# In the eyes of others : the role of honor concerns in explaining and preventing insult-elicited aggression
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# Chapter 3

# Adding injury to insult:

## The impact of honor on physiological indicators of threat and challenge in response to insults

*"He who has lost honor can lose nothing more"*

Publius Syrus

## Abstract

To investigate the link between honor vs. dignity ideals and reaction to insults regardless of a specific cultural context, we experimentally induced honor en dignity concerns in participants within one cultural context. Then, participants were insulted (or not) during an ostensibly cooperative computer task after which cardiovascular indicators of threat and challenge were measured. In a following task, participants were given the opportunity express their aggression towards the same opponent during a Competitive Reaction Time task. When honor was activated, participants experienced threat after being insulted and expressed more aggression. When dignity was made salient, participants experienced challenge after being insulted and expressed less aggression. These results empirically demonstrate that insults instigate a sense of threat among those high in (experimentally-induced) honor.

Previous research on the way cultural values affect interpersonal behavior has shown that people from an honor culture tend to respond with more anger and aggression to an offense compared to people from a dignity culture (Cohen, et al., 1996; Cohen, et al., 1999; Henry, 2009). This pattern is not restricted to cultural differences; even within one cultural context, people who strongly adhere to honor ideals tend to respond more vigorously to insults and provocation, compared to people adhering less to honor (Beersma, et al., 2003; IJzerman, et al., 2007). However, little is known about the underlying psychological mechanisms driving these effects.

In the current study, we approach honor-related differences in response to insults from a novel perspective by turning to the biopsychosocial model of arousal regulation (Blascovich, 2000; Blascovich & Tomaka, 1996). This model distinguishes between two psychological states— challenge and threat — and their accompanying physiological states of arousal regulation. In this study we examine how insults affect people's arousal regulation when they are or when they are not concerned with honor, by assessing cardiovascular indicators of threat and challenge following an encounter in which people received either negative or insulting feedback. By doing so, we aim to get a better understanding of why people respond more vigorously to insults when their honor is at stake.

**Honor**

Honor plays an important role in many societies in how people define themselves, the extent to which they are valued by their group and the way they interact with other people. Honor is defined as the value of an individual in his own eyes, and in the eyes of his society (Pitt-Rivers, 1965). As such, honor — besides representing an internal quality — is a social construct. Honor not only communicates the esteem of an individual, bestowed upon him or her by others, it also communicates the sensitivity of the individual for that same public opinion (Gilmore, 1987). Maintaining a positive social image and protecting one's reputation to ensure favorable evaluations is considered key among those

adhering to honor (Rodriguez Mosquera, et al., 2000, 2002a). The necessity to maintain an honorable reputation and vigilance towards threats to that image is something that all honor cultures share.

**Dignity**

Honor is often contrasted to dignity. Dignity is defined as the value of an individual, least equal to that of every other person (Ayers, 1984; Leung & Cohen, 2011). Dignity pertains to an internalized sense of moral values and guidelines, and less strict social norms. In dignity cultures, it is believed that the worth of each individual is intrinsic and stable. People are born with dignity and it cannot be taken away by others. Dignity thus entails not having to rely on others' approval in order to be valued. Correspondingly, people are less worried about others disapproval to jeopardize their worthiness. People in dignity cultures operate more autonomously and are less likely to be influenced by others' opinion than people in honor cultures (Kim, Cohen, & Au, 2010; Leung & Cohen, 2011).

For example, research has shown that in dignity cultures — commonly found in western, individualized societies such as the northern parts of the USA and Western Europe — a person's pride is associated with achievement and autonomy rather than social interdependence and family reputation (Rodriguez Mosquera, et al., 2002a). Additionally, compared to honor cultures, people in dignity cultures tend to show less sensitivity to insults and threats to their honor in terms of anger, aggression and the need to restore one's social image (Cohen, et al., 1996; Rodriguez Mosquera, et al., 2008; Van Osch, et al., 2013).

It is important to note that both ideals of honor and dignity play a part in defining their sense of self-worth for most people, regardless of cultural background. For example, upholding moral standards (personal integrity) is very important for people in both honor and dignity cultures (Rodriguez Mosquera, et al., 2002b). Additionally, self-esteem has been shown to be linked to social evaluative cues such as the sense of being included or excluded, even in dignity cultures (Leary, Tambor, Terdal, & Downs, 1995). Thus, honor and dignity are

both important concepts, though there are differences in the extent to which each is considered principal in different cultures. A number of studies have provided evidence for the notion that honor is associated with higher sensitivity to self-threatening situations such as being insulted (Beersma, et al., 2003; Cohen, et al., 1996; Rodriguez Mosquera, et al., 2008). The aim of the current research is to identify the psychological impact of such conditions when either honor or dignity concerns are salient, in order to better understand how such sensitivity can be explained. In particular, we aim to investigate whether a potentially offensive situation is considered more threatening by those concerned with honor compared to those concerned with dignity.

**Threat vs. Challenge**

According to the psychosocial model of arousal (Blascovich & Tomaka, 1996), people respond differently to tense situations based on the inference of the demands and available resources to cope with said situation. For example, when people make the appraisal that they have enough resources to cope adequately with the demands of a tense situation, they are more likely to be challenged by that situation. However, when people make the appraisal that the available resources do not meet the demands required to cope adequately with that situation, they will more likely be threatened by the situation.

The psychosocial model of arousal also posits that each of these psychological states is associated with a specific cardiovascular reaction. A psychological state of challenge is associated with the activation of the sympathetic-adrenal-medullary axis (SAM) resulting in increased cardiac performance and decreased vascular resistance. A psychological state of threat is also associated with SAM axis activation, accompanied by pituitary-adrenal-cortical (PAC) axis activation, resulting in increased cardiac performance but little to no change or even an increase in vascular resistance (Blascovich & Tomaka, 1996; Mendes, Blascovich, Lickel, & Hunter, 2002).

Assessment of cardiovascular indicators of challenge and threat is useful in understanding honor-related responses to insults for several reasons. While

challenge and threat are both adaptive ways to cope with stress, they result in different short-term and long-run outcomes. For example, challenge has been linked to performance-approach motivation leading to mobilization of cognitive and physical resources and enhanced performance (Chalabaev, Major, Cury, & Sarrazin, 2009; Tomaka, Blascovich, Kelsey, & Leitten, 1993). On the other hand, threat is associated with higher levels of subjective stress, a decrease in performance and rigid conflict management (de Wit, Scheepers, & Jehn, 2012; Mendes, et al., 2002). Thus, appraising a conflict as a threat may have a very different and possibly detrimental effect on the way people manage the situation compared to when they experience challenge.

Cardiovascular measures also have merits beyond traditional self-reports and behavioral indicators. First, cardiovascular indicators provide us with online measurements which can be assessed right at the relevant moment. This allows us to gauge appraisals during tense and complex situations such as possibly offensive interaction. Second, cardiovascular indicators are gathered unobtrusively; because participants are unaware of the exact moment of measurement, they are less able to manipulate or inhibit their response (Mendes, et al., 2002). Third, threat and challenge are motivational indicators, indicating why people respond in a certain way.

## Study 3

The aim of the current study was to examine the effect of honor concerns on psychophysiological indicators and aggression. Previous studies have examined these effects more indirectly. For example, there is research linking differences in cortisol and testosterone levels to honor, while honor endorsement was not assessed (Cohen, et al., 1999). Other studies have assessed honor endorsement, but do not report about the direct link between measures of honor ideology and aggressive responses to insults (Rodriguez Mosquera, et al., 2008). Moreover, in cross-cultural research, it is often not possible to exclude other ethnicity-related factors (such as language barriers and socio-economic status of ethnic minorities) as alternative explanations for the results. Therefore, we

decided to experimentally activate honor concerns within a single cultural setting in order to establish a direct causal link between honor concerns and responses to insults.

We hypothesized that when honor is made salient, insults instigate a sense of threat because they are considered a threat to honor (Cohen, et al., 1996). Therefore, these participants were expected to show a cardiovascular response associated with threat and higher levels of aggression after being insulted. When dignity is made salient, we expect a pattern associated with challenge rather than threat. Because dignity is associated with less sensitivity toward external judgments and evaluations (Kim, et al., 2010), these participants are more likely to remain challenged during a demanding task and demonstrate lower levels of aggression.

## Method

### Participants and Design

A total of 114 social sciences undergraduate students participated in this study. Since it was our aim to activate honor and dignity concerns in one cultural setting, 16 nonnative Dutch participants were excluded from analysis. Additionally, four participants were excluded because they did not believe our cover story that they were working together with a second participant. This resulted in a total of 94 participants with gender and age distributed equally among conditions (76 female, age $M = 19.35$, $SD = 1.87$). The study had a two (ideal condition: honor vs. dignity) by two (feedback condition: insult vs. control) between subject design.

### Instruments and procedure

After entering the lab, participants were informed about the nature of the study and the additional measurement of cardiovascular indicators. To avoid suspicion about the actual procedure, we informed them that the study concerned the effect of digital communication on cooperation. Participants were told that they would be paired with a random second participant whom they did not know, and would perform two tasks together. After consenting, participants

were randomly assigned to one of four conditions, placed in individual cubicles and ECG (cardiac performance), ICG (impedance) and blood pressure sensors were attached to them. During the first five minutes of the experiment, participants were told to relax and watch a short clip while baseline measures were collected.

Next, to make participant's honor vs. dignity concerns salient, we used an experimental manipulation. Participants first responded to a set of leading questions (see also Libby & Eibach, 2002; Shafa, Harinck, Ellemers, & Beersma, *under review*) to invoke agreement with honor vs. dignity ideals. The topic of each question was matched in both conditions, but the formulation of the question was such that it would either represent an honor ideal in the honor condition (e.g., My value as a person also depends on how others value me) or a dignity ideal in the dignity conditions (e.g., Other people cannot take away my value as a person). Next, participants were asked to think about and describe a personal situation in which they needed to maintain a positive reputation in the honor condition and a positive self-image in the dignity condition. A similar versions of this manipulation has been used previously to successfully activate or deactivate honor concerns in a Dutch sample (Shafa, et al., *under review*). Additionally, we pretested the current manipulation in a pilot study. Results indicated that participants in receiving the honor manipulation scored significantly higher ($M = 5.07$, $SD = .86$) on a questionnaire assessing family honor, $F(1, 28) = 4.27$, $p = .05$, $\eta_p^2 = .14$ (Rodriguez Mosquera, et al., 2002b) than participants receiving the dignity manipulation ($M = 4.16$, $SD = 1.41$), but were not affected in their level of self-esteem, $F(1, 28) = .33$, $p = .57$ (Rosenberg, 1979).

This ideal manipulation was followed by the first cooperation task, which consisted of three rounds. In each round, participants were (supposedly randomly) assigned to solving a series of ten word puzzles and forwarding their answers to their collaborator via a network connection, who had to use these answers to solve a mystery question. Participants were told that, to mimic the

restriction of real digital communication, interactions were limited to two instances of feedback per round from the question solver to the puzzle solver through an internal chat system. Participants were in fact not matched to another participant, but received preprogrammed responses. This way, participants were always at the receiving end of six instances of feedback. Two of these instances (first and third instance) were equal for both feedback conditions and reported what the mystery questions were. The other four instances varied across feedback condition. In the control condition, participants received neutral feedback about their performance (e.g., "*Are you managing?*"). In the insulting feedback condition, participants received four instances of offensive feedback about their performance (e.g., "*You're turning this into a fucking mess.*"). Some of the word puzzles were fairly difficult to answer correctly, so all participants were bound to make mistakes, which made the negative feedback more credible.

Directly after the first task, participants were asked to evaluate this part of the cooperation by recording a video message using the webcam. The goal of this task was to create a motivated performance situation in order to assess cardiovascular indicators (Blascovich, 2000; de Wit, et al., 2012; Scheepers, 2009). After one minute, a 'continue' button appeared at the bottom of the screen so participants were able to continue with the experiment when done recording. If not stopped by the participants, the recording would continue for a maximum duration of three minutes.

After the speech task, participants started the second cooperation task with the same supposed collaborator. This was in fact the Competitive Reaction Time Task (CRT; Meier, Robinson, & Wilkowski, 2006; Taylor, 1967). This task is played over 25 trials, in which participants have to react as quickly as possible to a stimulus appearing on the screen. Whoever responds quicker in a trial is allowed to send a dose of white noise to the opponent, which is played back through a headphone. Participants select the intensity of each noise burst – from 60 dB to 105 dB with increments of five dB - at the beginning of each round. The intensity selected by participants has been validated as a measure of

aggression against the opponent (Bushman & Baumeister, 1998; Meier, et al., 2006). Participants always win the first trial of this task and then randomly win or lose the following 24 trials. We programmed the noise intensity as such that after losing, participants would receive a steadily climbing noise level over the course of the task, in order to mimic conflict escalation (Bushman & Baumeister, 1998).

After completion of the second task, the network connection was supposedly terminated and participants continued individually. At this point, the effectiveness of the honor/dignity manipulation and participants' self-esteem was assessed, followed by an open-ended question allowing for the participants to make comments on the previous tasks. Participants who were suspicious about the actual existence of another participant were excluded from analyses. In the end, participants were fully debriefed, thanked and rewarded (€ 5 or course credits).

**Measures**

**Physiological indicators.** Cardiovascular signals were recorded at 1000 Hz using a Biopac MP150 system (Biopac Systems Inc., Goleta, CA). ECG signals were recorded with two spot electrodes on the anterior torso using an EKG100C amplifier (Biopac Systems Inc., Goleta, CA). ICG signals were recorded with four spot electrodes on the posterior torso using a NICO100C amplifier (Biopac Systems Inc. Goleta, CA). Systolic and diastolic blood pressure were measured with an inflatable finger cuff around the middle phalanx of participant's non-preferred middle finger using a Nexfin HD system (Bmeye B.V., Amsterdam, The Netherlands). The ECG, ICG and blood pressure signals were recorded with Acknowledge software (Biopac Systems, Goleta, CA). All data were scored blind to condition using Matlab and AMS-IMP software (Free University, The Netherlands). After first inspection of the data, signals that could not be scored due to movement artifacts or measurement error were

rejected[7]. In order to ascertain the required engagement in the motivated performance task, we recorded the number of heart beats per minute and (HR) and calculated pre-ejection period (PEP, interval between electrical stimulation and opening of the aortic valve) by determining the time between the Q-point in the ECG and the B-point in the ICG (de Wit, et al., 2012). The combination of a significant rise in HR and a significant drop in PEP during a task (compared to a baseline measure) indicates motivated performance.

To assess challenge and threat, we also calculated cardiac output (CO, volume of blood pumped by the heart in one minute), and total peripheral resistance (TPR, overall vascular resistance), following a standard procedure (Sherwood, et al., 1990). In line with standard practice (Blascovich, 2000; Scheepers, 2009; Sherwood, et al., 1990), cardiovascular indicators of threat and challenge were assessed after subtracting the final minute of the baseline measure from the first minute of the video speech task, which was our motivated performance situation. These measures were then used to calculate a Threat Challenge Index (TCI). To do so, z-scores were calculated for both measures at first. Next, we gave CO a weight of 1 and TPR a weight of -1 and calculated the sum of these two figures. As such, a positive score on this index indicates a challenge response while a negative score indicates a threat response (de Wit, et al., 2012; Seery, Weisbuch, Hetenyi, & Blascovich, 2010).

**Aggression.** The level of noise bursts administered during the Competitive Reaction Time task (Taylor, 1967) were used as an indication of participants' aggression towards their supposed opponent. This measure varied between 60 dB and 105 dB. In some research the first noise burst is analyzed separately from the remaining 24 noise bursts while in other research all trials

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[7] The cardiovascular data of 15 participants could not be scored reliably due to poor ICG or blood pressure signals. Four participants were removed from analysis because their HR or TPR reactivity scores differed more than 3,5 standard deviations from the mean. This resulted in 75 participants' whose physiological data could be analyzed reliably.

are averaged. (Bushman & Baumeister, 1998; Meier, et al., 2006). For the purpose of conciseness, we will only discus the results pertaining to the average measure. The reported results were similar in the first trial and approached significance. However, neither including nor excluding the first trial affected the significance of the findings for the average noise administered.

**Anger.** Four items were used to measure how angry participants were during the task (e.g., *To what extent were you upset, angry, annoyed, aggravated?*) as a way to assess their response to the feedback they received. This scale ($\alpha$ = .85) was measured on seven-point scales (1= *not at all*; 7 = *very much*).

**Honor concerns.** Three items of the family honor concerns questionnaire (Rodriguez Mosquera, et al., 2002b) were used to assess participants honor values ($\alpha$ = .50). For example, an item in this honor domain was: *To what extent would it harm your self-worth if you were known as someone who is not able to protect your family's reputation.* Answers were given on seven-point scales (1= *not at all*; 7 = *very much*). We focused on this domain because previous research has shown that this domain is most likely to differentiate between honor and dignity culture values (Rodriguez Mosquera, et al., 2012; Rodriguez Mosquera, et al., 2002b).

**Self-esteem.** Self-esteem was assessed using the Rosenberg Self-Esteem Scale (Rosenberg, 1979). This scale consists of ten items ($\alpha$ = .93) and measures self-esteem with both positively and negatively worded items (e.g., *On the whole, I am satisfied with myself*). This scale was measured using seven-point scales (1 = *totally disagree*; 7 = *totally agree*). We added this measure to control for possible interfering effects of our experimental manipulations and the offensive remarks.

Additionally, participant's gender, age and place of birth were recorded. All control variables were measured at the end of the procedure.

# Results

Unless reported otherwise, we analyzed data using ANOVA, with ideal condition and feedback condition as independent variables. Results are discussed in chronological order; descriptive statistics are shown in Table 4.1.

**Motivated performance.** We assessed engagement during the video task by contrasting the HR and PEP scores of the baseline measure to the HR and PEP scores of the video task using dependent sample $t$-tests. During the speech task, HR rose significantly $t(74) = -8.89$, $p < .001$, $r = .72$ and PEP dropped significantly $t(74) = 8.90$, $p < .001$, $r = .72$ compared to the baseline. These results indicate that the speech task was indeed a motivated performance task, enabling us to assess cardiovascular indicators of threat and challenge during this period.

Figure 3.1

*Ideal by feedback interaction effect on TCI*
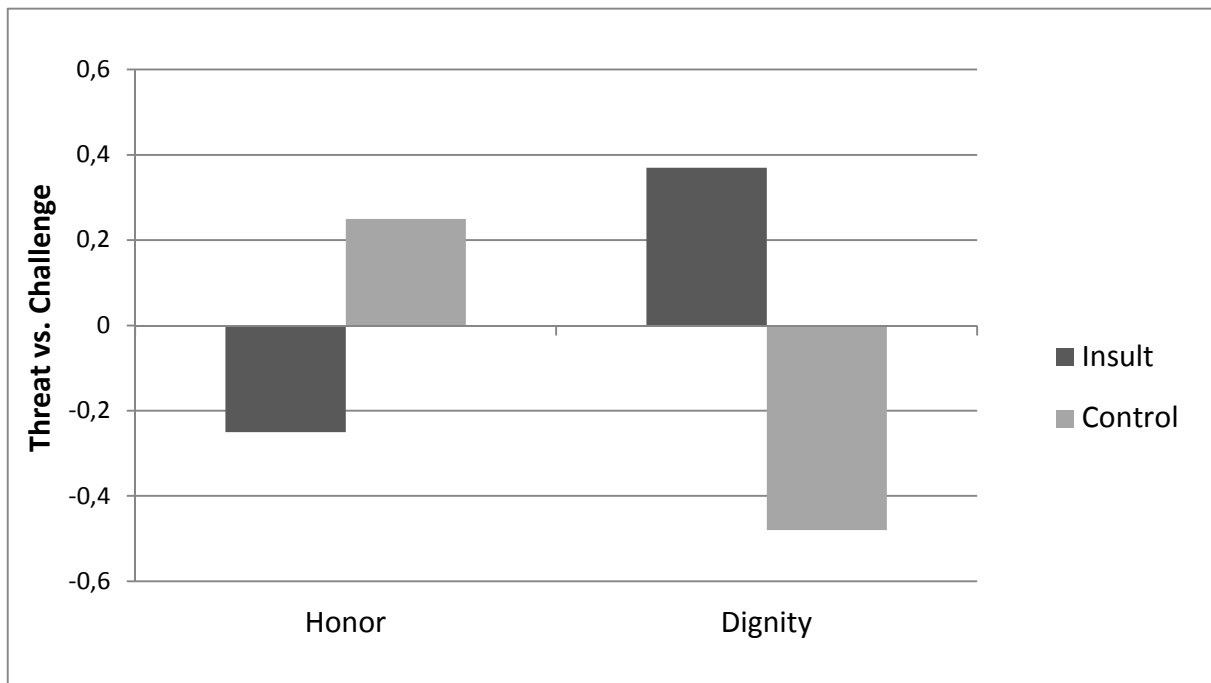


**Threat and Challenge.** We found a marginally significant interaction effect for the TCI, $F(1, 71) = 3.95$, $p = .051$, $\eta_p^2 = .05$. Inspection of the means

(see Figure 3.1) show that, as expected participants in the honor condition who were insulted showed cardiovascular reactivity associated with a threat state ($M$ = -0.25, $SD$ = 1.77), while those who were not insulted appeared to be more challenged ($M$ = 0.25, $SD$ = 1.72). Interestingly, and according to our expectations, this pattern was reversed in the dignity condition, where insulted participants seemed more challenged ($M$ = 0.37, $SD$ = 1.01) compared to the not insulted participants who were more threatened ($M$ = -0.48, $SD$ = 1.38).

**Aggression.** There was a significant interaction effect, $F(1, 90) = 3.99$, $p$ = .049, $\eta_p^2$ = .04 on the noise level administered by participants. Inspection of the means (see Table1) using simple effect analyses indicated that insulted participants in the honor condition administered higher levels of white noise ($M$ = 75.94, $SD$ = 12.89) compared to not insulted participants ($M$ = 68.81, $SD$ = 11.43; $F(1, 92) = 3.83$, $p$ = .053, $\eta_p^2$ = .04). This difference between insulted ($M$ = 70.11, $SD$ = 11.89) and not insulted participants ($M$ = 72.50, $SD$ = 9.29) was not present in the dignity condition $F(1, 92) = .60$, $p$ = .44. As expected and in line with previous research, the honor group responded with more aggression after an insult, while an insult had little impact on aggression among those in the dignity group.

**Anger**. We assessed group differences in the extent to which participants reported anger after the procedure. There was a significant interaction effect of ideal and feedback $F(1, 90) = 4.49$, $p$ = .037, $\eta_p^2$ = .05 (see Table 4.1). Interestingly, simple effect analyses showed that participants in the honor insult condition reported to be less angry ($M$ = 3.03, $SD$ = 1.28) compared to participants in the honor control condition ($M$ = 4.03, $SD$ = 1.37; $F(1, 92)$ = 5.95, $p$ = .017, $\eta_p^2$ = .06 ). This difference was however not present between the dignity insult condition ($M$ = 3.65, $SD$ = 1.31) and the dignity control condition ($M$ = 3.51, $SD$ = 1.16; $F(1, 92) = .15$, $p$ = .69)[8]. There were no significant main effects (all $F$s < 2.56, $p$s > .11).

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[8] Adding the anger scale to the analyses of aggression or cardiovascular indicators as a covariate resulted in similar outcomes.

**Honor concerns.** We did not find any significant effects on the honor concerns scale (all $F$s < 1, $p$s > .43). Contrary to expectation, participants in the honor condition did not report higher honor concerns ($M = 4.74$, $SD = .89$) compared to participants in the dignity condition ($M = 4.71$, $SD = 1.02$).

**Self-esteem.** We did not find any differences on the self-esteem scale. The analysis yielded no significant effects (all $F$s < 1.22, $p$s > .27), indicating that the ideal manipulation nor the type of received feedback affected participants' self-esteem.

## Discussion

In the current study, we experimentally activated honor or dignity concerns in a group of (dignity-culture) participants and we assessed cardiovascular indicators of threat and challenge as well as behavioral indicators of aggression in response to insulting feedback. Assessment of cardiovascular indicators demonstrated that when honor was made salient, a tense situation such as an offensive encounter is more likely to instigate a threat response. On the other hand, when dignity is made salient, offensive remarks rather instigate a challenge response. These findings are novel because they are one of the first to establish a direct link between activation of honor concerns and the differential appraisals of insults, even when a sense of honor is experimentally activated.

Surprisingly, the effects on the cardiovascular indicators reversed in the control condition, where participants received critical—but not insulting— feedback. While participants in the honor-control condition showed a challenge response, participants in the dignity-control condition showed a threat response. This pattern might be explained by the specific characteristics of the task, combined with the way participants interpret the feedback depending on whether honor or dignity was made salient. The feedback conveyed two messages; a content-related evaluation about the participants' performance on the task, and a social evaluation of the participant by the other person. Participants in the honor condition were supposed to rely more on the social evaluation and where thus threatened by the insulting feedback and challenged by the non-insulting

feedback. Participants in the dignity condition were supposed to focus more on the content-related evaluation. As a result, they may have experienced threat in the critical condition when they realized they were performing poorly on the task. However, they became challenged in the insult condition, perhaps because this type of negative social evaluation is considered 'over-the-top' and inappropriate, so they may have discounted the insulting feedback.

As expected, when honor was made salient, participants responded with higher levels of aggression towards a supposed antagonist who insulted them compared to when they received non-insulting feedback. These results are indirect evidence for the effectiveness of the honor manipulation and in line with previous research on honor. These results not only conceptually replicate the finding that insulting honor results in more aggression, but also corroborate that the lowest levels of aggression are found in the honor-no-insult condition (see also Beersma, et al., 2003; Cohen & Nisbett, 1997). This reoccurring observation has nevertheless received very little attention so far.

A surprising finding was the low amount of anger in the honor-insult condition. Since participants in this condition felt more threatened and expressed more aggression, one would also expect higher levels of anger. However, there is prior research showing that anger following offensive encounters subsides more quickly among those from an honor culture, once the anger has been expressed, while it tends to linger when it is not expressed (Cohen, et al., 1999). It might be the case that participants in the honor-insult condition let go of their resentment once they had to chance to express it by administering higher levels of white noise.

The current study adds to previous research on honor and dignity by establishing a more direct link between both honor and dignity ideals and responses to insults. By using a manipulation of honor and dignity concerns, rather than comparing people with different cultural backgrounds, we can discard interfering effects of differences associated with regional background or societal position. Additionally, we incorporate for the first time cardiovascular

measures of arousal regulation into the honor-dignity framework, demonstrating that insults instigate a threat response when someone's honor is at stake. As previous research has shown, a state of threat is associated with numerous detrimental consequences such as higher levels of subjective stress, diminished performance, and the tendency to behave rigidly in the course of conflicts (Chalabaev, et al., 2009; de Wit, et al., 2012; Mendes, et al., 2002; Tomaka, Blascovich, Kibler, & Ernst, 1997).

Additionally, we were able to activate honor concerns and evoke aggression to insults among a group of people who all live in a dignity culture and who are generally less affected by insults. It would be interesting to also consider the alternative; whether it is possible to create an experimental manipulation for people from an honor culture to become less sensitive to insults. Such a manipulation is not only interesting from a theoretical or experimental perspective, but it may also form the basis for an intervention that can be used to ease conflict management and negotiation in potentially honor-threatening situations.

However, there are also some limitations to this study. For example, we did not find any significant correlations between the behavioral measure of aggression and the cardiovascular indicators. This lack of covariance between physiological indicators and traditional — behavioral or self-report — measures is not uncommon in psychophysiological research (Mendes, et al., 2002; Scheepers, 2009), but does not necessarily invalidate each of the two types of measures. As Scheepers concludes, cardiovascular indicators are unconscious markers of a certain psychological states, but they do not necessarily have to lead to other outcomes associated with these states. Additionally, the reported effects on the cardiovascular indicators were largest in the dignity condition. This might be due to the fact that we employed a dignity manipulation as well, to activate dignity ideals in a group of participants that are known to endorse dignity ideals by default. Possibly, re-emphasizing these concerns amplified the outcomes in that condition.

**Conclusion**

Experiencing an offensive encounter has a different impact on people who are concerned with honor compared to those who are concerned with dignity. People who are concerned with honor show a physiological threat reaction and approach an insulter more aggressively —compared to people who are concerned with dignity. Interestingly, once this aggression was expressed and had served its function, participants were more likely to let go of their resentment. These findings inform us about the underlying psychological mechanisms of cultural differences in conflict escalation following insults.

Table 4.1

*Descriptive statistics per condition, significance of ideal by feedback interaction and correlation*

| | Honor | | Dignity | | Interaction | | Correlations | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| | Insult | Control | Insult | Control | F | P | 1. | 2. | 3. | 4. | 5. | 6. | 7. | 8. | 9. |
| **1. HR** | **7.05** (7.50) | **4.67** (5.65) | **7.02** (5.59) | **7.48** (7.54) | .82 | .37 | - | -.41* | .25 | -.26 | .27 | .14 | -.29+ | -.12 | -.07 |
| **2. PEP** | **-9.78** (9.01) | **-9.71** (10.72) | **-11.41** (10.50) | **-8.00** (8.51) | .51 | .47 | -.22 | - | -.72** | .59** | -.73** | -.01 | .27 | -.11 | -.21 |
| **3. CO** | **.06** (.33) | **.16** (.30) | **.15** (.18) | **.07** (.17) | 2.25 | .14 | .30* | -.76** | - | -.66** | .94** | -.16 | -.15 | -.02 | .13 |
| **4. TPR** | **201.48** (991.86) | **-61.65** (1416.7) | **-273.79** (796.09) | **574.14** (1481.8) | 4.20 | .044 | -.01 | .39** | .50** | - | -.87** | -.23 | .19 | -.03 | .01 |
| **5. TCI** | **-.25** (1.77) | **.25** (1.72) | **.37** (1.01) | **-.48** (1.38) | 3.95 | .051 | .16 | -.64** | .84** | -.89** | - | -.21 | -.18 | .01 | .08 |
| **6. Aggression** | **75.94** (12.89) | **68.81** (11.43) | **70.11** (11.89) | **72.50** (9.29) | 3.99 | .049 | .15 | -.01 | .00 | .03 | -.02 | - | .16 | .04 | .22 |
| **7. Anger** | **3.03** (1.28) | **4.03** (1.37) | **3.65** (1.31) | **3.51** (1.16) | 4.45 | .037 | .07 | -.04 | .19 | .09 | -.05 | -.08 | - | .09 | -.01 |
| **8. Honor** | **4.77** (.95) | **4.72** (.86) | **4.85** (.95) | **4.57** (1.09) | .31 | .58 | .05 | .05 | .19 | .06 | .06 | .18 | -.06 | - | -.22 |
| **9. Self-esteem** | **5.01** (1.25) | **4.85** (1.24) | **5.23** (1.05) | **5.14** (.92) | .02 | .88 | .22 | -.34* | .17 | -.12 | .16 | .18 | -.15 | .23 | - |

Note. We found no significant main effects. Correlations in the top half of the table concern the honor condition, correlations in the bottom half of the table concern the dignity condition. ** $p < .01$; * $p < .05$; + $p < .1$ (two-sided), 1-5 df = (1,71), 6-9 df = (1,90).