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Overcoming or Removing Gendered Barriers? Support for Individualistic Diversity, Equity, and Inclusion Interventions Among Those in Power

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ABSTRACT

Organizations are increasingly committed to diversity, equity, and inclusion (DEI) efforts. However, those who have the power to implement DEI interventions and those who ought to benefit from such interventions might have conflicting perspectives about their aims. In three studies, we investigate how those with high (vs. low) power endorse structural versus individualistic interventions for women. In Study 1 ($n = 403$), we focus on women's evaluation of the intervention. We find that they anticipate that structural interventions will be more successful at alleviating gender barriers at work than individualistic interventions. In Studies 2 ($n = 500$) and 3 ($n = 319$), we focus on men and women across different levels of power and find that individuals, regardless of their gender and their hierarchical position, prefer interventions that challenge organizational systems that maintain inequalities than those that support women in coping with DEI issues. However, individuals with stronger system-legitimacy beliefs showed just as much support for individualistic DEI interventions as for structural ones. The results suggest overall support for structural DEI interventions, but that ongoing meritocratic beliefs can detract from their actual implementation. We discuss how intervention research may benefit from focusing on interventions that target system-legitimacy beliefs to leverage more support and implementation of structural interventions.

Although women are entering the labor market more than ever before (Eurostat 2024), workplace gender disparities persist in Europe. Women are still paid less and are underrepresented in the labor market, all the while being disproportionately represented in lower-paid jobs, being more at risk of losing their jobs (Carli 2020), and experiencing lower subjective work–life balance (Beham et al. 2019) compared to men (Eurostat 2023). As a result, organizations frequently implement workplace gender equity through programs and policies that intend to improve women's position at work (Annabi and Lebovitz 2018; Pietri et al. 2019; Shortland 2011).

Interventions that intend to alleviate workplace gender inequities tend to take one of two approaches: those that (1) focus on changing the individual to limit the consequences of gender inequities (i.e., are individualistic; Lambert et al. 2022; Ryan and Morgenroth 2024), or (2) focus on changing organizational structures and systems to target gender inequities at its source (i.e., are structural; Melaku and Winkler 2022; Nielsen et al. 2010).

Individualistic interventions for women often involve raising awareness, developing skills, and ultimately offering support to women by building individual coping resources through education, training, and developing networks (Kim, Fitzsimons, and Kay 2018; Sutherland and Cooper 2000). In this way, these interventions often include self-affirmation strategies and

competence-building programs to increase women's self-worth and sense of empowerment (Ely, Ibarra, and Kolb 2011; Ely and Meyerson 2000). While individualistic interventions can touch on structural barriers that contribute to gender inequities, they do not address these barriers directly (Cheryan et al. 2017; Rodino-Colocino 2018). By contrast, structural interventions target institutional barriers to gender inequities rather than focusing on individual actions; some examples include affirmative action programs to ensure gender diversity or workplace flexibility policies to promote alternative and flexible work arrangements. In that way, individualistic interventions do not inherently challenge the organizational systems that may cause and sustain gender inequities that structural interventions do.

Individualistic interventions have long been used as a tool for remedying inequities and inequalities (Anand and Winters 2008). In early considerations of "diversity management" literature in the Western European and North American contexts, individualistic interventions showed promising benefits for women in the workplace. Such benefits included enhancing women's self-efficacy (Ford et al. 2021), helping with skill development (Clarke 2011), and increasing professional networks (Tsen et al. 2012). Because of these benefits, individualistic interventions have remained popular to date.

For example, there are presently many interventions for women and girls in Science, Technology, Engineering, and Mathematics (STEM) fields to enhance their field-specific skills and encourage their career ambitions (Liben and Coyle 2014). Individualistic interventions are also seen in the form of leadership training programs, where women are taught to increase their confidence, take greater risks, and not fall prey to the impostor syndrome (Atir 2022). Especially since the release of Sheryl Sandberg's influential book "Lean In" (2013), the popular press and social media started to promote the notion that women themselves can reduce gender inequities by changing their behaviors at work. Likewise, organizations now commonly offer women self-development programs that encourage them to adopt an agentic behavioral style for career advancement (Martin 2022).

But if the women who stand to benefit the most from DEI efforts could choose their own interventions, would they choose interventions that target and require change from themselves? In the present research, we examine whether there is a misalignment (or agreement) in how women and those in positions of power (i.e., in the organization's leadership hierarchy) endorse individualistic versus structural interventions among women. Further, we examine if system-legitimacy beliefs act as a motivating factor that leads to this misalignment, such that those who hold power may evaluate DEI initiatives differently because they have stronger legitimizing beliefs than those without power.

The current research makes two important contributions to the field. First, we examine individual preferences for different types of interventions, and through this, we address the relative lack of emphasis on the factors that may influence intervention evaluation in the current literature (Lambert et al. 2022). In doing so, we zoom in on individuals' power positions as a predictor of their intervention evaluations. DEI intervention research has mainly focused on the preferences and effectiveness of interventions for people in low-power positions (Annabi and Lebovitz 2018; Bezrukova et al. 2016; Wong et al. 2022); however, explanations for the actions of those in a position of power to carry out DEI efforts have been relatively understudied.

Second, this research is important because it has implications for possible tensions when organizations seek to implement interventions aiming to achieve workplace gender equity. Scholars have called to distinguish interventions that focus on changing the targets of the intervention (in this case, women) or those that focus on the broader structural functioning and gain a greater understanding of how well they are each received (Allcock and Filatotchev 2010; Ryan and Morgenroth 2024; Timmers, Willemsen, and Tijdens 2010). We answer this call and show that support for these interventions differs depending on who you ask and their beliefs about the status quo.

1 | Rethinking DEI Interventions: From Individualized Focus to Structural Solutions

Women are often in relatively lower positions of power in organizations and broader society and therefore are the target group of many gender DEI interventions (Catalyst 2022). Although early research and implementation of individualistic interventions pointed to evidence of benefits, individualistic interventions now face substantial scientific and community critique (Berkeley Economic Review 2021; Kim, Fitzsimons, and Kay 2018; Ryan and Morgenroth 2024). In particular, the effects of individualistic interventions are often short-lived, unstable, and contingent on the presence of structural interventions.

Additionally, scholars have argued that individualistic interventions may not ultimately deliver what women require in the workplace. Individualistic interventions aim to improve ambition and skills, but nowadays, many women already see themselves as ambitious, desiring high-profile jobs (McKinsey & Company 2022), and equally competent to men (Eagly et al. 2020). Research also demonstrates that popular individualistic interventions do not target barriers such as being held to a higher standard than White and male peers (Moscatelli et al. 2020), receiving less support from their managers (McGUIRE 2002; McKinsey & Company 2022), or not being able to meet masculine ideal worker norms (Acker 1990; Zanhour and Sumpter 2022). Research also suggests that the exclusive use of individualistic interventions without structural change may even exacerbate the discrimination that women face in the workplace (Kim, Fitzsimons, and Kay 2018).

Rather than individual characteristics and skills, research has shown that the work context and culture have a bigger impact on constraining women's choices and career trajectories. For instance, a common reason used to explain gender inequalities is the claim women have lower career ambitions than men; however, research suggests that many women leave due to incompatibilities with the work structure and caregiving responsibilities (Stroh, Brett, and Reilly 1996), because they feel undervalued or because the work environment lacked

meaningful career opportunities for them (Hewlett 2014; Stone and Lovejoy 2004). A similar reason used to explain gender inequalities is that women lack confidence in the workplace, particularly in leadership roles; to this, we draw on research showing that imposter feelings are associated with social and organizational cultures, particularly in masculine workplace cultures (Feenstra et al. 2020; Tulshyan and Burey 2021). Structural interventions include transforming neoliberal and individualized work culture (Grosser and McCarthy 2019) and reducing barriers that hinder skill development and access to better career opportunities (Berkeley Economic Review 2021; Livingston 2016). Contrary to individualistic interventions, structural interventions such as installing organizational systems of accountability (Kalev, Dobbin, and Kelly 2006), changing organizational culture (Cheryan and Markus 2020), and flexible work arrangements (Maraziotis 2024) have been associated with relatively bigger and more consistent effects on social equities. In fact, the benefits of individualistic interventions are at times even contingent on structural and institutional DEI efforts (McKinsey & Company 2022).

Individualistic interventions are facing growing criticism, with increasing calls for initiatives that address the structural roots of gender inequities (Berkeley Economic Review 2021; Johnson, Smith, and Christensen 2023; Ryan and Morgenroth 2024). Given the greater sustainability and effectiveness of structural interventions, and considering the calls to action for more systematic and structural change, we expect that women will prefer structural approaches to address gendered issues in the workplace over individualistic interventions.

2 | The Effects of Power on Intervention Preference

While there are substantial reasons for women to prefer structural interventions, curiously, individualistic interventions are still widely implemented in major organizations (INSEAD 2023; International Labour Organization 2023; UN Women 2023). We propose that organizations still frequently use individualistic interventions because people in higher positions of power typically decide which interventions are implemented (e.g., those in leadership positions, HR managers). We expect that people in higher power positions may be more likely to endorse individualistic interventions over structural interventions, while people in lower power positions endorse structural interventions over individualistic interventions. If so, it is important to understand the psychological factors driving the discrepancy between high and low-power people's support for different initiatives. We posit that one key factor that may drive such a discrepancy may be the tendency to believe that current workplace systems are already just and legitimate.

To understand the role of power and individuals' beliefs on how high and low-power individuals endorse DEI interventions, we draw on system-justification theorizing. System justification theory has often been used to explain why those in low-power and high-power groups may justify inequitable systems of operations (Jost and Banaji 1994; Jost and Toorn 2012). We turn especially to the theorizing used to understand the beliefs and behaviors of high-power groups and why they may uphold inequitable arrangements (Kay et al. 2009; Proudfoot and Kay 2014).

First, high-power individuals are incentivized to uphold inequitable systems as they tend to derive their authority from, or despite, existing inequitable structures within organizations (Benschop and van den Brink 2013; Cortis, Foley, and Williamson 2022). Consequently, organizational members with high power may thus be less likely to find problems with inequities, thereby believing the current system in which they operate is just and legitimate (i.e., have high system-legitimacy beliefs (SLB); van der Toorn, Tyler, and Jost 2011). In this way, high-power individuals may underestimate the scope and severity of inequities and may not consider structural change necessary.

Several empirical studies show this legitimization of current organizational systems among high-power individuals. For instance, regardless of gender, organizational leaders tend to rate the gender equality climate in their organization more positively (Cortis, Foley, and Williamson 2022; To, Sherf, and Kouchaki 2023). Organizational leaders also report less need for change than lower-ranked staff (Benschop 2011; Benschop and van den Brink 2013). Furthermore, changes to current organizational structures have also been associated with feelings of threat from high-power individuals. High-status groups, for example, have been shown to exhibit greater sensitivity to group identity threats, especially when exposed to organizational pro-diversity messages (Dover, Major, and Kaiser 2016). Finally, some empirical research already suggests a connection between power and a proclivity to support individualistic diversity interventions; for example, when asked to explain who is responsible for solving gender inequality, organizational leaders have been shown to attribute more responsibility to individuals from marginalized groups, rather than current organizational systems (Cuthbert et al. 2023).

Second, we propose that stereotypes play a role in understanding how individuals justify social inequities. We suggest that believing in gender stereotypes connects one's position of power and system legitimacy beliefs, ultimately leading to a preference for individualistic interventions over structural change. Social identity theory (Tajfel 1978; Tajfel and Turner 1979) suggests that individuals tend to enhance the status of their ingroups by making favorable comparisons with outgroups, often by relying on stereotypes that put those other groups in a negative light (Oakes, Haslam, and Turner 1994). Here, high-power individuals may use negative stereotypes to distinguish themselves from outgroups, in this case, from women in disadvantaged positions at work. Such a theoretical approach is also consistent with system-justification theory which suggests that individuals adopt system-justifying stances to preserve the current social order, often using stereotypes to explain and legitimize inequalities (Jost and Banaji 1994).

For example, gender stereotypes have been used to justify gendered divisions of labor. Research has demonstrated that individuals judged women to be communal because it was consistent with their assumed “homemaker” role and judged men to be agentic because it was consistent with their assumed role of “employee” (Eagly and Steffen 1984). These particular gendered stereotypes have also been associated with system-justifying beliefs (Jost and Kay 2005), especially when gender roles are viewed as fixed, rather than malleable (Kray et al. 2017).

In the case of high-power individuals and those with high system-legitimacy beliefs, such gender stereotypes may be used to rationalize the success of high-power individuals and the marginalization of women, particularly in low-power positions, as a natural outcome. These stereotypes may be used to support the idea that gender inequities are not socially constructed but naturally occurring and stable power structures (Morton et al. 2009). In this way, individuals in high-power positions may be more likely to support individualistic interventions that buy into gendered stereotypes, such that women inherently lack capabilities in the workplace and need to be trained to succeed (Ryan 2023; Ryan and Morgenroth 2024), leaving structural issues unchallenged. Those with high SLBs, who we propose are often in high-power positions, are then likely to favor individualistic solutions focused on improving the abilities or behaviors of individuals over structural interventions that challenge the status quo.

Overall, we suggest that there is a link between power, system-legitimacy beliefs, and support for DEI interventions. Ultimately, to challenge the status quo, one must be willing to tolerate a great deal of uncertainty, give up one's sense of security, and risk being alienated from social groups in mainstream society (Jost 2019; Jost et al. 2017). Those with high SLB may not think that structural change is necessary. And since power can increase the tendency to legitimize the existing system—because it has benefited them—high-power individuals may overlook the current system's flaws. In fact, high-power individuals may use gendered stereotypes to justify women's disadvantaged positions, making them less likely to support structural change. Some empirical research already suggests such a connection; for example, when asked to explain who is responsible for solving gender inequality, organizational leaders have been shown to attribute more responsibility to individuals from marginalized groups, rather than current organizational systems (Cuthbert et al. 2023). Through these beliefs of system legitimacy, we believe high-power individuals will endorse structural interventions less than low-power individuals, and individualistic interventions more in comparison.

3 | The Present Research

Taken together, to our knowledge there is currently no empirical evidence showing differences in how individualistic and structural interventions may be evaluated. We conducted three studies to examine this proposition. In the first study, we first tested whether women generally endorse structural interventions over individualistic interventions. We expected

> EH1. Women will evaluate structural interventions for gender equality more favorably than individualistic interventions.

Moreover, we wanted to do initial exploratory tests to test our reasoning that those with high SLB may not think that structural change is necessary. In Study 1, we explored the effect that SLB had on women's evaluation of the intervention, suspecting that those with high SLB may evaluate the individualistic intervention more favorably than the structural intervention and vice versa for those with low SLB.

In Studies 2 and 3, we used the actual hierarchical position of men and women to see if their evaluation of a specific intervention is driven by their positions of power, rather than by being part of the target group for the intervention. Moreover, to follow up on Study 1, we wanted to see if SLB consistently affected women's evaluations and preferences for one intervention over another, and if it was connected to the participants' hierarchical position. Hence, we tested whether power differences resulted in different evaluations of an individualistic over structural DEI intervention (Studies 2 and 3), and if system-legitimacy beliefs explained the differences. We expected

> EH2: A moderated-mediation effect in which higher power leads to more favorable evaluations of individualistic interventions and less favorable evaluations of structural interventions mediated by system-legitimacy beliefs.

Altogether, we propose the following second stage moderated mediation model (see Figure 1).

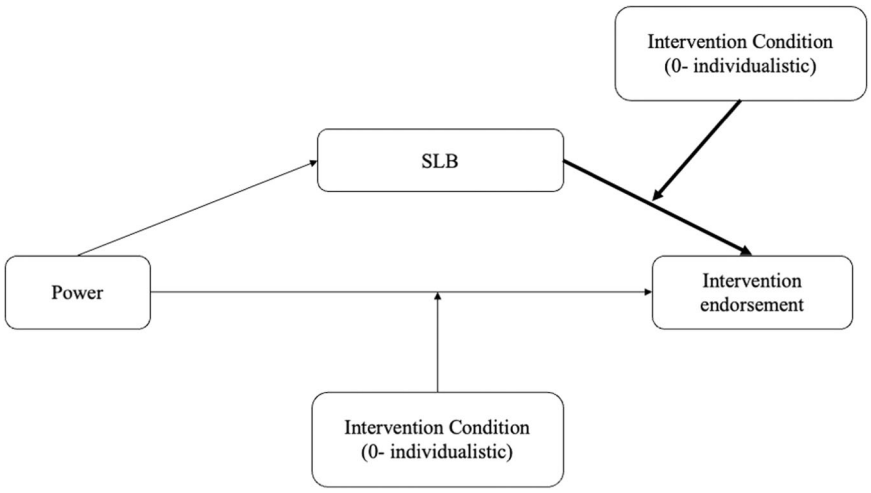

FIGURE 1 | The conceptual model for the current research. *Note*. The bold lines show the relationships tested in Study 1, specifically the relationship between SLB, intervention condition, and intervention endorsement. The entire conceptual model is tested in Studies 2 and 3.

All studies were pre-registered and approved by the ethical committee at the institution of the first author under the codes FEB-20220502-13527 and FEB-20230302-13928. However, our original pre-registered hypotheses were not confirmed, and we instead ran exploratory analyses examining revised research questions with post-hoc hypotheses (EH1 and EH2) which we currently report. The materials, syntax, pre-registrations, and pre-registered analyses for all studies can be found in the online Supporting Information.

4 | Study 1

Our aim in Study 1 was to identify potential differences in how women endorsed an individualistic intervention (through a description of a work–life balance *training* program) and a structural intervention (through a description of a work–life balance *policy* program) in an online study with an experimental design. Additionally, we were interested in whether SLB indeed differentiated women's evaluations for an intervention and tested whether SLB and the intervention condition jointly affected the participants' intervention evaluations.

4.1 | Method

4.1.1 | Participants

As pre-registered, we recruited 403 women (M_{age}= 39.62, SD = 11.61, 70.4% with bachelor's degree or higher, $N = 379$ cisgender, 1 transgender, 11 non-disclosed). The participants participated using the paid online survey panel, Prolific Academic. The participants were predominantly from the United Kingdom (94.25%, others were from the United States and Canada). Additionally, on a Likert scale of 1 (to a very small extent) to 7 (to a very large extent), the participants generally reported having moderately high caregiving responsibilities ($M = 4.588$, SD = 2.349). As pre-registered, we followed conventions by Leiner (2019) and used the participants' speed factor (i.e., the quotient of the overall median time to finish the survey and participants' completion time) to exclude 5 participants for completing the survey exceptionally quickly (speed factor $< .2$) or slowly (speed factor > 5).

4.1.2 | Design and Manipulations

We used a one-factor between-participants study design with 2 levels (Intervention condition: individualistic vs. structural). At the start of the study, participants provided their demographic information. Then participants were randomly assigned to one of two intervention conditions.

Intervention manipulation. Participants were asked to read a fictional scenario where they were asked to imagine that they worked at an organization actively trying to tackle gendered barriers and requested input from employees on different possible gender DEI interventions. In the individualistic intervention condition, the participants watched a video with an individualistic framing of gendered barriers (e.g., women underestimating their abilities, women not daring to negotiate) and then evaluated a description of an individualistic gender intervention that was designed to help women craft their work–life balance more optimally.

In the structural intervention, the participants watched a video with a structural framing of gendered barriers (e.g., double standards for evaluating men and women, organizational culture not accommodating to women) and then evaluated a description of a structural gender intervention that was designed to provide organizational infrastructure for women to manage their work–life balance.

The videos for each condition were taken from Kim et al.'s (2018) research on the effect of "lean in" messages on women's attributions for gender inequality, while the descriptions of the work–life balance interventions were designed for this study. Using a pilot study, we determined that participants found both interventions to be similarly clear and realistic, and in both interventions, work–life balance was seen to be a relevant issue (pilot results are in online supplemental analyses). After the participants evaluated the intervention that was randomly assigned to them, the participants answered further checks and exploratory variables.

4.1.3 | Measures

We operationalized participants' evaluation of the intervention through the participants' anticipated intervention success of the intervention presented to them. Specifically, based on the description of the intervention, the participants provided an impression of whether the intervention would be successful and useful for women across 6 items that we developed specifically for this study (e.g., "I think this program would be successful for women," "This program would be effective at reducing gender inequality at work"). At the end of the survey, we asked participants for general feedback on the survey to which some participants provided qualitative feedback on the intervention. These qualitative responses were coded to reflect (1) a clear preference for the individualistic intervention, (2) a clear preference for the organizational-centered intervention, (3) no explicit preference but criticism of the individualistic intervention, (4) no explicit preference but criticism toward the structural intervention, and (5) no explicit preference and criticism toward both interventions. Additionally, we included a measure of SLB to test whether it mediated women's endorsement of the interventions.

Across all studies, all variables were measured on a 1–7 Likert scale (1 – *strongly disagree*, 7 – *strongly agree*). All variables showed good reliability with Cronbach's alpha values over 0.8. The manipulation check variables showed acceptable reliability with the lowest Cronbach's alpha value of 0.732. Further information about the variables is shown in Table 1, which shows detailed information about all measures across Studies 1, 2, and 3.

4.2 | Study 1: Results

4.2.1 | Descriptive Statistics and Manipulation Checks

All means, standard deviations, and correlations between variables are displayed in Table 2.

TABLE 1 | Overview of key measures across Studies 1, 2, and 3.

Measure name	Studies	Alpha	Sample Items	Source
Intervention success (6-items)	1, 2, 3	S1: 0.930 S2: 0.944 S3: 0.949	"I think this program would be useful for women."	Adapted from Krafft, Arden, and Verhoef (2017) to assess the program and not a product
Intervention support (2-items)	2, 3	S2: 0.917 S3: 0.921	"I would support implementing this program."	Developed specifically for this study
Manipulation checks (Individualistic: 3-items, Structural: 3-items)	1, 2	Individualistic S1: 0.769 S2: 0.738 S3: 0.732 Structural S1: 0.911 S2: 0.900 S3: 0.892	"To what extent would the program presented to you focus on how individuals can equip themselves to solve problems." "To what extent would the program presented to you focus on how the work environment can change to solve problems."	Developed specifically for this study
System-legitimacy beliefs (12-items)	1, 2, 3	S1: 0.871 S2: 0.895 S3: 0.886	"We live in an open society where individuals of any groups can achieve higher status."	System-legitimacy beliefs (Levin et al. 1998)

TABLE 2 | Study 1: Means, standard deviations, and correlations.

	Mean	SD	1	2	3
1. Intervention (0: Individualistic)	—	—	1	—	—
2. Anticipated intervention success	4.908	1.614	0.276**	1	—
3. SLB	2.920	0.927	0.045	0.097	1

**Correlation is significant at the 0.01 level (2-tailed).

Participants indicated that the individualistic intervention focused more on individual development solutions to gender inequality than the structural intervention ($M_{individualistic} = 5.448$, $SD_{individualistic} = 1.047$, $M_{structural} = 5.091$, $SD_{structural} = 1.072$, $t = 3.384$, $p < 0.001$, $d = 0.337$). By contrast, participants indicated that the structural intervention focused more on organizational solutions to gender inequality than the individualistic intervention ($M_{individual} = 4.347$, $SD_{individualistic} = 1.716$, $M_{structural} = 5.318$, $SD_{structural} = 1.195$, $t = -6.584$, $p < 0.001$, $d = 0.658$).

While the manipulation was successful on the relative ratings of individual and structural focus, participants rated both, individualistic and structural interventions, above the mid-point on having the structural or individualistic focus respectively. This finding suggests that participants may have perceived that individual effort is still needed to navigate structural conditions. Alternatively, participants may have seen any organization-wide intervention, even if the focus was on individuals, thinking this focus still involves some structural changes, such as redistributing resources of sharing informal knowledge. Nevertheless, because the structural condition was perceived as significantly less individualistic in focus than the individualistic condition (and vice versa in the individualistic condition) we considered it appropriate to interpret the conditions in line with our original theoretical arguments.

4.2.2 | Posthoc Hypotheses Testing

Consistent with hypothesis EH1, we found that, in general, women anticipated greater intervention success in the structural intervention ($M = 5.349$, $SD = 1.410$) than in the individualistic intervention ($M = 4.460$, $SD = 1.687$), $F(1, 399) = 32.79$, $p < 0.001$, $d = 0.571$). This effect remained statistically significant even after additional robustness checks (i.e., controlling for the potential role of participants' caregiving responsibilities on participants' intervention ratings).

Additionally, of the women who left written input on the interventions ($N = 20$), none preferred the individualistic DEI intervention over the structural intervention. Of these women, 6 showed a clear preference toward the structural intervention (e.g., "*My feeling is that the policy change to allow more flexible working for women is going to be more effective at having a good outcome*"). Some women ($N = 8$) were critical about both intervention programs, specifically because they thought the interventions should involve men as well (e.g., "*I would much prefer to have seen a program for men, suggesting that they step up more on the home side to facilitate an equal balance in that sense*"). Otherwise, most criticism of the programs was directed toward the individualistic interventions ($N = 5$; "*Hate the idea of being told how to curate my work/life balance. In my opinion, the differentiation needs to be between paid work and unpaid work*"). Only 1 woman was critical toward the structural intervention

(e.g., "*From experience and observation, I have found that the policies of 'flexible working' for women end up in others (in the household, in the organization she works for) benefit more than the woman, and most of the beneficiaries will be men while some will be women who have mastered the art of playing both systems (family, employers)*").

Moderation Analyses with SLB. We explored whether the type of intervention that women were given moderated the effect of SLB on anticipated intervention success. First, we found a trend that women's scores on SLB were positively related to anticipated intervention success scores ($\beta = .0976$, SE = 0.052, $t = 1.877$, $p = 0.061$). Then we found a statistically significant interaction effect of SLB and intervention type on women's anticipated success of the intervention ($\beta = -0.271$, t (3, 370)= −2.742, $p = 0.006$) where those with low SLB anticipated greater success for the structural interventions more than individualistic interventions (−1SD SLB: $\beta = 0.372$, SE = 0.119, $t = 3.129$, $p = 0.002$) and participants high on SLB did not differentiate in their evaluations of the interventions (+1SD SLB: $\beta = -0.1001$, SE = 0.1244, $t = -0.805$, $p = 0.421$). Figure 2 shows the effect of SLB on anticipated intervention success for the different interventions, where the relationship between SLB and anticipated intervention success is positive for the individualistic intervention, and not for the structural intervention.

4.3 | Study 1: Discussion

Across the qualitative and quantitative data, we found that women generally evaluated the structural intervention as more positive than the individualistic intervention, supporting our first hypothesis. Women anticipated the structural intervention to have a similar degree of success to individualistic interventions, regardless of their system-legitimacy beliefs. However, women with higher system-legitimacy beliefs were more positive toward the individualistic intervention compared to women with lower system-legitimacy beliefs. These findings align with the literature positing that those who are more likely to legitimize the current systems of operation are also more likely to favor ways that maintain those systems (Cortis, Foley, and Williamson 2022; Jost and Toorn 2012), potentially because the system worked for them, rather than endorsing ways that change or challenge them.

5 | Studies 2 and 3

While in Study 1, we focused on women's evaluation of structural and individualistic interventions, in Studies 2 and 3 we wanted to see if the effects would generalize across gender, and considering power positions. If this is the case, our findings are not solely due to women being potential targets of the intervention, instead, differences in how individualistic and structural interventions are evaluated could stem from a broader effect of power positions and system-legitimacy beliefs. Therefore, we opened these studies to all genders, recruiting specifically on different power positions, and set out to test if there was a difference in endorsement of the intervention based on participants' actual hierarchical positions and the type of intervention they were given.

Overall, we used a quasi-experimental design to test whether power (as the quasi-experimental variable) through SLB, affected individuals' endorsement of the intervention. We reported Studies 2 and 3 together because the methodologies were virtually identical, other than an additional measure of participants' leadership position in Study 3.

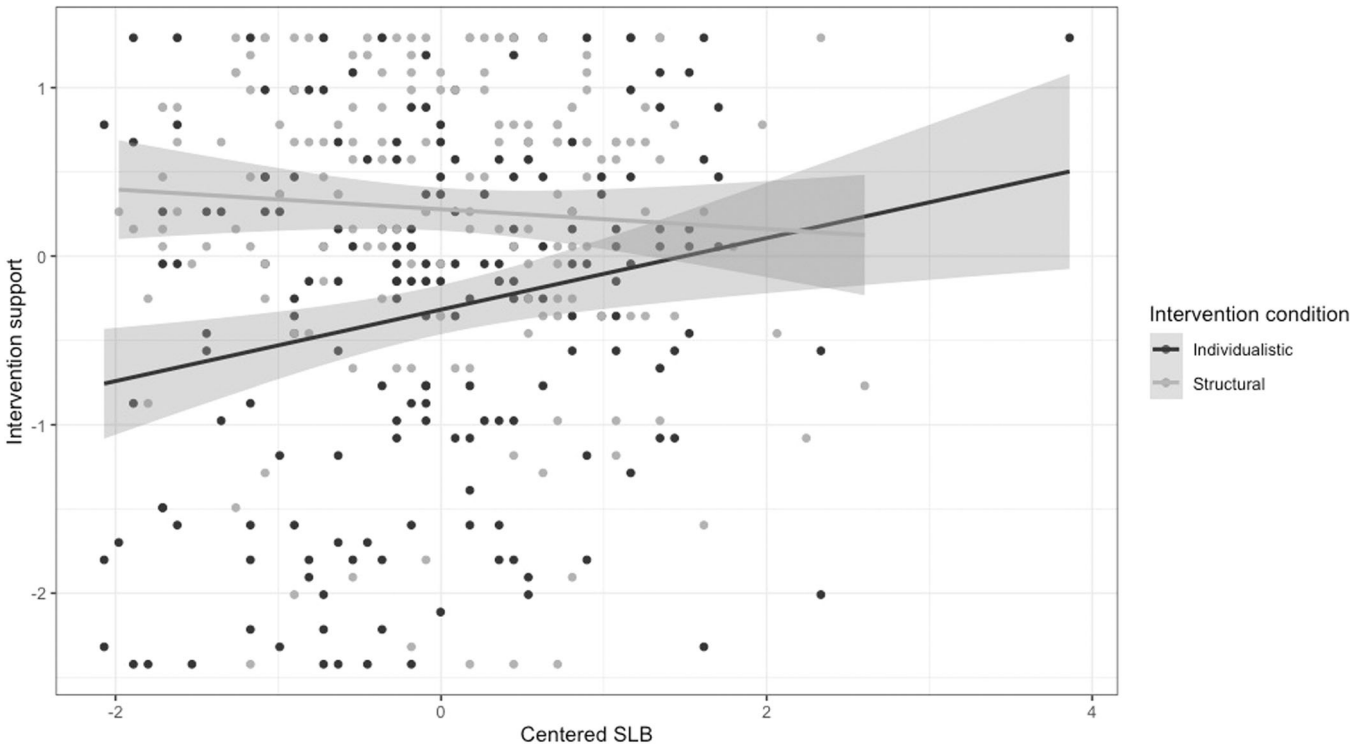

FIGURE 2 | Study 1: Effect of intervention condition on intervention support by SLB.

5.1 | Method

5.1.1 | Participants

In Study 2, 500 paid participants were recruited from Prolific (employed; 168 men, 328 women, 2 gender non-conforming, 1 gender non-listed, 1 undisclosed; 63.4% with formal higher education; $M_{age} = 40.40$, $SD_{age} = 9.84$) and predominantly based in the United Kingdom (91.37%, others from the United States and Canada). Following conventions by Leiner (2019), we excluded one participant because their speed factor was out of range.

In Study 3 with the same Prolific set-up, our final sample consisted of 319 employed participants (81 men, 235 women, and 3 gender non-conforming individuals; 66.72% highest educational level was higher education; $M_{age} = 39.02$, $SD_{age} = 10.73$) predominantly based in the United Kingdom (99.06%, others from United States and Canada). In Study 3, we additionally measured the leadership position of participants who were in power positions; of those who were in leadership positions, 52.4% were in lower-level management, 38.8% were in middle-level management, and 8.8% were in higher-level management. Across the studies, using the same measure of caregiving responsibilities from Study 1, the participants generally reported having a moderate amount of caregiving responsibilities (S2: $M = 4.004$, SD = 2.22; S3: $M = 3.91$, SD = 2.399).

5.1.2 | Design and Manipulations

We used quasi-experimental set-ups across Studies 2 and 3. This was a 2 (Intervention condition: individualistic vs. structural) x 2 (Power (quasi-variable): high-power vs. low-power) between-participants design.

Manipulations. As in Study 1, participants gave their demographic information and were asked to imagine they worked at an organization focused on tackling gender inequality.

Priming Position of Power. Using hierarchical level as a proxy for power (see Finkelstein 1992; To, Sherf, and Kouchaki 2023), participants were recruited based on whether they worked in high- or low-hierarchical positions in their real-life jobs. Participants who worked in high-hierarchical positions were put in the high-power group, and participants who worked in low-hierarchical positions were put in the low-power group.

As a prime to boost the effects of participants' real-life positions of power, we used Galinsky and colleagues' (2006) power prime. For participants with a power position in real life, participants described a situation when they needed to control the ability of another person to get something they wanted (i.e., high-power group). For participants who did not hold a power position in real life, participants described a situation where they were dependent on someone else's control over what they wanted (i.e., low-power group).

Intervention manipulation. Identical to Study 1, depending on the intervention condition to which they were assigned, we primed participants with a video that highlighted individual barriers to gender inequities and then described the individualistic intervention or a video that highlighted organizational barriers to gender inequities and then described the structural intervention (following Kim, Fitzsimons, and Kay 2018). The participants then evaluated the program based on their impressions of the description.

5.1.3 | Measures

In Studies 2 and 3, we used a direct measure of endorsement of the intervention by asking participants to indicate how likely they would be to support the implementation of the intervention. Table 1 shows the full overview of measures across the studies and how the scales were sourced and adapted for the current research.

Analytical strategy. To test our hypotheses, we conducted a moderated mediation analysis using the PROCESS function from the "bruceR" package in Rstudio. This approach allowed us to test if power differences were connected to differences in intervention support through increased SLB, and if such an indirect effect differed depending on the type of the intervention (i.e., individualistic vs. structural intervention). Power and intervention conditions were dummy coded, such that the low-power condition and the individualistic intervention were the reference categories. The analyses were conducted using 1000 bootstrapped samples to estimate the parameters.

Additionally, we considered that there may be gender differences in how participants rated intervention support for each condition. We did not find a main effect of gender on intervention support. However, in both studies, we found a significant two-way interaction between gender and SLB, where women with high SLB reported higher intervention support for the individualistic intervention than high SLB men (S2: $\beta = 0.328$, SE = 0.128, $t = 2.562$, $p = 0.011$; S3: $\beta = 0.418$, SE = 0.168, $t = 2.494$, $p = 0.013$). Thus, due to these differentiating effects of gender on intervention support and because we recruited more women than men in our studies, we controlled for gender in the main mediation, moderation, and moderated-mediation analyses; gender was dummy-coded such that 0 represented male participants and 1 represented female participants.

5.2 | Studies 2 and 3: Results

5.2.1 | Descriptive Statistics

All means, standard deviations, and correlations between the variables we measured in Studies 2 and 3 are shown in Tables 3 and 4. Table 5 shows a summary of the participants' means and standard errors of intervention support as a function of SLB and intervention condition.

Comparable to Study 1, the participants indicated that the individualistic intervention was more focused on individual development solutions than structural solutions to gender inequality than the structural intervention (S2: $M_{individualistic} = 5.345$, $SD_{individualistic} = 1.083$, $M_{structural} = 4.892$, $SD_{structural} = 1.731$, $t = 4.740$, $p < 0.001$, $d = -0.424$; S3: $M_{individualistic} = 5.312$,

TABLE 3 | Study 2: Means, standard deviations, and correlations.

	Mean	SD	1	2	3	4	5
1. Power	—	—	1				
2. Condition	—	—	−0.012	1			
3. Intervention support	4.992	1.485	−0.070	0.342**	1		
4. SLB	2.994	1.021	0.117**	0.004	0.077	1	
5. Gender (0: Men, 1: Women)	—	—	−0.043	0.040	0.031	−0.099*	1

*Correlation is significant at the 0.05 level (2-tailed).
**Correlation is significant at the 0.01 level (2-tailed).

TABLE 4 | Study 3: Means, standard deviations, and correlations.

	Mean	SD	1	2	3	4	5
1. Power	—	—	1				
2. Condition	—	—	−0.003	1			
3. Intervention support	5.118	1.356	−0.052	0.330**	1		
4. SLB	3.076	1.008	0.187**	0.037	0.059	1	
5. Gender (0: Men, 1: Women)	—	—	−0.123*	0.051	0.076	−0.105	1

*Correlation is significant at the 0.05 level (2-tailed).
**Correlation is significant at the 0.01 level (2-tailed).

TABLE 5 | Studies 2 and 3: Means and SE of intervention support across intervention conditions and SLB.

	Low SLB (−1SD)	High SLB
Study 2		
Individualistic intervention	4.14 (0.125)^{a}	4.81 (0.121)^{b}
Structural intervention	5.54 (0.123)^{c}	5.47 (5.22)^{c}
Study 3		
Individualistic intervention	4.37 (0.143)^{a}	4.96 (0.142)^{b}
Structural intervention	5.51 (0.139)^{c}	5.62 (0.145)^{c}

Note: Within both columns and rows, means that share a letter in the superscript do not statistically differ, $p < 0.05$

$SD_{individualistic} = 1.028$, $M_{structural} = 4.854$, $SD_{structural} = 1.059$, $t = 3.920$, $p < 0.001$, $d = -0.439$). By contrast, participants indicated that the structural intervention focused more on structural solutions than individualistic solutions to gender inequality than the individualistic intervention (S2: $M_{individualistic} = 4.296$, $SD_{individualistic} = 1.058$, $M_{organization} = 5.365$, $SD_{structural} = 1.062$, $t = -8.335$, $p < 0.001$, $d = 0.727$; S3: $M_{individualistic} = 4.306$, $SD_{individualistic} = 1.642$, $M_{structural} = 5.488$, $SD_{structural} = 0.997$, $t = -7.764$, $p < 0.001$). As in Study 1, participants rated both interventions above the mid-point on both having a focus on structural and individual changes.

Posthoc Hypothesis Testing. In Tables 6–9, we present the steps and additional statistics involved in testing our hypothesized second-stage moderation model. We found that a higher position of power at work was associated with higher beliefs in system legitimacy across Studies 2 and 3 (S2: $M_{High\_power} = 3.113$, $M_{Low\_Power} = 2.875$, $t = 2.6188$, $p = 0.009$, $d = 0.234$; S3: $M_{High\_power} = 3.252$, $M_{Low\_Power} = 2.899$, $t = -3.182$, $p = 0.002$, $d = 0.380$).

To further test whether, and how, system-legitimizing beliefs would explain why the two interventions were evaluated differently, we tested if the intervention condition acted as a second-stage moderator of the relationship between SLB and intervention support. Similar to what we found in Study 1, we found a significant effect of the interaction between SLB and intervention condition on intervention support in both studies (S2: $\beta = -0.371$, $z = -2.705$, $p = 0.007$, $\eta^2 = 0.020$; S3: $\beta = -0.243$, $z = -2.113$, $p = 0.023$, $\eta^2 = 0.020$). Also similar to Study 1, the participants generally supported the structural intervention significantly more than the individualistic intervention, regardless of their SLB scores. However, the simple slopes showed that SLB significantly and positively influenced people's support for the individualistic intervention (S2: $\beta = 0.251$, SE = 0.062, $t = 3.494$, $p < 0.001$; S3: $\beta = 0.182$, SE = 0.078, $t = 2.330$, $p = 0.020$), but not for the structural intervention (S2: $\beta = -0.040$, SE = 0.0572, $t = -0.699$, $p = 0.485$; S3: $\beta = -0.061$, SE = 0.072, $t = -0.844$, $p = 0.399$). We plotted the interactions in Figures 3 and 4 and additional regression statistics are found in Table 9. The main follow the same pattern of results when only testing women in the sample.

To test hypothesis EH2, we tested our entire moderated mediation model. We did not find that individuals' power position and the intervention type they received had a direct joint effect on their intervention support. However, the effect of power on intervention support through SLB was trending toward statistical significance in the individualistic intervention (S2: $\beta = 0.024$, $z(1, 493) = 1.791$, $p = 0.073$; S3: $\beta = 0.036$, $z(1,$

TABLE 6 | Direct effects testing in the second stage moderated mediation model building.

Variable	β	SE	*t*	*p*	*F-value*	*Adj R^2*
Dependent variable model: Intervention support					1.432 (1.101)	0.002 (0.334)
Power	−0.152 (−0.07)	0.090 (0.113)	−1.692 (−0.612)	0.091 (0.541)		
Gender	−0.006 (−0.164)	0.095 0.130	0.061 (−1.266)	0.951 (0.206)		
Mediator variable model: SLB					5.877 (6.224)	0.003 (0.002)
Power	0.228 (0.332)	0.089 (0.112)	2.554 (2.977)	0.011 (0.003)		
Gender	−0.205 (0.193)	0.941 (0.128)	2.180 (1.512)	0.030 0.132		

Note: Values in parentheses indicate statistics from Study 3.

TABLE 7 | Mediation test of second stage moderated mediation model building.

Variable	Estimate	SE	*z*	*p*	*Adj R^2*
Dependent variable model (Step 3): Intervention support					0.008 (0.011)
Power	−0.235 (−0.178)	0.129 (0.154)	−1.821 (−1.159)	0.069 (0.247)	
SLB	0.131 (0.101)	0.073 (0.081)	1.785 (1.254)	0.074 (0.210)	
Gender	−0.105	0.127	0.828	0.407	
Indirect Effect	0.010 (0.038)	0.007 (0.032)	1.355 (1.185)	0.175 (0.236)	

TABLE 8 | Moderation test of second stage moderated mediation model building.

Variable	Estimate	SE	*z*	*p*
Dependent variable model: Intervention support				
Power	−0.242 (−0.173)	0.201 (0.244)	−1.204 (−0.709)	0.229 (0.478)
Intervention condition	0.963 (0.826)	0.178 (0.207)	5.410 (4.079)	< 0.001 (< 0.001)
Power × Intervention condition	0.097 (0.083)	0.249 (0.297)	0.391 (0.278)	0.696 (0.781)
Gender	0.043 (0.083)	0.117 (0.178)	0.367 (0.466)	0.714 (0.641)
Intervention Condition	2.120 (1.844)	0.433 (0.497)	4.902 (3.789)	< 0.001 < 0.001
SLB	0.313 (0.245)	0.115 (0.128)	2.723 (1.906)	0.006 (0.057)
Intervention condition × SLB	−0.371 (−0.326)	0.130 (0.154)	−2.705 (−2.113)	0.007 (0.035)
Gender	−0.104 (0.093)	0.115 (0.178)	0.903 (0.525)	0.367 (0.599)

TABLE 9 | Second-stage moderated mediation test.

Independent variable: Power **Conditional indirect effects with bootstrap:**	**Indirect effect**	**SE**	*z*	*p*
Individualistic intervention	0.024 (0.036)	0.014 (0.021)	1.735 (1.736)	0.083 (0.083)
Structural intervention	−0.004 (−0.011)	0.006 (0.013)	−0.566 (−0.837)	0.572 (0.403)

313) = 1.736, $p = 0.083$; further statistics in Table 9). Participants' power position had no indirect effect (through their SLB) on support for the structural intervention support. Figure 5 shows the overall second-stage moderated mediation effect and associated coefficients on participants' intervention support. We found similar patterns of results when testing the same models using the anticipated intervention success of the interventions as the dependent variable.

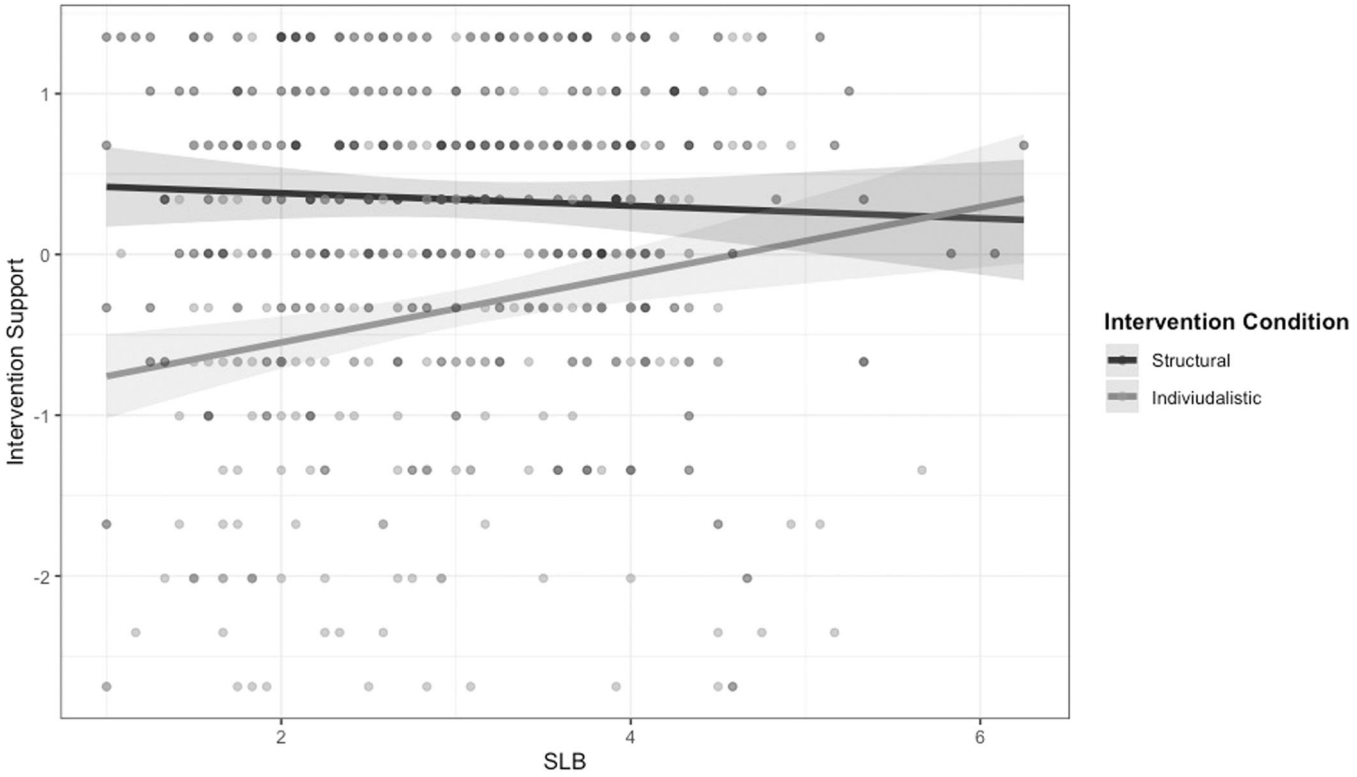

FIGURE 3 | Study 2: Effect of intervention condition on intervention support by SLB with gender controlled.

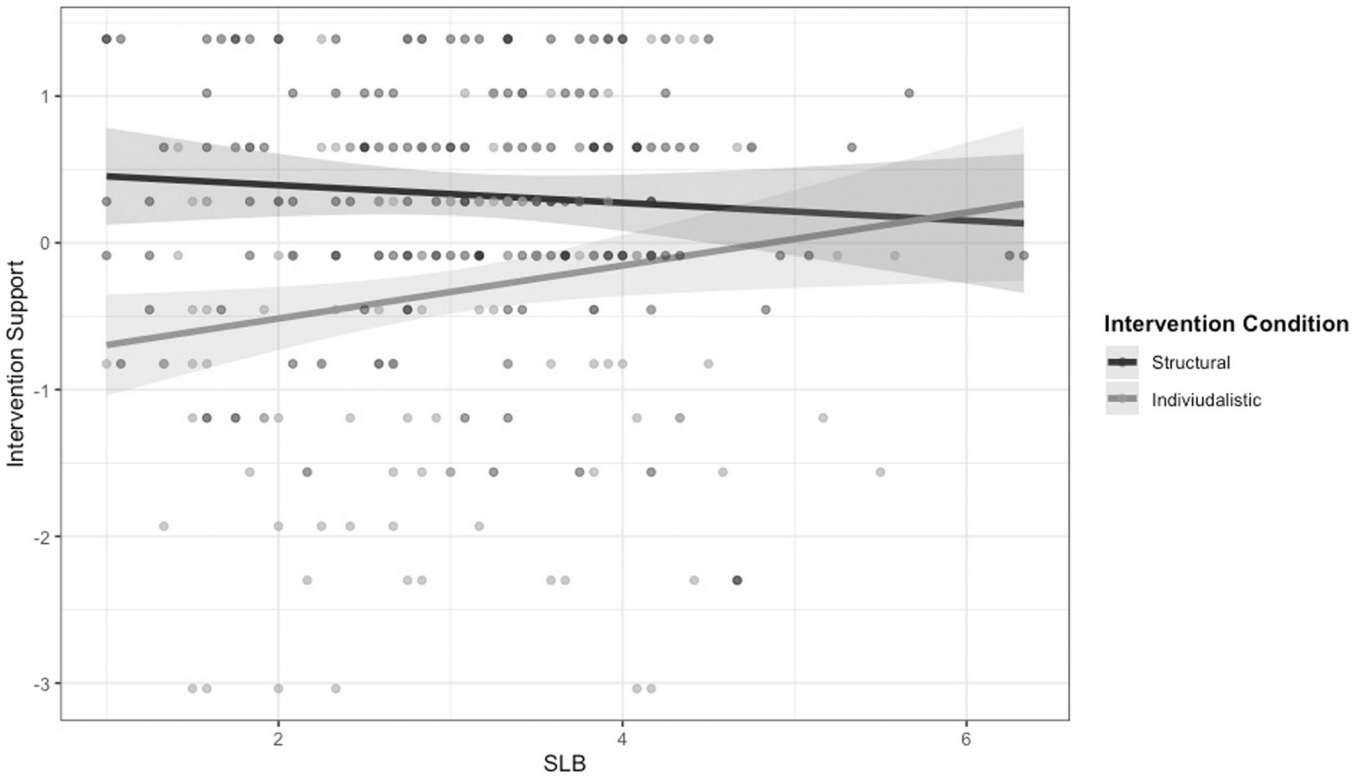

FIGURE 4 | Study 3: Effect of intervention condition on SLB-intervention support with gender controlled.

5.3 | Studies 2 and 3: Discussion

Notably, regardless of their power positions or levels of system-legitimacy beliefs, participants favored the structural intervention over the individualistic one. Moreover, we did not find statistically significant power-related differences in support for the structural intervention. We only found a trend whereby power was indirectly linked to intervention support for the individualistic intervention

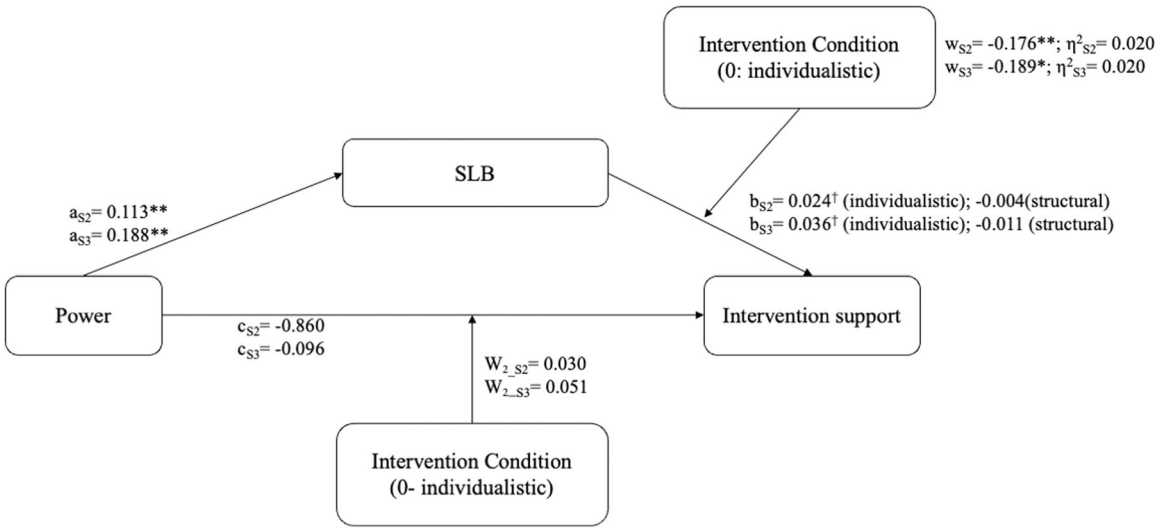

FIGURE 5 | Tested second stage moderated mediation model across Studies 2 and 3.

through SLB, but this mediation was not found for the structural intervention. The differences in intervention support were more clearly driven by different system-legitimacy beliefs rather than directly by people's power positions.

6 | General Discussion

The studies we have presented suggest that both high-power and low-power individuals support structural interventions more than individualistic ones. In Study 1, women anticipated the structural interventions to be more successful, supporting hypothesis EH1. In testing hypothesis EH2 through Studies 2 and 3, we do not find strong evidence that power, system-legitimacy beliefs, and intervention support are interrelated. System-legitimacy beliefs more clearly differentiated intervention support than position of power, particularly for individualistic interventions. While we originally expected that high-power individuals would favor individualistic interventions more, these findings may speak to more nuanced preferences for interventions and the important role of system-legitimizing beliefs. With growing awareness of the limits of individualistic (Kim, Fitzsimons, and Kay 2018; Sugiyama et al. 2016), more organizational awareness of the importance of DEI (McKinsey & Company 2022), and increasing respective investment (Chiu 2022; Michels, Murphy, and Venkataraman 2023) our findings may suggest an overall shift in increased favoring of structural interventions over individualistic approaches.

Overall, we did not find that high and low-power individuals largely differed in their endorsement of a DEI intervention for women. However, we identified a positive link between system-legitimacy beliefs and positively evaluating and supporting an individualistic intervention. While we found general support for structural interventions, participants with higher system-legitimizing beliefs supported individualistic interventions just as much as structural interventions.

This finding suggests that those who strongly believe in the legitimacy of the status quo are more likely to support interventions implying that women must work harder to deserve their place in the workplace. This points to an issue with "sticky meritocratic beliefs"; among those with high system-legitimacy beliefs, the notion that success and belonging must be earned through hard work is likely to accompany support for individualistic interventions, without considerations of social structure forces that are out of the individual's control (Mijs and Savage 2020). Because individualistic interventions are so popular and often require fewer resources to implement than structural interventions, and the fact that individualistic interventions are perceived as having some structural according to our studies, such support may detract from the actual implementation of structural interventions. Without intervention, largely implementing individualistic interventions may still signal an emphasis on individual responsibility for women and other marginalized groups for their representation, inclusion, and equity within their work environments.

In that regard, our findings highlight the importance of attenuating system-legitimizing beliefs in an organization so that structural interventions clearly rise above individualistic interventions in support and implementation. Such interventions may draw on research suggesting that there are a number of factors that increase individuals' motives to legitimize current inequalities: (1) perceiving that the system is under threat, (2) low personal control, (3) feeling that one is dependent on the system, and (4) feeling that the system is inescapable, may increase individuals' motives to legitimize current inequalities (Kay and Friesen 2011). Interventions that directly target these factors and feelings should, therefore, decrease motives to justify the system and create more critical consciousness (Godfrey and Wolf 2016), described as the extent to which people "critically read the world" and attribute social problems and inequities to structural forces rather than individual factors (Watts, Diemer, and Voight 2011). We therefore consider it worthwhile for future research to examine whether such an approach may make people more open to information critical of the status quo, and supportive of structural change over individualistic efforts.

6.1 | Limitations and Future Research

Our findings are not without limitations. First, the findings from our data may be a conservative indication of participants' preferences due to the leadership breakdown of our sample and the gendered issues that the interventions were set to address. In Study 3, most participants in the high-power condition were in lower to middle management roles, with fewer in higher management positions. This may have been because people in very senior power positions, who may have the highest levels of system-legitimizing beliefs, are not likely to participate in online survey platforms. Moreover, while we tried to make participants' leadership positions salient, the scenario did not call for participants to actively draw on their position of power to make their decision, limiting the extent to which the participants connected this position to their evaluations of the interventions.

Second, we considered the possibility that the preference for an intervention may differ depending on the problems of gender inequities concerned and the associated solutions. For instance, work–life balance as a problem of gender inequities may be rather commonly agreed as a structural problem, particularly in the Global North (e.g., through rhetoric about solutions for work–life balance, Dominus 2016; Kolade 2022; *The Guardian* 2022); hence, structural solutions for work–life balance may be perceived as less threatening to existing systems of inequality. On the other hand, leadership representation and issues of agency may be viewed as a problem that women themselves should work against and have individual responsibility over (Lardi 2022; O'Conor 2015; *The New York Times* 2021); thus, structural interventions for these issues may be seen as more threatening to existing systems of inequality, countering higher system-legitimacy beliefs and affecting intervention support.

Third, it may be possible that the effects we witnessed in our data were a conservative measure of how organization and individualistic intervention would be received. Using work–life balance initiatives as the setting for our experiments may not have been "threatening" enough to system-legitimacy beliefs as is possible in real-life DEI efforts. For example, affirmative action programs radically change the organizational system in which marginalized groups are equitably represented in the workplace (Kurtulus 2016; Muttarak et al. 2013; Prakash 2020). However, men and organizational leaders as members of majority and dominant groups have shown resistance to such programs and have felt threatened by their implementation (Foley and Williamson 2019; Johansson et al. 2019; Phelan and Rudman 2011). Thus, more disruptive structural initiatives may have elicited stronger or different reactions from both targets and implementers.

Lastly, our participant sample was predominantly based in the United Kingdom and may speak to the position of women in the workplace particularly in the United Kingdom context. These findings may speak to other contexts that are similar to how workplace gender equality is addressed through workplace policies and awareness-raising (e.g., other contexts in Western Europe or North America). However, our findings are limited in how they explain other contexts where gender equality is not similarly addressed in organizations.

6.2 | Conclusion

Overall, this research shows some interesting dynamics when considering a DEI intervention that aims to be helpful for women. Individuals generally preferred interventions that challenged organizational structures and systems, and position of power was not linked to particularly endorsing individualistic interventions over structural interventions. Importantly, higher system-legitimacy beliefs are likely associated with support for individualistic interventions in similar measures to structural interventions. Thus, while we observe a potential shift toward more support for structural DEI interventions, we argue that individualistic and meritocratic beliefs may detract from the actual implementation of structural interventions. Moving forward, intervention research can focus on ways to attenuate system-legitimizing beliefs to garner more leverage for the implementation of structural interventions.

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Data Availability Statement

The Supporting Information and pre-registration information that support the findings of this study are openly available in OSF at https://osf.io/6b79x/.

Due to the ethical approval received, the raw data from this research may not be openly shared, particularly with countries outside the European Economic Area. The data can be made available from the authors upon reasonable request and with the permission of the University of Groningen's (Faculty of Economics and Business) data management team.

Conflicts of Interest

The authors declare no conflicts of interest.

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Supporting Information

Additional supporting information can be found online in the Supporting Information section.