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STIGMA IN THE MARKETPLACE

ESTIGMA NO MERCADO

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Tese apresentada ao Programa de Pós-Graduação em Administração do Departamento de Administração da Faculdade de Economia, Administração, Contabilidade e Atuária da Universidade de São Paulo, como requisito parcial para a obtenção do título de Doutor em Ciências.

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ABSTRACT

Stigma is a discrediting attribute that emerges in social interactions, playing different roles in different contexts. Several fields (e.g., sociology and psychology) have been dedicating special attention to this phenomenon as it significantly impacts people's lives. Although there is some interest in the idiosyncrasies of stigma in marketing and consumer behavior, the literature investigating such a concept is still too fragmented. By exploring the roles of stigma in the marketplace from multiple perspectives, this dissertation deepens and advances the understanding of the complex relationship between stigma and the marketplace. The first paper is a systematic literature review that synthesizes what we know about stigma in the marketplace. It also suggests research avenues worth exploring by marketing and consumer behavior researchers to advance knowledge on marketplace stigma. The second article is a qualitative study looking at stigmatized consumers. It examines the meanings of intimate apparel consumption to transgender consumers and the interplay between stigma and vulnerability in the marketplace. The third and last article comprises two experimental studies that reveal the negative impacts of conflicting information, within and across different information sources, on consumers' attitudes toward and willingness to adopt medical cannabis. This set of papers shows that stigma plays complex and multifaceted roles in the marketplace, affecting consumers, companies, and other marketplace stakeholders.

Keywords: Marketing. Consumer behavior. Stigma. Marketplace.

RESUMO

O estigma é um atributo desacreditador que emerge nas interações sociais, desempenhando diferentes papéis em diferentes contextos. Diversas áreas (por exemplo, sociologia e psicologia) têm dedicado atenção especial a esse fenômeno, pois ele impacta significativamente a vida das pessoas. Embora haja certo interesse nas idiossincrasias do estigma em marketing e comportamento do consumidor, a literatura que investiga tal conceito ainda é muito fragmentada. Ao explorar os papéis do estigma no mercado a partir de múltiplas perspectivas, esta dissertação aprofunda e avança a compreensão da relação complexa entre estigma e mercado. O primeiro artigo é uma revisão sistemática da literatura que sintetiza o que sabemos sobre o estigma no mercado. Ele também sugere caminhos de pesquisa que valem a pena serem explorados por pesquisadores de marketing e comportamento do consumidor para avançar o conhecimento sobre o estigma do mercado. O segundo artigo é um estudo qualitativo sobre consumidores estigmatizados. Ele examina os significados do consumo de roupas íntimas para consumidores transgênero e a interação entre estigma e vulnerabilidade no mercado. O terceiro e último artigo compreende dois estudos experimentais que revelam os impactos negativos de informações conflitantes, dentro e entre diferentes fontes de informação, nas atitudes dos consumidores e na disposição de adotar a cannabis medicinal. Este conjunto de artigos mostra que o estigma desempenha papéis complexos e multifacetados no mercado, afetando consumidores, empresas e outras partes interessadas do mercado.

Palavras-chave: Marketing. Comportamento do consumidor. Estigma. Mercado.

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1 INTRODUCTION

Stigma is "an attribute that is deeply discrediting" (Goffman, 1963, p. 3), resulting in social disapproval (Bos et al., 2013). Stigma emerges in social interactions, varying across different contexts (Crocker & Major, 1989). The marketplace is a context in which stigma plays a significant role, with several factors contributing to its bluntness or perpetuation (Mirabito et al., 2016). Stigma can be divided into four manifestations (i.e., public stigma, self-stigma, structural stigma, and stigma by association) that are dynamically interrelated (Bos et al., 2013). The relationship between stigma and the marketplace is complex and multifaceted, and the literature investigating such a phenomenon is too fragmented (Mirabito et al., 2016).

This dissertation contributes to the literature on marketing and consumer behavior in several ways, deepening and advancing the understanding of the roles of stigma in the marketplace. First, it organizes the state-of-the-art in the field by adapting Bos et al.'s (2013) framework to the marketplace context. Then, it investigates consumers' stigmatization by exploring the marketplace navigation of transgender consumers. Finally, it describes the idiosyncrasies of stigmatized product adoption by revealing the impacts of conflicting information in this process.

The practical contributions of this dissertation are threefold. First, it reveals how stigma manifests in different markets and situations, providing insights into how marketing practitioners can contribute to blunt stigma and improve consumers' well-being in the contexts they operate. Second, it put forward ideas on how marketing managers from fashion-related industries can make their businesses more welcoming to transgender consumers by drawing the defiance such consumers face in the marketplace. Third, it offers companies insights into how to deal with the challenging context of having their products stigmatized.

1.1 RESEARCH QUESTION

Given the complexity of marketplace stigma, the research question that guides this dissertation is: **what are the roles of stigma in the marketplace?**

1.2 GOALS

Three papers were developed to answer the research question guiding this dissertation. The goals presented below summarize the specific goals of each of these papers:

- Organize what we know about stigma in the marketplace, how it has been approached, and where researchers should concentrate their efforts to take advantage of such a concept to advance the knowledge in marketing and consumer research.

- Examine the meanings of intimate apparel consumption to transgender consumers and the role of stigma in generating vulnerability for them in such a marketplace.

- Describe the impacts of conflicting information on consumers' attitudes toward and willingness to adopt medical cannabis products.

1.3 DISSERTATION STRUCTURE

The following three main chapters of this dissertation comprise the research papers developed. After these sections, the final chapter presents the dissertation conclusions. The information about the three articles is presented below:

- STIGMA IN MARKETING AND CONSUMER RESEARCH: A LITERATURE REVIEW AND RESEARCH AGENDA

This systematic literature review addresses the stigma concept in marketing and consumer behavior studies. The resulting manuscript targets the International Journal of Consumer Studies' special issue, "Systematic Literature Reviews in Consumer Studies".

Authorship: Rodolfo R. Rocha and Andres R. Veloso.

- CONSUMING INTIMATE APPAREL: A BRAZILIAN TRANSGENDER DISCOURSE

This qualitative study explores how transgender consumers navigate the intimate apparel marketplace and the role of stigma in generating vulnerability. As to the current date, this manuscript is under minor revisions at the Journal of Consumer Affairs. Previous versions of this paper were presented at a couple of conferences: the 2021 ANPAD Marketing Meeting and the 2021 EMAC Annual Conference. A more advanced version of this study is going to be presented at the 2023 SCP Annual Conference.

Authorship: Rodolfo R. Rocha, Andres R. Veloso, Giovanna G. Rossini, Beatriz T. Collalto, Larissa S. Lopes, Giovanna Z. Batista, and Roberto F. Falcão.

- THE IMPACTS OF CONFLICTING INFORMATION ON CONSUMERS' ATTITUDES TOWARD AND WILLINGNESS TO ADOPT MEDICAL CANNABIS PRODUCTS

This experimental research describes the effects of conflicting information on stigmatized products' adoption, using medical cannabis as the case for the investigation. The paper resulting from this research targets the Health Marketing Quarterly. Preliminary versions of this study were presented in two conferences: the 2020 SemeAd and the 2021 ACCI Annual Conference.

Authorship: Rodolfo R. Rocha, Andres R. Veloso, Christian G. S. Munaier, and Iná F. Barreto.

2 STIGMA IN MARKETING AND CONSUMER RESEARCH: A LITERATURE REVIEW AND RESEARCH AGENDA

2.1 INTRODUCTION

Published in 1963, "Stigma: Notes on the Management of Spoiled Identity", the book by Erving Goffman is considered the seminal publication on stigma. Since then, the concept – originated in sociology – has been approached in many other fields, such as psychology, medicine, and health sciences (Bos et al., 2013). As marketing and consumer behavior are multidisciplinary fields open to other disciplines (MacInnis & Folkes, 2010), absorbing the concept of stigma looks like a natural movement to researchers in these fields. Indeed, the literature has explored such a concept in different and meaningful ways (e.g., stigma in service encounters, the impacts of stigma on consumer well-being, and strategies consumers adopt to cope with stigma).

Stigma is "an attribute that is deeply discrediting" (Goffman, 1963, p. 3), emanating from social interactions and resulting in "widespread social disapproval" (Bos et al., 2013, p. 1). As social contexts differ, a particular attribute can be stigmatized in one situation but not in a different one (Crocker & Major, 1989). In the marketing literature, Mirabito et al. (2016) conceptualize what they call "marketplace stigma" as "the labeling, stereotyping, and devaluation by and of commercial stakeholders (consumers, companies and their employees, stockholders, and institutions) and their offerings (products, services, and experiences)" (p. 171). This definition not only contextualizes the concept of stigma within marketing and consumer behavior, but also broadens its application to entities other than individuals. As consumption practices are central to the construction of consumers' identities in most societies worldwide (Arnould and Thompson, 2005), understanding the roles of stigma in the marketplace is a fundamental step to advancing consumer well-being through destigmatization (Mirabito et al., 2016).

Goffman (1963) suggests that stigmas can be of three different types: (a) abominations of the body, (b) blemishes of character, and (c) tribal stigma. General physical deformities fall under the first category of stigma. The second type of stigma comprises attributes ranging from rigid beliefs and dishonesty to addiction and homosexuality. Finally, race, nationality, and religion are examples of the last category proposed by Goffman (1963). The author uses the word "normal" to describe those individuals who do not carry any attribute considered discrediting in a particular social context.

In 2013, celebrating the 50th anniversary of Goffman's (1963) seminal work on stigma and inspired by Pryor and Reeder's (2011) model, Bos et al. proposed a conceptual framework that categorizes stigma into four types: public stigma, self-stigma, stigma by association, and structural stigma. As stigma originates from social interactions and contexts (Bos et al., 2013; Mirabito et al., 2016), public stigma is central to Bos et al.'s (2013) framework, comprising all forms of representations and reactions from the "normals" toward the stigmatized ones. On the other hand, self-stigma refers to the consequences of stigma for stigmatized individuals and the strategies they adopt to cope with it. As stigma can affect those associated with stigmatized individuals, such as relatives and friends, Bos et al. (2013) suggest the "stigma by association" category to encompass such a phenomenon. Finally, structural stigma indicates societal structures responsible for exacerbating or blunting stigma. Mirabito et al. (2013) present a similar idea of structural stigma when discussing the contextual factors that can stigmatize or destigmatize marketplace entities.

Two concepts are sometimes used as synonyms of stigma but are conceptually different: prejudice and stereotype. Prejudice emerged as a research stream within psychology and sociology that occasionally overlaps stigma (Bos et al. 2013). However, the authors argue that while stigma necessarily involves perceivers' reactions to individuals' discrediting attributes, prejudice does not. Stereotypes might be confused with stigma because they are commonly viewed as something bad, an intrinsic characteristic of stigma (Neuberg et al., 2020). However, the authors reason that stereotype is a complex generalized belief that helps people understand other people's behaviors in a social context, but not necessarily in a negative way.

The contributions of our review paper are threefold. First, it synthesizes the literature on stigma in marketing and consumer research, presenting the state-of-the-art in this domain. As the literature on marketplace stigma is still fragmented (Mirabito et al., 2016) and we could not find any systematic literature review addressing stigma in this field, organizing the knowledge can foster its advance (Paul et al., 2021). Second, we frame our thematic analysis on two models from disciplines in which stigma is a consolidated topic, sociology (Goffman, 1963) and psychology (Bos et al., 2013). In doing so, we root marketing and consumer behavior studies on stigma on rich and fertile soil. Finally, we put forward a future research agenda to help guide substantial studies on stigma in marketing and consumer behavior. This review also marks 60 years since Goffman's (1963) seminal work "Stigma: Notes on the Management of Spoiled Identity".

This paper is organized as follows. In the next section, we detail the scientific procedures and rationales for systematic literature reviews (SPAR-4-SLR) protocol put forward by Paul et al. (2021) and followed by us in this review. After that, we introduce the analyses with a bibliometric profile of the articles on stigma in marketing and consumer behavior. Then, we present the thematic analysis we conducted based on Bos et al.'s (2013) and Goffman's (1963) frameworks on stigma. The following section comprises a suggested research agenda to guide future studies on stigma in marketing and consumer behavior structured using the theories, constructs, and methods (TCM) framework (Paul et al., 2017). Finally, we present our study's contributions, limitations, and conclusions.

2.2 PROCEDURES AND RATIONALES

Systematic literature reviews abound in business and marketing fields, and several guiding papers on such a methodology are worth consulting (e.g., Palmatier et al., 2018; Paul & Barari, 2022; Paul & Criado, 2020; Paul et al., 2021). As discussing the idiosyncrasies of literature reviews is not among the goals of our paper, we address in this section only the characteristics of the literature review form we develop in this article.

Following the SPAR-4-SLR protocol developed by Paul et al. (2021), we conducted a domain-based review using the TCM framework (Paul et al., 2017). Domain-based reviews concentrate on synthesizing a specific body of literature to describe the state-of-the-art and develop a future research agenda in that domain (Palmatier et al., 2018; Paul & Criado, 2020; Paul et al., 2021). Among the five ways a domain-based review can manifest (Paul et al., 2021), the framework-based one is developed using a specific framework (Paul & Criado, 2020). Several frameworks are being used in literature reviews in our field (e.g., ADO, TCM, and TCCM). The TCM framework (Paul et al., 2017) was our choice due to its suitability to the model of the future research agenda we envision and propose.

The research protocol we followed for this review, grounded by Paul et al.'s (2021) SPAR-4-SLR, is illustrated in Figure 2.1 and detailed in the subsequent sections.

Assembling

Identification
Domain: stigma (topic) in marketing and consumer research (areas)
Research questions:
• What do we know about stigma in marketing and consumer research?
• What types of stigma have been explored and how has stigma been approached in marketing and consumer research?
• Where should researchers concentrate their efforts to take advantage of the stigma concept to advance the knowledge in marketing and consumer research?
Source type: articles from academic journals
Source quality: CABS AJG – Marketing (2, 3, 4, 4*)

Acquisition
Search mechanism and material acquisition: Scopus and Web of Science
Search period: 2013 – 2022 (10 years)
Search keyword: "stigma*" (truncation)
Total number of articles returned from the search:
• Scopus: 76
• WOS: 102
• Merging and removing duplicates: 105

Arranging

Organization
Codes: authorship, publication year, journal title, number of citations, type of stigma (Bos et al., 2013; Goffman, 1963), country, stigma, target of stigma, methodological approach, data collection, data analyses, purpose, and main findings
Framework: TCM (Paul et al., 2017)

Purification
Article type excluded:
• Not empirical = 17
• Not stigma = 6
Article type included: 82 articles directly approaching stigma in empirical marketing and/or consumer behavior studies

Assessing

Evaluation
Analyses methods: bibliometric and thematic
Agenda proposal method: TCM (Paul et al., 2017)

Reporting
Reporting conventions: textual discussion, tables and figures
Limitations: methodology-related
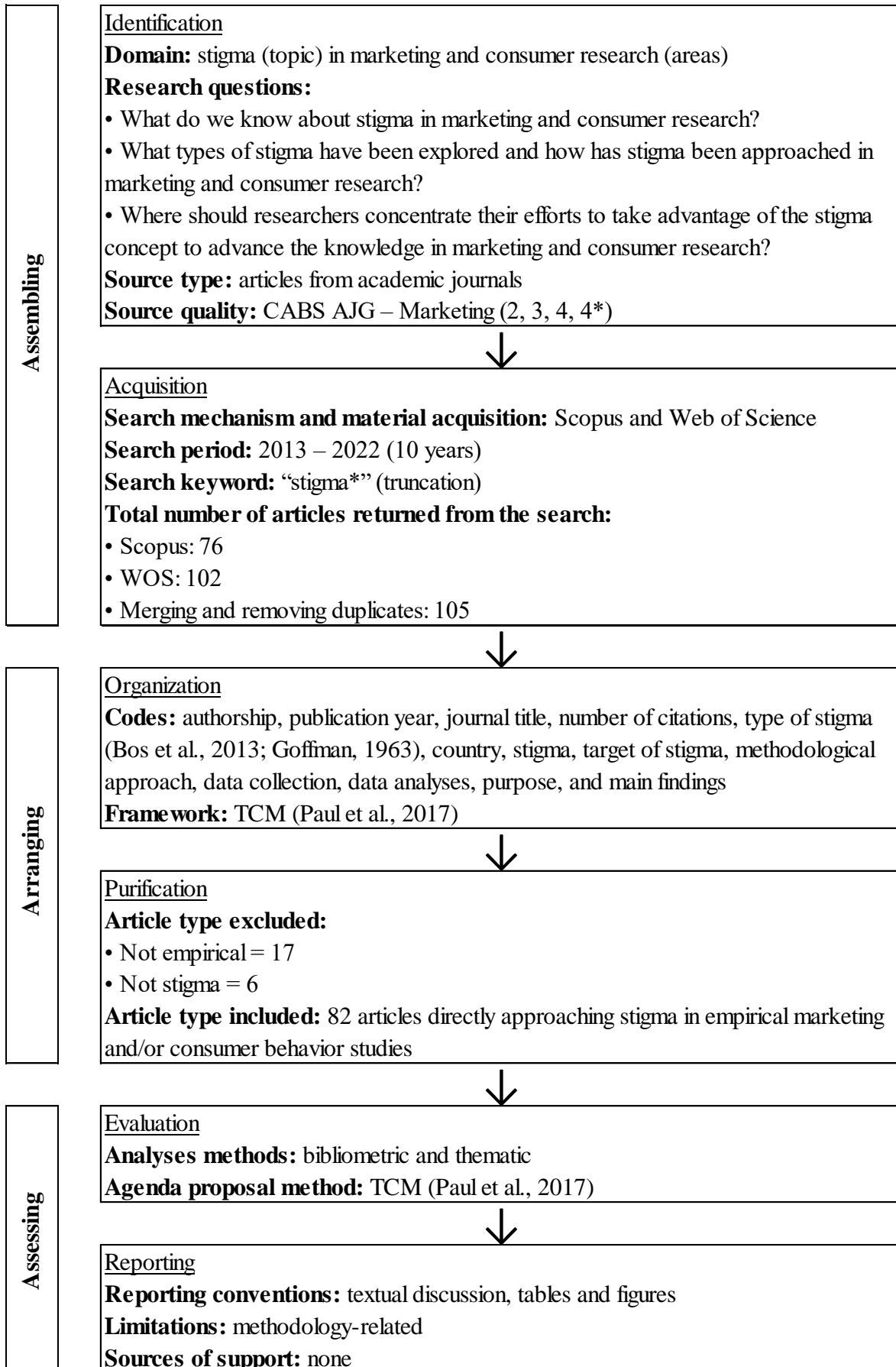**Sources of support:** none

Figure 2.1 – Review protocol

2.2.1 Assembling

We started this review stage by defining several criteria for identifying the literature to be synthesized. First, we defined stigma (topic) in marketing and consumer research (areas) as the domain to be approached. Defining marketing and consumer research as the areas of interest was vital to properly guide the following methodological choices. During the free exploration of the literature aiming at defining the domain to be addressed, we realized that opting to disentangle marketing and consumer behavior literature would be unproductive and limiting to the review. Further, as consumer behavior is considered a subdiscipline of marketing (MacInnins & Folkes, 2010), we decided to focus our review on both areas.

Second, we defined the research questions guiding this review:

• What do we know about stigma in marketing and consumer research?

• What types of stigma have been explored and how has stigma been approached in marketing and consumer research?

• Where should researchers concentrate their efforts to take advantage of the stigma concept to advance the knowledge in marketing and consumer research?

Although several systematic literature reviews in our field do not state research questions clearly, it is a recommended guideline that allows researchers to focus on answering such questions more straightforwardly (Lim et al., 2021; Paul et al., 2021). In addition, it provides the readers with a precise notion of what to expect from the review. Third, we selected academic journals as the published literature sources, following Paul et al.'s (2021) recommendation and the criteria used by most of the systematic literature reviews in marketing.

Finally, in the fourth step of the identification sub-stage, we defined the quality of sources of articles to be included in the review. The two most respected journal rankings in business are the Chartered Association of Business Schools Academic Journal Guide (CABS AJG) and the Australian Business Deans Council Journal Quality List (ABDC JQL). Although the CABS AJG includes fewer journals than the ABDC JQL (Paul et al., 2021), it offers a more recent list version (2021 vs. 2019). Moreover, the CABS AJG is widely adopted by business schools (Darevau & Cheikh-Ammar, 2021) and researchers (Södergren, 2021). As our review focuses on stigma in marketing and consumer research, we selected only journals from the marketing field in the CABS AJG to be included in the search. Regarding the quality threshold, we have

not considered journals from the bottom tier of the CABS AJG only (i.e., 1). Thus, we could cover eligible sources without being limited to top-tier journals only (Darevau & Cheikh-Ammar, 2021; Paul et al., 2021).

Still in the assembling stage of the review, we then moved to the acquisition sub-stage, comprised of the definition of the (a) search mechanism, (b) search period, and (c) search keywords. We used Web of Science and Scopus as databases for our literature search as they offer useful bibliometric details (Paul et al., 2021). While freely exploring the literature on stigma in marketing and consumer research, we came across a considerable number of papers. Hence, we established a 10-year search period for the review, as recommended by Paul et al. (2021) when dealing with an already-developed domain. Finally, as we had already set strict criteria for the journals' area and quality and the search period, we opted for using the truncation "stigma*" as the only keyword. Our decision aimed to ensure we could gather all academic articles addressing stigma in relevant and updated marketing and consumer research literature.

After applying all criteria described above, our search returned 102 articles from WOS and 76 from Scopus. WOS returned more articles than Scopus because it includes the KeyWords Plus® feature when searching for a topic. This characteristic expands the search from the traditional fields (i.e., title, abstract, and keyword) as it generates and indexes terms by automatically searching other fields of the articles. Finally, we merged the articles returned from the two databases and removed duplicates, keeping 105 for the next review stage.

2.2.2 Arranging

The first sub-stage of the arranging stage is the organization, contemplating the definition of the codes used in the analyses. Following Paul et al.'s (2021) recommendation, we decided to code the articles based on some central bibliometric information and according to the TCM framework (Paul et al., 2019). The bibliometric codes were authorship, publication year, journal title, and number of citations. We used the taxonomy proposed by Bos et al. (2013), comprised of four types of stigma (i.e., public stigma, self-stigma, stigma by association, and structural stigma) and the three types of stigma (i.e., abominations of the body, blemishes of character, and tribal stigma) put forward by Goffman (1963) as the codes related to theory, the T of the TCM framework. The C of the framework, which stands for context, was retrieved from the articles regarding the country where the study was conducted and the target of stigma (i.e., consumer, product, or worker). Finally, as to the M of the framework, which stands for methods,

we gathered information on the approach (i.e., qualitative, quantitative, or mixed), data collection, and data analysis. Finally, we also summarized the primary purpose and main findings of each article that were analyzed to help us structure our review and offer the reader useful information about the papers.

Following the organization, we moved to the purification sub-stage of the SPAR-4-SLR protocol, focusing on defining inclusion and exclusion criteria. First, we decided to include only empirical papers in the review as our goal is to assess how the concept of stigma is applied in research in marketing and consumer behavior. Thus, 17 articles, such as conceptual papers, commentaries, and dialogues, were excluded. Then, we also excluded articles that do not approach stigma directly. In this purification step, we excluded six articles that we could not fit into the codes previously defined for the TCM framework (Paul et al., 2017). Examples of excluded articles are those that mention stigma only as a suggestion for future studies or use stigma as an example of a phenomenon that might emerge in another context. After the purification, we included 82 articles directly approaching stigma in empirical marketing and consumer behavior studies in our analyses.

2.2.3 Assessing

We start this stage of the SPAR-4-SLR protocol (Paul et al., 2021) by defining the analysis methods, the first step of the "evaluation" sub-stage. Although we present the main bibliometric information of the articles we reviewed to introduce the results, the thematic analysis of the stigmas addressed in each paper reviewed is the core of our review. In this regard, we organize the stigmas identified in each article under review based on the frameworks proposed by Bos et al. (2013) and Goffman (1963) previously introduced in this manuscript. Also in the evaluation sub-stage, we propose a future research agenda based on the TCM framework (Paul et al., 2017), informing best practices to be followed and the research gaps worth further investigation.

The second and final sub-stage of the protocol is "reporting". As a convention, systematic literature reviews combines texts and visual elements to report result (Paul et al., 2021). Thus, we present useful tables and figures to illustrate the textual discussion on the domain reviewed. Relevant acknowledgments regarding methodological limitations and support are also stated.

2.3 ANALYSES AND FINDINGS

This section is divided into two main sub-section due to their distinct goals. First, we present a synthesis of the key characteristics of the 82 papers review. This initial bibliometric analysis aims to provide a profile of the articles on stigma in marketing and consumer research we reviewed. Then, we focus on the thematic analyses of the papers, relying on Bos et al.'s (2013) and Goffman's (1963) stigma frameworks.

2.3.1 Key Characteristics of the Sample

The CABS AJG 2021 list has 41 marketing journals ranked "2" or above, the source quality criterion abovementioned. From these journals, 25 published papers on stigma from 2013 until 2022, the search period we defined. Considering the same timespan, four of the six top-ranked journals (i.e., 4*) published articles on such a topic. The Journal of Marketing Management published the highest number of articles (12), followed by the Journal of Public Policy & Marketing (9), Psychology & Marketing (8), the Journal of Consumer Research (7), and the Journal of Services Marketing (5). These top five journals are presented in Table 2.1, along with their position on the CABS AJG 2021 list, the number of articles published, and the references of such articles.

Journal Title	CABS AJG 2021	# Articles	Articles Published
Journal of Marketing Management	2	12	Apostolidis et al. (2021); Beresford and Hirst (2020); Cherrier (2017); Dean (2018); Pemberton and Takhar (2021); Rocha et al. (2020); Rodhain and Gourmelen (2018); Rome et al. (2022); Rosa-Salas and Flower (2020); Rosenthal et al. (2021); Veer and Golf-Papez (2018); Wyllie and Carlson (2018)
Journal of Public Policy & Marketing	3	9	El Hazzouri and Hamilton (2019); Gollnhofer (2017); Hildebrand et al. (2013); Lin and McFerran (2016); Mitra et al. (2022); Motley and Perry (2013); Wilson (2022); Yeh et al. (2017); Zhang et al. (2022)
Psychology & Marketing	3	8	Homburg and Ukrainets (2021); Huneke et al. (2015); Kudo and Nagaya (2017); Kurt (2022); Larsen et al. (2014); Randers et al. (2021); Sundar et al. (2021); Yeh et al. (2013)

Journal of Consumer Research	4*	7	Coskuner-Balli and Thompson (2013); Crockett (2017); Eichert and Luedicke (2022); Lin et al. (2013); Liu and Kozinets (2022); Smith et al. (2021); Valor et al. (2021)
Journal of Services Marketing	2	5	Hepi et al. (2017); Kralj et al. (2019); Larson and Bock (2016); Parkinson et al. (2017); Zolfagharian et al. (2017)

Table 2.1 – Most influential journals

We used Google Scholar to retrieve the total citations of the set of papers in our review. This information was extracted on January 11, 2023. We also used this information to calculate the articles' average citations per year, a more concrete measure to assess the influence of the publications (Güngör & Çadirci, 2022). To determine the average citations per year, we subtracted the year the article was published from the current year (2023) and divided the total citations of the paper by the result of such a calculation.

Table 2.2 lists the top ten influential articles ranked by average citations. The Journal of Consumer Research published the two most influential papers and has more articles on the list (3). Lundahl (2020) and Valor et al. (2021) are tied as the 8th most cited papers on average, but the former is ranked above the latter on the list because it has more total citations (33 vs. 22).

Reference	Article Title	Journal Title	Average Citations	Total Citations
Coskuner-Balli and Thompson (2013)	The status costs of subordinate cultural capital: At-home fathers' collective pursuit of cultural legitimacy through capitalizing consumption practices	Journal of Consumer Research	26,2	262 (1)
Crockett (2017)	Paths to respectability: Consumption and stigma management in the contemporary black middle class	Journal of Consumer Research	24,5	147 (4)
Fletcher-Brown et al. (2021)	Vulnerable consumer engagement: How corporate social media can facilitate the replenishment of depleted resources	International Journal of Research in Marketing	21,5	43 (17)
Xu et al. (2014)	Second-hand clothing consumption: A cross-cultural comparison	International Journal of	20,3	183 (2)

	between American and Chinese young consumers	Consumer Studies		
Gurrieri et al. (2013)	Women's bodies as sites of control: Inadvertent stigma and exclusion in social marketing	Journal of Macromarketing	14,9	149 (3)
Bauman et al. (2016)	Taboo tattoos? A study of the gendered effects of body art on consumers' attitudes toward visibly tattooed front line staff	Journal of Retailing and Consumer Services	12,0	84 (6)
Parkinson et al. (2017)	Online support for vulnerable consumers: A safe place?	Journal of Services Marketing	11,2	67 (9)
Lundahl (2020)	Dynamics of positive deviance in destigmatisation: Celebrities and the media in the rise of veganism	Consumption Markets & Culture	11	33 (22)
Valor et al. (2021)	The role of emotion discourse and pathic stigma in the delegitimization of consumer practices	Journal of Consumer Research	11	22 (26)
Hepi et al. (2017)	An integrative transformative service framework to improve engagement in a social service ecosystem: The case of He Waka Tapu	Journal of Services Marketing	10,2	61 (11)

Table 2.2 – Most influential papers. Note: Total citations' ranks are indicated between parentheses.

2021 and 2021 concentrate more than one-third of the articles on stigma in marketing and consumer research (28) published between 2013 and 2022. Figure 2 shows that the number of papers published per year remained stable in the other years, with a decrease in 2015 and 2016 followed by an increase in 2017. Figure 2.2 also presents the yearly average of the articles' average citations. In this regard, the articles published in 2013, 2014, and 2017 are the most influential. On the other hand, 2018, 2015, and 2022 are the years with the less influential papers in our sample.
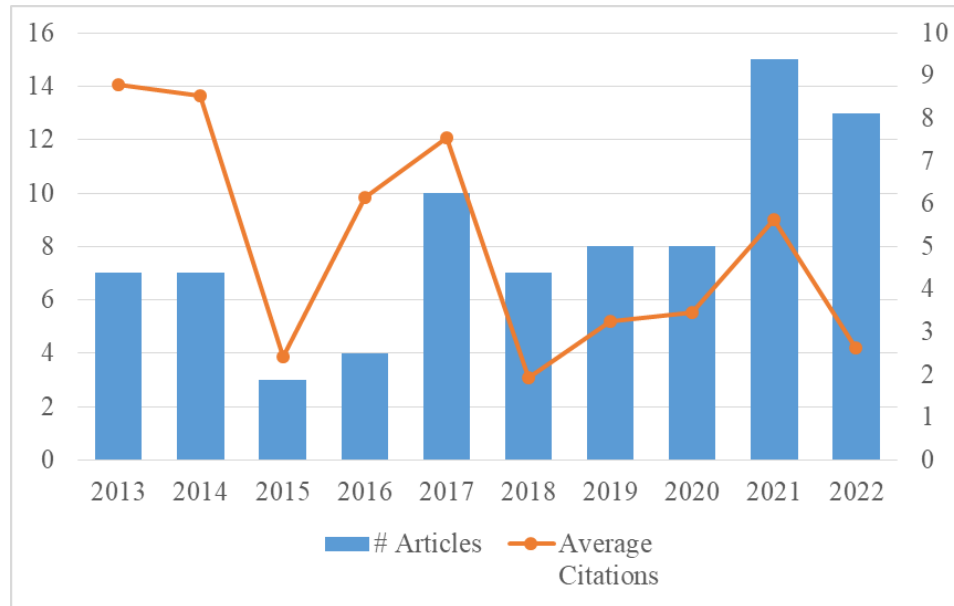
Figure 2.2 – Annual scientific production and citations

Although the papers analyzed describe research conducted in more than 25 different countries, nearly half of them (37) present studies conducted in the USA. The mix of countries where the studies were conducted ranges from more developed (e.g., Denmark and New Zealand) to less developed (e.g., Sri Lanka and Thailand). However, the majority of the studies focus on developed countries. The articles also target different marketplace entities, another contextual element we analyzed. In our sample, 69 papers target commercial stakeholders, and 12 manuscripts target their offerings (Mirabito et al., 2016). One of the articles approaches both entities. Of the papers targeting commercial stakeholders, 60 focus on the consumer, while ten are interested in the workers (i.e., employees, self-employed individuals, and professional service providers). Finally, 13 manuscripts describe studies targeting stigmatized products (i.e., marketplace offerings).

As to methods, nearly half of the entire set of papers employed qualitative techniques (40), while the other half used quantitative approaches (39). The remaining three articles adopted mixed methods. Among the qualitative papers, interviews were the most implemented data collection technique (19). These interviews ranged from more traditional techniques, such as in-depth interviews, to less usual ones (e.g., laddering and photo-elicitation interviews). Out of the quantitative papers, the majority of the published articles (28) are experimental. Regarding data analysis, 45 papers implement multiple analysis techniques. From the articles using a single approach, thematic analysis is the most applied qualitative technique (11), and structural equation modeling (SEM) is the most used quantitative technique (4).

2.3.2 Thematic Analysis

We used two frameworks to code the theoretical perspective of the published articles. First, we followed Bos et al.'s (2013) taxonomy to analyze into which category (i.e., public stigma, self-stigma, stigma by association, and structural stigma) the stigma approached in the papers fall. These categories were described in the introduction and are explored in depth in the following sections. Second, we used Goffman's (1963) categorization of stigma types (i.e., abominations of the body, blemishes of character, and tribal stigma). Table 2.3 summarizes the thematic analysis of the literature, indicating the papers in each category. Next, we organize this section into four sub-sections according to Bos et al.'s (2013) taxonomy. The stigma types proposed by Goffman (1963) are discussed in these sub-sections.

Type of stigma (Bos et al., 2013)	Type of stigma (Goffman, 1963)	Reference
Public stigma	Abomination of the body	Cowart and Brady (2014)
		Cowart and Darke (2014)
		Fletcher-Brown et al. (2021)
		Gurrieri et al. (2013)
		Harmeling et al. (2021)
		Huneke et al. (2015)
		Rodhain and Gourmelen (2018)*
		Rosenthal et al. (2021)
	Blemish of character	Apostolidis et al. (2021)
		Austin and Gaither (2019)
		Bartsch and Kloß (2019)
		Bauman et al. (2016)
		Beresford and Hirst (2020)
		Bridson et al. (2017)
		Cherrier (2017)
		Chin et al. (2019)
		Fan et al. (2021)
		Geiger-Oneto and Simkins (2018)
		Hepi et al. (2017)
		Ho and O'Donohoe (2014)
		Homburg and Ukrainets (2021)
		Jin (2015)
		Jones et al. (2018)
		Lin et al. (2013)
		Lundahl (2020)
		Meyer et al. (2020)

		Milfeld et al. (2021)
		Motley and Perry (2013)
		Smith et al. (2021)
		Sundar et al. (2021)
		Valor et al. (2021)
		Wang et al. (2013)
		Wilson (2022)
		Yeh and Jewell (2015)
		Yeh et al. (2013)
		Yeh et al. (2017)
	Tribal	Johnson et al. (2017)
		Pemberton and Takhar (2021)
		Pervan et al. (2022)
Self-stigma	Abomination of the body	Cruz et al. (2018)
		El Hazzouri and Hamilton (2019)*
		Kralj et al. (2019)
		Kurt (2022)
		Lin and McFerran (2016)
		Morozova and Gurova (2021)
		Parkinson et al. (2017)
		Phillips (2022)
		Rodhain and Gourmelen (2018)*
		Rome et al. (2022)
		Sinha (2016)
	Blemish of character	Achar et al. (2022)
		Coskuner-Balli and Thompson (2013)
		de Faria and Casotti (2019)*
		Ferguson et al. (2020)
		Gollnhofer (2017)
		Hildebrand et al. (2013)
		Jacob et al. (2022)
		Jeffrey and Thomson (2019)
		Larsen et al. (2014)
		Larson and Bock (2016)
		Omeraki Çekirdekci (2020)
		Randers et al. (2021)
		Rosa-Salas and Flower (2020)
		Saatcioglu and Corus (2014)
		Schneider-Kamp (2021)
		Soster et al. (2019)
		Veer and Golf-Papez (2018)
		Wyllie and Carlson (2018)
		Xu et al. (2014)
		Zhang et al. (2022)

	Tribal	Crockett (2017)
		Dean (2018)
		El Hazzouri and Hamilton (2019)*
		Jerez-Jerez and Melewar (2020)
		Leak et al. (2021)
		Mitra et al. (2022)
		Rocha et al. (2020)
		Sobh et al. (2014)
		Zolfagharian et al. (2017)
Stigma by association	Blemish of character	de Faria and Casotti (2019)*
		Kudo and Nagaya (2017)
		Xue et al. (2022)
	Tribal	Liu and Kozinets (2022)
Structural stigma	Blemish of character	Bettany et al. (2022)
		Eichert and Luedicke (2022)

Table 2.3 – Thematic analysis. Note: * indicates duplicated references (approach stigmas that fall into different categories).

2.3.3 Public Stigma

The essence of stigma is the social and psychological reactions perceivers have against the targets of stigma (i.e., the stigmatized), representing the public expression of stigma (Bos et al., 2013). Thus, public stigma is the core of both Bos et al.'s (2013) and Pryor and Reeder's (2011) models and also a necessary condition for the other manifestations of stigma to exist (Bos et al., 2013). In our analyses, we coded as public stigma all studies that focus on the representations the perceivers or "normals" – to use Goffman's (1963) term – hold toward the targeted stigma.

Out of the 39 articles addressing public stigma, eight focus on abominations of the body (Goffman, 1963). Cowart and Darke (2014) and Rosenthal et al. (2021) explore age-related stigma. The former also incorporates gender-related stigma, suggesting that older women are labeled as vulnerable by sales agents, causing them to be targets of unethical sales tactics. The latter explores how older consumers are represented in advertising under the eyes of older individuals themselves. Fletcher-Brown et al. (2021) unveil how individuals with cancer engage with corporate social media to replenish depleted resources. Stigmas related to health conditions, such as cancer and HIV, are also explored by Harmeling et al. (2021) in a series of studies that show the inferences stigmatized consumers make regarding how potential perceivers would judge their consumption based on marketing communications' audience cues. Individuals' appearance is also a potentially stigmatizing attribute. Huneke et al. (2015) explore

this stigma by using eye-tracking, revealing that service employees who display an unhealthy lifestyle stimulate consumers' attention to unhealthy meal options. Cowart and Brady (2014) and Rodhain and Gourmelen (2018) address reactions to overweight-related stigma. The former focuses on overweight frontline employees, while the latter look at those reactions against overweight consumers. Finally, Gurrieri et al. (2013) examine how women's corporeal representations in social marketing campaigns can backfire, entailing stigma and exclusion.

Blemishes of character (Goffman, 1963) are the focus of most articles (28) on public stigma we analyzed. All those addressing health conditions have consumers with mental illnesses as the targets of stigma and use quantitative methods. Several labels applied to individuals, both consumers and workers, products, and brands are investigated in the published papers. Workers can be a target of stigma because they are tattooed (Bauman et al., 2016) or due to their accents (Wang et al., 2013). Bridson et al. (2017) investigate the "selling out" stigma attached to musicians. Ex-offenders, drug addicts (Milfeld et al., 2021), and "hard-to-reach" (Hepi et al., 2017) consumers are also labels addressed by the studies on public stigma. As to stigmatized products, Sundar et al. (2021) explore how unnatural product claims bias consumers' attitudes and choices. Beresford and Hirst (2020) show how brands can also be stigmatized by consumers. Although moral-related stigma toward consumers is addressed by Chin et al. (2019) in the context of bankruptcy, consumers' moral judgment against products is a more common topic in the literature we investigated. This context is explored by Austin and Gaither (2019), Geiger-Oneto and Simkins (2018), Jones et al. (2018), and Wilson (2022). Consumption practices can also be a source of stigma, affecting not only consumers but also workers (Ho & O'Donohoe, 2014) and products (Apostolidis et al., 2021; Cherrier, 2017) involved in the consumption context. In the set of papers we analyzed, the practices that cause consumers to be stigmatized are overspending (Fan et al., 2021), norm violation (Lin et al., 2013), veganism (Lundahl, 2020), beauty work (Smith et al., 2021), and bullfighting (Valor et al., 2021). Socioeconomic status (SES) is the last blemish of character that falls into the public stigma category. Bartsch and Kloß (2019) examine the effects of personalized charity advertising on consumers' attitudes and intentions toward stigmatized social groups. Homburg and Ukrainets (2021) explain the effects of the stigmatization of low-status customers on non-stigmatized customers. Finally, Motley and Perry (2013) investigate the stigma attached to those living in public houses.

Tribal stigma (Goffman, 1963) was given less attention in the literature on stigma in marketing and consumer research than the other types of stigma. There are two papers in our set that

address religion-related stigma. Pemberton and Takhar (2021) have consumers as the targets of stigma, while Johnson et al. (2017) deal with products as targets. The former assesses the increasing visibility of French hijabi fashion bloggers and its impacts on the attitudes toward Muslims in France. The latter discusses privilege and marketplace inclusion using halal food as the context. Lastly, Pervan et al. (2022) show how service social workers are stigmatized and examine the potential for marketing communication to blunt such a stigma.

2.3.4 Self-Stigma

Self-stigma is the result of the awareness of public stigma by the stigmatized individual (Bos et al., 2013). The consequences of such an awareness can manifest implicitly or explicitly (Rüsch et al., 2011). On the one hand, it has negative effects on the well-being of the stigmatized individuals, while on the other, it can drive attempts to confront such a circumstance by adopting coping strategies (Bos et al., 2013). The studies that describe individuals' perspectives of the effects of stigma on their lives and/or explore coping strategies they adopt to deal with it (39) were coded as "self-stigma" and are presented below.

Due to self-stigma characteristics, most papers that fall into this category (35) have consumers as targets. Exceptions are two studies that focus on stigmatized occupations (waitpeople and sex workers), one that addresses a stigmatized practice (shamanism), and another one that explores a stigmatized product category (nameplate jewelry). Jerez-Jerez and Melewar (2020) develop an understanding of the relationship between waitpeople's professional identity and its antecedents. Mitra et al. (2022) examine identity management as a coping strategy for female sex workers in India. Dean (2018) explores indigenous South American shamans' identity work and sensegiving. Finally, Rosa-Salas and Flower (2020) seek to understand how individuals incorporate nameplate jewelry into their life narratives and family histories. While the first three articles described above refer to Goffman's (1963) "tribal stigma" type, the last one touch on a "blemish of character".

Eleven articles in our sample explore abominations of the body (Goffman, 1963) into the self-stigma category (Bos et al., 2013). Overweight-related stigma is the most prevalent, with seven studies focusing on such a stigma. Kralj et al. (2019), Parkinson et al. (2017), and Rodhain and Gourmelen (2018) investigate the internalization of stigma by overweight consumers and the effects of such a reaction. Coping strategies and other explicit effects of stigma on overweight individuals are explored by Kurt (2022), Lin and McFerran (2016), Sinha (2016), and El

Hazzouri and Hamilton (2019). The other four papers on abominations of the body shed light on stigmas related to sexual orientation (Rome et al., 2022), race (El Hazzouri & Hamilton, 2019), label (Phillips, 2022), health condition (Cruz et al., 2018), and age (Morozova and Gurova, 2021). This diffusion of stigma types reveals that many different physical attributes have the potential to be discredited by society and, hence, stigmatize the individuals possessing such a characteristic.

Different health conditions are explored as blemishes of character. de Faria and Casotti (2019) explore consumption meanings and practices of Down syndrome adults, Larson and Bock (2016) focus on the idiosyncrasies of the search for mental health professionals, Schneider-Kamp (2021) investigate consumers with food intolerance and their struggle to adhere to hegemonic taste regimes, and Wyllie and Carlson (2018) shed light on the underutilization and adoption of mental health services. Three papers investigate labels that are sources of stigma: at-home fatherhood (Coskuner-Balli & Thompson, 2013), tattooed people (Larsen et al., 2014), and transracial adoptive mothering (Soster et al., 2019). Smoking is a practice that is becoming more stigmatized in recent years in several cultures. Achar et al. (2022), Ferguson et al. (2020), and Jeffrey and Thomson (2019) explore this practice by showing how smokers internalize and react to this changing context. Stigmatized sexual practices are explored by Achar et al. (2022) and Veer and Golf-Papez (2018). The other consumption practices considered blemishes of character are food activism (Gollnhofer, 2017), meat consumption (Randers et al., 2021), and second-hand clothing consumption (Xu et al., 2014). Another blemish of character is consumers' socioeconomic status (SES), a context explored by four of the published papers we analyzed. Jacob et al. (2022) investigate how SES influences consumers' price sensitivity. Çekirdekci (2020) focuses on poor migrant consumers' lived experiences. Saatcioglu and Corus (2014) take a multidimensional look into the lives of impoverished consumers. Finally, Zhang et al. (2022) examine the role of generic price look-up code in Special Supplemental Nutrition Program for Women, Infants, and Children benefit redemptions. The remaining paper into the "blemishes of character" category examines how and why gay men respond to in-group and out-group influences in their consumption decisions (Hildebrand et al., 2013).

Five articles in our sample approach tribal stigma (Goffman, 1963), and three of them focus on race-related stigma. Crockett (2017) investigates the coping strategies black people use to resist everyday racism in the consumption domain, arguing that such strategies depend on how ideology, strategy, and consumption are connected to sociohistorical aspects. Leak et al. (2021) explore how historical remnants of marketing communications affect black consumers' brand

attitudes, finding that exposure to marketing executions incorporating race-related stigma has a detrimental influence in such a marketplace subsegment. Involuntary prosumption in a stigmatizing context is investigated by Rocha et al. (2020). The authors reveal that black consumers are socially and ideologically pushed to become prosumers due to racism, market constraints, and social stigma. This finding shows that prosumption is an example of a coping strategy. Addressing religion-related stigma, Sobh et al. (2014) also investigate a coping strategy adopted by stigmatized consumers. They identify how privileged Muslims reconcile two opposing hegemonic fashion discourses in their own wealthy countries. The remaining paper in this category deals with label-related stigma. Zolfagharian et al. (2017) explore how second-generation immigrant customers' attitudes and intentions toward a brand are affected by service employee use of language.

2.3.4 Stigma by Association

The impacts of stigma on stigmatized individuals are clear and intuitive, but can people associated with someone that possesses a stigmatized attribute also be affected by such a stigma? Stigma by association (Bos et al., 2013; Pryor et al., 2012) is about this. The authors argue that not only those who have significant connections with the stigmatized (e.g., family and friends) might get stigmatized by association, but also those with less relevant connections. In this regard, individuals might get stigmatized by association because of pure proximity to those possessing a discrediting attribute (Pryor et al., 2012).

In marketing and consumer research, this category of stigma acquires peculiar traits. Consumers might get stigmatized simply because they buy or use a stigmatized product (Kudo & Nagaya, 2017). Also, after product-harm crises, products from the same country of origin of the product that went through the crisis get stigmatized by association, negatively affecting consumers' preferences. Such an idiosyncrasy of this marketplace dynamics opens a potential research avenue for marketing and consumer behavior scholars, discussed in an upcoming section of this paper.

The other two studies in our sample that addresses stigma by association are de Faria and Casotti (2019) and Liu and Kozinets (2022). The first paper was presented in the self-stigma sub-section as it approaches the consumption meanings and practices of adults with Down syndrome from their own perspective. However, the authors also analyze the impacts of stigma on these

adults' relatives by interviewing their family members. The second study investigates how families of China's "leftover women" cope with such a label-related stigma.

2.3.5 Structural Stigma

As stigma is a phenomenon occurring in the social sphere, societal structures are responsible for creating and perpetuating stigmas (Bos et al., 2013). Structural stigma is the core of Mirabito et al.'s (2016) paper on marketplace stigma, as it suggests several ways marketplace stakeholders and offerings are affected by contextual currents that both increase and decrease stigma. As societies differ in terms of socio-cultural and historical aspects, understanding a given community's social context is vital to understanding the structural stigma forces acting in such a context (Bos et al., 2013). This understanding is necessary for developing structural strategies aiming to blunt stigma and advance consumers' well-being (Bos et al., 2013; Mirabito et al., 2016).

Despite the importance of examining structural stigma, only two articles we analyzed directly approach such a category of stigma. Bettany et al. (2022) theorize stigma consumption in a context of diverse, dynamic, and contradictory stigmatizations. The authors use pre-exposure prophylaxis (PrEP) – a practice that can reduce the chances of getting HIV from sex or injection drug use – to portray stigma as a dynamic structure of colliding patterns. Eichert and Luedicke (2022) seek to understand the consumption practices of a historically stigmatized group (gay men) after achieving recognition, status, and respectability in society. The authors present a conceptual model of consumption under fragmented stigma, suggesting that consumption can both mitigate and reinforce stigma.

2.4 FUTURE RESEARCH AGENDA

This paper aims to systematically review the literature on stigma in marketing and consumer research and propose meaningful research avenues for future research in this domain. The first purpose was accomplished in the previous sections, and the remaining of this paper is dedicated to fulfilling the second one. Following the theories, constructs, and methods (TCM) framework (Paul et al., 2017), we further suggest where researchers should concentrate their efforts to take advantage of the stigma concept to advance the knowledge in marketing and consumer research.

2.4.1 Future Directions for Theory

Marketing and consumer behavior researchers have been making meaningful use of the concept of stigma to advance the literature in our field. However, the literature in this domain is still fragmented (Mirabito et al., 2016) due to the lack of use of a solid theoretical framework to ground the empirical findings. Although most of the papers we reviewed use Goffman's (1963) definition of stigma, the theoretical paths start diffusing right after such an initial conceptualization. On the one hand, it allows the studies to explore the phenomena from multiple perspectives, resulting in a rich collection of findings. On the other, it precludes the field from advancing the theories of stigma both in our field and in other disciplines, such as psychology and sociology, which are interested in consumer behavior (MacInnis & Folkes, 2010).

Mirabito et al. (2016) made an initial attempt to contextualize stigma in the marketplace, conceptualizing what they coined as "the stigma turbine". Their framework provides marketing and consumer behavior researchers with a robust guide to conduct studies in such a field, especially for those interested in contributing to illuminating how stigma can be blunt by understanding how it is exacerbated in the marketplace. However, we propose a theoretical research agenda supported by Bos et al.'s (2013) organizational framework, which is based on Pryor and Reeder (2011). By borrowing a framework from a discipline where stigma is a central topic (i.e., social psychology), we aim to suggest research avenues paved in solid theory for marketing and consumer scholars. Although we propose a future research agenda divided into four dimensions of stigma, integrating different types of stigma is encouraged.

Public stigma is central to understanding stigmatization, as such a phenomenon comprises the cognitive representations perceivers hold toward the stigmatized and the consequences of these features (Bos et al., 2013). According to the authors, how perceivers judge the targets of stigma depends on different aspects of the representations they hold. First, onset controllability is the extent to which the stigmatized is attributed to be responsible for their condition. In general, the more responsible the target is judged to be, the more they are stigmatized. Second, perceived severity is how serious the stigmatized condition is judged to be, resulting in an intriguing mix of anxiety and sympathy on perceivers' judgment as the level of perceived severity increases. Third, perceived dangerousness is the level of threat felt by the perceiver. Typically, the more danger they perceive in the condition, the more they avoid and exclude the stigmatized. Finally, there are the perceptions of norm violation attached to the stigma. Generally, if the stigmatized is judged to have violated a social norm, resulting in a stigmatized condition, then there is a

high level of stigmatization on the perceivers' part. These nuances of public stigma originated the future research questions presented in Table 4.

Self-stigma is the component of Bos et al.'s (2013) model that might be of great interest to consumer behavior researchers, as it encompasses the consequences of stigma to the targets of stigmatization and their responses to such effects. This approach to stigma presents several nuances worth investigating, illustrated as future research questions in Table 4. Someone being publicly discredited or poorly treated due to a possessed stigma is a manifestation of enacted stigma. These experiences nurture the felt stigma, which is the fear of being stigmatized. Finally, the interplay of enacted and felt stigma results in the internalized stigma, with detrimental consequences to one's psychological well-being (Pryor & Reeder, 2011). As a reaction to those negative consequences, stigmatized individuals can try to alleviate stigma by adopting coping strategies. These strategies can target altering the context (problem-focused) or managing negative emotions (emotion-focused) (Bos et al., 2013). Finally, the degree to which a stigma can be hidden is another central aspect of stigmatization. This idea of concealed stigma has been discussed since Goffman (1963), which explores stigmatized individuals attempting to pass as "normal".

Stigma by association presents marketing and consumer behavior scholar with promising research avenues, illustrated in Table 4 as suggested future research questions. In essence, stigma by association is the idea that an individual may be stigmatized merely as a consequence of their connection with someone possessing a discrediting attribute (Neuberg et al., 2020). From the marketing perspective, this conceptualization can be expanded because, in addition to individuals, products can also be stigmatized in the marketplace. As products do not have emotions and feelings, the negative effects of stigmatization fall on companies and consumers associated with stigmatized products.

Finally, structural stigma (Bos et al., 2013) can be directly connected to the "stigma turbine" metaphor proposed by Mirabito et al. (2016). This dimension of stigma refers to the roles of several contextual elements in exacerbating or blunting stigma. Examining the socio-cultural context in which stigmas manifest provides marketing and consumer behavior researchers with clues on how these contextual forces can be managed to foster stigma reduction. As structural stigma is highly contextual, it will be further discussed in the section dedicated to future directions for context. However, to maintain the future research questions organized according to Bos et al.'s (2013) framework, they are presented in Table 2.4 as a matter of structural care.

Stigma Dimension	Future Research Questions
Public stigma	• How does the portrayal of stigmatized groups in advertising influence consumers' attitudes toward the advertised brand? • To what extent do consumers choose products/services based on the brand's reputation for promoting diversity, equity, and inclusivity? • How do consumers react to the use of humor to address stigma-related issues in marketing campaigns? • How do different nuances of stigma affect how perceivers judge the targets of stigma? • How can stigma be incorporated into attribution theory to explain stigmatization? • What types of norm violations are more prone to result in a stigmatized condition? • How can stigma perception be measured?
Self-stigma	• To what extent do marketing strategies aimed at reducing stigma affect consumer well-being? • How does self-stigma affect consumer willingness to pay for products/services? • What is the role of self-stigma in consumer information search and evaluation of marketplace offerings? • What are the long-term effects of internalized stigma on consumer behavior and well-being? • How does self-stigma influence consumer behavior regarding health and wellness products? • How can the use of social media help stigmatized consumers cope with their conditions? • What is the impact of self-stigma on consumer behavior in the digital age and the use of social media for product research and purchasing? • How does self-stigma impact consumer behavior regarding luxury and premium brands?
Stigma by association	• How can companies respond to stigmas associated with their offerings? • What is the impact of stigmas associated with products/services on brand reputation and customer loyalty? • What factors contribute to the development of stigma by association in the marketplace? • What are the long-term consequences of stigma by association on consumers' well-being? • What strategies can companies use to mitigate the effects of stigma by association and improve consumer attitudes toward their offerings? • What ethical considerations are involved in managing stigma by association in the marketplace? • How can the impact of stigma by association on consumers' well-being be measured?

Structural stigma	• What is the role of social media in exacerbating and blunting structural stigma? • What are the most effective strategies for reducing structural stigma in different contexts? • How can marketing strategies be used to positively support public policies aiming to change structural stigma? • How do people from different backgrounds and socioeconomic statuses experience stigma? • What aspects of cultures change the way stigma is experienced? • How do societal attitudes and beliefs toward stigmatized groups impact the marketing strategies of companies? • What is the role of marketing in changing social structures to promote stigma reduction? • How can stigma in different contexts be measured?

Table 2.4 – Future research questions

2.4.2 Future Directions for Context

The cross-cultural studies in our sample (e.g., Morozova & Gurova, 2021; Xu et al., 2014) clearly indicate that stigmas vary depending on the context. Thus, investigating stigma in different contexts emerges as a natural suggestion for future research. Exploring stigmas in different countries and eventually comparing the socio-cultural contexts is a more obvious approach to this suggestion. However, comparing historical contexts, such as Eichert and Luedicke (2022), can significantly contribute to marketing and consumer behavior literature as it gives an evolutionary perspective of social structure changes. Investigating different socioeconomic contexts in the same country or region can also be of enormous value to our field. Homburg and Ukrainets (2021) compare low- and high-status consumers, drawing a possible way to approach this contextual comparison.

Although the articles in our review encompass studies conducted in more than 20 different countries, there is still a concentration of studies conducted in the US. Considering the richness that different contexts can bring to the theoretical discussion of stigma in marketing and consumer research, focusing on one country precludes the field from taking advantage of this contextual dimension. The combination of rigorous theoretical grounding with a broad exploration of contexts has the potential to contribute to the literature and practice in our field.

Finally, as different marketplace entities can be targets of stigma (Mirabito et al., 2016), these distinct approaches can also be seen as contextual peculiarities. Research on stigma across various disciplines focuses on the stigmatization of individuals or groups of people with similar discrediting conditions. From the marketing perspective, these studies address the consumers'

context and experiences. However, our field can also take advantage of a broader perspective, investigating how products, brands, and companies become stigmatized. More importantly, future research can explore how contexts contribute to the stigmatization of these marketing entities and what can be done to mitigate its effects on consumers.

2.4.3 Future Directions for Methods

The balance between qualitative and quantitative methods and the wide range of data collection and analysis techniques used in the studies we reviewed indicate that stigma can be addressed from multiple methodological perspectives in marketing and consumer research. However, as it is a sensitive topic, researchers can take advantage of innovative technologies and creative techniques to advance our understanding of stigma, prioritizing research participants' best interests (Hill, 1995). Advancements in neuroscience (He et al., 2021) and artificial intelligence (Vlačić et al., 2021) can be useful for assessing the underlying mechanisms of stigma in and real-life responses of both targets and perceivers. As to creative techniques, our sample offers some practical alternatives, such as the use of photo-elicitation (de Faria & Casotti, 2019; Randers et al., 2021), participatory research (Rosa-Salas & Flower, 2020), and netnography (Johnson et al., 2017; Parkinson et al., 2017; Schneider-Kamp, 2021).

Although there are some attempts in other fields to measure stigmas in the contexts of HIV (e.g., Earnshaw & Chaudoir, 2009) and mental illnesses (e.g., Link et al., 2004) for example, marketing and consumer behavior researchers have no appropriate measurement tool to rely on. Thus, talented consumer psychology researchers in our field are encouraged to embrace the challenge of developing stigma scales. These tools would help us measure and compare different stigmas and contexts, providing more robustness to our theoretical findings, practical implications, and contributions to policy. Finally, we uphold the methodological diversity we found in our literature review. Marketing and consumer behavior research has much to gain without being restricted to a few research methods.

2.5 CONCLUSION

This paper reviewed 82 articles on stigma in marketing and consumer behavior published in 25 journals ranked "2" or above according to the CABS AJG 2021 from 2013 to 2022. We followed the SPAR-4-SLR protocol (Paul et al., 2021) to conduct the review and the TCM framework (Paul et al., 2017) to organize the findings and future research agenda proposed. Our goals were

to (1) explore what we know about stigma in marketing and consumer research, (2) identify the types of stigma explored and how stigma is approached in these fields, and (3) indicate where researchers should concentrate their efforts to take advantage of the stigma concept to advance the knowledge in marketing and consumer behavior.

We found that stigma is a topic that fits in a wide range of theories, contexts, and methods in marketing and consumer behavior literature. At the same time, the literature on stigma in these fields is too fragmented, hindering more consistent advancements in knowledge and practice. To start paving a more coherent path in this direction, we borrowed two frameworks from other disciplines – sociology (Goffman, 1963) and psychology (Bos et al., 2013) – to identify and organize the types of stigma in the papers we reviewed. These organizational frameworks allowed us to conduct a thematic analysis of the stigmas addressed in the papers, founding that stigma is approached from multiple perspectives in marketing and consumer research. Finally, we identified the research needs in our field to suggest vital theories, contexts, and methods worth being investigated by marketing and consumer behavior researchers. The theoretical research agenda was organized based on Bos et al.'s (2013) framework, attempting to create a consistent perspective of the opportunities for advancements in this domain.

By successfully achieving the goals established, our literature review presents three main contributions. First, it synthesizes the knowledge on stigma in marketing and consumer behavior, presenting the state-of-the-art in this domain. Second, it incorporates two frameworks from disciplines in which stigma is a well-established topic, putting together the fragmented literature on stigma in our field. Finally, it indicates a research agenda and suggests questions worth being addressed to guide future studies on stigma in marketing and consumer behavior. Stigma is a multifaceted topic with marked seat and priority boarding in marketing and consumer behavior disciplines due to its importance for all marketplace entities.

While our methodological decisions allowed us to conduct a rigorous systematic literature review, they also posed two main limitations to our study. First, the source type and quality thresholds set might have left some articles on stigma in marketing and consumer behavior out of our sample. However, we firmly believe that the analyses and findings presented here accurately portray the state of the knowledge in this domain. Second, our chosen organizational framework might not have encompassed some stigma nuances. Even so, we are convinced that we chose a suitable comprehensive framework to analyze the literature in our field.

3 CONSUMING INTIMATE APPAREL: A BRAZILIAN TRANSGENDER DISCOURSE

3.1 INTRODUCTION

Transgender people have a gender identity that is not consistent with their sex at birth (Bradford & Syed, 2019; Levitt & Ippolito, 2014). This incongruence between biological characteristics and social identity (Erickson-Schroth, 2014) motivates transgender people to undergo a gender transition process that encompasses three stages: (1) social transition (e.g., using products and services, such as clothing, makeup and hairstyle to temporarily assume the new identity); (2) medical transition (e.g., consuming hormones and other products that alters their physical appearance); and (3) surgical transition (e.g., undergoing surgery to assume the new identity) (Erickson-Schroth, 2014). As such, clothing plays a pivotal role for those struggling for recognition of their new gender identity (Baker et al., 2005; Crane, 2006), as it allows transgender people to forge and maintain their identity before society (Catalpa & McGuire, 2020; McGuire & Reilly, 2022) through one of the most visible forms of consumption (Reilly et al., 2019).

Research on the role of clothing in gender identity affirmation of transgender consumers is still in its infancy (Chauhan et al., 2019; Devine, 2018; McGuire & Reilly, 2022), but these studies have so far overlooked the role that the consumption of intimate apparel[1] can have, mainly because it can be done in secrecy and serve as an initial/experimental step into the transition process. The need for secrecy emerges from society's struggles to understand and support transgender people. Interestingly, Vogue (Fass, 2022) has identified exposed intimate apparel as a fashion trend, heightening the importance of this clothing item for those seeking to construct a new gender identity.

This scenario prompts high levels of discrimination, marginalization, and stigmatization not only in the marketplace (Crockett, 2017), but also within transgender peoples' families (Edwards et al., 2018) and from society in general (Munt, 2016; McGuire & Reilly, 2022). Even worse, due to their stigmatized gender identity, transgender individuals are vulnerable to physical violence (Lombardi et al., 2002). In a context where anti-trans violence is becoming a

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[1] We use "intimate apparel" throughout the paper in a broader sense (encompassing underwear, lingerie, briefs etc.), except in the interviewees' statements, where their original wording was kept. The roles (e.g., functional or symbolic) of intimate apparel are timely discussed.

global epidemic (Taylor, 2020), Brazil constantly ranks as the country with the highest number of homicides against transgender people (Benevides & Nogueira, 2021; TvT, 2020).

Due to the high level of materiality associated with clothes (Ferreira & Scaraboto, 2016), transgender consumers tend to prefer dressing in the simplest way to signal their gender identity during their social transition (Erickson-Schroth, 2014). For those in a conflict between selves, clothing is a strategic form of presenting their extended selves to others (Ruvio & Belk, 2018). And, as such, these products can be considered an extension and an expression of one's identity and self (Belk, 1988; Ferreira & Scaraboto, 2016). In this sense, putting on an outfit is a clear attempt to externalize ideas and feelings (Erickson-Schroth, 2014) and simultaneously satisfy several functional needs, such as comfort, usability, and versatility (Pessoa, 2012; Reilly et al., 2019). However, the emerging body of literature on the role of clothing on consumer identity does not evidence how society can hinder the transition process of transgender people through discrimination, marginalization, and stigmatization, limiting their ability to express their gender identity and reconcile their fragmented identities (Gorman-Murray, 2008).

Although stigmas are complex and multifaceted (Bos et al., 2013), studies on the dynamic nature of stigma are still scarce (Adkins & Ozanne, 2005; Saatcioglu & Ozanne, 2013), and we would argue that further research is still very much needed as stigmatization dramatically influences the social transition process of transgender people. According to Goffman (1963, p. 3), stigmatized people carry "an attribute that is deeply discrediting", causing transgender people to suffer felt stigma (e.g., the feeling of being stigmatized), as well as enacted stigma (e.g., stigma originated from others) (Scambler, 2004; Ndichu & Rittenburg, 2021). While undergoing the gender transition process, transgender people expect to experience stigma and vulnerability when navigating the intimate apparel marketplace. As such, in our study we address two research questions:

• **(RQ1) What does consuming intimate apparel mean to transgender consumers?**

• **(RQ2) What is the role of stigma in generating vulnerability for transgender consumers in the intimate apparel marketplace?**

In examining the consumption of intimate apparel by transgender consumers in Brazil, our contributions are threefold. First, we contribute to the literature on both transgender consumers and gender identity by discussing the meanings of consuming intimate apparel to transgender consumers and their experiences navigating such a marketplace. Second, we shed light on how

stigma (felt and enacted) can influence marketplace interactions between transgender consumers and organizations (e.g., intimate apparel manufacturers and retailers), resulting in experiences of vulnerability that hurt their emotional and social well-being. Finally, we expect our research to have a social contribution as we give voice to transgender consumers – a vulnerable, marginalized, and stigmatized consumer group. Sociohistorical environment and change are determinants for increasing or decreasing stigma and vulnerability (Mirabito et al., 2016), but, although we briefly present the Brazilian context in order to highlight the struggle transgender people face, sociohistorical aspects are not the focus of our study.

3.2 LITERATURE REVIEW

3.2.1 Stigmatized Gender Identities and Consumer Vulnerability

As previously mentioned, transgender people have a gender identity that is not consistent with their sex at birth (Bradford & Syed, 2019; Levitt & Ippolito, 2014). Trans people carry a negative stigma due to their belonging to a social group of people nonconforming to expected social standards (Crockett, 2017). Goffman's (1963, p. 3) seminal work on stigma coins it as "an attribute that is deeply discrediting". Although specific cultural and historical contexts are responsible for determining whether an attribute is discrediting (Mirabito et al., 2016), stigmatized identities are generally due to (1) physical deformities, (2) character blemishes, or (3) tribal associations (Goffman, 1963). Unfortunately, others can perceive trans people as part of all three types of stigma generators. In stigmatized social contexts, gender is considered a conspicuous stigma (i.e., immediately visible in social interactions) due to its notability in such contexts (Quinn, 2006). On the other hand, concealable stigmatized identities may go unnoticed in social interactions.

Consumers with conspicuous stigmatized identities are treated negatively in the marketplace (Bone et al., 2014), which presents them with experiences of vulnerability in that context (Mirabito et al., 2016). These negative experiences of vulnerability in the marketplace push them to adopt coping strategies to minimize the potential negative consequences emerging from marketplace interactions (Ndichu & Rittenburg, 2021). Buying and using products (goods, services, or experiences) to communicate an aspirational identity is typical coping strategy consumers choose while trying to destigmatize their identities and conform to social norms (Arnould & Thompson, 2005). Ndichu and Rittenburg (2021) found that sharing intimate

information in social support contexts (e.g., support groups or peer support) can serve as a strategy to disseminate accurate information and avoid misinformation. These are some of the challenges those in stigmatized consumption contexts face while dealing with the negative consequences of concealing their stigmatized identities that make them even more vulnerable in the marketplace (Crocker & Major, 1989; Hill & Sharma, 2020).

Regarding the idea of conspicuous stigma versus concealable stigma (Quinn, 2006), Scambler (2004) reframes stigma under a health and healthcare lens, by opposing felt and enacted stigma. Ndichu and Rittenburg (2021) contribute to the discussion with the definition of stigma by proposing that stigma emerges not only from other people's perspectives (enacted stigma), but also from the feelings of the stigmatized, who perceive themselves as being imperfect (felt stigma). Although felt stigma is an internal aspect, several "sociocultural winds" influence its process as different contexts make specific aspects of people's identities more prominent. The authors argue that the family is a potentially painful source of felt stigma as it is a primary intimate social group, and, as Corrigan and Miller (2004) put it, a stigmatized identity in one of the family members can prompt negative stigma in the whole family. Public spaces where social interactions occur are another sociocultural element that shape experiences of stigmatization and can influence felt stigma (Damangeot et al., 2013). The reinforcement of the felt stigma occurring in enacted stigma encounters is a fundamental drive for vulnerability (Scambler, 2004). Moreover, vulnerability can be seen as a result of the stigmatization process, even more substantial for people with stigmatized identities (Mirabito et al., 2016). Thus, the interplay of felt and enacted stigma in the marketplace (Damangeot et al., 2013) appears to be mediated by consumer vulnerability.

Consumer vulnerability is "a state in which consumers are subject to harm because their access to and control over resources are restricted in ways that significantly inhibit their ability to function in the marketplace" (Hill & Sharma, 2020, p. 551), thus limiting consumers' ability to maximize their utility and well-being (Smith & Cooper-Martin, 1997). Vulnerable experiences are influenced by both internal (e.g., biosocial or physical aspects and demographics) and external (e.g., discrimination and repression) factors (Baker et al., 2005). Transgender consumers face both these factors, mainly because society hinders their ability to use their consumption experiences as a path to express their ideals, maintain their lifestyles, and build their identities (McCracken, 2010).

In the fashion market, companies are accused of perpetuating stigmatized identities when marginalizing consumers with specific body characteristics by constantly signaling that they

are not acceptable (Scaraboto & Fischer, 2013). Retail is another source of discrimination, as gender nonconforming consumers are common victims of systematic and structural discrimination (McKeage et al., 2018), sustaining trans people's stigmatized identities. Marketplace actors are responsible for generating stigma as they hold relative power to exclude consumers from stigmatized groups (Ndichu & Rittenburg, 2021). This exclusion can be exacerbated in contexts where stigmatizers consider the stigmatized responsible for their condition (Jones et al., 1984).

Online retailing is considered a safer shopping alternative to brick-and-mortar stores as buying clothes is a highly gendered activity, making transgender consumers more vulnerable (Reynolds & Goldstein, 2014). Such a threat is present because public spaces are where transgender consumers commonly experience stigmatization and vulnerability (Damangeot et al., 2013). Apart from this social interaction issue, thrift stores and secondhanded shops are also presented as good alternatives due to their more comprehensive range of styles and sizes, and because there is less interaction with salespeople and other customers (Reynolds & Goldstein, 2014). However, regarding intimate apparel, a secondhand piece is not currently an alternative to be considered due to hygienic concerns.

3.2.2 The Role of Clothing on Identity and Gender Transition

Fashion and clothing play an essential role in the social construction of identity (Crane, 2006) as it is a social norm/standard that contributes to constructing one's identity at the individual and societal level (Halberstam, 2019). Transgender consumers' experiences with clothing and fashion are distinct from the experiences that cisgender[2] consumers have (Reddy-Best & Pedersen, 2015). This difference is due to transgender consumers' need to communicate their identities (Reddy-Best, 2018) or conceal them, attempting to prevent them from facing stigmatization and vulnerability (Baker et al., 2005; McCracken, 2010) in the latter case. Although intimate apparel is traditionally seen as an under-the-clothes piece (Reddy-Best et al., 2022), there is a fashion trend of exposing these pieces (Fass, 2022). Such a trend reveals another potential role of intimate apparel for those undergoing identity and gender transitions, carrying both functional and aesthetic purposes (Law et al., 2012).

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[2] A cisgender person is a person whose gender identity matches their sex assigned at birth.

Clothing also promotes self-confidence (Piacentini & Mailer, 2004), and its materiality is employed during identity transitioning processes by reconstructing how individuals are seen and treated by others (Choi et al., 2014; Ferreira & Scaraboto, 2016). This happens not only because of product features and social interpretation, but also because of the sense of freedom (Ruvio & Belk, 2018) that trans people feel when they dress according to their gender identity, appeasing their body image – the mental representation one has about one's body (Garner & Garfinkel, 1981) – and increasing their self-confidence.

Regarding the social aspects of stigmatized identities, Scambler (2004) argues that there are norms of identity and being that emerge from a myriad of causes, consolidating into structural stigmatization within society. The social identity of one nonconforming self is constantly challenged by the stigma they carry (Ndichu & Rittenburg, 2021). To tackle this reality and shift from a discreditable identity to an accredited one (Vincent, 2003), people stigmatized due to not adhering to gender norms have to fight a bitter social transformation battle (Scambler, 2004). And for transgender individuals, the transformation generally parallels the gender transition process, starting with the social transition, going further with the medical transition, and ending with the surgical transition (Erickson-Schroth, 2014).

The social transition process involves several decisions trans people have to make to better reflect their gender identity, from choosing a name to changing their appearance (Reynolds & Goldstein, 2014). From a social context perspective, Ruvio and Belk (2012) argue that social approval and recognition directly impact the emotional well-being and sense of belonging of transgender consumers. Clothing plays a significant role in making trans people's bodies fit their gender identity. While it is a simple way to signal identity, finding specific apparel is an arduous enterprise (Reynolds & Goldstein, 2014). And although it is not a piece of clothing that is meant to be publicly displayed, intimate apparel has the potential to materialize gender transition and contribute to identity formation (Del Hierro, 2017) of trans people in more intimate and private ways (Reddy-Best et al., 2022). Before the emergence of new fashion trends related to exposed lingerie, intimate apparel usually remained concealed, being an object that helped individuals break what Marion and Nairn (2011) call "one's sameness". It has the capacity to transform consumer selves into new projects (Ahuvia, 2015), mitigating internal conflicts during the redesign of consumers' identity projects (Ferreira, 2019).

Furthermore, transgender people undergoing medical transition, characterized by the use of hormonal therapy, present several body changes that trans people must get used to (Deutsch, 2014), which also presents a challenge for intimate apparel fitting (Reilly et al., 2019). For the

ones opting for a surgical transition, body changes are even more striking (Chyten-Brennan, 2014). As such, clothing becomes a central concern to trans people (Crane, 2006), so much so that some of them decide to go through a sex reassignment surgery in order to be able to wear clothes that fit both their body and their identity (Chyten-Brennan, 2014). Such thinking signals that several aspects can potentially impact transgender individuals' intimate apparel consumption (Reddy-Best et al., 2022) due to its importance to the identity transitioning process and its role in the attempt to destigmatize their new identities (Mirabito et al., 2016). Finally, after recovering from the surgical procedure, trans people must get used to their bodies and adjust to several aspects of their daily lives, including choosing appropriate clothes (Chyten-Brennan, 2014). Here, once again, intimate apparel fitting emerges as a primary concern (Reilly et al., 2019).

3.3 METHODOLOGY

In order to gain insight into the phenomenon that encompasses individuals experiencing the process of gender identity transitioning while dealing with stigma and vulnerabilities, we adopted a qualitative approach (Gheondea-Eladi, 2014), giving voice to transgender consumers and their marketplace navigation experiences, which for us opens up the possibility of gaining insights on how to diminish the level of stigma and vulnerability these groups experience. Focusing on the subjects' intimate apparel consumption experiences, meanings and roles, we elected an exploratory-descriptive methodological route (Ritchie et al., 2013).

To answer the two proposed research questions and deepen the understanding of transgender consumers' intimate apparel consumption milieu, we conducted in-depth interviews with transgender consumers using semi-structured interview guides (Silverman, 2013) based on the existing literature. Our focus was on understanding the role of stigma regarding how society treats trans people, and the associated vulnerabilities within the intimate apparel marketplace context. In-depth interviews, as well as other qualitative techniques, have the potential to help better understand and respond to stigma-related experiences (Mirabito et al., 2016).

3.3.1 DATA COLLECTION

We constructed a semi-structured guide to support the in-depth interviews we conducted with transgender consumers, which allowed interviewees to express themselves openly (Silverman, 2013). Guiding questions were prepared, grounded on extensive literature on consumer stigma

(e.g., Bone et al., 2014; Mirabito et al., 2016) and vulnerability (e.g., Baker et al., 2005; Hill & Sharma 2020), gender identity (Erickson-Schroth, 2014), and clothing-related studies (e.g., Ferreira & Scaraboto 2016; Reilly et al., 2019). A psychologist specializing in gender diversity also collaborated with some suggestions on language appropriateness in the interview guide. After this language review, we conducted a pilot interview with a transgender consumer in order to check for ambiguity and clarity. This pilot interview allowed us to validate our script with slight adjustments, mainly in regards to the order of the questions.

Using a snowball sampling technique (Browne, 2005), starting with contacts suggested by the pilot informant, we completed the first round of interviews with ten transgender consumers. The sessions were conducted remotely using online meeting platforms. As we had not reached theoretical saturation at that point (Low, 2019), we asked the Laura Vermont LGBT Citizenship Center[3] to suggest more participants to be interviewed. This second round of interviews – held in person at the Center's facilities – led to eight more informants, resulting in a final corpus of 18 successful interviews. The interviewees' profiles are detailed in Table 3.1, using codes from I1 to I18 instead of real names to preserve their anonymity. It is also worth mentioning that none of the interviewees had undergone gender-affirming surgeries at the time they were interviewed.

Interviewee	Gender Identity	Age	Currently Working	Education
I1	Female	26	No	Attending Higher Education
I2	Male	24	No	Incomplete Higher Education
I3	Female	26	Yes	Attending Higher Education
I4	Female	21	No	Attending Higher Education
I5	Female	41	No	Attending Higher Education
I6	Female	38	Yes	Attending Elementary School
I7	Male	18	Yes	Attending Higher Education
I8	Female	22	Yes	Completed High School
I9	Male	28	No	Completed High School

[3] The Laura Vermont LGBT Citizenship Center is a São Paulo City Hall initiative to support the transgender community.

I10	Male	26	Yes	Attending Higher Education
I11	Female	43	No	Incomplete High School
I12	Female	49	Yes	Incomplete High School
I13	Female	22	No	Completed High School
I14	Female	19	No	Incomplete High School
I15	Male	22	Yes	Attending Higher Education
I16	Female	19	Yes	Completed High School
I17	Male	27	Yes	Attending Higher Education
I18	Male	20	Yes	Incomplete Higher Education

Table 3.1 – Interviewees' profile.

All the interviews were audio-recorded and, after that, transcribed verbatim. We informed all participants about their anonymous identity and voluntary participation, and each interviewee received consent forms via e-mail before each session, which they were asked to reply to either agreeing with the terms or not.

It is worth mentioning that one of the participants asked to audio-record the interview himself – a demand that the interviewer promptly accepted. This unexpected event reinforces the vulnerability of transgender consumers, and reveals possible tactics they use to protect themselves from their bleak reality. Such a situation is a useful methodological takeaway we recommend other researchers be aware of when dealing with vulnerable consumer groups.

3.3.2 Data Analysis

A thematic analysis of interview transcripts was carried out based on the theoretical frameworks' main themes (deductive), and the emerging themes from the data (inductive). This hybrid approach of deductive and inductive coding (Fereday & Muir-Cochrane 2006) allowed us to capture and develop themes related to the consumption of intimate apparel by Brazilian transgender individuals, revealing the phenomenon's idiosyncrasies.

The dialogical thematic analysis conducted by two of the authors followed three major steps: pre-analysis, material exploration, and treatment of results (Bernard et al., 2016). We started with a pre-analysis, reading all the material to obtain the first insights into the content and

highlight potential emerging themes. Then we moved on to the exploration phase, in which we used the main topics of the literature review as a reference in order to conduct the search for themes in the data. Finally, in the treatment step, we organized the main themes combining topics from the theoretical framework and the issues that emerged from the participants' inputs in their own voices to allow interpretations and conclusions. After each stage of dialogical thematic analysis, we carried out understanding meetings (Fereday & Muir-Cochrane 2006), where the two authors responsible for the analyses met a third author who served as a mediator for the theme understanding process.

The abovementioned processes resulted in the themes discussed in the following section, in line with the topics highlighted in our research questions: transgender consumers' experiences navigating the intimate apparel marketplace, and the role of stigma in generating vulnerability for transgender consumers in the intimate apparel marketplace.

3.4 ANALYSIS

This section presents the analysis of intimate apparel consumption by Brazilian transgender individuals focusing on exploring the meanings of consuming intimate apparel to transgender consumers while navigating that marketplace, and describing the role of stigma in generating vulnerability for transgender consumers in the intimate apparel marketplace. We start the analysis with an overview of transgender consumers' experiences and meanings related to intimate apparel consumption that emerged from the interviewees' statements. With the marketplace as the background for our exploration, transgender consumers' marketplace navigation issues that emerged from the data are also explored in this section, especially experiences regarding stigma and vulnerability.

3.4.1 Consuming Intimate Apparel: Experiences and Meanings

The interviewees' narratives evidenced that the first contact with intimate apparel associated with the sex opposite from their birth sex was a remarkable experience for most. It is an act surrounded by curiosity, shame and concern, which usually takes places during childhood. This experience may be considered the ground zero for what Reynolds and Goldstein (2014) call "social transition", unveiling an unexplored role of intimate apparel for transgender consumers. In general, the individuals report that they tried on their siblings' clothes, hiding in their rooms,

reinforcing a fear of rejection and punishment and an avoidance of stigma. As voiced by I11: "I closed the bedroom door […], a lot of fear and panic, you know?".

In their very first contact with these articles of clothing, the interviewees mentioned a mix of feelings and emotions: on the one hand, shame, fear, and concern, but on the other, liberation and happiness because clothes have, as mentioned before, the power to externalize feelings and influence gender expression.

> "[I] was the only man at home. I always wanted to wear it. I waited until my sisters were out... once, I wore one to see how it looked, and after I put it on, I started to wear and wear and wear." (I1)

> "It was great! After I put it on, I never took it off again!" (I4)

The experience of wearing intimate apparel designed for the sex opposite to their birth sex was shown to impact transgender people's self-esteem. Regarding body image (Garner & Garfinkel, 1981), some interviewees comment on the sensation of wearing the proper intimate apparel, and how it might help forge and communicate their identity:

> "Not every transman feels good, [because traditional underwear does not have] volume and so for us to feel good that way too [...]. [In that sense, the] specific fashion for trans people helps a little bit, at least in self-esteem, to feel good physically as well." (I2)

> "I prefer to buy boxer briefs; boxer briefs are everywhere, it's one thing that has always helped trans men because it's the only kind of underwear that is everywhere, it's even a cool style, everybody likes it, and it doesn't look like panties." (I2)

> "Because when I came out, I didn't really think about sexual intercourse with men or anything. In fact, what I wanted was to be a woman. I wanted to have breasts. I wanted to have long hair. I wanted to wear women's clothes. So when I wore women's clothes for the first time, it was a dream come true. I was amazed! It was all good!" (I6)

> "I feel more complete wearing men's underwear." (I7)

These statements illustrate the importance of clothing and fashion for identity construction as reported by other authors (Crockett 2017; Ruvio & Belk 2012), and shed light into intimate apparel fit issues (Reilly et al., 2019). I2's statement highlights the impact the fashion industry – an important player in the intimate apparel marketplace – can have on transgender consumers' well-being. It is an industry that can offer clothes that fit not only trans people's bodies, but also their identities (Chyten-Brennan, 2014). The quote below summarizes the roles of intimate

apparel ranging from functional to symbolic, culminating with what Ruvio and Belk (2018) call a sense of freedom:

> "I felt good, right? [laughter] More comfortable. So you can have an idea, I think that most of the feminine pieces that I used to have, I burned, burned them all. Thrown into the garbage, I don't know. It was a big weight that came off my heart, off my back, off everywhere. Because it meant a lot, you know? I think that from the moment I got rid of those things, whatever I wore before, because what I had worn before, I was already a little kid, the problem was really the underwear, so when I got rid of the panties and all that stuff... It was really good." (I2)

Overall, the discussion above shows that intimate apparel takes part in meaningful experiences transgender people go through during the identity transitioning process. Intimate apparel has the potential to harmonize people's self-concept (Gorman-Murray, 2008), interrupt one's sameness (Marion & Nairn, 2011), and enable a new identity project (Ahuvia, 2015; Ferreira, 2019) through self-transformation and self-acceptance. During social transition (Reynolds & Goldstein, 2014), such roles are even more vital for transgender consumers due to their stigmatized identity status.

3.4.2 Transgender Consumers' Marketplace Navigation: Gender Transitioning and Intimate Apparel

When asked to comment on the roles of intimate apparel in the construction of their identity during gender transitioning, interviewees voiced that:

> "It contributes, it contributes because, whether I want it or not, it was a thing created to identify you as a man, or in the case of trans women, as women, you know what I mean?" (I2)

> "Yes, I felt like a woman." (I4)

> "I feel like it's a dream come true. I feel free, comfortable... all of that. I started to accept myself more afterwards." (I5)

> "It contributes because the great paradigm of our lives is not accepting ourselves the way we came into the world, and when we wear underwear, it brings something inside us that says, the woman I want to be is being born... It's like a puzzle. It's as if that little piece that was missing starts to fit in." (I13)

> "It's a feeling of satisfaction, of looking like what you want to look like. You are getting closer to what you want to look like." (I16)

"[It's a] social issue because it justifies one's identity so much, who you are. The way you dress and accept yourself is totally part of your identity, of who you are. Even more so at the beginning of a transition." (I17)

The above excerpts reinforce the idea that intimate apparel plays both functional and symbolic roles (Law et al., 2012) during transgender consumers' social transition. I17's quote above reveals that intimate apparel has the potential to help transgender people fight the social transformation battle (Scambler, 2004) while facing stigma and vulnerability in that marketplace. As such, the aesthetics of these pieces were shown to be essential to them, contributing in forging transgender consumers' identity. I1, for example, points out that he likes to buy intimate apparel to "compliment my body and to please my partner".

In this regard, motivation to buy intimate apparel comes from different sources, such as utility (e.g., quality and comfort) and social (e.g., I7 – "for someone to see"). Women report being motivated by issues related to performance, such as sexuality and beauty, such as when I1 reveals, "to compliment my body and to please my partner", as well as a sense of belonging to that gender, as I16 states: "you feel closer to what you want to look like". From what we could gather, transgender consumers seek not only to satisfy their functional needs when buying intimate apparel, but it also expresses their willingness to experience the fantasies and the feelings involved in intimate apparel marketplace navigation. Issues such as feeling beautiful and having consumption experiences influenced by personality traits and cultural background mentioned in the literature (Holbrook & Hirschman, 1982; Reddy-Best, 2018) were also identified in the interviewees' statements.

In this sense, it is interesting to highlight some narratives that focus on the social aspects surrounding the acquisition and consumption of intimate apparel. The following evidence suggests that transgender consumers, even though they suffer significantly from the limited availability of products suited to their physical characteristics (Reddy-Best et al., 2022), follow fashion and trends like any other consumer.

"I follow them, but I don't buy them; it's Calvin Klein, Guess, these brands… if I had money every day, I would buy them to compliment my body, to please my partner, and [to fulfill] the need to have the intimate pieces." (I8)

"I wear a lot of midi skirts, I love crop tops, and my fashion reference is Kim Kardashian because I like to mark my waist with a high waist." (I8)

"I follow Alice Ferraz[4] on social media a lot. She started from nothing, and today she is in all the fashion weeks. Camila Coelho, I also like what she posts a lot." (I13)

Although the intimate apparel marketplace may be a source of stigma and vulnerability for transgender consumers (Scaraboto & Fischer, 2013), our data has shown that they try to find ways to navigate it due to its importance for their gender transitioning process. The excerpts from I8 and I13 above also reveal that fashion brands' use of celebrities plays an essential role in transgender consumers' intimate apparel marketplace navigation as they act as references for these consumers, even if they are cisgender. Social influence is one of the aspects that impact transgender individuals' intimate apparel consumption (Reddy-Best et al., 2022). These findings corroborate studies on consumers in gender transitioning periods, which provide insights into these consumption phenomena, emphasizing the roles of symbolic consumption and the subjects' identity construction (Ferreira, 2019; Voice Group, 2010).

3.4.3 Stigma and Vulnerability in the Intimate Apparel Marketplace

As previously mentioned, vulnerability is influenced by internal and external factors (Baker et al., 2005; Hill & Sharma, 2020), and is considered to be directly associated with sigma, whether in public spaces or among family members (Mirabito et al., 2016), with both issues emerging in the interviewees' statements. Some stores ask customers to fill out forms, or show their IDs for registration purposes, situations that bother I7: "One of the things that bother me a lot is when I have to give my ID or say my name. Since I have not updated my ID yet, it bothers me to have to say my name". Choosing a name is critical to the social transition process (Reynolds & Goldstein, 2014). Thus, when needing to show an ID without the person's social name (the name they chose for themselves), transgender consumers' social and emotional well-being is hurt (Ruvio & Belk, 2012) – an explicit example of vulnerability in the marketplace. Regarding internal factors, the inadequacy of most available products concerning transgender consumers' bodies stands out in most of our interviewees' statements. "To feel good physically" (I2), "hurt me a lot" (I12), and "the discomfort is general" (I14) are some short expressions that illustrate how intimate apparel intimate fitting issues concern transgender consumers (Reilly et al.,2019).

Although the symbolic and aesthetic aspects are of great relevance, as evidenced earlier, it is essential to note that the functional aspects include comfort and fit, usability and versatility

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[4] Alice Ferraz and Camila Coelho are Brazilian fashion influencers. Both are cisgender and their content is not aimed at transgender people.

(Pessoa, 2012; Reilly et al., 2019), and cannot be neglected. As Wattanasuwan (2005) comments, people do not consume clothing only to satisfy material needs, but also to carry out their self-creation projects. The following accounts highlight this issue:

> "I am always looking for a model of panties that don't hurt me as much, and until now I have never found that because most of them always hurt me a lot." (I12)

> "[...] the existing pieces make us feel womanly and better with our body, but the discomfort is general." (I14)

Regarding consumption-related experiences, our interviewees declare difficulties and complaints about the modeling of the pieces. Most of these stories are from transwomen regarding unsettling experiences when wearing intimate apparel, since most models available in the market are developed for cisgender women's bodies. As I14 states: "finding panties that fit and don't hurt me as much [is a challenge]. There are some that tighten so much that they end up bruising. Recently, I bought two and... wow, horrible". This situation generates the need for more specialized products that are more expensive for transgender consumers. I8 points out that "of course it's different, but they could be more affordable (…). It's expensive". These emerging issues about fit and affordability are similar to those Chauhan et al. (2019) and Reilly et al. (2019) could gather from their researches in different contexts.

For this reason, all interviewees mentioned that they prefer to buy intimate apparel in brick-and-mortar stores. Such a finding opposes the suggestion that online shopping would be a safer alternative to brick-and-mortar retail for transgender consumers (Reynolds & Goldstein, 2014). Our interviewees believe that buying online increases the risk of the underwear not fitting, being the wrong size, or being uncomfortable. However, they tend to feel fragile in front of the sales staff, and therefore seek alternatives, such as going shopping with someone: "I prefer to go shopping with someone; sometimes it's a little embarrassing, right?" (I1).

This conflict illustrates the strategies applied by transgender consumers to cope with stigma and vulnerability (Ndichu & Rittenburg, 2021). Most interviewees reported having experienced some embarrassment, and they also believe that, in general, salespeople are not adequately trained to deal with transgender consumers.

> "Since my voice is high and my appearance is not as masculine, what happens a lot is that people don't read you with the gender I identify with." (I10)

> "… and fitting rooms, there was a time when I still had long hair, they would not let me into men's fitting rooms, and they would not let me in, but that has been changing over time." (I7)

> "I had asked for some underwear and one person in the staff started to act ironically, you know? Kind of mocking, like 'Hey, that transvestite wants to buy some panties'." (I1)

Most interviewees mentioned negative experiences when interacting with intimate apparel salespeople, revealing the existence of enacted stigma (Scambler, 2004) in the marketplace. These findings seem to be mainly related to the gender and identity transitioning processes. For instance, I12 reports how sellers become confused: "with me, it has always been a problem and a great fear to not be known as a transman, to not be seen as a man. So sometimes I was treated and called as a woman, [but] that was always a huge problem." I12 also reports on unkind reactions from sellers: "just like I told you about a saleswoman looking at us like: 'Are you going to pick that piece?'. Or when I pick smaller pieces, you know? They look [at us] mockingly.".

Finally, our interviewees reflect that they feel invisible to intimate apparel retailers and brands, another indication of felt stigma (Scambler, 2004). I15 illustrates this feeling in their statement: "no, stores definitively don't think about our needs, or how they should sell, or comfort". These reported situations affect transgender consumers' emotional and social well-being, which should be a subject of concern by companies committed to customer experience (Hill & Sharma, 2020; Ruvio & Belk, 2012). To tackle these troubling situations, our interviewees said they recommend stores in online groups and sometimes in person, illustrating the importance of social support as suggested by Ndichu and Rittenburg (2021). I10 says: "I usually recommend it to virtual friends". The stores that they mainly recommend are the intimate apparel retail stores where they feel well cared for and find appropriate products. As reported by I6: "If I go to a store and people treat me well, I will definitely come back and tell people to go there".

3.5 CONCLUSION

"In fact, it's a little wrong for people to think a transgender individual is different from a straight or bi person because it is not! We are people who wear clothes". This final remark from I7 sums up the struggle for recognition transgender consumers face when navigating the intimate apparel marketplace. It also illustrates how vulnerability hinders transgender consumers' ability

to use their consumption experiences to build their identities (McCracken, 2010). According to the transgender consumers interviewed in this research, consuming intimate apparel involves both positive aspects (e.g., gender identity affirmation and self-acceptance) and negative issues (e.g., stigma, vulnerability, and fear). This duality is striking when considering the importance of this type of product to our interviewees, especially during the social transition process (Del Hierro, 2017; Reddy-Best et al., 2022). In this early stage of identity transition, experiences of enacted stigma in the intimate apparel marketplace can potentially reinforce felt stigma, discouraging transgender individuals' identity projects and negatively affecting their well-being.

On the meanings of consuming intimate apparel for transgender consumers, our interviewee's statements showed that although intimate apparel is seen as a legitimate way to express their gender identity and selves, functional aspects such as comfort and fit are also determinants. They argue that intimate apparel items must provide comfort, offer aesthetic appeal and deliver symbolic meaning. These findings are aligned with Reilly et al. (2019) when they mention that intimate apparel fitting is a primary concern for trans people.

However, the act of consuming intimate apparel is not limited to the moment of purchase and does not occur only inside the marketplace or in social interactions. While it contributes to identity formation during the social transition, it can also be consumed in private (Reddy-Best et al., 2022), preventing them from facing stigmatization and vulnerability (Baker et al., 2005; McCracken, 2010). Such a unique characteristic was made evident by our interviewees when revealing their stigma experiences in the intimate apparel marketplace. Transgender consumers are faced with a dilemma when consuming intimate apparel: on one hand, they expect that consuming these pieces can positively contribute to their gender identity and selves, while on the other, they are concerned and even fear experiencing vulnerability in the marketplace due to their stigmatized identities.

As previously suggested by Reddy-Best et al. (2022), our interviewees' statements illustrated that the needs and wants of transgender consumers are far from being met by most retail stores and intimate apparel brands. In addition to the problems presented by the pieces themselves, the lack of product availability and the high price of specialized pieces became evident in several interviewees' accounts. Another negative issue our interviewees mentioned was the interaction with sellers and embarrassing situations due to their lack of training to deal with different consumer segments, negatively influencing their consumption experience and social well-being. Although the literature presents online stores (e.g., Damangeot et al., 2013;

Reynolds & Goldstein, 2014) as a reasonable alternative to brick-and-mortar for stigmatized consumers, our interviewees clarified that this alternative constrains their marketplace experiences. Transgender consumers desire to fully navigate the intimate apparel marketplace (and other public spaces) without feeling vulnerable due to their stigmatized identities and not having to look for alternatives when buying and consuming such pieces.

This paper's first theoretical contribution is to gender-related consumption literature as it sheds light on a consumption context that is vital for transgender individuals' identity projects and that, at the same time, brings about experiences of stigma and vulnerability. It is worth discussing this conflicting situation as it negatively impacts transgender consumers' well-being, calling for more research. Our exploration of the meaning of consuming intimate apparel for transgender consumers allowed us to glimpse the role of consumer vulnerability as a mediator of felt and enacted stigma in the marketplace, opening a research avenue for future studies investigating the frontiers of stigma and vulnerability. As we present the idiosyncrasies of the intimate apparel marketplace under transgender consumers' eyes, we also contribute to a emerging body of literature intersecting clothing consumption and gender transition processes. In this regard, we argue that intimate apparel plays a unique role during transgender people's social transition as the consumers can choose whether to use such pieces privately or publicly, different from other fashion products. As such, transgender consumers find in intimate apparel an ally to manage their stigmatized identities. And finally, our key takeaway is that consuming intimate apparel carries several (sometimes conflicting) meanings for transgender consumers when navigating this marketplace.

As a central managerial finding, we put forward that while the range of intimate apparel options for transgender consumers is limited, these products' prices are prohibitive. Therefore, we suggest that intimate apparel manufacturers, retailers, and brands carefully plan their portfolios and review their pricing to meet transgender consumers' needs and wants. Moreover, we strongly encourage intimate apparel retailers to better train their sales teams in order to deal with gender-diverse customers so transgender consumers do not feel embarrassed or even fear entering intimate apparel retail stores. These suggestions aim to diminish transgender consumers' vulnerability while enhancing their emotional and social well-being.

Regarding the key social contribution of our study, we believe that we were able to give voice to transgender consumers – a vulnerable, marginalized, and stigmatized consumer group. Our initiative aims to encourage research that fosters consumers' interests and helps advance vulnerable consumer groups' well-being. In this sense, we argue that there is a need to bring

scholars closer to consumer caregivers, both individuals and organizations. Finally, just as transgender consumers are willing to have their voices heard, other relevant groups of vulnerable consumers are also willing to be noticed (e.g., the elderly, the overweight, the illiterate). Despite the recent efforts made by the Transformative Consumer Research Movement (see Davis et al., 2016, for a review), more research is needed to deepen the understanding of the underlying meanings of consumption for a broader range of vulnerable consumer groups.

In conclusion, although sociohistorical aspects were not the focus of our present study, we recognize that intimate apparel marketplace navigation by transgender consumers involves several issues emerging from different contexts. As such, further research could explore these issues by studying transgender individuals with contrasting socio-demographic characteristics and diverse sociocultural backgrounds to provide insights related to real-world phenomena (MacInnis et al., 2020). One limitation of our study is related to the characteristics of our sample: none of our interviewees had undergone gender-affirming surgical procedures, limiting our discussion on the role of intimate apparel in this gender transition stage. In that regard, we envision that fitting issues would emerge with more relevance in groups experiencing that stage of transition, and we suggest further research in the future to investigate our suspicion. Although the exploratory-descriptive methodological route we chose for this study can also be seen as a limitation of our paper, it has allowed us to provide insights into the lived consumption experiences of transgender consumers in the intimate apparel marketplace. Therefore, we encourage future research to advance further into the understanding of stigmatized gender identities in the marketplace and the role of clothing in identity transitions.

4 THE IMPACTS OF CONFLICTING INFORMATION ON CONSUMERS' ATTITUDES TOWARD AND WILLINGNESS TO ADOPT MEDICAL CANNABIS PRODUCTS

4.1 INTRODUCTION

The legalization of medical cannabis in many countries has been spurring the pharmaceutical industry worldwide in recent years. In 2022, the global medical cannabis market reached $10.87 billion in revenue, and this amount is expected to double by 2027 (Statista, 2023). In Brazil, a collegiate board resolution by the Brazilian Health Regulatory Agency (ANVISA) regulating medical cannabis came into force in March 2020 (ANVISA, 2019). ANVISA classifies medical cannabis products as prescription drugs, meaning they must be prescribed by a physician, cannot be sold over the counter, nor can be advertised to consumers (ANVISA, 2008). Similar restrictions to prescription drugs are observed in other countries, such as the US (Geiger-Oneto & Sprague, 2020) and Japan (Morimoto, 2020), posing several challenges to pharmaceutical marketing practitioners when deciding how to market such products (Spiller & Wymer Jr., 2001).

Despite the increasing number of studies attesting to the benefits of medical cannabis (Gittins & Sessa, 2020), these products are still stigmatized due to their relatively recent legalization, making their acceptance difficult on the part of consumers (Geiger-Oneto et al., 2021; Simkins & Allen, 2020). This shift from illicit to legal has spurred considerable debate about the legalization of cannabis and its social acceptance (Geiger-Oneto & Sprague, 2020), which has led consumers to form conflicting attitudes about this issue (Simkins & Allen, 2020). Opinions about the legalization of cannabis vary considerably across countries. As to medical cannabis, only 14% of the Japanese agree that it should be made legal in their country, whereas in the US, this amount reaches 76% (Ipsos, 2019). According to the same study, 54% of the Brazilians are for the legalization of medical cannabis.

As advertising is not an available source of information about medical cannabis products, consumers have to rely on other sources when searching for information on such products. Physicians are a credible source of information in this regard, playing a vital role in consumers' decisions to adopt a certain drug or treatment (Gargano et al., 2015; Hwang, 2020). As their prescription is required for consumers to buy medical cannabis products, physicians become even more influential in the adoption of these products. Friends and colleagues comprise

another information source consumers usually trust when searching for health-related information (Hwang, 2020). Finally, news in media is a widely available source of health information to consumers (Nagler, 2014). However, consumers will often find conflicting information about medical cannabis not only across the available sources, but also within the same source (Kees et al., 2020).

The effects of conflicting health information that the media disseminates go beyond the confusion it causes among consumers, affecting consumers' attitudes toward products, brands, or categories and eventually encouraging less healthy behaviors (Nagler, 2014). The attitude-to-behavior process is a well-established topic among consumer behavior researchers since, generally, a behavior change occurs due to a change in attitude (Bagozzi, 1981). Regarding medical cannabis, the negative attitude associated with it tends to cause consumers to look for less stigmatized but potentially more harmful treatment options (Gittins & Sessa, 2020). Although there are some fledgling studies on the impacts of different information sources on health-related decisions and behaviors, findings are inconsistent and focused on single sources (Hwang, 2020) without considering the outcomes when information is conflicting. Moreover, little is known about consumers' adoption of stigmatized products and the role of information on risk perception in such a process (Ndichu & Rittenburg, 2021). In this regard, cannabis products represent a natural laboratory for marketing and consumer behavior research (Olsen & Smith, 2020).

Given the context above, the research question guiding this study is: what are the impacts of conflicting information on consumers' attitudes toward and willingness to adopt medical cannabis products? By answering this question, we contribute to the health marketing and consumer behavior literature and practice in several ways. First, we advance the theoretical understanding of the impacts of conflicting information on consumers' decision-making by exploring conflicting information across and within different information sources. Second, we contribute to the literature on stigmatized products by investigating the effects of conflicting information on consumers' risk perception and its impacts on their willingness to adopt such products. Finally, we provide health marketing managers with practical implications as we indicate the roles of information in consumers' decision-making process, providing insights on how to manage such information across and within different sources.

4.2 LITERATURE REVIEW AND HYPOTHESES DEVELOPMENT

4.2.1 Health Information Search and Sources

Consumers' health information search is a critical stage in their decision process as it involves multiple sources (Hwang, 2020). In the online context, the availability of sources increases with the same fierce intensity as consumers' trust in the information decreases (Featherstone et al., 2019; Hwang et al., 2018). Consumers consider medical professionals the most reliable source of health information, followed by friends and the media (Gargano et al., 2015). As they offer health expertise and/or verified information, medical professionals and media are classified as official sources of health information, whereas friends and family are unofficial sources (Hwang, 2020).

This myriad of information sources overwhelms consumers, unsettling their evaluations of and decisions on whether to adopt or not a certain product (Wang et al., 2016). When searching for health-related information, consumers often find conflicting information across (Hwang, 2020) and within (Kees et al., 2020) different sources. In both cases, consumers' trust in the information searched, and its source decreases (Urala & Lähteenmäki, 2004). Moreover, in the case of a product or behavior adoption decision, they tend to choose a worse alternative (Nagler, 2014). Assuming that medical cannabis is an effective treatment alternative for several diseases (Gittins & Sessa, 2020), we propose the hypothesis that follows:

H1a: Conflicting information across different sources will lead to lower willingness to adopt medical cannabis products.

4.2.2 Risk Perceptions in Stigmatized Products Adoption

It is well-established in the marketing and consumer behavior literature that perceived risk plays a vital role in lowering consumers' willingness to adopt prescribed drugs (Bearden & Mason, 1978; Stone & Grønhaug, 1993). Risk perception is also shown to have a negative impact on consumers' intention to adopt stigmatized products (Ndichu & Rittenburg, 2021). Medical cannabis products are both prescribed drugs and stigmatized products, hence doubling the negative role of risk perceptions in these products' adoption.

Stigmas emerge from discrediting attributes individuals are judged by others to have (Goffman, 1963). As people, products also have attributes that might be stigmatized in the marketplace

(Mirabito et al., 2016). Medical cannabis products are stigmatized due to their relatively recent legalization (Simkins & Allen, 2020), regulatory confusion (Geiger-Oneto & Sprague, 2020), and contested legitimacy (Geiger-Oneto & Simkins, 2018). Along with the perceived risks associated with their stigmatized condition, we argue that conflicting information also increases consumers' risk perception and, in turn, negatively affects medical cannabis products adoption. Thus, we propose that:

H1b: Perceived risk mediates the effect of conflicting information across different sources on willingness to adopt medical cannabis products.

4.2.3 The Impacts of Conflicting Information on Consumers' Attitudes

Attitudes may be described as predispositions that guide behaviors and have a fundamental role in the understanding of consumers' behavior (Cohen & Reed II, 2006). Consumers' attitudes vary in intensity during their formation process (Kwon & Nayakankuppam, 2015), and this intensity is reflected in consumers' attitude accessibility when they make their decisions (Fazio et al., 1989). The information consumers obtain is a central element of the attitude formation process toward products, brands, or categories (Ajzen, 2001; Cohen & Reed II, 2006). However, there are mixed findings in consumer behavior literature regarding whether conflicting information leads to positive, negative, or inconclusive attitudes (Hwang et al., 2018).

Despite the debatable effects of conflicting information on consumers' attitudes, it is demonstrated that it unsettles consumers, negatively affecting their psychological well-being (Rucker & Petty, 2004; Wang et al., 2016). Conflicting media information also affects consumers' attitudes toward the media itself (Sun & Meng, 2022) since it makes them more skeptical (Cozzens & Contractor, 1987). Regarding health-related decisions, the impact of conflicting information on consumers' attitudes is worrying since it might result in harmful behaviors to their health and well-being (Nagler, 2014; Urala & Lähteenmäki, 2004). Thus, we put forward the following hypothesis:

H2: Conflicting media information will lead to negative attitudes toward medical cannabis products.

4.3 STUDY 1

In study 1, we test hypotheses 1a and 1b to understand the impacts of conflicting information across different sources on consumers' willingness to adopt medical cannabis products and the moderating role of perceived risk in this relation. One hundred sixty-one undergraduate students from a Brazilian private college participated in this study in exchange for course credits. The study was a one-factor between-subjects design with four conditions reflecting different information sources (physician vs. friend vs. media vs. control).

4.3.1 Procedure

Participants were presented with an initial scenario instructing them to imagine they were diagnosed with a chronic disease that would not lead to death but would require the use of a continuous medication to improve their health and quality of life. The story continued with the participant imagining they had visited their trusted physician who prescribed a drug with proven efficacy to their condition and no relevant side effects. They were also told that the medication was widely available and had an affordable price. Finally, they were shown the image and short description of a medical cannabis product (Canabidiol Prati-Donaduzzi). Both the image and description were real, retrieved from the manufacturer's website.

Afterward, participants were assigned to one of the experimental conditions (independent variable), all with negative information about the medication recommended and prescribed by their trusted doctor. The paragraphs were identical in all conditions, describing the negative experiences of patients that used such a medication. The manipulated variable was the information source. In one of the conditions, the negative information was provided by another physician the participant visited looking for a second opinion. In another condition, the negative experience was reported by a friend. The last condition comprised negative information the participant read on their favorite online media channel. Participants in the control condition did not read negative information about the medical cannabis drug prescribed by their trusted doctor, being directly assigned to the question regarding their willingness to adopt such a product. Participants in the experimental conditions answered the same question after reading the negative information from one of the sources. Then, participants answered the perceived risk questions, followed by the manipulation check, the measure of trust in different information sources, and basic socio-demographic questions (sex, age, household income, and religion).

Finally, participants were debriefed by reading the actual goal of the study before finishing the participation.

4.3.2 Measures

Willingness to adopt medical cannabis, the dependent variable in study 1, was measured by the participants' "yes or no" dichotomous answer to the question: "in this context, would you buy and start taking the medication (Canabidiol Prati-Donaduzzi) prescribed by your trusted doctor?".

Perceived risk, the mediator variable, was measured by using a seven-point scale comprised of nine items in which participants indicated their degree of agreement (1 = strongly disagree; 7 = strongly agree) with each statement adopted from Klerck and Sweeney (2007) and Stone and Grønhaug (1993). Although the authors divide the perceived risk into three categories (physical, performance, and psychological), we considered the whole scale as the measure of perceived risk to better suit our goals.

Manipulation was checked by evaluating one item in which participants recalled the information they read about the medical cannabis product. They were asked to choose whether the information they read was negative, positive, neutral or if they had not read any information about medical cannabis products.

 To evaluate the participants' level of trust in different information sources, we asked them to indicate their level of agreement with statements structured as follows: "I trust in the information I get from [information source]". They used a seven-point scale (1 = strongly disagree; 7 = strongly agree) to answer four questions encompassing four different information sources: trusted doctor, physicians in general, friends, and media.

4.3.3 Results

As this study's dependent measure (willingness to adopt) was a dichotomous variable (0 = no; 1 = yes), we analyzed the results using a binary logistic regression that revealed a significant interaction between conditions and willingness to adopt medical cannabis (Wald $\chi2(3) = 15.4$; p = .002). Figure 4.1 shows that participants in the control condition (condition 1) are significantly more willing to adopt medical cannabis (95.3%) than those in all other conditions. Individuals' willingness to adopt medical cannabis in the other conditions, those who were

presented with information contradicting their trusted doctor recommendation, was: another physician (condition 2; 70%), friend (condition 3; 68.3%), and media (condition 4; 67.6%). Table 4.1 shows the estimated marginal means, confirming the significant difference between the control condition and all others. It also shows that the 95% confidence interval of conditions 2, 3, and 4 overlaps, illustrating the nonsignificant difference between them. These results support our hypothesis that conflicting information across different sources would lead to lower willingness to adopt medical cannabis products (H1a). Further, our analyses indicate that such an assumption holds independent of the conflicting information source.
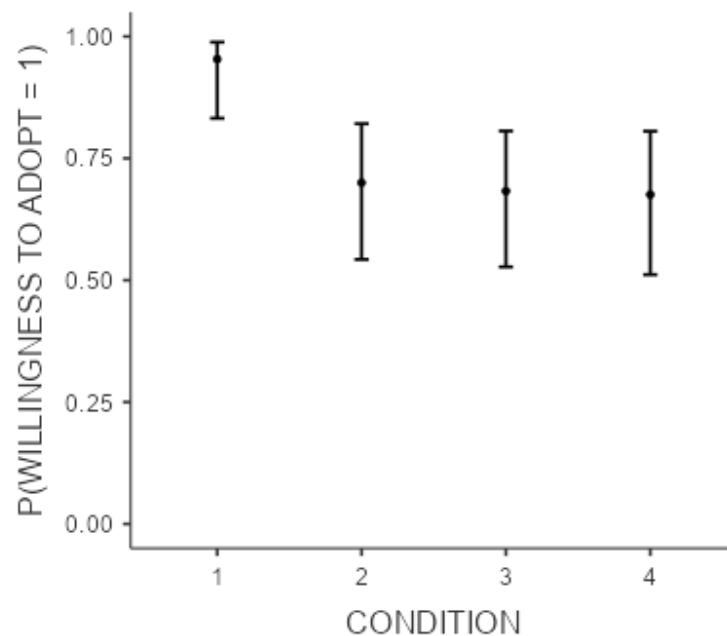

Figure 4.1 – Effects of conflicting information across different sources on consumers' willingness to adopt medical cannabis

CONDITION	Probability	SE	95% Confidence Interval	
			Lower	Upper
1	0.953	0.0321	0.832	0.988
2	0.700	0.0725	0.543	0.821
3	0.683	0.0727	0.527	0.806
4	0.676	0.0770	0.511	0.806

Table 4.1 – Estimated marginal means across conditions

To test H1b, we first conducted a reliability analysis that indicated that the perceived risk scale is reliable (Cronbach's α = .924). Then, we performed a mediation analysis to assess the mediating role of perceived risk on the linkage between the sources of conflicting information and consumers' willingness to adopt medical cannabis. The results, illustrated in Table 4.2, indicate that the total effect of the conditions on willingness to adopt is significant (β = -0.0879; t = -2.98; p = .003). With the inclusion of perceived risk as the mediation variable, the effect of conflicting information sources on perceived risk is shown to be insignificant (β = -0.0481; t = -1.72; p = .086). The indirect effect of the conditions on willingness to adopt through perceived risk is significant (β = -0.0398; t = -2.88; p = .004). These results show that the relationship between conflicting information sources and willingness to adopt is fully mediated by perceived risk, supporting H1b.

Effect	Label	Estimate	SE	95% Confidence Interval		Z	p	% Mediation
				Lower	Upper			
Indirect	a × b	-0.0398	0.0138	-0.0668	-0.01273	-2.88	0.004	45.3
Direct	c	-0.0481	0.0280	-0.1030	0.00678	-1.72	0.086	54.7
Total	c + a × b	-0.0879	0.0295	-0.1457	-0.03005	-2.98	0.003	100.0

Table 4.2 – Perceived risk mediation estimates

We also assessed the participants' level of trust in different information sources: trusted doctors (M = 5.48; SD = 1.17), physicians in general (M = 5.04; SD = 1.18), friends (M = 4.38; SD = 1.69), and media (M = 4.07; SD = 1.67). The confidence interval analysis illustrated in Table 4.3 reveals some significant differences across the means.

	Mean	SE	95% Confidence Interval		SD
			Lower	Upper	
TRUSTED DOCTOR	5.48	0.0925	5.30	5.66	1.17
PHYSICIANS IN GENERAL	5.04	0.0928	4.85	5.22	1.18
FRIENDS	4.38	0.1330	4.12	4.64	1.69
MEDIA	4.07	0.1314	3.81	4.33	1.67

Table 4.3 – Level of trust comparison.

Participants trust the health information they get from their trusted doctors more than all other sources. Physicians in general are the second more trustful health information source. Although

participants' means of trust in media is the lowest among all groups, it does not differ significantly from means of trust in health information they get from friends.

Finally, to test the manipulations, we evaluated if participants could recall the valence of the information about medical cannabis they had read and if their performance in the test would affect their willingness to adopt such products. 72% of the participants correctly recalled the valence of the information they read. A binary logistic regression revealed no significant interaction between participants' information valence recall (correct or incorrect) and their willingness to adopt medical cannabis (Wald $\chi 2(1) = 1.11$; p = .292). Thus, the manipulation was considered to be successful.

4.4 STUDY 2

Study 2 was designed to test hypothesis 2, which predicts that conflicting media information will lead to negative attitudes toward medical cannabis products. Three hundred seventy-eight voluntary Brazilian adults participated in an online experiment. The study was a one-factor between-subjects design with five conditions encompassing all possible combinations of information's valence (positive/positive vs. negative/negative vs. positive/negative vs. negative/positive vs. control).

4.4.1 Procedures

The opening page of the data collection platform was used to inform the individuals about the study in which they were about to participate, presented as a study on general medical treatments to prevent bias. On that page, the participants were also informed that their participation would be voluntary and anonymous and that they were free to quit the study at any time.

Subsequently, the participants were randomly assigned to one of the following five conditions, each one with two news stories about medical cannabis: both positive (n = 95), both negative (n = 65), positive/negative (n = 64), negative/positive (n = 89), and not related to medical cannabis (n = 65). We applied two scenarios (positive/negative and negative/positive) to the "conflicting news stories" condition to avoid the anchoring effect (Tversky & Kahneman, 1974). However, an independent t-test revealed no significant difference between the two

conditions regarding attitude means: t(151) = .203, p = .839. Thus, we have grouped the two scenarios as the "conflicting" condition, resulting in four conditions for the analyses.

After clicking the button declaring that they had read both news stories, the participants answered the three questions from the seven-point attitude measurement scale. Next, the manipulation test evaluated participants' perception of the information valance of the news pieces they read. The participants also answered basic socio-demographic questions about their sex, age, education level, household income, and religion. At this point, we included one closed-ended question to gather participants' opinions about the legalization of medical cannabis with the following set of possible responses: "in favor", "against", and "do not know". Lastly, the debriefing section revealed the study's actual purpose and thanked the respondents for their participation.

4.4.2 Measures

Consumers' attitude toward medical cannabis (dependent variable) was measured based on a three-item scale adapted from the instrument used by Aschemann-Witzel and Grunert (2015). Participants answered the following questions: "taking medical cannabis is…" (1 = extremely bad; 7 = extremely good), "I am [strongly against/strongly for] taking medical cannabis" (1 = strongly against; 7 = strongly for), and "I [would not like/would like] to take medical cannabis" (1 = would not like; 7 = would like).

The manipulation check consisted of a question asking the participants to categorize the two previously read news stories into one of the following five options: "both positive", "both negative", "one positive and one negative", "not related to medical cannabis", or "I do not remember".

4.4.3 Results

We started our analyses by assessing the attitude scale reliability, which showed to be a valid measure (Cronbach's α = .884). We also ran an exploratory factor analysis to check the "attitude" construct consistency. The extraction revealed all three items above 0.8, with overall KMO = 0.715 and 83.8% of the total variance explained by the principal component. Thus, the resulting mean was saved as the attitude measure.

To test hypothesis 2, which predicts that conflicting media information would lead to negative attitudes toward medical cannabis products, we conducted a one-way ANOVA. The independent variable comprises four conditions with all possible combinations of information's valances participants were exposed to (condition 1: both positive; condition 2: both negative; condition 3: conflicting; condition 4: control). The analysis comparing the four conditions suggests that the attitudes toward medical cannabis differ across the conditions (F = 4.68; p = 0,003).

As Levene's homogeneity of variances test was not significant (p = 0.139), the equal variance was assumed, and a Tukey post-hoc test was selected to check for individual differences between groups. The test indicated that the mean score for those who read only positive news pieces about medical cannabis (M = 5.67; SD = 1.36) is significantly higher than those who read only negative news pieces (M = 4.78; SD = 1.68) and those who read conflicting news pieces (M = 5.10; SD = 1.59). The mean scores of those in the control condition (M = 5.15; SD = 1.64), who read news pieces unrelated to medical cannabis, presented no significant difference from all other groups. Figure 4.2 illustrates such findings.
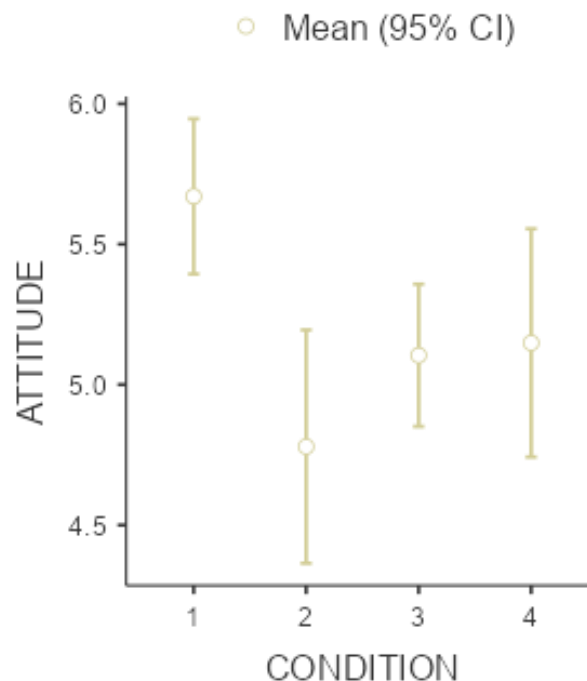

Figure 4.2 – Attitude means across conditions

4.5 DISCUSSION

Results from study 1 showed that participants were significantly less willing to adopt medical cannabis if presented with conflicting information about such a product. Although participants' level of trust in different health information sources varies, in line with what previous research findings suggest (Gargano et al., 2015; Hwang, 2020), their lower willingness to adopt medical cannabis products after being exposed to conflicting information holds independent of the information source. These results corroborate previous research that showed the detrimental impacts of conflicting information on consumers' product adoption decisions (Nagler, 2014). Further analyses revealed that conflicting information impact participants' willingness to adopt medical cannabis through perceived risk. That is, conflicting information increases participants' perceived risk, which, in turn, reduces their willingness to adopt medical cannabis products. These findings align with those of Ndichu and Rittenburg (2021), suggesting that consumers' risk perceptions negatively impact their willingness to adopt stigmatized products.

Study 2's results revealed that even within the same source (media), conflicting information has a significant and negative influence on participants' adoption decision process. That is, participants exposed to conflicting information about medical cannabis (one negative and one positive) presented low attitude levels, similar to those exposed to two negative news pieces and lower than those who read two positive news pieces. These results align with previous studies that showed that conflicting information unsettles consumers' attitude formation (Wang et al., 2016). Although previous researches are inconclusive regarding the valence of conflicting information effects on consumers' attitudes (Hwang et al., 2018), our results reveal that it has negative impacts. Moreover, none of the socio-demographic variables tested as mediators (sex, age, education level, household income, and religion) showed significant effects on consumers' attitudes toward medical cannabis. Not even consumers' opinions about the legalization of cannabis influenced their attitudes toward such products. Thus, our results on the role of conflicting information were proven to be robust.

4.6 CONCLUSIONS

In this paper, we examined the impacts of conflicting information on consumers' attitudes toward and willingness to adopt medical cannabis products through two experimental studies. First, we found that when exposed to conflicting information about medical cannabis (i.e., both positive and negative), consumers' willingness to adopt medical cannabis decreases. This

finding contributes to the literature on consumer decision-making and product adoption by showing the adverse outcomes associated with conflicting health-related information consumers find across different sources. Previous findings were inconsistent and focused on single sources (Hwang, 2020). Second, we found that conflicting information increases consumers' risk perception, decreasing their willingness to adopt medical cannabis products. This finding contributes to the stigmatized products' literature by revealing the effects of conflicting information on risk perception and its impact on consumers' willingness to adopt such products. Little was known about the role of information on risk perception in consumers' adoption of stigmatized products (Ndichu & Rittenburg, 2021). Third, conflicting information was shown to have the same impact on consumers' attitudes toward medical cannabis as negative only information. Our finding confirms that conflicting information unsettles consumers and hence negatively affects their psychological well-being (Rucker & Petty, 2004; Wang et al., 2016), expanding the literature on consumer well-being. Previous research presented mixed findings on the direction toward which conflicting information affects consumers' attitudes (Hwang et al., 2018). In our study, conflicting information was shown to negatively affect individuals' attitudes toward medical cannabis, which, in turn, is likely to result in harmful behaviors to their health and well-being (Nagler, 2014; Urala & Lähteenmäki, 2004).

Our study also provides a couple of managerial implications. First, we provide health marketing managers with insights into the roles of health-related information in consumers' product adoption process. Practitioners are recommended to monitor and manage conflicting information across and within different sources to increase consumers' willingness to adopt stigmatized products. Second, informing consumers about the benefits of medical cannabis products can help educate them, moving them away from potentially less healthy choices. In this sense, pharmaceutical companies are encouraged to invest in public relations initiatives, as advertising of prescription drugs is not allowed.

One limitation of our paper is that it investigates only one stigmatized product. Although it allowed us to deepen our understanding of medical cannabis products' idiosyncrasies, further research could extend our findings to other stigmatized products such as genetically modified food, condoms, and continuous positive airway pressure (CPAP) machines. Another limitation of our study is that we did not assess consumers' actual behavior. Our goal was to show the impacts of conflicting information on attitudes and intentions. However, further research can

expand our findings to behavioral outcomes, advancing our understanding of the impacts of conflicting health-related information on people's lives.

Although the means of those in the conflicting condition do not differ from those in the control group at a .05 level, they differ from those in the positive condition. Moreover, the two groups that differ from the positive condition are the negative and conflicting ones. Thus, our results support H2.

A series of mediation analyses were conducted to assess alternative explanations. Participants' socio-demographic variables (sex, age, education level, household income, and religion) and their opinions about the legalization of medical cannabis were considered potential mediator variables. However, at a .05 level, none of the alternative mediator variables significantly impact the relationship between conflicting information about medical cannabis and consumers' attitudes toward such products.

Finally, 78% of the participants passed the manipulation test that assessed if they could recall the combination of information valences to which they were exposed. Further, an independent t-test revealed no significant impact of participants' performance on the test on their attitude scores: $t(376) = -1.24$, $p = 0.214$. Thus, manipulation was considered to be effective.

5 CONCLUSION

This dissertation aimed to explore the roles of stigma in the marketplace. As previously suggested by Mirabito et al. (2016), marketplace stigma was shown to be complex and multifaceted, playing significant roles for consumers, companies, and other marketplace stakeholders. The concept of stigma originated in sociology with Goffman's (1963) seminal work. However, it has been approached in several fields, from psychology to medicine. (Bos et al., 2013). As multidisciplinary fields (MacInnis & Folkes, 2010), marketing and consumer behavior naturally absorbed this concept, exploring its peculiarities in different and meaningful ways. This dissertation is structured into three papers, putting forward several findings and contributions that are summarized below.

The first paper reviewed the state-of-the-art on stigma in marketing and consumer behavior. It also incorporated two frameworks (i.e., Bos et al., 2013; Goffman, 1963) to suggest how the fragmented literature on stigma in our field can be organized. Finally, it proposed a future research agenda to guide studies on stigma in marketing and consumer behavior. Theoretically, it contributes to the organization of the roles of stigma in the marketplace by looking ten years back in this domain and envisioning the next years to come. By reviewing a myriad of marketplace contexts in which stigma manifests, it offers practical contributions for marketing managers worried about the negative impacts of stigma in the markets they are involved in. Although the review followed Paul et al.'s (2021) SPAR-4-SLR protocol, the criteria and thresholds set present the study with limitations that are discussed in the article.

The second article investigated stigma in the marketplace from stigmatized consumers' perspectives. It focused on understanding the neglected aspects of intimate apparel consumption by transgender consumers by discussing the role of stigma in generating vulnerability in the intimate apparel marketplace. The findings revealed that: (1) the consumption of intimate apparel by transgender individuals involves a striking duality of both positive and negative aspects; (2) although transgender consumers see intimate apparel as a legitimate way of expressing their gender identity, carrying symbolic meanings, functional aspects (e.g., comfort and fit) are also essential for them; (3) intimate apparel plays a unique role during transgender people's social transition as they can choose whether to use such pieces privately or publicly, unlike most fashion products. These findings contribute to the literature on consumer behavior broadly. More specifically, it advances the understanding of the interplay between marketplace stigma and consumer vulnerability. By shedding light on how stigma can influence marketplace interactions between transgender consumers and organizations, the

article offers practical contributions for intimate apparel manufacturers and retailers. Finally, as the study gives voice to transgender consumers – a vulnerable, marginalized, and stigmatized consumer group, it also has social implications. The study's limitations are mainly due to methodological choices and appropriately discussed in the paper.

Finally, the third paper looks at a less explored perspective of marketplace stigma: stigmatized products. It investigated the impacts of conflicting information on consumers' attitudes toward and willingness to adopt medical cannabis products. Findings revealed that consumers were significantly less willing to adopt medical cannabis if presented with conflicting information about it. The study also showed that conflicting information negatively impacts consumers' adoption decision process even within the same source (media). Theoretically, it advances the understanding of the effects of conflicting information on consumers' decision-making. It also contributes to the literature on stigmatized products by revealing the effects of conflicting information on consumers' risk perception and its impacts on their willingness to adopt these products. Finally, the paper provides practical implications for marketing practitioners dealing with stigmatized products and services by indicating the roles of conflicting information about such products in consumers' decision-making and adoption processes. Contextual choices are the main sources of this research's limitations, detailed in the paper.

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