

# Investigating How Queer People of Color Use ICTs to Cope with Stigma

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**Abstract.** Stigma is an attribute that differentiates and negatively classifies an individual within a specific categorized identity. Multiple identities are stigmatized, such as the LGBTQ and PoC communities. When these identities are layered on top of one another, so are the stigmas associated with them, and this creates an increased risk of negative consequences. Literature indicates that a way to ameliorate these negative consequences is to find ways to cope. This literature review analyzes the current research regarding what is known about how QPOC leverage ICTs as a tool for coping with stigma. Overall, it was found that not much is known about the particular ICTs QPoC are leveraging to cope, nor is there much knowledge on how they are using these unidentified ICTs. Further research is necessary to better understand what ICTs are being used and how QPoC are using them in order to help ameliorate the negative consequences of stigma.

**Keywords:** LGBTQ, PoC, ICT, Stigma, Coping.

## 1 Introduction

Stigma is defined as any attribute an individual has that differentiates and classifies them negatively within a particular identity category [1]. Minority groups such as People of Color (PoC) and the Lesbian, Gay, Bisexual, Transgender, Queer<sup>1</sup> (LGBTQ+)<sup>2</sup> community experience high levels of stigma in the United States (U.S.) [3]. It is possible to hold more than one stigmatized identity at a time. Holding both a stigmatized racial identity and a stigmatized sexual/gender identity, Queer People of Color (QPoC)

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<sup>1</sup> Umbrella term to include all sexual and gender minorities

<sup>2</sup> This literature review uses the term LGBTQ+, however, when referring to cited literature, language researchers use (such as LGB, LGBT, and LGBTQ) will remain unchanged.

experience higher levels of societal discrimination and oppression than individuals with only one of these two identities [2]. QPoC experience discrimination on a daily basis, including bullying, lower employment rates, differential treatment in social settings, etc., which can increase their risk of emotional distress and other negative consequences such as mental health issues [2, 3]. To ameliorate the negative emotional consequences of the stigma-driven discrimination they face, such as homophobia, transphobia, and racism, QPoC often develop resiliency and other forms of coping mechanisms [4]. Connecting with others is an essential component of coping; the Theory of Stigma explains that belonging to a network of communication is an important aspect when coping with stigma [21]. Thus, introducing various online media for communication could prove positive for these communities.

Many QPoC leverage Information Communication Technologies (ICTs) as a tool in developing coping mechanisms in response to the stigma society places on their identities [5]. While extant literature suggests QPoC use ICTs in general in this context, less is known about which specific tools are being used and how they are being used. There is considerable research focusing on various ways PoC cope with stigma and various ways LGBTQ individuals cope with stigma [6], however, less literature focuses on how QPoC use ICTs specifically to cope with the unique stigma placed at intersections of their identities. This poster reviews the existing literature surrounding the impact that stigma has on individuals who identify as QPoC and highlights the lack of research regarding the leveraging of ICTs as a coping method.

## 2 Methods

This literature review seeks to understand the impact of stigma in the LGBTQ+ and PoC communities, how individuals with both of these stigmatized identities cope with their particular stigmas, and the role that ICTs play in this coping. Understanding the impact that stigma has on these individual communities allows for a better cohesive analysis of the impact of being doubly stigmatized. Given their higher rates of discrimination/exposure to the combination of racism, transphobia and homophobia, which results in an increased likelihood of mental health issues, this review focuses on QPoC specifically. The following questions guided the first phase of this literature review:

### Stigmatized Communities

- RQ1: What are the common themes present in the experiences of LGBTQ+ individuals, specifically in regard to the stigma they endure?
- RQ2: What are the common themes present in the experiences of PoC, specifically in regard to the stigma they endure?

### Coping

- RQ3: What activities do QPoC engage in to cope with societal stigma?
- RQ4: What is the role of developing coping mechanisms in response to stigma-driven discrimination?

## ICTs & Coping

- RQ5: To what extent do QPoC utilize ICTs as coping mechanisms in response to societal stigma, and what are the benefits of using these tools?

The search for the literature that informs this paper began with consulting an advisor, Ph.D. candidate Juan Fernando Maestre at Indiana University Bloomington, who conducts research with stigmatized populations. He provided recommendations for literature which addressed RQs 1-2. Key words and phrases related to the problem space were identified: minority stress, intersection of PoC and LGBTQ+, social support, coping mechanisms of QPoC, and online communities for social support. Google Scholar and several university databases were the primary source of articles. Authors examined twenty-seven articles regarding stigma and six articles regarding coping.

When the literature no longer presented new information, all authors came to a mutual consensus that the same themes began to recur, it was agreed that saturation was reached. The authors then conducted a search for additional literature focusing on RQ5. After an extensive search, only seven articles were found linking stigmatized communities and the use of ICTs as a tool for coping. The search yielded five articles that listed ICTs as one of many tools for coping leveraged by stigmatized groups other than QPoC, however, only two articles discussed various coping mechanisms employed by QPoC specifically. Neither of the latter two articles discussed in any depth or specificity exactly what ICTs QPoC are using and how they are using them.

Each author read and analyzed the articles and through this analysis, identified the core concepts that appeared repeatedly throughout the research. There was a gap in literature examining how QPoC leverage ICTs to cope, what ICTs are being used, and how QPoC are using them.

## 3 Results & Findings

This literature review summarizes the extant literature of the experiences of PoC and LGBTQ+ individuals regarding how they experience stigma, the role that coping mechanisms play in dealing with these stigmas, and how these groups can leverage information communication technologies as a coping mechanism. It is worth noting that there was far less research on QPoC intersectional identities than on these groups separately. Based on the information gathered from this literature review, the following themes emerged consistently in several English-speaking countries.

### 3.1 Stigma & The Queer Community

LGBTQ+ individuals have increased negative experiences throughout their lifetime as a result of their stigma [18]. LGBT [2] youth with at least one stigmatized identity were found to have a higher susceptibility of self-injury, depressive symptoms, and were more likely to commit suicide [8]. LGBTQ+ individuals, from adolescence to adult-

hood, are more likely to engage in risky sexual activities and substance abuse in response to the stigma society places on their identity [4]. Regardless of the setting, LGBTQ+ individuals experience the effects of stigma, including high rates of cyberbullying and workplace mistreatment; 25-60% of LGBTQ+ employees reporting workplace discrimination stemming from their sexual orientation [2, 8]. Overall, LGBTQ+ individuals experience high levels of stress and discrimination due to their stigmatized identity.

### **3.2 Stigma & People of Color**

Racial minorities endure negative experiences as a result of stigma. Racial minorities struggle with greater amounts of psychological distress than non-racial minorities. [9]. They also experience higher susceptibility of health problems [19]; minorities struggle with higher rates of psychiatric symptoms than their white peers [14]. Racial minorities experience high levels of racial discrimination with police and within the criminal justice system [11]; fatalities at the hands of police officers are higher for racial minority groups than for non-racial minorities [13]. Additionally, racial minorities with mental disorders who have abused substances tend to receive longer incarceration sentences than non-minorities with the same mental disorder [14]. Racial minorities are differentially affected by unemployment and holding low-income jobs [11]. Black and Hispanic individuals have higher unemployment rates than non-Hispanic White and Asian individuals [15]. Individuals who identify as a racial minority struggle with consequences of having their stigma affect their everyday life, such as their health, home, income, and how they are perceived by society [20].

### **3.3 Stigma & Queer People of Color**

Research indicated a clear distinction between having a singular marginalized identity and having more than one. Individuals holding both a marginalized racial identity and marginalized sexual identity can build resilience to societal stress as stated by the Minority Stress Theory [3]. Identifying as both a racial and sexual/gender minority creates an elevated risk of discrimination beyond already present discrimination that comes with having only one of these marginalized identities. QPoC experience higher risk of health problems, including high levels of inflammatory biomarkers associated with chronic conditions like cancer [3]. Black and Latino populations contained high levels of occupational and social hazards, such as the inhalation of fumes and racial discrimination living under the poverty line [3]. On average, QPoC earn less and achieve less than LGBTQ who identify as white in the workplace disregarding qualification or job performance [2]. In terms of housing discrimination, an alarming amount of young people that are homeless identify as LGBTQ [2]. Within the LGBTQ community itself, racism still heavily exists since the community is predominantly populated with individuals who identify as white [16]. It is difficult for QPoC to find safety within either one of their identity groups as there is racial stigma within the LGBTQ community and there is sexual and gender minority related stigma within PoC communities.

### 3.4 Coping Mechanisms and the Use of ICTs to Cope

The theme present throughout this section of the literature review is that QPoC use ICTs to cope, however there is little known about what ICTs exactly they are using and how they are using them. Research has shown that, while ICTs is one tool for coping in larger lists of coping mechanisms, it has not been the focus of any studies, and thus little is known about what ICTs in particular are being used. The literature demonstrated that individuals with multiple marginalized identities tend to adopt coping mechanisms to cope with stigma, for example these individuals often reach out to online communities to connect to others who have similar identities [4]. Online, these individuals are seeking out and coming to an understanding of what their identity is, learning of experiences that others with their same identity have had, and communicate with others who identify with them [8]. LGBTQ individuals were found to have a higher sense of acceptance after interacting with other individuals who identified as LGBTQ [10]. There is a clear positive impact of online communities on self-esteem and overall quality of life for individuals with stigmatized identities [7], however, as ICTs have not been the main focus of any research, little is known about the specific characteristics of the online communities these individuals engage in. Apart from online communities, there is a lack of detailed knowledge on what other ICTs are being employed.

### 3.5 The Gap

Few studies included large enough samples of LGBTQ+ participants who are also PoC to examine the unique issues facing this group [2]. The completion of the literature review indicated that there is a gap in the research that examines how QPoC leverage ICTs to cope with the unique stigma that they experience having two marginalized identities. While literature suggests that QPoC actively leverage ICTs as a tool for coping, there is little knowledge about which specific tools are being used and how. Table 1 explains number of studies found, the sample size, and the percentage of people of color included.

**Table 1.** Representation of PoC in studies with participants from the LGBTQ community.

Type of Study	Sample Size	Participants of Color
Interview	33	5 (15%)
Survey	323	88 (27%)
Survey	460	111 (32%)
Survey	449	108 (32%)
Interview	600	144 (24%)
Survey	3588	206 (6%)
Survey	4933	541 (11%)
Total: 7	Total: 10,386	Total: 1,203 (11.58%)

This gap in knowledge is important because over 130 million individuals in the U.S. identify as QPoC [17]. Each of these individuals experience the negative consequences

of stigma every day and as a result must find a way to cope. If there is a better understanding of how marginalized and stigmatized populations leverage ICTs as part of their coping mechanisms, then it will be possible to maximize benefits and minimize harms.

A lack of knowledge regarding what specific ICTs QPoC are leveraging to cope and how they are doing so represents an inability to improve these interfaces and improve the experiences of these individuals. If there is knowledge about how these populations use these tools, the design of these ICTs can be improved, educators can build them into their curriculum, and health practitioners build them into their care.

#### **4 Future Research & Next Steps**

This literature review has found that QPoC experience a unique stigma due to their dual marginalized identities. Since QPoC are dealing with multiple societal stigmas, there is pressure to find unique ways of coping with the added burden. In order to better understand the complex relationship between race, sexual orientation, gender identity, and the use of information communication technologies to cope, more work needs to be done [5].

To fill the gap and address this lack of knowledge, the following strategies are proposed:

1. Conduct interviews to collect information on how QPoC report their experiences of stigma as double minorities, as well as what ICTs they report using to cope with their stigmas and how they are using them. This will provide a basic foundation of the experience of QPoC, directly from the experts themselves.
2. Utilize the information collected in strategy 1 to create a more informed, online survey administered to individuals who identify as QPoC in order to gauge the generalizability of this information.
3. Present a cohesive analysis of how QPoC leverage ICTs as a tool to cope with societal stigma and how these coping mechanisms can be improved.

The information gained through these strategies can be beneficial for informing improvements for both new and existing digital tools to support the needs and behaviors of the QPoC that are using these tools to cope. This information can inform workshops led by both UX/HCI experts and the members of this population, as designing tech with QPoC themselves will create an improved understanding of how to better implement features that will address their needs. Leveraging ICTs as a tool for coping has the potential to ameliorate both online and offline experiences for this unique population, if given the proper exploration and expansion.

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