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Identifying and Correctly Labeling Sexual Prejudice, Discrimination, and Oppression

Shannon B. Dermer, Shannon D. Smith, and Korenna K. Barto

To effectively work with and advocate for lesbians, gay men, and their families, one has to be aware of the individual, relational, and societal forces that may negatively affect them. The focus of this article is to familiarize the reader with terminology used to identify and label sexual prejudice, discrimination, and oppression. The pros and cons of both historically used language and newer terminology are discussed.

Coined nearly 40 years ago, the word *homophobia* is arguably the most recognized term used to describe the marginalization and disenfranchisement of lesbians and gay men (Herek, 2000). Those who stigmatize homosexuality frame it as an individual pathology originating from problems in psychosexual development, abuse, or a sinful lifestyle. Harley, Jolivette, McCormick, and Tice (2002) noted that "the practice of discussing minorities in terms of pathology has had a continuous history in the United States" (p. 218). With the invention of the term *homophobia*, Weinberg (1972) and other researchers pushed to depathologize homosexuality and refocused conversations to include the prejudice embedded in individuals and society (Herek, 2000). The consequence of Weinberg creating a label to recognize irrational fear about homosexuality opened the door to recognizing oppression based on sexual orientation and sparked a movement within mental health professions to normalize nonheterosexual orientations.

Although the term *homophobia* was originally created in 1967 to embody the irrational fear of lesbians and gay men (Weinberg, 1972), the meaning has expanded over time to encompass any negative attitudes toward sexual minorities. Sexual minorities are a group composed of lesbian, gay, bisexual, transgender, and intersex individuals, as well as people questioning their sexual or gender identity. In essence, the term *sexual minority* includes anyone whose sexual orientation, sexual identity, sexual behavior, gender orientation, or gender identity fall outside of what is considered "normal" or typical by dominant society. Because both sexual minorities as a group and the attitudes toward them are quite diverse, some researchers have questioned whether the concept of homophobia is still useful for describing attitudes toward sexual minorities (Herek, 2000).

Although Weinberg's (1972) naming of homophobia was a tremendous step forward in advocacy for certain sexual minorities, this single term cannot account for the continuum of prejudice, discrimination, and oppression that sexual minorities face. Consequently, other terms have been created. For instance, Herek (2000) proposed the use of the term *sexual prejudice* for the scientific analysis of all negative attitudes based on sexual orientation, including heterosexuality, bisexuality, transexuality, and homosexuality. In addition, other concepts such as homonegativity, antigay hostility, heteronormativity, heterocentrism, heterosexualism, sexual stigma, and internalized homophobia have been created to capture a more complex picture of the individual, relational, and societal oppression with which sexual minorities contend.

A larger pool of language now exists to describe negative attitudes and actions toward sexual minorities, and it is important for clinicians to understand the various terms and the possible consequences of particular language. Part of being sensitive to working with lesbian and gay clients is the ability to be aware of, identify, and name the multifaceted face of oppression. The term *homophobia* is no longer precise enough to encapsulate the manifest and surreptitious facets of sexual prejudice. In addition to knowledge about sexual development and the coming-out process, counselors should have a more nuanced vocabulary to be able to name and externalize both covert and overt expressions of sexual intolerance. It is important for counselors to be able to identify and understand oppression to help intervene with clients and advocate for sexual minorities within the counseling profession and society.

The role of a professional counselor goes beyond being a sympathetic ear for an individual client. The standards of the profession compel a counselor to understand oppression, develop her or his own cultural awareness, promote social justice, advocate for the elimination of bias and prejudice, struggle against intentional and unintentional discrimination, and advocate for the overall wellness of clients (Constantine, Hage, Kindaichi, & Bryant, 2007; Council for Accreditation of Counseling and Related Educational Programs, 2009; Hermann & Richter, 2006; Sue, Arredondo, & McDavis, 1992). Part of reaching these lofty goals is having awareness and understanding of the language used to encompass oppression, privilege, discrimination, and prejudice.

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The focus of this article is to familiarize the reader with terminology used to identify and label sexual prejudice, discrimination, and oppression. We discuss the pros and cons of both historically used language and newer terminology. Because sexual minorities encompass a diverse collection of marginalized people, it may do an injustice to individual groups to try and discuss them homogeneously. For this reason, our discussion of terminology is specifically directed at lesbians and gay men, although some of the following concepts relate to all sexual minorities.

Oppression, Privilege, and Empowerment

Before we discuss specific terminology, a discussion of dominant groups and the processes of oppression, privilege, and empowerment is pertinent. Individuals who belong to dominant groups are those within a society who by birth or by attainment are members of groups that are seen as normal or have the ability to influence the definition of *normal*. Those with dominant group memberships gain cultural power, which is a privileged status based merely on one's cultural identity (Hays, Dean, & Chang, 2007). Individuals with a heterosexual orientation (or lesbian, gay, and bisexual people who do not correct the assumption that they are heterosexual) reap the benefits of being part of a dominant group. Lesbians, gay men, and other sexual minorities must deal with oppression based on their sexual minority status and the consequences of heterosexual privilege. Additionally, for heterosexual individuals, advocating against oppression and helping to empower lesbians and gay men necessitates becoming aware of one's own privilege based on heterosexuality (Smith & Chen-Hayes, 2003).

Oppression

Oppression is the exercise of power to disenfranchise, marginalize, or unjustly ostracize particular individuals or groups. Systematic oppression occurs through repeated integration of prejudice and discrimination into societal institutions (e.g., law, social policy, schools, language, media) and through threats of violence, removal of rights, and exclusion from decision-making processes. In addition, oppression can be intentional or unintentional and exists in any society in which there are dominant and subordinate groups.

Hanna, Talley, and Guindon (2000) described oppression on a continuum that includes the concepts of primary oppression, secondary oppression, and tertiary oppression. *Primary oppression* is directly committed by a person with privilege. *Secondary oppression* occurs when a person or group remains silent about another person or group perpetrating oppression through force or deprivation. Finally, *tertiary oppression* happens when a member or members of a marginalized group seek acceptance from the dominant group at the expense of others in the marginalized group.

Oppression and privilege may be more easily understood in terms of targets and agents (Crethar & Dermer,

2005). *Targets* are members of social identity groups that are disenfranchised, exploited, marginalized, victimized, and made powerless in a variety of ways by oppressors and by oppressors' systems and institutions (M. Adams, Bell, & Griffin, 2007; Young, 1990). *Agents* are members of a dominant social group that is privileged either by birth or by attainment. Whether deliberately or unwittingly, agents exploit or gain an unfair advantage over members of target groups (M. Adams et al., 2007).

Privilege

The benefits, advantages, and immunity from prejudice and discrimination afforded to agents are known as *privilege*. Privileged people gain power "because of the entitlements, advantages, and dominance conferred upon them by society. These privileges were granted solely as a birthright, not because of intelligence, ability, or personal merit" (Black & Stone, 2005, p. 243). Privilege contains five core components: (a) it is a special advantage, (b) it is granted because of dominant group membership or as a birthright, (c) it is related to a preferred status, (d) it benefits the recipient and excludes others, and (e) entitled status may or may not be outside of the privileged person's awareness (Black & Stone, 2005; McIntosh, 1998).

These benefits of privilege are assigned to members of dominant groups whether they want them or not. Merely by being a member of a group that is considered privileged, one inherits the rights and benefits of that group. McIntosh (1998) argued that privilege is not only a state of being favored over other groups but also a set of conditions that selectively empowers particular groups while not empowering others.

Empowerment

Empowerment is a process through which subordinate groups attain greater decision-making power and greater access to resources, as well as a process by which dominant groups share their power and control. According to Lindskog and Crethar (2005),

> empowerment can be defined as the course of action by which individuals, groups, and broader systems that are comparatively powerless, disenfranchised, or marginalized: (a) increase awareness of the power dynamics at work in their life context, including institutional and social barriers; (b) develop the skills and capacity for gaining some reasonable control over their lives and life context, given the constraints of their environments; (c) recognize areas in their lives where they can begin to exercise individual control as well as areas where they need to begin building allied support to confront institutional barriers. People become truly empowered when they do the above (d) without infringing on the rights or freedoms of others (e) while actively supporting, encouraging and developing the empowerment of others in the community. (p. 7)

Through identifying and naming patterns of oppression based on sexual orientation, heterosexual counselors can become aware of their own privilege and help empower lesbians, gay men, and their families.

■Language

Following the tradition of narrative therapists and social linguists, correctly identifying, naming, and then externalizing an interactional process not only gives that process power but also gives others the power to fight against it. Specifically, naming the processes of prejudice, discrimination, and oppression against sexual minorities helps to question society's values, categories, and rules about sexual orientation. Even in the simple act of naming society's prejudice and hostility, counselors help "identify it as a problem for individuals and society" (Herek, 2004, p. 9).

The term *homophobia* extended Churchill's (1967) concept of homoerotophobia, a construct encompassing the societal fear of erotic or sexual contact with people of the same sex. Homoerotophobia targeted societal or cultural proscriptions against same-sex attractions and sexual behavior. The notion of homophobia, however, highlighted individual discomfort with homosexuality rather than focusing anxiety embedded at the societal level (Smith, Dermer, Ng, & Barto, 2007).

Additional views of homophobia have evolved over time, expanding the original notion of homophobia (H. E. Adams, Wright, & Lohr, 1996; Fyfe, 1983; Hudson & Ricketts, 1980; Lehne, 1976; Levitt & Klassen, 1974; Morin & Garfinkle, 1978). For example, Hudson and Ricketts (1980) described homophobia as a unidimensional construct composed of several emotional responses (e.g., fear, anger, disgust) that persons experience while interacting with lesbian, gay, bisexual, transgender, and questioning (LGBTQ) individuals (Hudson & Ricketts, 1980). A three-dimensional view of homophobia consisting of negative attitudes, culture-bound commitments to traditional sex roles, and personality traits has been proposed (Fyfe, 1983). In addition, O'Donohue and Caselles (1993) outlined an interactive model of cognitive, behavioral, and emotional components with situational determinants in producing homophobia-driven aggression. Other researchers have suggested that homophobia is a construct that consists of negative attitudes, affective regulation, and malevolence toward lesbians and gay men (H. E. Adams et al., 1996).

Although the word *homophobia* brought prejudice against sexual minorities to the forefront, the term itself was critiqued in later years (Herek, 1988, 2000, 2004; Hudson & Ricketts, 1980; Lehne, 1976; Morin & Garfinkle, 1978; O'Donohue & Caselles, 1993; Shields & Harriman, 1984). One such critique was that *phobia* is a diagnostic term, even though Weinberg (1972) did not intend to use it in a diagnostic sense. Most antigay prejudice does not rise to the level of a true phobia (Herek, 2004; Shields & Harriman, 1984). The central emotion involved in phobias is fear, whereas the central emotion in most prejudice is anger (Herek, 2004; Shields & Harriman, 1984). Also, *homophobia* is a term that tends to highlight

individual, microlevel prejudices rather than focusing on prejudice, discrimination, and oppression at the macrolevel.

Homophobia

Identifying and giving a name to individual, social, and cultural processes of discrimination and prejudice helps "crystallize the experience of rejection, hostility, and invisibility that . . . [lesbian and gay individuals] feel throughout their lives" (Herek, 2004, p. 8). The first widely accepted term used to externalize discrimination toward lesbians and gay men was *homophobia*. The term *homophobia* was initially coined in 1967 to signify an irrationally negative attitude toward lesbian and gay people (Weinberg, 1972). The definition included the notion of dread of being in close quarters with lesbians and gay men, as well as an irrational fear, hatred, and intolerance by heterosexuals.

Heterosexism

The term *heterosexism* was created as a parallel to language that externalized other isms, such as racism and sexism (Herek, 1990). Whereas *homophobia* has been defined as an individual's negative, fearful emotional response to homosexuality, *heterosexism* has been defined in ecological terms, that is, as a systematic process of privilege toward heterosexuality relative to homosexuality based on the notion that heterosexuality is normal and ideal (Herek, 2004; Palma & Stanley, 2002; Pharr, 1998).

Heterosexism is also referred to as cultural heterosexuality because of the presumption that individuals are heterosexual unless there is evidence to the contrary. The intended or unintended (Braun, 2000) result of viewing heterosexuality as the social, cultural, and behavioral norm is that this stance implies that all other sexual orientations and related practices are abnormal or deviant. The implication of heterosexism is that nonheterosexuality automatically becomes open to question and subsequently the object of various forms of prejudice and discrimination.

D'Augelli (1998) discussed the heterocentric bias in the United States and the contexts in which same-sex affection is acceptable. In general, Americans are socialized into a heterosexual model of sexual privilege and oppression. Societal institutions are created in a culture that favors heterocentric scripts related to gender conformity and heteroerotic attachments. Nevertheless, same-sex displays of affection may be deemed acceptable under certain, prescribed conditions. The term *homosociobility* has been used as a way to identify socially acceptable same-sex displays of affection within a heterosexist society. At first, homosociability may seem to expand the boundaries of acceptance. Nevertheless, by its very nature, homosociability tends to maintain heterosexual privilege.

> Homosociability is the only acceptable way to express same-sex interests, but there are clear social scripts for its expression. For boys, sports participation is the socially sanctioned

script for ritualized (and thus controlled) same-sex affection. For girls, traditional female sex role development contains same-sex affection in a way that diffuses its erotic elements. By the end of elementary school, children in American society have learned that heterosexuality is natural and that homoeroticism is shameful. (D'Augelli, 1998, p. 190)

The idea that same-sex expressions of sexuality are deviant and unacceptable is integrated into the micro-, meso-, and macrolovels of society. The insidious nature of heterosexism in cultural institutions means that it is all around, while simultaneously rendered invisible. The group that holds a privileged status in a particular society goes unquestioned and unnoticed and is the assumed group membership for all individuals unless there is evidence to the contrary.

Whereas *homophobia* refers to individual beliefs and behaviors emanating from personal ideology, *heterosexism* refers to the cultural ideology that maintains societal prejudice against sexual minorities (Herek, 2004). The term *heteronormativity* has also been suggested to represent this idea. The advantage of using concepts such as heterosexism and heteronormativity, as opposed to homophobia, is that they acknowledge the collusion in antigay attitudes at all societal levels. These terms underscore the exclusion or invisibility of sexual minorities; the disadvantage is they fail to acknowledge overtly intolerant attitudes and behaviors.

Sexual Prejudice

Herek (2004) suggested that the term *sexual prejudice* be used to represent negative attitudes based on sexual orientation. He posited that using the term *sexual prejudice* would enhance study of antigay attitudes because it does not fall prey to some of the disadvantages of using the term *homophobia* and links hostility based on sexual orientation to research on other forms of prejudice. *Prejudice* is defined as an attitude based on judgment or evaluation directed at a specific social group or its members and involving negativity, hostility, or dislike (Herek, 2004). Furthermore, the term *sexual prejudice* does not involve the implied value of irrationality or fear encompassed in the term *homophobia*.

Herek (2004) believed that the concept of sexual prejudice should replace the use of the terms *homophobia* and *heterosexism*. Homophobia is not an accurate description, as discussed previously, and heterosexism focuses so much on the societal level that it leaves out individual attitudes. Unlike the aforementioned terms, *sexual prejudice* is able to integrate micro-, meso-, and macrolevel attitudes. Nevertheless, *sexual prejudice* refers to attitudes rather than behaviors; therefore, it fails to account for the outcomes resulting from the attitudes.

Sexual Stigma

Stigma is the societal shame associated with a person based on an identity or characteristics that the dominant group devalues or finds unacceptable. According to Herek (2004), "sexual stigma refers to the shared knowledge of society's negative regard for any nonheterosexual behavior, identity, relationship, or community" (p. 15). Once a group is stigmatized, the stigmatized portion of a person's identity "trumps all other traits and qualities. . . . Others respond to the individual mainly in terms of it" (Herek, 2004, p. 14). Stigma is seen as something within a person rather than as a socially constructed label that others affix to that person or group (Link, 2000).

Sexual stigma devalues sexual minorities and may lead to hostility (from either the dominant or marginalized group), restricted identity, exclusion, discrimination, and less access to power and resources (Herek, 2004; Link, 2000). In addition, when individuals are brought up in a society that stigmatizes membership in a particular group, the shame, rejection, and associated group stereotypes may be internalized by the minority group. Sexual stigma is perpetuated through rejection of LGBTQ people, same-sex relationships, and the LGBTQ community (Herek, 2004). Sexual minorities adopting these negative, dominant beliefs are labeled as having *internalized homophobia*.

Internalized Homophobia

Although homophobia was previously described as a process external to sexual minorities, it can also manifest itself internally (Reynolds & Hanjorgiris, 2000). Simply put, *internalized homophobia* refers to negative feelings about one's own homosexuality or bisexuality resulting from stigmatized status. It involves negative self-attribution about one's sexual orientation based on societal values that heterosexuality and opposite-sex relationships are more healthy, intimate, committed, and normal than are other types of sexual orientations or relationships. Overall, internalized homophobia entails accepting the dominant society's prejudice against sexual minorities and turning those values and attitudes inward. Internalizing societal attitudes and beliefs may manifest itself within sexual minorities as a threat to self-acceptance or even as self-hate (Herek, 2004; Loiacano, 1989; Reynolds & Hanjorgiris, 2000). Individuals who have not disclosed their sexual minority status are more likely to experience internalized homophobia. Nevertheless, even those who are ostensibly gay-affirmative and self-accepting may have lingering societal messages of inferiority. The term *covert internalized homophobia* has been used to label the enduring effects of internalized homophobia in those who have struggled against societal stereotypes.

Again, the term *homophobia* may not be technically appropriate in that phobia connotes fear of self rather than highlighting the feelings of shame, guilt, or anger. Other researchers have differentiated between homonegativity and homophobia. Homonegativity is seen as multidimensional construct that includes antigay attitudes, beliefs, and judgments (Herek, 2004) and could be used concomitantly to denote external and internal components of societal attitudes. The terms *internalized homonegativity* and *covert internalized homonegativity* are more accurate descriptions of this process

than is homophobia. Nevertheless, the term *homophobia* is so ingrained in the literature and in society that it may make such a transition difficult.

Sexual Orientation Victimization (SOV)

Internalized homonegativity may contribute to developmental opportunity loss, self-doubt, constriction of affect, social vigilance, turning away of social opportunities, and inauthentic heterosexual role-playing or relationships (D'Augelli, 1998). Typically, as children and adolescents develop, they become aware of sexual attraction and experiment with this attraction through various forms of dating behavior. Because of internalized homonegativity, youth and young adults who have same-sex attractions may shy away from dating opportunities or engage in opposite-sex dating to fit in with societal expectations (Smith, Dermer, & Astramovich, 2005). In addition, LGBTQ individuals may restrict their expression of affect and hypervigilantly monitor their own behaviors so as not to transgress gender or sexual norms. Social vigilance involves monitoring one's own behavior (on the basis of the apparent perceptions of others) to make sure one conforms to gender and sexual orientation norms. Sexual minorities often develop acuity at assessing others' awareness of their sexual orientation.

D'Augelli, (1998) believed that these restricted or inauthentic experiences are all forms of SOV. SOV results in both the internal effects of not feeling comfortable in one's own skin and the inability to forthrightly express sexual attraction and affection without fear of stigmatization or retribution. There are four manifestations of victimization: (a) developmental opportunity loss; (b) self-doubt induced by cultural heterosexism; (c) institutional victimization; and (d) direct attacks by those who know, suspect, or assume the victim is a sexual minority. Direct attacks may take the form of verbal abuse (e.g., threats, harassment), property attacks (e.g., vandalism, arson), physical attacks (e.g., chased, kicked, hit, beaten, murder), or sexual attacks (e.g., sexual assault, rape, incest) as a result of revealed or suspected membership as a sexual minority. These direct attacks may emanate from family members, friends, peers, or strangers. Institutional victimization ranges from an invisibility in societal institutions (e.g., school, legal, governmental, religious) to an outright criminalization of homoerotic behaviors.

SOV ranges from seemingly innocuous jokes, to hostile verbal comments, to physical or sexual attacks. It results in a normative victimization in which heterosexuality is viewed as normal and attraction to members of the same sex (homoeroticism) as abnormal and deviant. Normative victimization has also been referred to as *heterosexism*.

Minority Stress

Coping with the constant bombardment of negative attitudes from society can be overwhelming and draining. Minority stress stems from the prejudice, discrimination, and oppression associated with being a marginalized group in society (Meyer, 1995, 2003). Stress may emanate from both external and internal sources.

> Lesbians, gay men, and bisexuals represent a sexual minority, and like other minorities, they are often treated by the majority with much disdain and discrimination. Yet, unlike most other minority groups, they are often not recognized as a legitimate minority group deserving of constitutional protections against discrimination. (DiPlacido, 1998, p. 138)

Additionally, unlike most minorities who share experiences with their families and rely on family support in the face of marginalization and victimization, many sexual minorities do not have similar experiences as their families (D'Augelli, 1998). Sexual minorities are usually raised in heterosexual homes, so they do not share that particular minority status with their families. In fact, the family may be purveyors of some of that abuse and victimization.

The antidote to internalized homonegativity and minority stress is not a realignment or alteration of sexual orientation toward the dominant society's view of normal sexuality; rather, the antidote lies in advocating for cultural change while assisting clients toward a resocialization that leads to self-acceptance (Meyer & Dean, 1998; Pearson, 2003). Meyer and Dean (1998) argued that sexual minorities must shake off the ill effects of a *"heterosexist opportunity structure*: norms and institutions that promote opposite-sex relationships and devalue and discourage same-sex intimate relationships" (p. 165). Individuals must create space in their hearts and minds for a new structure that defines sexual minorities as normal, valued, and accepted. Only in creating and integrating such a structure can sexual minorities critique sexual prejudice from an empowered position (Meyer & Dean, 1998) and combat its deleterious effects on LGBTQ individuals, same-sex relationships, and the family members and organizations that love and support them. Contesting the insidious effects of sexual prejudice without adopting a new value structure opens the door to covert internalized homonegativity.

■Conclusion

The advent of specific language to encapsulate society's prejudice against sexual minorities opened the door to seeing prejudicial and homonegative views of society as the ill to be combated rather than seeing homosexuality as individual pathology. Naming sexual prejudice allows it to become a societal issue capable of scientific study and intervention (Herek, 2000). The act of naming also gives activists, advocates, and allies the ability to externalize and battle against negatively valenced attitudes that may, at first, seem nebulous but result in real, systematic oppression.

To effectively work with and advocate for lesbians, gay men, and their families, one has to be aware of the individual,

relational, and societal forces that may negatively affect them (Pearson, 2003; Pope, 1995). Dominant society influences views of what is acceptable and typical. Societal messages about homosexuality may manifest themselves in ideas and behaviors that range from incorrect or misguided to dangerous and violent (Herek, Gillis, & Cogan, 1999). Authors and researchers have pointed to the importance of studying ways to reduce or eliminate prejudice against lesbians and gay men and the importance of finding ways to increase understanding of the dominant group toward sexual minorities (Herek, 2004; Herek et al., 1999; Loiacano, 1989; Palma & Stanley, 2002; Pearson, 2003; Pope, 1995; Szymanski, 2005).

Meyer and Dean (1998) emphasized that although homosexuality itself is not indicative of mental health problems, the stress related to a sexual minority status may contribute to emotional difficulties. Their research findings on the negative effects of internalized homonegativity indicated the "need for intervention at the social level to reduce antigay attitudes and prejudice, and at the individual level to help lesbian, gay, and bisexual people to develop healthy sexual identities" (Meyer & Dean, 1998, p. 182). In addition to legislative and educational interventions, they suggested that mental health practitioners conduct gay-affirmative therapy and be sensitive to socialization, the coming-out process, and the effects of overt and covert sexual prejudice. Having the proper language to describe, understand, and research sexual oppression and prejudice is one step in helping practitioners, researchers, the LGBTQ community, and society at large create an opportunity structure that not only accepts but also normalizes same-sex attraction and relationships.

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