

Special Article

Multiple Minority Group Oppression: Divided We Stand?

Nina A. Nabors, PhD,^{1,7} Ruth L. Hall, PhD,² Marie L. Miville, PhD,³
Reginald Nettles, PhD,⁴ Monique L. Pauling, MS,⁵ and Brian L. Ragsdale, PhD⁶

Lesbian, gay, bisexual, and transgendered (LGBT) psychologists of color experience oppression from many sides. In addition to being negatively perceived by the majority society for being of different ethnicity, LGBT psychologists also experience oppression within their communities of color because of homophobia. In order to receive support from either community (people of color community of origin or European American gay, lesbian, bisexual, & transgendered community), multiple minority group members must deny important aspects of themselves, supported by one community and deemed as less important or unacceptable by the other. The double or triple oppression has a significant impact on their adjustment. This commentary focuses on the personal experiences and observations of LGBT psychologists of color as it relates to multiple oppression from the psychological community and society at large.

KEY WORDS: oppression; gay and lesbians of color; disability; multiple minority.

INTRODUCTION

Oppression has been described as the experience of having one's life intentionally shaped by forces and barriers that confine and restrict movement in any direction (1). Minority group members may experience oppression by both the dominant society and other minority groups of perceived higher status. This double or triple oppression is particularly salient for those who belong to multiple minority groups such as

lesbian, gay, bisexual, and transgendered (LGBT) individuals of color. LGBT psychologists of color have experienced a significant amount of oppression as professionals. They work in a profession that purports to be more inclusive than the general population. Yet, their personal experiences as graduate students, interns, clinicians, academicians, and researchers belie this inclusiveness. LGBT psychologists of color balance multiple identities including their ethnic minority status, sexual orientation identity, and the predominantly European American identity represented by their profession (2). Similar to their experience in society, the message LGBT psychologists of color receive is that only one aspect of their identity is important (ethnicity, gender, sexual orientation) with little emphasis on the interaction of multiple identities. This attempt to split the identities of LGBT psychologists of color is due in part to the invisibility of LGBT of color issues in psychology and the lack of research on the impact of multiple oppression (3). In addition, LGBT people of color are severely underserved by the mental health community (4). Thus LGBT psychologists of color have two main objectives: to serve the LGBT of color population and to increase the

¹Department of Psychology, Eastern Michigan University, Ypsilanti, Michigan.

²Department of Psychology, The College of New Jersey, Ewing, New Jersey.

³School of Applied Health & Educational Psychology, Oklahoma State University, Stillwater, Oklahoma.

⁴Counseling Center & Student Health Services, University of Maryland Baltimore County, Baltimore, Maryland.

⁵Department of Psychology, State University of New York, University at Albany, Albany & Behavioral Health Network, Springfield, New York.

⁶Department of Psychology, Loyola University, Chicago.

⁷Correspondence should be directed to Nina A. Nabors, PhD, 537K Mark Jefferson, Psychology Department, Ypsilanti, Michigan 48197; e-mail: nnabors@online.emich.edu.

visibility of their concerns through research and other means of dissemination. Dealing with the ongoing homophobia and racism within the psychological community at large requires energy better spent on dealing with the multiple charges to LGBT psychologists of color.

In this commentary LGBT psychologists of color will share their personal experiences of multiple oppression in society and the psychological community. They also offer individual solutions that have lessened the impact of multiple oppression in their own lives.

SMOKE AND MIRRORS: AFRICAN AMERICAN LESBIANS

Although I learned gender and cultural norms for African American females in childhood, homophobia alienates me, an African American lesbian, from the community that has grounded, supported, and protected me in my personal experiences with racism. I am an out, middle-aged academic and practicing clinical psychologist. I work in a predominantly European American profession and at a predominantly European American state college. In both situations, I experience a certain level of isolation and frustration. Sadly my experiences in predominantly European American lesbian/women's communities also leaves me wanting since the community is characteristically blind to other oppressions and to its own diversity. Ironically, the lesbian/women's communities take pride in their acceptance of difference, but may cringe at the visibility of African American lesbians beyond a token number. Not only do the lesbian/women's communities ignore their racial privilege, they also assume that the European American lesbian/women's experience is the experience of all lesbians/women, marginalizing the experiences of African American lesbians (5, 6). Moreover, the lesbian/women's communities do not appreciate the natural bond between African American women and men that is created by living in a racist society.

Alternately, even though race, culture, racism, and oppression bonds African Americans, sexism, internalized racism and sexism, homophobia, and heterosexism cripple the unity within the African American community, thus making me cautious in my own community. For example, the African American community sees African American lesbians as not perpetuating the race ("Lesbians can not be mothers") and taking on a "European American" life choice (7, 8). Being lesbian is beyond the African

American community's parameters of acceptable gender roles (9). African American lesbians fear abandonment if they are out as lesbians (6) and choose to remain invisible. In fact, most African American lesbians agree that homophobia within the African American community is more intense than within the majority community (5, 8).

Furthermore, the African American community's attitude toward sexuality fuels homophobia. Between the vulgarity of many contemporary music lyrics and the whispered sexuality emanating from the African American church exists a sexual vacuum (10). This silence about sexuality perpetuates domestic violence, mutes the African American voice in the AIDS epidemic, exacerbates homophobia, and contributes to teenage pregnancy (10, 11). According to West, African American self-determination did not take sexuality or sexual orientation into account.

Without support, integrating one's identity as an African American, woman, and lesbian becomes even more challenging. Furthermore, being one of only a few visible African American lesbians in many situations makes life more complex. I took two steps to remedy my feeling of alienation. First, I sought support outside of my department and college (there is no critical mass of African American lesbians here) and put my energy into making women of color and lesbians of color part of the agenda of two national organizations with whom I enjoy working. I also cosponsored an African American lesbian support group in Philadelphia. Generating a critical mass of African American lesbians (and this may be as few as four!) builds strength and feelings of affirmation.

As Smith (12) stated, African American lesbians cannot and should not separate race, class, gender, and sexual orientation oppressions because they are most often expressed simultaneously. For African American lesbians, creating effective coping styles to deal with triple minority status is critical in managing a world replete with potential rejection.

LATINA LESBIANS: CROSSING BORDERS, LOVING DANGEROUSLY

Loca, Marimacha, Maricon, Patlache: These are the names in Latino/a cultures that refer to lesbians; names Latina lesbians have reclaimed for themselves. We are often viewed with fear and condescension in the larger Latino/a society. Worse, like other lesbians of color, we are often viewed as adopting a sexual orientation, something *sucia* (dirty) from someone else,

usually European Americans. This means that, for Latina lesbians, a core aspect of oneself, our ability to love, is never acknowledged, let alone embraced, in the larger Latino/a community. Thus, what is visible within remains invisible without; what is visible without leaves much to be desired.

As a Latina Lesbian psychologist, I have experienced visibility/invisibility in a variety of ways. As a graduate student, I often felt pulled between those in my program who focused on People of Color (POC) issues and those who studied LGBT issues, in classrooms and on research teams. I certainly never felt comfortable enough “coming out” to other Latino/a professionals (I have since met a number of Latino/as who are very gay-friendly). The language describing oppression by POC generally excludes homosexuality, and the world of POC is usually assumed by ethnic minority psychologists to be heterosexual (e.g., Diaz-Guerrero’s discussion of Latina women as nurturing, maternal, and submissive to the husband always grated on my nerves). There was, and still is, nervousness, hesitation, and lots of eyes rolling when someone dared to bring up the topic. After all, being queer was a European American guy thing! This saddened and disappointed me, particularly because it was in the psychological studies of people of color that I felt most “home” as a professional.

Then too were my experiences with LGBT psychologists, particularly at professional organizations. My first experience at a convention social hour dried up my interest in joining such organizations for years. I remember walking into the room and seeing a sea of European American male faces (guess I found where those earlier stereotypes came from). No one bothered to greet me, and I felt visibly alone. Ironically, it is the words and actions of my she-roes and heroes from both POC and LGBT walks of life and theoretical frameworks who helped provide a language and empowered me to describe my multiple oppressions (13–15). The good news is that I completed my doctorate in counseling psychology and these days I am a university professor. One of the courses I teach is a graduate level course, Multicultural Counseling, and not surprisingly I cover with equal passion the topics of POC, LGBT, and, of course, multiple oppressions. There has also been a recent movement within the field of psychology to create a space for LGBT POC. This is being received with the usual hesitation, but nonetheless, there are enough of us now to create a stir.

INTEGRATING MULTIPLE MINORITY STATUSES: SEXUAL ORIENTATION, ETHNIC MINORITY, AND PHYSICAL DISABILITY

Gay men, lesbians, bisexual women, bisexual men, and the transgendered (GLBTs), members of ethnic minority groups, and persons with physical disabilities (PWDs) have historically epitomized the meaning of stigma in our society (16). Membership in any one of these groups generally ascribed inferior status carries with it particular emotional burdens, i.e., “minority stress” (17). Simultaneous membership in more than one (e.g., ethnic minority and GLBT) can compound these effects (18, 19). My experience as a gay male of color with a physical disability (mid-life postpolio syndrome) suggests to me that these effects are further complicated for “triple-minority” group membership.

Key impediments for any minority group are prejudice and discrimination; these impediments also are seen as major problems for those with disabilities. PWDs often point to social barriers and negative attitudes of others as being among their main problems. Therefore, PWDs must manage not only the disability, but also the responses of others to the disability (20). For the GLBT PWD, the availability of social support is reduced for majority GLBT individuals, and even more so for the ethnic minority GLBT PWD.

Issues related to GLBT individuals with disabilities have not been studied extensively. Gay and bisexual male culture is popularly viewed as youth oriented and inhospitable to aging gay men. The relative invisibility of older gay men has been attributed at least in part to this phenomenon (21). Emphasis on physical attractiveness and ability within the gay male community results in a similar inhospitability to gay and bisexual men with disabilities. A similar dynamic does not appear to operate in the same way for lesbians and bisexual women, though research is needed here.

Individuals who carry multiple minority statuses are faced with the task of integration, which involves not only aspects of the self, but relationships to the larger majority. Ethnic minority GLBT individuals must bear the additional task of integrating two major aspects of their identities when both are conspicuously devalued (18). GLBT PWDs must also integrate the additional impact of further social marginalization because of physical disability.

Clinicians should be mindful of the multiple issues involved and sensitive to the internal developmental processes (e.g., coming out GLBT, coming out “with a disability”) and their impacts on the life

choices of multiple minority individuals. Our organizations and communities need to be aware of the tendency for one minority to exclude another. Individual and societal sequelae merit further research and careful consideration by the leadership in our various groups.

TRANSGENDER ISSUES FOR THIS PERSON OF COLOR

I am a psychologist in training, a therapist, a bisexual, and a transgendered person. Transgender for me means that the gender label I was assigned at birth does not correspond with my experience of who I am. After an extensive effort to reconcile who I am (a man) with the biologically determined prescription for behavior (female), my study of men's psychology enabled me to understand that who I am is not wrong, but male. When people see me on a dark street—sometimes on a well-lit street—they often see an African American male and walk or run in the other direction. I have experienced people patting their wallet pockets and clutching their purses or children when I pass. I have also experienced people letting their dogs out when I jog, people locking and relocking their cars, and police cars following me. I know that these experiences are less likely to happen to individuals perceived as female.

As a professional I am protected by laws, but run aground on unwritten codes. For example, if I don't meet my colleagues' expectations for African American women, I am treated as less than a professional. Psychologists of color participate in this self-policing. Perhaps my existence makes all psychologists of color less acceptable. I am told it is a good day when I wear a skirt, or that I should try harder to accentuate my feminine parts. Although racism complicates the issues, there are benefits. The idea of political correctness in spite of its problems creates a foundation for building safe space. There are support groups and a growing literature about transgender, which includes African Americans. I can expect that some of my colleagues will be engaged in a process of personal growth that allows them to embrace both their own and my diversity as an asset.

My life is hard, but it hasn't killed me. The best parts are when I can go to places where I can wear a tie and use the right pronouns and people understand and do not treat me like a monster. The good news is that those places have begun to include the professional organizations to which I will one day be able to turn

for support, as a transgendered person, a person of color, and a psychologist.

INVISIBLE IN AFRICAN AMERICAN COMMUNITIES AND BARELY VISIBLE IN EUROPEAN AMERICAN COMMUNITIES: CHALLENGES OF BEING AN AFRICAN AMERICAN GAY MAN IN AMERICA

I am an African American gay male clinical psychologist beginning my first position at a midwestern university. To my knowledge, I am the first African American man in the last 15 years to obtain a PhD from my graduate program and was the only openly African American gay man within the entire 30 plus year of the Clinical, School, and Experimental psychology PhD programs at this northeastern university.

European Americans seem to be threatened by my "race" and not by my sexual orientation, whereas African Americans seem threatened by my sexual orientation and not by my "race." By refusing to separate my African American and gay identities, I engage in purposeful resistance to both European American and African American communities when asked to choose one identity over the other. Because I am part of two communities, African American and gay, I often view my identity as being situated in both communities (although, I feel more allegiance to African American communities). Sometimes, I feel that being African American is like being in a club and my membership might be revoked. There seems to be an unspoken code within in this club, guided by a concept of what African American is and what African American is not. When some African American people meet for the first time, there seems to be a test conducted on each other to determine our Black racial identity status (22) or level of African American acculturation (23). Some of this testing feels like a form of gate-keeping behavior. If I fail a portion of the test, for example, by saying a "wrong statement" relating to African American culture, the other African American persons may act as if they possess the authority to take away my African American identity, to revoke my membership. Being an "out" African American gay man seems to threaten my African American club membership. Many African Americans do not have a positive reference point for placing my gay identity (24).

For many European Americans, they appear to accept the fact I am gay with greater ease than my being an African American. I perceive my relationship

with some European Americans as them going through an adjustment process in order to feel comfortable around me as an African American man. Once European Americans have adjusted to my being an African American, I believe it makes it easier for them to accept my gayness. My impression is that European Americans feel more comfortable viewing my primary identity as gay rather than having to think about how I cope with racism, and being part of the African American culture. Finally, very few European Americans seem to be aware that my experience of racism in the European American heterosexual community also occurs in European American gay communities.

Concepts of “the self,” when created from a monistic stance, often marginalize important multiple identities. New models of the self need to be developed that honor the multiple ways people experience themselves across their lifespan. I long for the day when I can be visible in both European American and African American communities, and not treated as one preferred identity over another—but as one.

CONCLUSION

Several perspectives on the impact of multiple minority oppression have been presented. Factors such as homophobia in POC communities, racism in majority LGBT communities, as well as ableism and sexism in both communities lead to feelings of isolation and marginalization for LGBT psychologists of color. Individually, LGBT psychologists of color have sought social connections outside of the psychological community for support. In addition, courageous acts such as speaking out in the classroom about the issues of LGBT POC and becoming active in majority LGBT and ethnic minority organizations have increased the focus on LGBT POC issues. Increased attention to these issues through journal articles such as this one, task forces within majority organizations that focus on the specific research and clinical needs of LGBT POC, and more emphasis on recruitment of LGBT persons of color into the psychological community will go a long way in addressing the effects of multiple oppression.

REFERENCES

1. Frye M. Oppression. In Richardson L, Taylor V, Whittier N, editors. *Feminist Frontiers IV*. New York: McGraw-Hill, 1997:7–9.
2. Morales ES. Ethnic minority families and minority gays and lesbians. *J Homosex* 1989;17:217–39.
3. Soto TA. Ethnic minority gay, lesbian, and bisexual publications. A 10-year review. *Div. 44 Newsletter* 1997;13:13–4.
4. Fukuyama MA, Ferguson AD. Lesbian, gay, and bisexual people of color: Understanding cultural complexity and managing multiple oppressions. In Perez R, DeBord A, Bieschke K, editors. *Handbook of Counseling and Psychotherapy With Lesbian, Gay and Bisexual Clients*. Washington, DC: American Psychological Association, 2000:81–105.
5. Greene B. Lesbian women of color. In Comas-Diaz L, Greene B, editors. *Women of Color*. New York: Guilford Press, 1994:389–427.
6. Lourde A. I am your sister: African American women organizing across sexualities. *Practice* 1987; 5:83–7.
7. Hall RL, Rose S. Friendships between African American and European American lesbians. In Weinstock J, Rothblum E, editors. *Lesbians and Friendships: Ourselves and Each Other*. New York: New York University Press, 1996: 165–91.
8. Leslie D, MacNeill L. Double positive: Lesbians and race. In Adleman J, Enguidanos G, editors. *Racism in the Lives of Women: Testimony, Theory, and Guides to Antiracist Practice*. New York: Haworth, 1995:161–79.
9. Hall RL. Softly strong: African American women’s use of exercise in therapy. *Psychother Patient* 1998;10:81–100.
10. West C. *Race Matters*. New York: Vintage, 1994.
11. Dyson M. *Race Rules*. New York: Addison Wesley, 1996.
12. Smith B. Homophobia: Why bring it up? *Interracial Books Child Bull* 1989;7–8.
13. Ramos J. *Companeras: Latina Lesbians*. New York: Latina Lesbian History Project, 1987.
14. Trujillo C. *Chicana Lesbians: The Girls Our Mothers Warned Us About*. Berkeley: Third Woman Press, 1991.
15. Espin OM. *Latina Realities: Essays on Healing, Migration, and Sexuality*. Boulder, CO: Westview, 1997.
16. Goffman E. *Stigma: Notes on the Management of a Spoiled Identity*. New York: Simon and Schuster, 1963.
17. Brooks VR. *Minority Stress and Lesbian Women*. Lexington, MA: DC Health, 1981.
18. Greene B. Ethnic minority lesbians and gay men: Mental health and treatment issues. In Greene B, editor. *Ethnic and Cultural Diversity Among Lesbians and Gay Men*. Thousand Oaks, CA: Sage, 1997:216–39.
19. Di Placido J. Minority stress among lesbians, gay men, and bisexuals: A consequence of heterosexism, homophobia, and stigmatization. In Herek GM, editor. *Stigma and Sexual Orientation: Understanding Prejudice Against Lesbians, Gay Men, and Bisexuals*. Thousand Oaks, CA: Sage, 1998: 138–59.
20. Olkin R. Psychosocial dimensions of polio and post-polio syndrome. In Halstead LS, editor. *Managing Post-Polio Syndrome*. Washington, DC: National Rehabilitation Hospital Press, 1998:107–25.
21. Berger RM. *Gay and Gray*. Binghamton, NY: The Haworth Press, 1996.
22. Helms J. *African American and European American Racial Identity: Theory, Research and Practice*. Westport, CT: Praeger, 1990.
23. Landrine H, Klonoff EA. *African American acculturation: Deconstructing Race and Reviving Culture*. Thousand Oaks, CA: Sage, 1996.
24. Simmons R. Some thoughts on the challenges facing African American gay intellectuals. In Hemphill E, editor. *Brother to Brother: New Writings by African American Gay Men*. Boston, MA: Alyson, 1989:211–28.