expressed that they viewed their treatment as “unfair.” Immediately after hearing the question, for example, Participant 3C answered: “Definitely. We’re treated unfairly.” This type of response was surprisingly a rare opinion, though, and 60% of participants expressed uncertainty as to how to respond.

“When I experience these kinds of situations, I think a lot about it. I was thinking maybe I mistakenly understood their intentions. Like I don’t know if this is discrimination or it’s just me not understanding [Korean people’s] culture and mindset. Like I’m trying to see the causes.”  
(Participant 4C)

Like Participant 4C’s considerations, most participants seemed to not feel comfortable making a concrete judgment call about the fairness or unfairness about their treatment. We might expect initially from the research of Crocket and Major (1989) that foreign residents

might be incentivized to attribute their experiences to discrimination as a “self-protection” mechanism. However, our findings seem to indicate that similar to Ruggiero and Taylor’s (1995) studies on gender discrimination, most foreign residents experienced “situational ambiguity” in their cognitive appraisal of their treatment and were thus unable to conclusively attribute their experiences as unfair or discriminatory. However, unlike the results of the research of Ruggiero and Taylor (1995), situational ambiguity did not necessarily make participants more likely to resort to self-blame. While explicit attribution to self-blame was present in a small minority of interviews, as Participant 5B expressed, “Maybe I’m just sensitive. I’m easily affected by other people’s words,” a much more common response was to search for explanatory factors besides discrimination and self-blame. For example, Participant 6E, who expressed mixed feelings in response to the fairness question, commented: “I feel like I shouldn’t be treated that way, but I do understand the history of Korean culture. So that’s how I’m able to accept it because I understand the culture.” In another case, Participant 1E struggled to reach a definitive answer in response to the interview question, admitting, “I cannot really say that I’ve been treated unfairly, because I haven’t been denied any of the things that I needed. And I don’t know if that’s because I’m white.” These responses from participants seemed to indicate that the cognitive appraisal process of attributing blame or responsibility to a certain actor is incredibly complex and involves the consideration of a variety of factors, such as if “culture” makes differential treatment excusable or how one’s racial background impacts the level of fairness of treatment one receives from others.

In one interview, an interviewee, Participant 5E, seemed to be even self-contradictory in answering the question of fairness, as they

first answered, “In my perspective, I think it’s definitely **unfair**. But actually, Asian societies are all like this.” However, about one minute into answering the question, they contradicted their earlier statement and said, “In my own experience, I think I was treated **fairly** in Korea. But I don’t think I fit with the society very well…Because [in] Korean society the people here, they are all the same nationality…This is why I think I can’t match very well. They are very reluctant to accept other nations.” Participant 5E’s comments seem to suggest that the situational ambiguity of differential treatment, combined with the complexity of the cognitive appraisal process featuring normalization (“actually, all Asian societies are like this”) and rationalization/logical analysis (“because…they are all the same nationality”) leads to an “error” in the process of attributional ambiguity which causes a person to shift back and forth between attributing the act to unfair treatment and to other causes.

Interestingly, among the respondents who clearly expressed that they felt their treatment as a foreigner was “unfair,” 5 out of 6 respondents either originated from a country in which they are an ethnic minority (1 Mexican American, 1 Korean American (Korean adoptee, and 1 Black American) or were Black and/or African descent. This may be attributable to a few reasons: For one, these individuals may have experienced instances that were less situationally ambiguous in their level of fairness, allowing individuals to attribute their experiences more conclusively to discrimination rather than a failure of the self or a third-party cause. Additionally, these individuals may have also been more likely to deem their treatment as unfair as their experience as a member of a stigmatized group (either as an ethnic minority in their home country or as a victim of anti-Black global racism) has made them more hyper-sensitive to instances of

potential discrimination. (Mendes et. al., 2008, Hoyt et. al., 2007)

This finding imparts important implications because it indicates a potential barrier in combating unwanted or unfair treatment against foreign residents in South Korea. If foreigners are unable to conclusively deem their experiences as “unfair,” then there is little public or societal incentive to change societal attitudes or policies aimed towards changing the way the ethnic majority in South Korea treats foreign residents. However, it critical to note here that just because foreign residents are hesitant to deem their experiences as discriminatory or unfair, does not mean that they are unaffected by such experiences nor that there is no reason to think that a shift in treatment towards foreign residents in South Korea is warranted. This topic will be explored further in section 4.6, which discusses the emotional and behavioral effects of differential treatment on foreign residents’ well-being.

#### **4.4. How Foreign Residents Make Sense of Differential Treatment: Exploring the Process of Cognitive Appraisal**

Thematic analysis also provided much insight into the intricacies involved the process of how foreign residents understand and cognitively appraise their experiences of differential treatment. Most notably, responses indicated that most foreigners employ a variety of different cognitive responses to make sense of their experiences, both during the actual experience of receiving differential treatment and as long-term patterns of thought while residing in South Korea. We explore in depth some of the commonly reported cognitive responses below:



### **Minimizes one's own experience in comparison to others.**

I have to recognize that I may not have white privilege, but still, I do have Western foreigner privilege. So not everything is bad. I don't know. To be honest sometimes I'm treated like a second-class citizen here, but what comes to my mind first is the privilege that I get."  
(Participant 2A)

Several respondents downplayed the severity, importance, and/or relevancy of their own experiences of differential treatment by comparing their own experiences to the (perceived) worse experiences of others. This kind of cognitive response bears similarities to the mechanisms of "downward comparison" proposed in past studies of victimization, in which individuals will minimize their own experiences as lesser than those of other's. (Taylor et. al., 1983)

Most of the respondents who exhibited minimization were white. In fact, 100% (5/5) of white respondents exhibited this kind of cognitive response. For example, Participant 1C commented, "Because I am white, I've never experienced the same of racial degradation that others have felt," while Participant 1A said, "A part of it is because I'm white, I don't experience as much discrimination." This is interesting because it reveals how previously proposed cognitive responses like "downward comparison" and coping mechanisms like "cognitive restructuring," both of which are useful in describing minimization as found in the interviews, interact with the concept of white guilt. We might expect that white respondents would tend to react very strongly to their experiences of differential treatment because, as many white respondents said, it was their first time experiencing any kind of discrimination or racism in South Korea and were initially shocked at the way they were treated. However, this was not the case. White

respondents all expressed recognition of their white privilege as a mitigating factor in their comparative experiences of differential treatment. This could also be a partial explanation as to why 100% of white participants reported “mixed feelings” in the question about fairness; their recognition of their privilege in the context of global racism factors into their cognitive appraisal of their experiences of differential treatment.

What was particularly surprising, however, was that this minimization through comparison was also present in several accounts of non-white respondents. 100% (3/3) of Hispanic or Latino respondents also exhibited minimization through comparison, as Participant 2A said: “I have to recognize that I may not have white privilege, but still, I do have Western foreigner privilege. So not everything is bad. I don’t know. To be honest sometimes I’m treated like a second-class citizen here, but what comes to my mind first is the privilege that I get.” The remaining two Hispanic or Latino respondents both used the term “white-passing” to explain why their experience of differential treatment was comparatively less severe. However, even non-white, non-white-passing respondents minimized their experiences. Participant 3B, who is Black American, said, “Me having these things said to me, it’s not as deep as someone who’s maybe half-Korean, or someone who’s darker than me.” This suggests that while white guilt and recognition of white privilege does play a part in the machinations of minimization through comparison, race on its own is not the only factor at play. Downplaying one’s own experience thus presents itself as more of a general cognitive response in which recognition of race and color plays but one role.

## Rationalization.

“I understand that you need to not place Western expectations on Korea in all ways. You can’t expect them to perfectly align with Western countries being democratic nations. I don’t judge Korea, and I understand it’s just a part of the development process.” (Participant 1C)

In addition to minimization through comparison, rationalization was one of the most reported types of cognitive responses to differential treatment. Within these types of responses, the phrase “I understand” was used incredibly often, as illustrated by the following responses:

“It’s okay because **I understand** that everyone cannot accept differences.” (Participant 4D)

“Having foreigners in the country is still ten to twenty years new, and also a lot of the population is still a lot older. So that’s why when old people stare at me, with anything new, **I understand** there’s a sense of distrust.” (Participant 1B)

“**I understand**. It’s a very homogeneous country, and people are not used to faces like mine, so I don’t mind [differential treatment] these days...I think, ‘They don’t have any prejudice. Maybe they’re just not used to it.’ It comes not from a place of meanness. It’s not because they’re bad. It’s just because they’re not used to it.” (Participant 2A)

This type of response indicates that one of the tools foreign residents use to make sense of their experiences of differential treatment is through factoring in elements such as South Korea’s historical background, culture, and personality differences to rationalize why they may be treated differently than South Korean natives. What is unique about this type of cognitive response that differentiates it from previously studied types of responses like logical analysis, however, is that it also seems to feature an element of empathy as indicated by the common use of the phrase “I understand.”

## Normalization.

“I think it’s kind of natural, because similar things happen in the States and also in China when you are defined as a foreigner.” (Participant 5D)

Respondents also often expressed responses that indicate their normalization of differential treatment in South Korea. These types of responses tended to be one of two types. The first is normalization through comparison to past experiences of racial discrimination, as indicated by Participant 5D above. These types of responses tended to paint instances of differential treatment in South Korea as “normal” or “natural” and refer to their experiences or knowledge of mistreatment or differential treatment in other countries in their responses. A response from Participant 3A also is indicative of this type of normalization: “I got of exposure [to differential treatment] from a young age, and I quickly understood that not everyone sees us as equals, and that’s how the world works.”

The second type of normalization was normalization after prolonged exposure to differential treatment in South Korea. In this type of normalization, participants responded initial feelings of emotional distress upon being subject to differential treatment in South Korea, but “getting used” to differential treatment after a certain, prolonged period of residency in the country. For example, Participant 2A, whose period of residency in Korea exceeded ten years, expressed that although his “first years [living in South Korea] were a little bit harsh,” he was able to cope with these experiences by normalizing the way he was treated: “Nowadays, I’m okay because I made peace with myself, so I’m fine...I learned to deal with it. For me it’s very normalized.” (Participant 2A)

### **Puts responsibility on self as representative of home country.**

“I’m trying to break the stereotypes. My professor said I have to work harder to prove myself… We have to be the ones to prove that we can actually do a lot of great things.” (Participant 4C)

This type of response was not very common, but it is included in this review because it was expressed by multiple respondents, two Indonesian students and one Chinese student and is reminiscent of the mechanism of internalized racism discussed in previous studies. (Watts-Jones, 2002) Parallel to how Participant 4C expressed that the responsibility was on members of her home country to “break the stereotypes” about Southeast Asians, Participant 4D expressed a similar sentiment: “I bring the Indonesian name, so I don’t want to make a bad name for Indonesia.” In addition, Participant 5D, a Chinese student, said, “I try to do my best [to] not leave so-called bad image about people from China, but the stereotypes are so hard to change.” Previously, studies on internalized racism have mostly been excluded to minority studies in the United States and other Western nations. However, one of the key aspects of internalized racism of arguing that there is a responsibility on the stigmatized party to “prove” themselves to the majority party, which is a sentiment shared by the three respondents who put responsibility on themselves to undo negative stereotypes. This indicates the possibility that a phenomenon with similarities to internalized racism may be at play in South Korea in which members of nations that are supposedly viewed as unfavorable in the eyes of South Koreans feel the necessity to take responsibility for undoing negative stereotypes associated with their country.

## Alteration of perception of identity.

When I first got here, I was a lot more interested in trying to learn about Korea and being Korean, but I've embraced my Gyopo-ness. Yeah, I'm Korean, but because of these instances of discrimination it's made me not want to identify as Korean. (Participant 6D)

Findings also point to the fact that some foreign residents, particularly those with ethnic ties to South Korea, make use of alteration of perception of identity to make sense of and cope with their experiences of differential treatment. "Alteration of perception of identity" here refers to the process of changing the way one thinks about one's own ethnic identity to lessen the negative emotional impact of experiences of differential treatment. For example, Participant 6D admitted that while he did try to identify more with "being Korean" when he first came to the country, he now identifies more with being "Gyopo," which is the Korean term for "overseas Korean." Participant 6A, a Korean adoptee, said: "Nowadays, [Korea]'s just another country that I'm living in. I have no feelings, no emotions about Korea. It's just a place." In the same vein, Participant 6B (also a Korean adoptee) said, "I've always felt like I don't really identify as Korean...If anything [differential treatment] is confirming my identity as American. I didn't realize how American I was until I came here and being discriminated against magnifies that because you're reminded that you're a foreigner." The mechanism of alteration of identity was only identified among respondents with Korean heritage. This finding suggests that experiencing differential treatment may cause foreign residents with ethnic ties to South Korea may choose to change the way they think about their ethnic identity or distance themselves from identifying as "Korean" to manage their levels of emotional distress from being treated negatively or

differently by members of their motherland.

## 4.5. The Aftermath of Cognitive Appraisal: A Culture of Silence

Table 5. Distribution of Responses to Question, “How do you usually respond to differential treatment in South Korea? Do you: Accept it as a fact of life? Try to do something about it?”

	White	Latino or Hispanic	Black or African descent	Indonesian	Chinese	Korean descent
Speaks up or responds directly	0%	0%	0%	0%	20% (1/5)	0%
Speaks up or responds indirectly	0%	0%	0%	0%	0%	0%
Does not respond externally	100% (5/5)	100% (3/3)	33% (1/3)	75% (3/4)	60% (3/5)	60% (3/5)
Situation-dependent	0%	0%	66% (2/3)	25% (1/4)	20% (1/5)	40% (2/5)

What are the practical consequences of a cognitive appraisal process in which most respondents are unable to label their experiences as “discriminatory” or “unfair”? This research lends support to the idea that because foreign residents in South Korea cannot cognitively conclude that their experiences are unjust, they are unable to behaviorally assert themselves or demand better or different treatment. This is illustrated by the finding that in response to being asked the question, “How do you usually respond to differential treatment in South Korea? Do you: Accept it as a fact of life? Try to do something about it?” 72% of respondents responded that they do

not externally respond to the differential treatment and “just keep quiet.” (Participant 3B) Examples of responses to this question are shown below:

“I’ve accepted the fact that I’m always going to be stared at or treated like I’m stupid. It’s not something I’m happy about, but it’s not something I’m going to respond to.” (Participant 1B)

“I just accept it, because I didn’t know how to tell them it wasn’t my fault, [and I] don’t know the standard of how things work.”  
(Participant 4B)

“I guess I accept [differential treatment] most times. Because it’s not really a racial problem from my point of view, just a cultural problem. So, I don’t think there’s anything anyone can do about this.”  
(Participant 5C)

Even in the 24% of cases in which respondents indicated that their responses to differential treatment are variable depending on the specific situation, a few participants expressed a decreasing inclination over time to speak up or respond to differential treatment either directly or indirectly because their previous instances of “speaking up” did not do anything to change the way they were treated. For example, Participant 4D and Participant 6D reported instances of reporting their experiences of differential treatments to institutions like human rights centers, but said they felt discouraged because there was “no follow-up” to address the issue in either circumstance.

This finding has tremendous importance because it indicates that even if foreign residents do feel unhappy or are negatively affected by their differential treatment in South Korea, because they tend to not respond to the situation either directly or indirectly, these dissatisfactions will not be made aware to South Korean society at large.

Furthermore, the silence regarding discourse about differential



treatment is exacerbated by the factor of white guilt/ recognition of white privilege. Participant 1E shared, “I wouldn’t speak about my experience of discrimination to people who experience a great deal more of discrimination than me. Because that would just sound like, ‘What are you even complaining about?’” This response indicates that in addition to the perpetuation of a culture of silence between foreign residents and Korean natives, there also exists a culture of silence between white and non-white racial groups of foreigners because white foreigners are uncomfortable sharing their dissatisfactions to people of color as to appear unaware of their white privilege.

#### **4.6. The Impact of Language Ability on Foreign Residents’ Perception of Differential Treatment**

Responses also indicated that self-assessed language ability had an impact on foreign residents’ interpretations of their experiences of differential treatment. However, differentiating from previous acculturation studies which showed a positive correlation with language proficiency and acculturation, there was minimal correlation found between respondents’ self-assessed language proficiency and their interpretation of their experiences as discriminatory and/or their tendency to use certain cognitive responses in the face of instances of differential treatment.

Notably, respondents with self-assessments on the lower end of the language proficiency scale (from elementary to high advanced) often actively acknowledged their limited language capacities as factors that may affect their experiences of differential treatment. One common pattern identified among these respondents was a tendency to use their limited Korean language skills as explanatory factors to justify their treatment as potentially non-discriminatory. For example,

Participant 4A, who identified as having beginner level Korean proficiency, remarked: “At some point I also feel that because I cannot speak Korean, so problems happen. It’s kind of like miscommunication.” Alternatively, other respondents with lower levels of Korean proficiency referred to their language limitation as a mitigating factor in interpreting their experiences as either fair or unfair. In other words, these respondents felt unable to accurately assess whether their treatment in Korea was actively discriminatory or simply a result of communication problems. For instance, Participant 1A, who is a self-assessed elementary Korean language speaker, commented: “I definitely experience less easy customer service... I always [feel like] people feel like they try to get it over with [or] get it done with, but I don’t know if that’s because of language [barriers] or the unwillingness to help.”

Respondents with higher levels of Korean language proficiency and respondents who increased their ability to speak Korean during their residency period, on the other hand, were more likely to acknowledge that language proficiency was *not* a factor that contributed to their receiving certain kinds of differential treatment. Participant 5D, for example, who reported a high advanced level of Korean language proficiency, said: “I really love Korean culture and I study really hard to speak Korean well, and I try to make friends with Korean people, but some of them do not do the same to me. They’re just not friendly to me so that makes me feel hurt.” This participant remarked that their fluency in Korean did little to prevent their experiencing of differential treatment—specifically social rejection—and so they did not use language proficiency to justify their treatment. However, these respondents were no more likely than respondents with lower levels of Korean proficiency to report their treatment in

South Korea as either fair or unfair; simply, language proficiency was not a factor they considered when evaluating the fairness of their experiences. A small minority of respondents, all of whom reported an increase of Korean language ability over their time of residency in Korea, however, expressed that they were able to identify instances of differential treatment as discriminatory because they did not experience a change in the way they were treated before and after they improved their ability to speak Korean. One of these individuals, Participant 2C, said that they initially came to Korea with no language ability at all, and at this time they tended to justify their experiences of differential treatment as simple miscommunications; however, even after they studied hard and eventually achieved a self-assessed low intermediate level of Korean language proficiency, they were still treated the same way. Participant 2C expressed disappointment and disillusionment from this observation and said: “You will never feel like you belong. You only belong if you look like them and grew up here. It doesn’t matter if you speak Korean fluently, or if you know Korean history more than them. It really doesn’t matter.”

Overall, these findings suggest that in the case of foreign residents in South Korea, language proficiency itself does not make an individual more or less likely to report their experiences of differential treatment as either fair or unfair, though individuals with higher reported levels of Korean proficiency may be more likely to not consider language proficiency in their appraisals of their experiences. However, in certain instances, such as in the cases of individuals who improve their language abilities while residing in Korea yet experience no change in their differential treatment, residents may be more willing to conclusively assess that their experiences are unfair and/or an example of discriminatory treatment.

## 4.7. The Detrimental Effects of Differential Treatment on Foreign Residents' Well-being: Revealing A Need for Change

It would be erroneous to conclude that because foreign residents do not tend to deem their experiences of differential treatment nor speak up about their experiences, differential treatment is unharmful. As discussed previously, these patterns are indicative of a difficulty in the process of cognitive appraisal to deem differential treatment unfair or discriminatory, rather than a satisfaction with differential treatment. This research reveals that differential treatment is in fact, incredibly harmful to foreign residents' well-being. In fact, 100% of respondents (25/25) reported at least one negative emotional and/or behavioral effect resulting from differential treatment. We explore some of these negative effects below:

### **Depression.**

"It was hard. It was so painful. At the time of [incident of differential treatment], I couldn't eat well, I couldn't sleep well." (Participant 4D)

Several respondents reported feeling "hurt" or "sad" in response to instances of differential treatment, and in two cases respondents expressed that the incident(s) of differential treatment caused them to spiral into depression. Participant 5A, for example, expressed that their continued exposure to differential treatment caused them to develop depression which lasted for "one and a half years," from which they were only able to recover from by leaving the country entirely for a period of time.

### **Feelings of Isolation or Alienation.**

“In the beginning, I really tried my best to speak Korean, and approach everyone in Korean. So, I really tried, but they don’t care. It makes me not want to try to fit in, because I already accepted the societal rejection.” (Participant 2C)

Respondents also expressed that their experiences led to feelings of isolation and/or alienation. These feelings were especially prominent among respondents whose length of stay in South Korea was 2 years or longer (e.g., “It sometimes makes me feel a little bit sad that I’m still considered an outsider even though it’s my fourth year here.” (Participant 5C)) and participants who expressed their efforts to integrate into Korean culture. (e.g., “Coming here, I always knew I’d feel like an outsider, but when I’m discriminated against, it’s just an unpleasant reminder of how different you are and how unwanted you are by certain institutions, especially when you’re putting in efforts to be a good foreigner here.” (Participant 6B))

### **Decreased Self-Esteem.**

“I realized that before leaving my home country, I was at a point that I was feeling very self-confident after a long time...That all crumbled down here.” (Participant 1E)

Another common negative emotional effect of differential treatment was decreased self-esteem or self-worth. Respondents reported both a general feeling of decreased self-esteem (such as in Participant 1E’s response above), and in more specific ways. For example, four respondents expressed that because of their experiences of differential treatment, they felt less willing to speak Korean because of decreased levels of confidence in their language ability. For example, participant 4C shared: “[Differential treatment] impacted me in terms of my language learning, because I feel dumb

sometimes. I don't feel comfortable speaking Korean. I don't know whether it's because the culture is so fast, but I feel a bit pressured. It's hard to build my self-confidence when the natives judge you that way."

### **Avoidance.**

"I learned to be very protective of myself. I don't like experiencing those kinds of things, so I just stay with my group and stay in safe places. I avoid certain places. And I know that's bad because I'm not completely free to do what I want." (Participant 2A)

In addition to the effects above which may be categorized as emotional negative effects, prolonged exposure to differential treatment also made foreign residents vulnerable to negative changes in behavioral patterns. For example, five respondents said that they purposefully avoided certain situations or locations to avoid being subject to differential treatment.

### **Behavior Monitoring or Alteration.**

In Daejeon or Seoul underground malls, everyone's eyes are watching you all the way through...And it's like 'Why are your eyes on me? Why are you suddenly behind me?' So, I kind of stopped going to the underground malls. Now my enthusiasm for it is zero. I used to love underground malls, but now I just order online, even though I don't like online shopping." (Participant 3C)

Another common negative behavioral effect of differential treatment was behavior monitoring or alteration. This refers to how some foreign residents' choice to change aspects of how they behave in their daily lives with the hope that in doing so, they will be able to lessen the frequency at which they are subject to differential treatment. These behavior patterns were variable and often were linked to the specific incidents of differential treatment an individual had faced

while living in South Korea. For example, Participant 2B expressed that she was often stared at, and in one case openly criticized, for speaking Spanish in public. Consequently, they said they are “hesitant to speak Spanish in public now.” In their words, “If I’m talking to my sister over the phone, I try to use English instead, because I’ve noticed I’ve never received any problems when I do that.” (Participant 2B) Similarly, Participant 5D said that they purposefully avoided revealing their status as a Chinese person to avoid differential treatment: “I just do not mention that I’m from China. If they ask me, I’ll tell them, but I just don’t tell them in the first place. I just don’t want people to see me differently because of my nationality.” (Participant 5D)

## Chapter 5. Discussion and Conclusion

This study puts forth the argument that when foreign residents living in South Korea face episodes of differential treatment, they undergo a complex process in which they employ a variety of cognitive techniques to make sense of their experiences. This process is not uniform across all foreign residents and is heavily modified by demographic factors—such as race, country of origin, and language proficiency—and individual differences within demographic groups arise as well.

Across all demographic groups, however, surprising patterns emerged that point to the unique nature of foreign residents' experiences of internally interpreting perceived differential treatment. Most respondents, all of whom had reported at least one experience of perceived differential treatment, were unable to conclusively label such experiences as fair or unfair in response to being asked: "Do you think the way you are treated in South Korea as a foreigner is fair?" This points to the complexity of foreign residents' processes of cognitively appraising differential treatment in South Korea. This is further supported by the fact that several cognitive responses were identified within respondents' reflection of their experiences, such as minimization of one's experience in comparison to others', and rationalizing or justifying their received treatment. This study also points to the fact that the majority foreign residents may choose to not respond to instances of differential treatment. However, this is *not* because they are satisfied with the way they are treated. Rather, the complexities involved in their process of cognitive appraisal in interpreting experiences of differential treatment leave most foreigners unable to reach a conclusion as to whether such



experiences can be justifiably categorized or “unfair,” and thus discriminatory, or not. This is an unsettling prospect, as it suggests that even though foreign residents’ experiences of differential treatment cause several negative psychological and behavioral consequences (e.g., depression, feelings of isolation, decreased self-esteem, avoidance, etc.), because they are unable to conclude that differential treatment is unfair or discriminatory, their voices will remain silenced regarding these issues.

The findings of this study furthermore contribute additional insight to prior research in differential treatment and discrimination. First, prior research that analyzed the connections between attributional ambiguity and discrimination studies tended to support the hypothesis that stigmatized groups were more likely to perceive ambiguous instances of differential treatment as discriminatory as a self-protection mechanism (Hoyt et. al., 2007; Mendes et. al., 2008); the results of this study partially corroborate this hypothesis but add additional nuance to the existing body of literature. All respondents identifying as Black or of African origin did find their experiences of differential treatment unfair, which supports past research conducted in Western settings. However, besides these individuals, there was no correlation between individuals’ race and their tendency to find their experiences of differential treatment as either fair or unfair. Both other stigmatized groups, such as people of color originating from countries in which they identified as ethnic minorities, and non-stigmatized groups, such as White individuals, nearly uniformly were unable to attribute their experiences to discrimination. This differentiation from past literature may be partially explained by the fact that whilst previous research has mostly been conducted with research participants who are native to the country in which the

research took place, the participants of this study were largely recent expatriates in South Korea. Being an expatriate in a new country in which individuals are unfamiliar with local social customs and ways of behaving may add an additional layer of ambiguity which confounds foreigners' ability to conclusively interpret their experiences as discriminatory or simple instances of miscommunication or cultural unawareness. This adds additional nuance to prior studies in that it complicates the suggestion that certain groups' tendency to perceive instances of discrimination as discriminatory can be explained by their race; rather individuals' interpretation of their experiences of differential treatment is modified not only by their race, but also their migrant status.

Second, this study adds additional insight into how different racial groups understand and internally process instances of differential treatment. Prior literature investigating the relationship between whiteness and interpretation of instances of potentially discriminatory experiences indicates that white individuals are less likely than non-white individuals to perceive their experiences as discriminatory, and this explanation for this phenomenon tends to be attributed to the fact that because white individuals largely are not exposed to instances of discriminatory treatment in their daily lives, they are less sensitive to potentially discriminatory situations.

However, in this study, white privilege was repeatedly acknowledged, both by white respondents *and* non-white respondents as a potentially mitigating factor in one's own experience of differential treatment; the acknowledgement of white privilege at times caused respondents to minimize the magnitude or significance of their own experiences of differential treatment and/or inhibit their likelihood of sharing their experiences to others. Among non-white

individuals, residents often referred to their ability to “pass” as white (such as in the case of self-proclaimed white-passing Hispanic and/or Latino individuals) or their light-skin (in the case of Black individuals) as reasons why their experiences of differential treatment were not as valid or serious as others’. This indicates that whiteness and privilege are complex considerations (either conscious or unconscious) that play into both white and non-white foreigners’ perception of differential treatment and suggests that non-white foreigners may be more willing to use the concept of whiteness as an explanatory factor of differential treatment in non-Western social contexts as opposed to Western social contexts with which they are more familiar.

Furthermore, the results of this study show that the phenomenon of internalized racism, which has previously exclusively been identified in the context of Western cultures in which stigmatized groups, such as Black individuals, put the responsibility of resolving discrimination upon themselves, is also apparent in other racial groups in South Korea. Interestingly, individuals identifying as Black or of African descent did not exhibit responses that indicate internalized racism. Rather, Indonesian respondents exhibited cognitive responses that can be likened to the phenomenon of internalized racism in which one puts responsibility on oneself to “prove themselves” to an ethnic majority or oppressor. (Watts-Jones, 2002) This indicates that in the context of global racism, individuals from countries that are perceived as unfavorable or lesser from the perspective of the host country may make use of cognitive techniques that are reflective of their understanding of their home country’s position in society and is a worrying prospect that warrants further research.

Third, this study complicates the association between language proficiency and perceived discrimination in that it illustrates that in

South Korea, both foreign residents with lower levels of Korean language proficiency and those with higher levels of Korean language proficiency tended to be unable to assess whether their instances of differential treatment in South Korea were discriminatory or not. Language ability was not a predictive factor in determining likelihood of attributing instances of differential treatment to discrimination; however, individuals that experienced an increase in their language performance whilst living in South Korea did express more instances of perceived discrimination. This supports the contention that in the context of South Korea, foreign residents' language ability does not majorly influence one's perception of differential treatment; rather, improvement of one's language ability may provide a comparative context with which individuals may feel more likely to conclude that their experiences were ones of discrimination in acknowledging that improvement of their language abilities does not affect the way that they are treated.

Lastly, this study adds nuance to previous studies about coping mechanisms and indicates that foreign residents may be more likely to turn to cognitive mechanisms such as minimization and justification as both emotion-focused and avoidance-based coping mechanisms. Utilizing such cognitive mechanisms allows foreigners to make sense of their experiences and lessen levels of emotional distress. Most foreign residents in this study were relatively recent expatriates to South Korea, so their decision to use emotion-based or avoidance-based coping mechanisms may be partially explained by the fact that their capacity or "toolkit" of coping mechanisms in South Korea is severely limited. Both foreign residents' lack of established social networks in the new social setting of South Korea and their limited ability to actively address and resolve instances of differential

treatment may in turn cause greater reliance on emotion-focused avoidance-based coping mechanisms, rather than problem-focused coping mechanisms. (Lazarus and Folkman, 1984, Endler and Parker, 1994) This can also potentially be explained by respondents' feelings of helplessness or inability to change alter the "problem" at hand, especially when most participants are unable to decisively label their experiences as problematic/unfair. As Participant 1D comments, "It feels like I can't do anything. I'm not from here. If I say anything it's my word against theirs." Participant 4A said in their interview, "There's no point in arguing about it really, because I'm not sure what it would achieve."

Cognitive responses like minimization, rationalization, and normalization, then, act as coping mechanisms for the purposes of emotional regulation in a situation in which "problem-focused" coping is deemed impossible. Furthermore, these coping mechanisms may also be helpful in mitigating the harmful effects of developing an external locus of control and learned helplessness in which an individual feels completely at the mercy of the environment in deciding one's well-being. This view is also supported by the fact that some respondents have high levels of self-awareness in this process and are conscious that using such cognitive patterns is a choice: "I don't know if it's good or bad for me to normalize [differential treatment], but it's how I cope. I'm not going to fight it." (Participant 2A) In the process of cognitive appraisal, foreign residents employ agency in purposefully choosing certain cognitive techniques in as self-protective measures against the potentially destructive effects of differential treatment.

It may be tempting to conclude from the review of cognitive responses that foreign residents' methods of making sense of their

experiences of differential treatment are maladaptive. However, this is not necessarily the case. Responses indicate that these cognitive responses are not simply momentary reactions to instances of differential treatment, but instead serve the function of coping mechanisms in maintaining emotional well-being during a period of residency in a foreign country where traditional methods of coping, such as social support from trusted friends or family, is limited.

It should be noted that this study is limited in scope since most respondents (21 out of 25) are students, and only a small minority of respondents reported other occupations. Because of this limitation in study participant demographics, this study does not encapsulate the lived experiences of all social groups within the population of foreign residents in South Korea. Rather, this study attempts to provide insight into the previously unstudied phenomenon of perceived discrimination among foreign residents in South Korea and acknowledges that further research into the diverse social and occupational groups is necessary to more comprehensively understand the plight of the different groups that encompass the population of foreign residents in South Korea.

In the context of a South Korean society that is undergoing a process of cultural heterogenization and deliberating the legislation of anti-discriminatory laws to protect foreign residents, it is critical to first recognize that foreigners face considerable difficulties in analyzing if, and which of, their experiences of differential treatment “count” as discrimination. This study hopes to act as a starting point for further research into foreign residents’ responses to differential treatment in an increasingly multicultural South Korea.

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# Appendix

Table 6. Examples of Cognitive Responses to Differential Treatment

	White/Caucasian	Hispanic or Latino
Expresses feelings of injustice	“Foreigners are seen as an attack on Korean people’s way of life. They don’t want foreigners to feel comfortable in Korea, so they’re trying their best to make sure foreigners don’t feel comfortable here. And they’ve succeeded.” (Participant 1C)	“I wasn’t expecting to be treated special. I was just expected to be treated like a normal person. But we’re kind of another type of human being that doesn’t belong.” (Participant 2C)
Shock	“I’m more shocked maybe because I’ve never experienced anything like this before.” (Participant 1A)	“I’ve lived a very privileged life. I’ve never faced discrimination by any means. So, I cannot understand why I would face that. I wasn’t used to it.” (Participant 2C)
Unsurprised	N/A	N/A
Minimizes experience in comparison to others’	“Obviously I’ve always been racially privileged all my life, whenever I’ve been, always. Probably you could call it discrimination, but I’m not systematically discriminated because I’m white and I definitely acknowledge that and maybe the things I experience I maybe perceive them more because I’m not used to this.” (Participant 1A)	“Honestly, I think I’m very privileged. I don’t think I face half of the discrimination that my Black friends or Muslim friends face, because I’m a straight white-passing woman. The things I face are just the tip of the iceberg.” (Participant 2C)
Normalization	N/A	“Nowadays, I’m okay because I made peace with myself, so I’m fine...I learned to deal with it. For me it’s very normalized.” (Participant 2A)
Rationalization	“I understand that you need to not place Western expectations on Korea in all ways. You can’t expect them to perfectly align with Western countries being democratic nations. I don’t judge Korea, and I understand it’s just a part of the development process.” (Participant 1C)	“I understand. It’s a very homogeneous country, and people are not used to faces like mine, so I don’t mind [differential treatment] these days...I think, ‘They don’t have any prejudice. Maybe they’re just not used to it.’ It comes not from a place of meanness. It’s not because they’re bad. It’s just because they’re not used to it.” (Participant 2A)
Confusion/Doubt	N/A	N/A

	Black or African descent	Indonesian
Expresses feelings of injustice	<p>“For the longest time I’ve tried to have this understanding, but I think my patience has grown short. It doesn’t seem to be getting better, and at this point I don’t really think it’s an excuse, the whole opening up thing.” (Participant 3A)</p>	N/A
Shock	N/A	N/A
Unsurprised	<p>“I already had an understanding that there would be certain types of discrimination coming here. Yes, it hurts, but I just kind of think, ‘Things are going to have to change slowly here,’ so I just try to let it go.” (Participant 3B)</p>	<p>“I already heard a lot about it, like how sometimes you will expect discrimination in Korea. That’s why I didn’t expect that I would be fully accepted by Koreans.” (Participant 4C)</p>
Minimizes own experience in comparison to others’	<p>“Me having these things said to me, it’s not as deep as someone who’s maybe half-Korean, or someone who’s darker than me. I get sad for myself, but I also get sad for people who have been here for a while and have a huge difficulty even if they’re born and raised here.” (Participant 3B)</p>	<p>“I feel kind of sad, but also in my program there are many international students that have it worse than me.” (Participant 4A)</p>
Normalization	<p>“I got of exposure [to differential treatment] from a young age, and I quickly understood that not everyone sees us as equals, and that’s how the world works. So, it wasn’t shocking.” (Participant 3A)</p>	N/A
Justification/ Rationalization	N/A	<p>“It’s okay because I understand that everyone cannot accept differences. So, I have forgiven [the person who treated me badly.]” (Participant 4D)</p>
Confusion/ Doubt	N/A	<p>“When I experience these kinds of situations, I think a lot about it. I was thinking maybe I mistakenly understood their intentions. Like I don’t know if this is discrimination or it’s just me not understanding [Korean people’s] culture and mindset. Like I’m trying to see the causes.” (Participant 4C)</p>

	Chinese	Korean descent
Expresses feelings of injustice	N/A	"I definitely feel like it's wrong and it's very frustrating." (Participant 6B)
Shocked	N/A	N/A
Unsurprised	N/A	N/A
Minimizes own experience in comparison to others'	N/A	N/A
Normalization	"I think it's kind of natural, because similar things happen in the States and also in China when you are defined as a foreigner." (Participant 5D)	"I've just gotten used to it. But also, my Korean got better. Nowadays, it's just another country that I'm living in. I have no feelings, no emotions about Korea. It's just a place." (Participant 6A)
Justification/ Rationalization	"The image of our government is not very good to other countries, and I think that's one of the reasons that Chinese people are treated very differently...[when I am treated differently] I just change my mindset [and think], 'This is a weird person, and I shouldn't take energy to get mad at this.'" (Participant 5B)	"I feel like I shouldn't be treated that way, but I do understand the history of Korean culture. So that's how I'm able to accept it because I understand the culture." (Participant 6E)
Confusion/ Doubt	N/A	"It's not very clear to me why I cannot do certain actions. I don't know if it's just a limitation in the system or it's discrimination for no good reason." (Participant 6B)



Table 7. Examples of Behavioral Responses to Differential Treatment

	White/Caucasian	Hispanic or Latino
Speaks up or responds directly	N/A	N/A
Speaks up or responds indirectly	N/A	N/A
Does not respond externally	“There’s no point in arguing about it really, because I’m not sure what it would achieve. So, I don’t want to confront them, I just accept it and move on with my day.” (Participant 1C)	“You cannot fight against them. You can’t be like, ‘Oh you shouldn’t do that,’ because it’s not going to change anything. And I don’t feel protected by the police. I don’t feel like they would be on my side if I were to argue with a Korean person. So, I just don’t do anything. I just accept it.” (Participant 2C)
Situation-dependent	N/A	N/A

	Black or African descent	Indonesian
Speaks up or responds directly	N/A	N/A
Speaks up or responds indirectly	N/A	N/A
Does not respond externally	“I want to sometimes express myself, but I always think, even if my tone is pleasant, are they going to think I’m mad. So, I’m always aware, even if I want to say something in a certain situation, I just keep quiet.” (Participant 3B)	“I just accept it, because I didn’t know how to tell them it wasn’t my fault, [and I] don’t know the standard of how things work.” (Participant 4B)
Situation-dependent	“With older people, I just ignore it, because in Korean culture, they’re always right and you’re always wrong. If they’re my age, I let them have it. Not always, but it depends on the level of them being racist.” (Participant 3C)	“We want to do something, but in Korea it’s not nice to talk to professors about problems. So sometimes we try to talk, but other times it’s just, ‘Oh, okay.’” (Participant 4A)

	Chinese	Korean descent
Speaks up or responds directly	“Most of the time I just tell them the truth that Chinese people are not all like that...If discrimination happens online, I will say something like ‘You should not do that,’ and I will just tell them what I know about the facts.” (Participant 5D)	N/A
Speaks up or responds indirectly	N/A	N/A
Does not respond externally	“I don’t think I have the courage to strongly strike back. I’m in another country. I’m not in China, so I don’t have the courage to do anything about this.” (Participant 5B)	“The language barrier makes me feel that I cannot advocate for myself the way that I’d like to, so I often don’t act on it and end up accepting it.” (Participant 6B)
Situation-dependent	“I wanted to report this incident, but I had to report evidence. They wanted me to send in evidence, but I was told without evidence there’s no way to report human rights abuses, especially verbal abuses. One time I actually reported, but there was no follow-up.” (Participant 5A)	N/A

Table 8. Examples of Effects of Differential Treatment on Self

	White/Caucasian	Hispanic or Latino
<b>Psychological</b>		
Depression	N/A	N/A
Isolation or Alienation	“It does make me feel very unwanted in Korea. Even though I have the full right to be here, it makes me think, ‘Do they want me or not?’” (Participant 1D)	“In the beginning, I really tried my best to speak Korean, and approach everyone in Korean. So, I really tried, but they don’t care. It makes me not want to try to fit in, because I already accepted the societal rejection.” (Participant 2C)
Decreased Self-esteem	“It feels bad at the moment, but for anything I feel worse about myself for not being better at Korean, than for them not including me.” (Participant 1B)	N/A
Puts responsibility on self as representative of home country.	N/A	N/A
<b>Identity-Related</b>	N/A	N/A
<b>Behavioral</b>		
Avoids situations	“Sometimes I feel like there’s opportunities to talk to people, and I just don’t want to do it. I don’t think about how much I avoid small talk and things like that, but I really do.” (Participant 1B)	“I learned to be very protective of myself. I don’t like experiencing those kind of things, so I just stay with my group and stay in safe places. I avoid certain places. And I know that’s bad because I’m not completely free to do what I want.” (Participant 2A)
Alters own behavior	N/A	“I’m very hesitant to speak Spanish in public now. So now, even if I’m talking to my sister over the phone, I try to use English instead, because I’ve noticed I’ve never received any problems when I do that.” (Participant 2B)

	Black or African descent	Indonesian
<b>Psychological</b>		
Depression	N/A	“It was hard. It was so painful. At the time of [incident of differential treatment], I couldn’t eat well, I couldn’t sleep well.” (Participant 4D)
Isolation or Alienation	N/A	“I’m afraid to meet other people in Korea, even if it’s a professor. I’m afraid of meeting Korean people in general.” (Participant 4D)
Decreased Self-esteem	N/A	“It impacted me in terms of my language learning because I feel dumb sometimes. I don’t feel comfortable speaking Korean...I feel a bit pressured. It’s hard to build my self-confidence when the natives judge you that way.” (Participant 4C)
Puts responsibility on self as representative of home country.	N/A	“I’m trying to break the stereotypes. My professor said I have to work harder to prove myself... We have to be the ones to prove that we can actually do a lot of great things.” (Participant 4C)
<b>Identity-Related</b>	“I was a military kid, and I really identified more with Korea, because the first time I came here I was 13 months old...It’s hard to be accepted culturally in Korean society because there is that ethnic component.” (Participant 3B)	N/A
<b>Behavioral</b>		
Avoids situations	“In underground malls, everyone’s eyes are watching you all the way through... So, I stopped going to the underground malls...I used to love underground malls, but now I just order online.” (Participant 3C)	N/A
Alters own behavior	“In my head, I’m always trying to be as calm as possible because I don’t want to come off as an angry Black woman, because there’s certain perceptions about that here. I definitely monitor my behavior.” (Participant 3B)	N/A

	Chinese	Korean descent
<b>Psychological</b>		
Depression	<p>“There are some cultural differences between the Korean and the Chinese, maybe it’s the personality differences so I cannot get along well with all the people, so it was a tough time for me. Because they were just mean to me. I felt uncomfortable all the time, so I got depressed totally for about one and a half years.” (Participant 5A)</p>	N/A
Isolation or Alienation	<p>“It sometimes makes me feel a little bit sad that I’m still considered an outsider even though it’s my fourth year here.” (Participant 5C)</p>	<p>“Coming here, I always knew I’d feel like an outsider, but when I’m discriminated against, it’s just an unpleasant reminder of how different you are and how unwanted you are by certain institutions, especially when you’re putting in efforts to be a good foreigner here.” (Participant 6B)</p>
Decreased Self-esteem	N/A	N/A
Puts responsibility on self as representative of home country	<p>“I try to do my best [to] not leave so-called bad image about people from China, but the stereotypes are so hard to change.” (Participant 5D)</p>	N/A
<b>Identity-related</b>	N/A	<p>“When I first got here, I was a lot more interested in trying to learn about Korea and being Korean, but I’ve embraced my Gyopo-ness. Yeah, I’m Korean, but because of these instances of discrimination it’s made me not want to identify as Korean.” (Participant 6D)</p>
<b>Behavioral</b>		
Avoids situations	N/A	N/A
Alters own behavior	<p>“I just do not mention that I’m from China. If they ask me, I’ll tell them, but I just don’t tell them in the first place. I just don’t want people to see me differently because of my nationality.” (Participant 5D)</p>	<p>“I feel like I can’t speak comfortably around Koreans in public spaces. Usually, I choose short answers...Because I look Korean, they don’t really know I’m a foreigner until I speak, so I would rather them prefer to just think I’m Korean.” (Participant 6E)</p>

Table 7: Examples of Feelings of Fairness and Unfairness

	White/Caucasian	Hispanic or Latino
Fairness/ Unfairness		
Unfair	N/A	<p>“I don’t think the way I’m treated is fair. I don’t think that we should be treated differently. We’re pretty much the same, so I don’t think there should be instances where we are treated differently than other people.” (Participant 2B)</p>
Fair	N/A	N/A
Mixed feelings	<p>“The question of fairness is an interesting one, because ultimately, I’m in their country, not my own country. I couldn’t comment on the fairness of it.” (Participant 1C)</p>	<p>“I have to recognize that I may not have white privilege, but I do have Western foreigner privilege. So not everything is bad. I don’t know. To be honest sometimes I’m treated like a second-class citizen here, but what comes to my mind first is the privilege that I get.” (Participant 2A)</p>

	Black or African descent	Indonesian
Fairness/ Unfairness		
Unfair	<p>“Especially with the color-based things, it’s definitely unfair...There has to be something done so people aren’t feeling less than human while they’re here.” (Participant 3B)</p> <p>“Definitely. We’re treated unfairly.” (Participant 3C)</p>	N/A
Fair	N/A	<p>“It’s fair. They treat me similar to Korean people, in general. It’s not all Koreans [that treat people differently], just some people.” (Participant 4D)</p>
Mixed feelings	N/A	<p>“As a foreigner, of course I want to be accepted. But I understand their background as a homogeneous country. I understand why they’re doing what they’re doing, but I think it’d be better if they can see we are human as well. I think it would be better if you don’t treat people differently according to their background.” (Participant 4C)</p>

	Chinese	Korean descent
<b>Fairness/ Unfairness</b>		
Unfair	“It’s so unfair to me. They just ignore us and think you will handle it, and that it’s your personal things you have to handle.” (Participant 5A)	“I don’t think [the way I’m treated] is fair. I don’t think anybody should be discriminated against in any way.” (Participant 6D)
Fair	N/A	N/A
Mixed feelings	“As an international student, I think the Korean government has treated me fair enough, even if it’s not complete fairness.” (Participant 5C)	“I don’t know if it’s a question of fair, but I think it’s just really difficult, especially if you’re not fluent in Korean.” (Participant 6C)

## Abstract in Korean

한국에 거주하는 외국인에 대한 차별 대우 및/또는 차별에 관한 이전의 연구들은 이러한 문제의 현실과 규모를 증명해 준다. 그러나 선행연구는 외국인에 대한 한국 토박이들의 태도 형성 과정과, 차별대우가 외국인의 건강과 정신에 미치는 영향을 설명하는데 초점을 맞추었다. 상대적으로, 한국외국인 거주자들이 지각된 차별적 대우의 경험에 반응, 식별, 합리화, 이해 및/또는 내재화하는 방법의 중요성을 간과하는 연구 문헌에는 상당한 격차가 있다. 본 연구는 대한민국에 체류하는 동안 최소 1회 이상 지각된 차별대우를 경험한 한국 거주 외국인을 대상으로 이루어진 25건의 심층면접 주제 분석에 기초한 연구로, 차별대우에 대한 한국 거주 외국인의 인지적·행동적 반응을 조사하기 위한 하나의 시범적 시도이다. 본 연구의 결과는 한국의 외국인 거주자들이 차별적 대우의 경험을 이해하기 위해, 차별적 대우의 경험과 동시에 그 경험의 여파에 적극적으로 대응하는, 여러 가지 인지 전략과 대처 메커니즘을 사용하는 과정의 복잡성을 강조하고 있다. 연구 결과는 또한 다른 인종 그룹의 구성원들이 자신의 경험을 처리할 때에 다른 전략을 구현함을 나타내며, 차별 대우와 인종에 대한 반응 사이의 상호 작용의 존재함을 보여준다.

주요어 : 차별 대우, 차별, 외국인 거주자, 인지 평가, 대처 메커니즘

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