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LGBT People of Color and Mental Health

LGBT people of color comprise diverse groups of individuals and communities connected by many aspects of identity, including race, ethnicity, national heritage, sexual orientation, loving relationship patterns, gender identity, and gender expression. There are several reasons to highlight social science information about LGBT people of color, and one of the most striking reasons is the diversity of ways the multiple levels of inequality are experienced.

This paper introduces current scientific research and understanding of the complexity of the experiences of lesbian, gay, bisexual, and transgender people of racial and ethnic minorities.

Stereotypes

FINDINGS: LGBT people of color are exposed to stereotypes within and outside LGBT communities.

LGBT people of color have received less research attention than white LGBT people. Moradi et al.ⁱ highlight the marginality of LGB people of color, explaining the misconception that, “LGB people of color do not exist or are so few in number that their presence or absence does not need to be made explicit” (p. 324).

When people are attempting to build awareness about the multiple inequalities LGBT people of color can experience, it is possible to over-generalize or perpetuate stereotypes about LGBT people of color. These stereotypes include:

- LGBT people of color cannot have satisfying relationships or families,
- communities of color shut out all LGBT people, and
- LGBT people of color must choose between their sexual orientation or gender identities and their racial or ethnic identities.

Contrary to these stereotypes, many LGBT people of color have accepting communities, happy relationships, and successful families. For example, in a Human Rights Campaign Survey, 60% of LGBT people of color stated that they were treated like anyone else in their racial or ethnic communities,ⁱⁱ the Movement Advancement Project has shown that more Black and Latino/a same-sex couples are raising children compared to white same-sex couples,ⁱⁱⁱ and when Black and Latino/a LGB people in New York were asked the importance of their sexual orientation and racial identities, they reported one was just as important as the other.^{iv}

Health Disparities

FINDINGS: LGBT people of color often suffer general health and health care disparities, with lower rates of health care access and poorer general health.

For every uninsured heterosexual in the U.S., it is estimated there are two uninsured LG or B people.^v There are alarming findings showing that health and health care may be worse for LGBT people who are also members of marginalized racial and ethnic communities. For example, in Washington D.C., nearly 50% of Black transgender people were without health insurance.^{vi} In California, Latino/a LGB people had the lowest rates of having health insurance and were least likely to have a source of regular, basic, healthcare; LGB African Americans had two to three times the rate of diabetes compared to any other group; and LGB Asian Americans showed the highest rates of psychological distress.^{vii} Although there has been more research on sexually transmitted infections, particularly HIV/AIDS, among LGBT people of color^{viii}, there is much less research on the vast array of other health indicators and health needs of LGBT people of color. The available research highlights appalling disparities faced by LGBT people who are also members of racial and ethnic minority groups.

Discrimination and Stress

FINDINGS: Multiple levels of discrimination add multiple experiences of stress.

Theory and research highlights that experiences of racism,^{ix} experiences with heterosexism,^{xi xii} and experiences with genderism^{xiii} are associated with mental health problems because discrimination experiences act as stressors. It has become clear that “discrimination is bad for your health,”^{xiv} and both racist and heterosexist stressors (e.g., discrimination) are associated with psychiatric symptoms^{xv} and substance use disorders.^{xvi}

Discrimination-related stress comes in many forms. A 2009 survey of LGBT people of color conducted by the Human Rights Campaign found: half of their respondents experienced and reported discrimination for being an LGB or T person, and 61% because of their race. Moreover, nearly a quarter (24%) survived violence because they are LGBT and 30% survived violence based on their race.

A recent study (2011) documented the micro-aggressions, or brief, daily experiences with racism and heterosexism, reported by African Americans, Latino/as, American Indian, and Asian/Pacific Islanders.^{xvii} Most of the sample identified as lesbian, gay, or bisexual, and the sample included a smaller percentage of those who identified as queer, transgender, two-spirited, and “other” gender. This new scale, measuring racism from the LGBT community, heterosexism from participants’ race community, and racism in romantic relationships, was significantly associated with higher levels of depression and general stress. Studies such as this highlight how belonging to an ethnic or racial minority group exposes LGBT people to additional sources of discrimination-related stress.

Understanding Differences Among Racial And Ethnic Groups

FINDINGS: Mental health differs for different groups of LGBT people of color.

It is important to note that although most LGBT people, including people of color, experience stigma and oppression, most LGBT people do not have mental health problems.^{xviii xix}

The effects of being the target of multiple kinds of oppression also differ for different social groups. For example:

- Even though African American LGB people tend to be the target of more discrimination than white LGB people, they do not consistently show higher rates of mental health disorders.^{xx xxi} However, African American lesbians and bisexual *women* have demonstrated greater depression than African American gay and bisexual *men*.^{xxii}
- Latino/a LGBT people, on the other hand, have higher rates of depression and lower rates of wellbeing in some studies,^{xxiii} however, these higher rates of distress for Latino/a LGBT people are not consistent across studies.^{xxiv}
- There is also some evidence that American Indian or First Nation two-spirit people, compared to their heterosexual counterparts, may suffer more psychological distress, including anxiety and post-traumatic stress symptoms.^{xxv}

The particular experiences of belonging to a sexual orientation group, a racial group, identifying with an ethnic group, and being gendered, (among other social experiences) creates a multidimensional picture of LGBT people of color that highlights the different experience of belonging to multiple social groups. The multiple types of discrimination and different ways similar types of discrimination are experienced require understanding that the mental health of LGBT people of color differs as well.

Coping and Resiliency

FINDINGS: LGBT people of color often cope and protect themselves from the stress of discrimination.

Resilience, coping, or protective factors are resources and ways of thinking, behaving, and managing emotion that may buffer individuals from stress and can enrich experiences of living in the intersections of sexuality, gender, race, and ethnicity. Some studies on resilience and coping have found that many LGBT people of color do **not** show additive health effects of discrimination or that they experience the stress in different ways because of different ways they manage that stress.

Having positive community connections can provide important opportunities of support to LGBT people of color. For example, LGB people, whether they belong to a minority or majority racial group, who have a more positive sense of their LG or B identity and who are more connected to an LGB community tend to have greater psychological well-being^{xxvi} From a qualitative study on transgender people of

color’s experiences of resilience, one participant underscored his community connections as a source of strength:

“There aren’t words in Vietnamese for transsexual—and my trans poc [people of color] community knows that. So, I feel like I represent a certain cultural perspective that is important. Activism is also part of my resilience to the bad shit I have been through—being able to give my voice....” (Richard, age 32, Multiracial FTM)^{xxvii}

Ways of managing discrimination may also mitigate its effects on individuals. This includes, for example:

- whether individuals appraise the discrimination as threatening,
- whether they believe they have the resources to counter it, and
- how they manage the stress when it cannot be avoided. For example, not accepting discrimination based on race, sexual orientation, or gender, and talking about it with others has been associated with lower rates of some psychiatric disorders^{xxviii}

One of the risks of encountering heterosexist stigma is that the targeted person will internalize these negative experiences, or that individuals will believe the stereotypes they encounter and experience the negative affect of others’ prejudice.

A recent study by Moradi and colleagues^{xxix} examined an interesting hypothesis that LGB people of color might demonstrate greater resilience against this risk than LGB white people. Although most of Moradi et al.’s comparisons between LGB white people and people of color revealed similarities between the groups, they found initial evidence that belonging to a racial minority group may boost LGB people’s resilience in some ways: LGB white people showed a positive association between heterosexist stigma and internalized homophobia, but LGB people of color’s experiences with heterosexist stigma were *not* related to internalized homophobia. This finding leaves unanswered the question about how people of color may tend to navigate discrimination differently to circumvent some of its costs.

It is possible that people of color, because they have experiences dealing with discrimination based on their race or ethnicity, may have learned more ways of coping with discrimination that they can garner when they experience discrimination aimed at their sexual orientation or gender. However, it is important to understand that this does not make LGBT people of color “immune” to negative health consequences of discrimination. Rather, there is a need to understand how the experiences of belonging to a particular racial or ethnic group might change the ways that LGBT people of color experience and manage the stressors encountered because of stigma and oppression. **Understanding this diversity may lend to the most effective promotion of community resources and to the most appropriate individual responses**

ENDNOTES

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