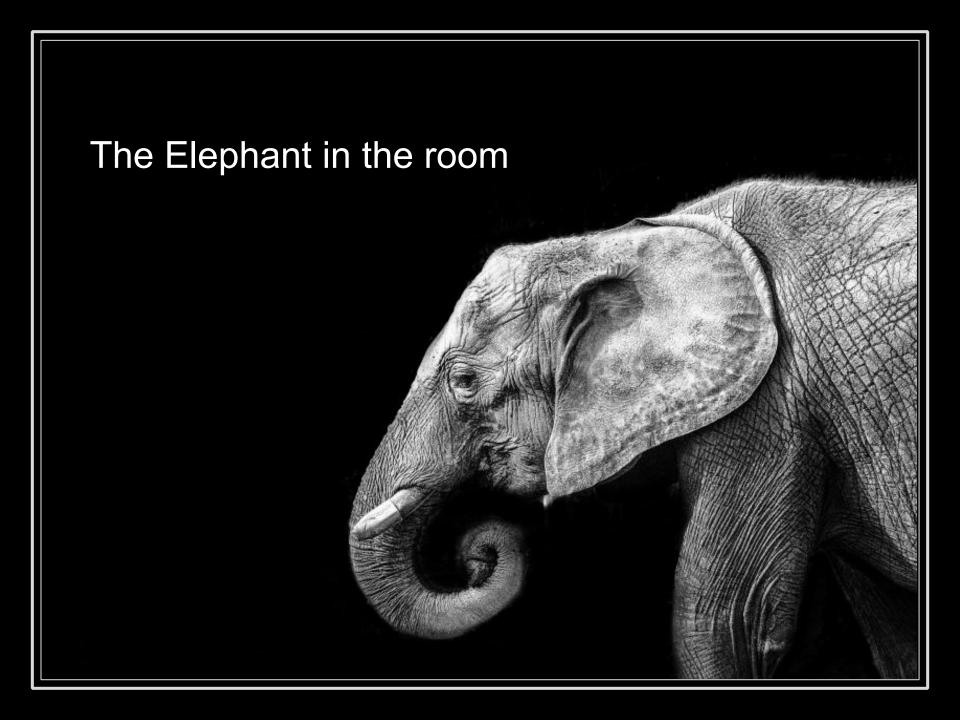
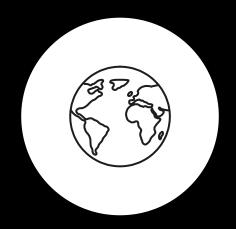
### Pride and Privilege:

Why diversity issues are important now more than ever

hello! I am Peter Thomas, Ph.D.





### Who the hell is this white guy...

And why is he talking to <u>us</u>about diversity?

What does Diversity look like?

# 1. What does Diversity look like?

Typically we think first of the big 3

Race Religion Sexual Orientation

## 1. What does Diversity look like?

Age Social Class Relationship Status Gender Identity Veteran Status Immigration Status Size Physical or Mental Ability Political Orientation Caste Skin tone Dress Code Geographical location Etc.

100

The breakdown of the one hundred

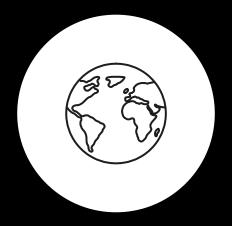


	5	Would speak English
	6	Would speak Spanish
	12	Would speak Chinese
	77	Would speak other languages
	22	Would not have shelter
ALIAN TO	9	Would not have access to drinking water
	23	Would be Muslim
	31	Would be Christian
	16	Would not align with a religion
	22	Would not have electricity
	16	Would not have a toilet
	42	Would live on less than \$2 a day

Heterosexual 89 Sexual minority 11 Would possess 59% of the entire world's wealth and 5/6 would be from the U.S. Would live in substandard housing Would be unable to read or write Would suffer from malnutrition Would be near death/1 near life Would have a college education Would have an internet connection 40 Would own a computer 22



Diversity in this room



## Safety vs. Comfort

We always want <u>safety</u> in the group, but we don't always want *comfort*. Discomfort happens at the learning edge of our comfort zones, where we are most likely to gain new understanding from our experiences. Conflict of understanding pushes our comfort zones and is a necessary and beneficial part of the dialogue process. It is our job as participants in this dialogue to turn conflict and discomfort into learning and growth for everyone. One of our first steps in this direction involves creating a safe environment where we can push our comfort zones and challenge ourselves to learn and grow.

## Safety vs. Comfort

Common to hear negative therapy experiences from everyone, but especially minority populations.

Psychologists are supposed to be best communicators and ambassadors of communication. BUT WE AVOID ALSO.

Therapists generally avoid talking about power, diversity differences and giving difficult interpersonal feedback.

Most therapists avoid broaching or bringing up cultural issues with clients. *More fear today to bring up due to climate.* 

## Safety vs. Comfort

New research that shows that increased awareness of lack of understanding cultural issues increases anxiety. Fear of making a mistake, thus race - based anxiety can increase.

Anxiety = Growth

# 2. The APA Guidelines on Multiculturalism

#### 2.

## The APA Guidelines on Multiculturalism

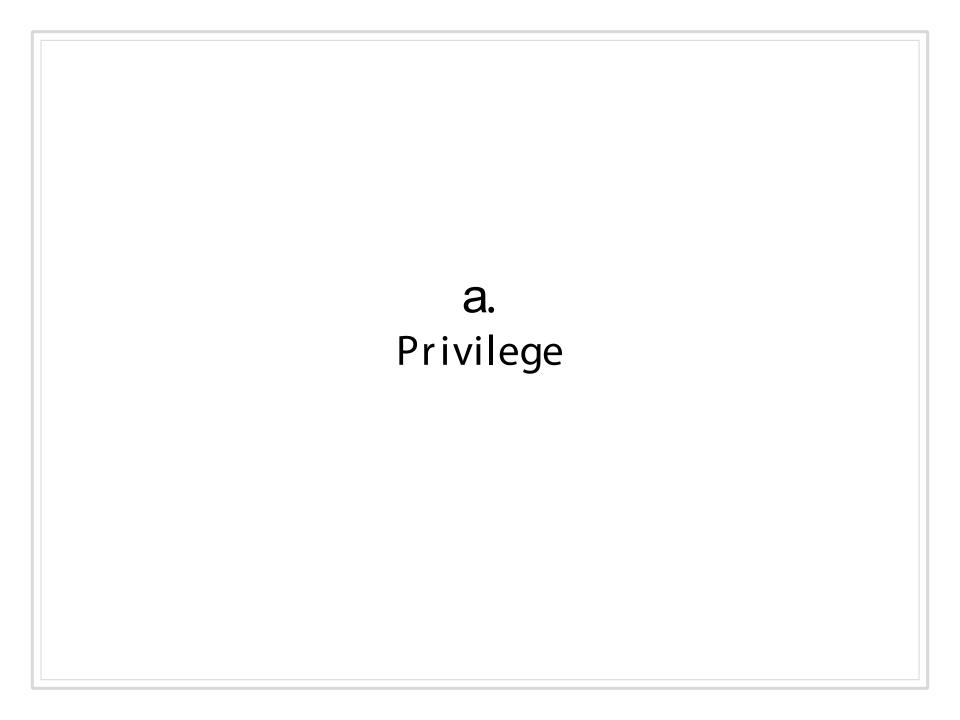
We are encouraged to recognize that, as cultural beings, we may hold attitudes and beliefs that can detrimentally influence the perceptions of and interactions with individuals who are ethnically and racially different from themselves

We are encouraged to recognize the importance of multicultural sensitivity/responsiveness, knowledge, and understanding about ethnically and racially different individuals.



3.

The current themes to the socio-political environment of 20 17/20 18



66

"...unearned assets that I can count on cashing in each day, but about which I was 'meant' to remain oblivious... like an invisible weightless knapsack of special provisions, maps, passports, codebooks, visas, clothes, tools and blank checks."

- Peggy McIntosh



## Privilege Discomfort

A person that encounters difference and perceives that difference as threatening can shift, psychologically, into a place of *Defense Against the Difference*. At this point, learning can be difficult, as all new information is processed through a filter of mistrust, hostility, and xenophobia.



## Privilege Discomfort

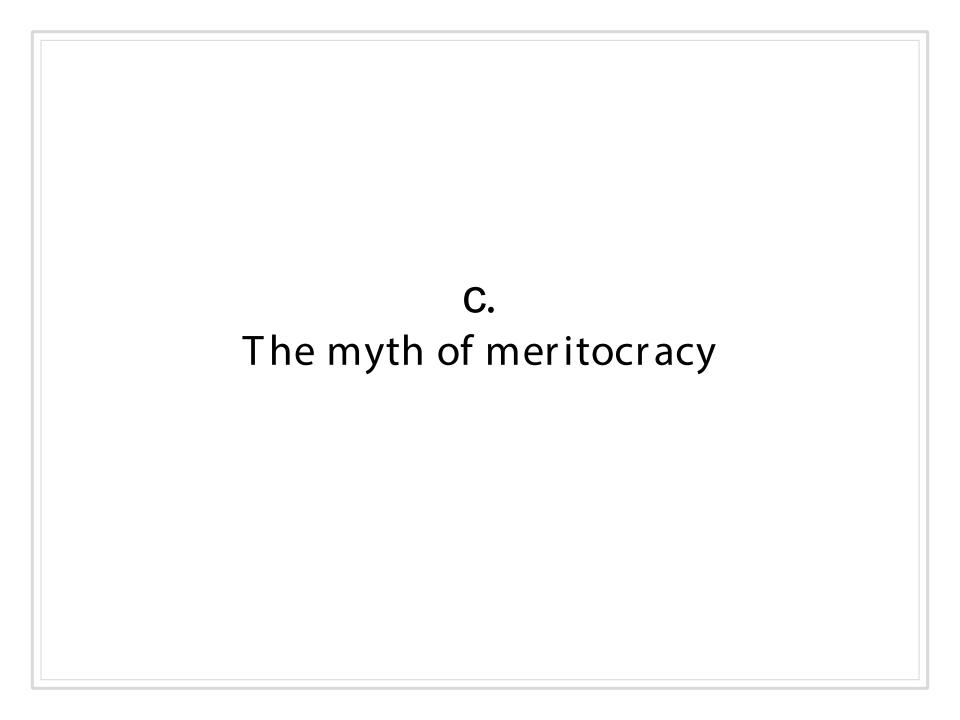
A person that encounters difference and either actively or unconsciously fails to acknowledge that difference as real and meaningful can shift into a place of *denial of that difference*, thus failing to take into consideration important information about that person.

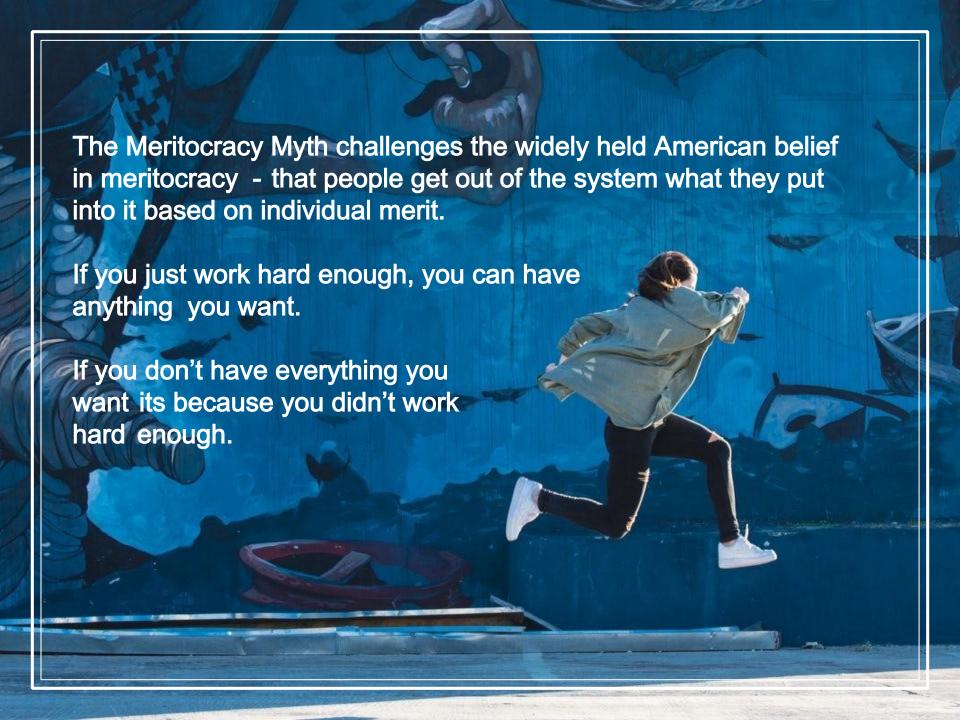
The Fallacy of Colorblindness



White fragility







Implicit bias

66

"Unlike explicit bias (which reflects the attitudes or beliefs that one endorses at a conscious level), implicit bias is the bias in judgment and/or behavior that results from subtle cognitive processes (e.g., implicit attitudes and implicit stereotypes) that often operate at a level below conscious awareness and without intentional control."

(Dovidio, Gaertner, Kawakami, & Hudson, 2002; also Banaji & Heiphetz, 2010)



https://implicit.harvard.edu/implicit/takeatest.html



Your data suggest little or no preference between straight people and gay people

Your data suggest no automatic association between female and male with career and family

Your data suggest a mild automatic preference for European Americans over African Americans Your data suggest a moderate automatic preference for light skin people over dark skin people



## Microaggressions

In relation to implicit bias













A.
SOUTH ASAIN
MALE
SUCCESSFUL LAWYER
GAY
IN AN ARRANGED MARRIAGE
TWO CHILDREN

B.
33 YEARS OLD
UNDOCUMENTED IMMIGRANT FROM
MEXICO
ABLE-BODIED
IN A HETEROSEXUAL MARRIAGE
PARENT OF A TRANSGENDERED
TEEN

C.
ATHEIST
DIABETIC
WHITE
65 YEAR OLD
WOMEN
UPPER MIDDLE CLASS
PARENT OF A SEVERELY AUTISTIC
ADULT

MORBIDLY OBESE
BLACK
CORPORATE EXECUTIVE
INTER-RACIAL RELATIONSHIP
33 YEARS OLD
SOUTHERN BAPTIST

D.

# GENDER, SEXUAL, AND ROMANTIC MINORITY ADOLESCENTS & SUICIDE RISK

Peter Thomas, Ph.D. Licensed Psychologist

#### CRITICAL TRENDS IN SUICIDE

#### CDC 2016:

RATE OF SUICIDE DEATHS INCREASED FROM 10.5 TO 13 PER 100,000 WOMEN & MIDDLE-AGED ADULTS SAW LARGESTS INCREASES RATES INCREASED FOR ALL RACIAL GROUPS EXCEPT BLACK MALES WHICH SAW A DECLINE

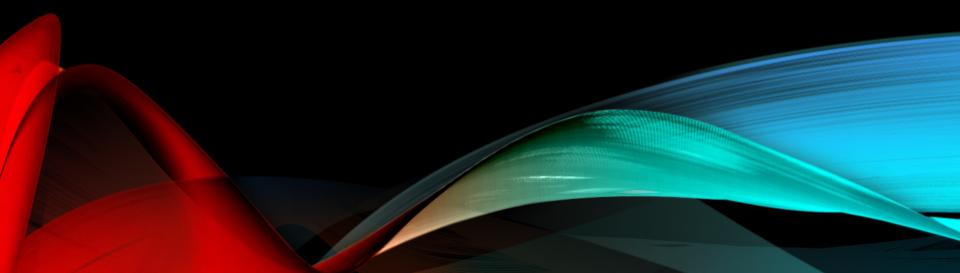
SUICIDE IS STILL THE 2<sup>nd</sup> LEADING CAUSE OF DEATH AMONG YOUTH AGES 10 TO 24

#### LGBT YOUTH SUICIDE

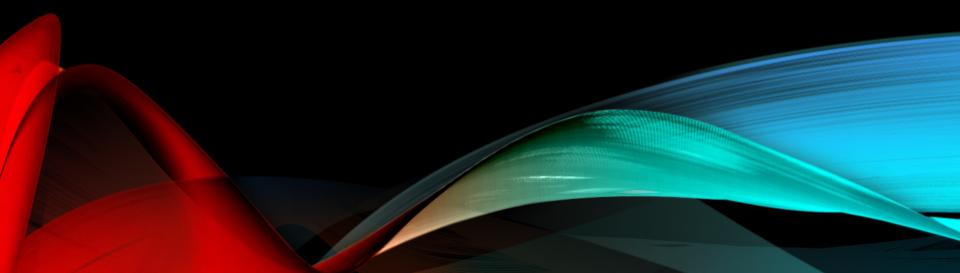
- RATE 4X GREATER RISK FOR LGB THAN STRAIGHT YOUTH (CDC 2016)
- 40% OF TRANSGENDER ADULTS HAVING MADE A SUICIDE ATTEMPT, MOST BEFORE THE AGE OF 25 (HERMAN, RANKIN, KEISLING, MOTTET & ANAFI, 2016)
- LGB YOUTH WHO COME FROM HIGHLY REJECTING FAMILIES ARE 8.4X THAN OTHER LGB YOUTH (FAMILY ACCEPTANCE PROJECT, 2009)

#### "THE SUICIDE CONSENSUS"

LGBT YOUTH ARE NOT AUTOMATICALLY VULNERABLE AND AT-RISK. WE WANT TO AVOID FRAMING THE LGBT EXPERIENCE IN TERMS OF VULNERABILITY AND VICTIMHOOD. BY REPEATEDLY EMPLOYING THIS NARRATIVE, AS A MEANS TO CALLING ATTENTION TO SUFFERING, IT TENDS TO IGNORE POSITIVE ASPECTS OF BEING QUEER OR TRANSGENDERED.



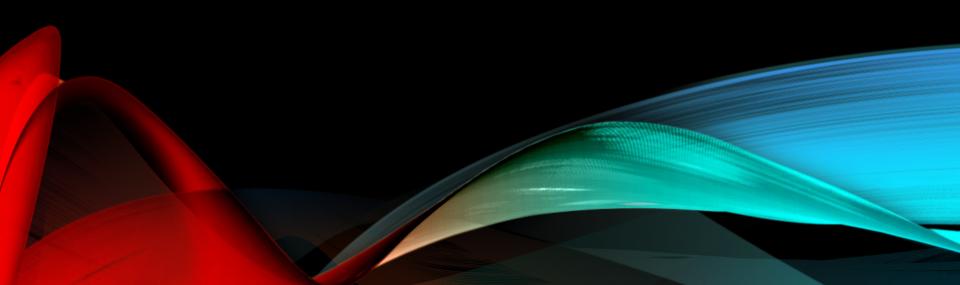
## A NOTE ON THE CURRENT POLITICAL AND CULTURAL ENVIRONMENT



## FROM LGBT TO GSRM

## HRC 2012 SURVEY GROWING UP LGBT IN AMERICA

10,000 YOUTHS AGES 13-17



#### BULLYING

SCHOOLS ARE NOT SAFE AS WE THOUGHT

78-86%

**VERBAL HARASSMENT** 

24%

REPORT BEING ATTACKED PHYSICALLY

1/3

OF TRANS STUDENTS HARASSED BY TEACHER

#### **REJECTION**

**FAMILY REJECTION** 

50%

NEGATIVE REACTIONS

X8

SUICIDE, DRUGS ALCOHOL, AND DEPRESSION

#### **HOMELESSNESS**

20-40%

OF HOMELESS YOUTH ARE LGBT (GSRM)

TURN TO PROSTITUTION

OR SUICIDE

### Asked to describe one thing in their life they would like to change...

#### LGBT (GSRM) Youth

- Understanding/tolerance/ hate 18%
- My parent/ family situation
   15%
- Where I live/ who I live with 9%

#### Non-LGBT(GSRM) Youth

- Money/debt/finances 20%
- Appearance/ weight 9%
- Improving mental health 7%

### Asked to describe the most important problem facing their lives right now...

#### LGBT (GSRM) Youth

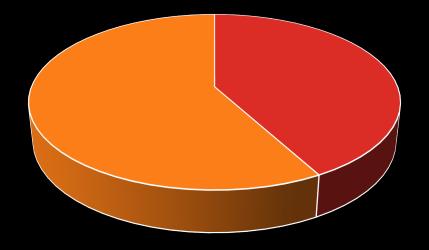
- Non-accepting families
   26%
- School/ bullying problems 21%
- Fear of being out or open 18%

#### Non-LGBT(GSRM) Youth

- Classes/exams/ grades25%
- College/ career14%
- Financial pressures related to college or job

11%

LGBT (GSRM) youth believe to a greater extent than their peers that they must leave their community to make their hopes and dreams come true.



4 in 10 LGBT (GSRM) youth (42%) say the community in which they live is not accepting of them.

77%

Three quarters of LGBT (GSRM) say they know things will get better, while 23% disagree with that statement.

Only 8% of Non-LGBT (GSRM) said they would disagree with that statement.

### HETEROSEXUAL PRIVILEGE

## HETEROSEXISM QUESTIONNAIRE

## HETEROSEXUAL PRIVILEGE

## QUESTIONS LGBT (GSRM) MAY HAVE IN MIND WHEN BEGINNING SCHOOL &THERAPY

- What does this person across from me think about LGBT (GSRM) people?
- Will I be judged if I come out to them?
- Are they LGBT (GSRM)?

- Will they get it?
- What are their religious beliefs?
- Will they think all my problems are related to my orientation?
- Will their paperwork out me/ have an option for me?

## MICROAGGRESSIONS IN TREATMENT & IN THE CLASSROOM

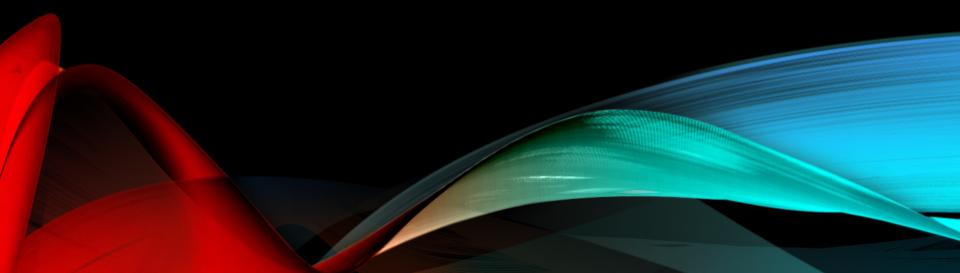
Sexual or Gender Microaggressions often occur with the use of assumptive or heterosexist terminology or heterosexist beliefs



## MICROAGGRESSIONS IN TREATMENT & THE CLASSROOM

Know the difference between sexual orientation and gender identity.

Gender identity does not determine sexual orientation & gender non-conformity is frequently more socially provoking than sexual orientation



THEME 1: ASSUMPTION THAT SEXUAL ORIENTATION IS THE CAUSE OF ALL PRESENTING ISSUES.

THEME 2: AVOIDANCE AND MINIMIZING OF SEXUAL ORIENTATION.

THEME 3: ATTEMPTS TO OVER IDENTIFY WITH LGBQ CLIENTS.

THEME 4: MAKING STEREOTYPICAL ASSUMPTIONS ABOUT LGBQ CLIENTS

THEME 5: EXPRESSIONS OF HETERO-NORMATIVE BIAS.

THEME 6: ASSUMPTION THAT LGBTQ INDIVIDUALS NEED PSYCHOTHERAPEUTIC TREATMENT.

THEME 7: IGNORING SEXUALITY ALL TOGETHER IN THERAPY (E.G. OPTIONS ON YOUR PAPERWORK.)

HAVE YOU EVER HAD REAL SEX?

I'M NOT BEING HOMOPHOBIC, YOU'RE BEING TOO SENSITIVE.

WHY DON'T YOU EVER WEAR DRESSES?

ARE YOU A MAN OR A WOMEN?

SO, WHO'S THE MAN IN THE RELATIONSHIP?

I HAVE A FRIEND LIKE YOU.

I'M TOTALLY COOL WITH YOU BEING GAY.

I JUST DON'T UNDERSTAND WHY YOU WOULD WANT TO MUTILATE YOUR BODY.

MR. SMITH, NICE TO MEET YOU.

YOU'RE BI? DOESN'T THAT MAKE YOUR BOYFRIEND INSECURE?



## Any questions?

You can find me at drpeterfthomas@gmail.com