Discrimination felt by teenagers based on their social class background can contribute to physiological changes associated with poorer health, according to a new study published online in *Psychological Science*, a journal of the Association for Psychological Science.

Lead author Thomas Fuller-Rowell, a researcher at the University of Wisconsin-Madison and a Robert Wood Johnson Foundation Health & Society Scholar, says that while the link between poverty and poor health has long been known, this is one of the first studies to consider the impact of class discrimination.

“The findings of our study suggest that the stress caused by social-class discrimination may be an important factor in explaining the negative influence of poverty on health,” says Fuller-Rowell.

The study looked at 17-year-olds from upstate New York enrolled in a long-running Cornell University study of rural poverty. The vast majority of the 252 teens were white, so the study did not look at the effect of race.

“Experiences of discrimination are often subtle rather than blatant, and the exact reason for unfair treatment is often not clear to the victim,” says Fuller-Rowell. For these reasons, rather than asking the study participants if they had experienced discrimination specifically based on their class background, the study measured general perceptions of discrimination. For example, they were asked: “How often do people treat you differently because of your background?”

Then researchers took overnight urine samples, and other tests to assess stress on the body, including measures of blood pressure and stress-related hormones such as epinephrine, norepinephrine, and cortisol. Together, these factors can measure a person’s “allostatic load,” a term that describes the negative health changes caused by a frequent exposure to stress.

The study found that teenagers who grew up in poverty reported higher levels of discrimination, and that discrimination, in turn, predicted allostatic load. In other words, the poorer the teens, the more they experienced discrimination, the worse their health measures were. Fuller-Rowell’s model suggests that about 13 percent of the negative health effects of poverty on health can be attributed to perceived discrimination.

“Our findings suggest that the stigma associated with poverty can lead to class discrimination, which, over time, can impact an individual’s health,” Fuller-Rowell says.

He says the researchers were interested in the question because despite research showing that negative stereotypes about the poor are pervasive, research has failed to consider the impact of social class discrimination on the poor. Furthermore, discussion of social class discrimination is generally not present in the public discourse in the same way as racial discrimination.
This suggests some possible avenues for helping poor children cope with discrimination. In the same way minority children are often alerted by their parents to possible racial discrimination they may encounter, Fuller-Rowell says, that all Americans may need to get better at talking about class discrimination and its effects.

“Americans tend not to be comfortable talking about social class, because this is supposed to be a class-less country,” he says. “But in terms of mitigating the effects of class discrimination, talking about it in schools and in the media is a beginning.”

Fuller-Rowell’s co-authors on the study are Gary Evans and Anthony Ong, both of Cornell University. Support for the study came from the Robert Wood Johnson Foundation Health & Society Scholars program, the W. T. Grant Foundation and the John D. and Catherine T. MacArthur Foundation Research Network on Socioeconomic Status and Health.