

Nathan Bawaan

Dr. Ben Cheung & Shu Leung

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‘I don’t feel like I am desirable’: Internalized racism among Asian GBM and MSM and
the subsequent health consequences

In the 1986 documentary, *Orientations*, on the experiences of queer Asian Canadians, one of the interviewees named Lloyd says, “A lot of the time I don’t feel like I am desirable. I’ll go stand around at the bars. I’ll see this [white man] with a mustache, dark hair. Even myself I find him quite attractive. And I think most people think like that too.”¹ Although Lloyd made this comment in the mid-1980s, many Asian gay and bisexual men (GBM) and men who have sex with men (MSM) in Canada and the US continue to harbor similar feelings and insecurities based on research from Giwa and Greensmith (2012), Brennan et al. (2013), and others. Even with the rising status of figures like Eugene Lee Yang, Kim Chi, and Bowen Yang, Asian GBM and MSM in North America still stand at the margins of the gay community without proper representation. Meanwhile, white GBM and MSM continue to dominate the center of the gay community, which enables them to define queerness and beauty standards. As a result, Asian GBM and MSM may reject their ethnic identity – a phenomenon known as internalized racism – to adhere to the white understanding of queerness.

In the following paper, I will examine how the erasure of Asian gay men and the centering of white people in the gay community impacts the health of Asian Canadian GBM and MSM. First, I will define internalized racism and place it in the context of Asian GBM and MSM experiences in Canada to provide context to this issue. I will then transition to an exploration of how this form of racism affects the health of these individuals, specifically by leading to negative perceptions of body image and poor sexual health outcomes. Ultimately, I argue that the resulting internalized racism from the marginalization of Asian Canadian GBM and MSM in the gay community presents unique health challenges to these individuals.

¹ *Orientations: lesbian and gay Asians*, directed by Richard Fung (1986: School of the Art Institute of Chicago, 2020), <https://stream-mcintyre-ca.eu1.proxy.openathens.net/ubc/title/22540>.

To understand the health impacts of Asian Canadian GBM and MSM marginalization within the gay community, one must have familiarity with the term ‘internalized racism.’ According to Vanessa Chong and Ben Kuo, internalized racism involves holding “Whiteness” in higher regard than one’s own ethnic minority identity or feeling ashamed for not being white.² These feelings generally occur in situations or environments where one’s ethnic heritage is presented or treated as less than white. Chong and Kuo’s definition appears in literature on Asian Canadian gay men, suggesting that this self-deprecation occurs within this subset of the Asian Canadian community. For example, Sulaimon Giwa and Cameron Greensmith wrote in their 2012 study: “Asian men’s internalized racism leads them to see Whiteness as attractive ... In the hopes of imagining themselves as normal, they seek out White male partners to legitimize their LGBTQ identities.”³ Giwa and Greensmith’s description of Asian GBM’s internalized racism conveys similar ideas as Chong and Kuo’s definition of internalized racism, specifically with the formers’ identification of Whiteness as the target of attraction and the linkage of ‘normal’ to Whiteness. But it also builds on the latter’s original definition. Giwa and Greensmith also bring in the legitimization of identity. They note that the queer Asian men they spoke with only felt comfortable identifying as part of the LGBTQ community if they were dating or sleeping with a white man.

This form of identity confirmation poses a problem on two fronts. First, it creates a power imbalance in which gay white men are the arbitrator of homosexual identity for Asian men.

² Vanessa Chong and Ben C. H. Kuo, “Racial identity profiles of Asian-White biracial young adults: Testing a theoretical model with cultural and psychological correlates,” *Asian American Journal of Psychology* 6, no. 3 (2015): 204, <https://doi.org/10.1037/aap0000022>.

³ Sulaimon Giwa and Cameron Greensmith, “Race Relations and Racism in the LGBTQ Community of Toronto: Perceptions of Gay and Queer Social Service Providers of Color,” *Journal of Homosexuality* 59, no. 2 (2012): 167, [10.1080/00918369.2012.648877](https://doi.org/10.1080/00918369.2012.648877).

While identity formation entails some relational validation,⁴ the process outlined by Giwa and Greensmith presents an extreme where Asian GBM and MSM no longer have self-control over whether they can be part of the gay community. This creates an unfair standard where gay Asian men must get their membership ‘approved’ when white gay men do not. Another problem created by this identity confirmation process is that Asian GBM and MSM begin to normalize this internalized racism and act on it when seeking intimate relationships. As Nakamura et al. observed in a 2019 study, “[Asian MSM] spoke of their own preference for White men and rejection of other Asians as dating partners.”⁵ This example fits the definition of internalized racism presented by Chong and Kuo; Asian MSM reject their ethnic heritage for the dominant ethnic group. The example also reveals another instance where Asian GBM and MSM are marginalized from the gay community; however, it is from members of their ethnic community instead of white people. Such an occurrence creates a cycle where Asian GBM and MSM feel more ashamed of themselves, seek out non-Asian (white) partners to validate their gay identity, and thus marginalize other gay members of their ethnic community. The internalized racism experienced by Asian GBM and MSM reduces their power to identify themselves and generates a cycle of marginalization. It also has negative impacts on the health of these individuals.

One health consequence of Asian GBM and MSM’s internalized racism is negative perceptions of their body image. Body dissatisfaction is often associated with depression-like symptoms, anxiety, and disordered eating. It is also more common in GBM, not just in Asians,

⁴ Gerald R. Adams and Sheila K. Marshall, “A developmental social psychology of identity: understanding the person-in-context,” *Journal of Adolescence* 19, no. 5 (1996): 437, <https://doi.org/10.1006/jado.1996.0041>.

⁵ Nadine Nakamura et al., “‘Hard to crack’: Experiences of community integration among first- and second-generation Asian MSM in Canada,” *Cultural Diversity & Ethnic Minority Psychology* 19, no. 3 (2013): 253, [10.1037/a0032943](https://doi.org/10.1037/a0032943).

compared to heterosexual men.⁶ But, internalized racism could fuel these thoughts within Asian and other racialized GBM and MSM. Both internalized racism and body dissatisfaction inherently involve comparison; the former is around one's race and ethnicity, while the latter centers around physical appearance. If an Asian GBM or MSM wished to be 'normal' in the eyes of the predominantly white gay male community, it would make sense that this would involve some dissatisfaction with their racialized body and desire to look like the stereotypical white gay man. David J. Brennan et al. observed this pattern in their 2013 study on body image perceptions among Asian and other ethnoracialized GBM. The researchers found that ethnoracialized GBM experience "tremendous pressure to meet the expectation of achieving a youthful, physically attractive, and muscular appearance in the predominantly White gay male culture."⁷ According to this particular study, racialized GBMs feel forced to achieve a particular body type – which has been distinguished as desirable by the white majority – in their efforts to fit into the gay community. This mirrors the findings of Giwa and Greensmith; in both studies, non-white gay men seek to associate with the white majority of the community by changing their behavior or appearances to join the so-called in-group. Such a culture is harmful to Asian GBM and MSM as it promotes inferiority and unworthiness. Additionally, internalized racism could make the impacts of negative body image perceptions among Asian GBM and MSM worse. Along with enduring the feelings associated with body dissatisfaction, these individuals may also be burdened with the health consequences of racism. The overlap between the health impacts of these two phenomena could make addressing them more difficult; even if a solution were to eliminate one of these sources of self-deprecation, the other would still be harming the well-

⁶ David J. Brennan et al., "'Never reflected anywhere': Body image among ethnoracialized gay and bisexual men," *Body Image* 10, no. 3 (2013): 389, <https://doi.org/10.1016/j.bodyim.2013.03.006>.

⁷ Brennan et al.. 395-6.

being of these individuals. In short, internalized racism not only fuels body dissatisfaction within Asian GBM and MSM but also compounds the symptoms of the latter which results in greater harm to these peoples' health.

Along with generating negative perceptions of one's body image, internalized racism can lead to lower sexual health outcomes among Asian GBM and MSM. This paper has sought to establish that internalized racism stems from and leads to the marginalization of gay Asian men from the predominantly white gay community. Given this systemic rejection, Asian GBM and MSM have little 'erotic capital,' which Giwa and Greensmith define as power within sexual relationships. The two researchers write that this lack of capital among gay Asian men, "at worst constrains them from equally negotiating safer-sex practices."⁸ Trevor R. Hart et al. found something similar in their 2021 study on the sexual health of South Asian Canadian GBM. Hart et al. note, "Their lack of social power in both mainstream South Asian and GBM settings also led to problems asserting themselves in sexual relationships and placed them at risk for HIV and STIs."⁹ Both these studies demonstrate that marginalization from the gay community reduces the power of Asian GBM and MSM in intimate relationships and could put these individuals in situations where they must accept unsafe practices to satisfy their sexual desires. An additional point – which Giwa and Greensmith and Hart et al.'s studies do not mention – is that the marginalization of Asian GBM and MSM limits these individuals' choices even before negotiating sexual practices, creating another obstacle to safe sex. If an Asian GBM or MSM is looking to have sex, they might be inclined to say 'yes' to an individual who refuses to use a condom or get STI tested in fear of being rejected and having their desires unfulfilled.

⁸ Giwa and Greensmith, 171.

⁹ Trevor A. Hart et al., "At the Intersection of Homophobia and Racism: Sociocultural Context and the Sexual Health of South Asian Canadian Gay and Bisexual Men," *Stigma and Health* (2021): 6, 10.1037/sah0000295.

Relatedly, internalized racism may also result in fetishization, which could limit Asian GBM and MSM's ability to satisfy their sexual needs. In the context of this paper, fetishization occurs when potential partners of a non-white GBM and MSM only view them in terms of stereotypes; they are judged solely on how well they fit a constructed archetype. If a non-white GBM and MSM do not fit this mold, they might be rejected. For Asians, this is particularly harmful because, as Brennan et al. note, "Asian men are rarely portrayed as sex symbols in North America."¹⁰ Thus, if Asian GBM and MSM were to be fetishized by their potential partners, they might not be able to engage in sexual intimacy, harming their sexual health and wellbeing. Moreover, Asian men may internalize these stereotypes – in a process similar to internalized racism – and begin to see themselves as not attractive or deserving of sexual pleasure. As a result, they may feel dissatisfied or sexually frustrated as they deny themselves sex. Additionally, the internalization of these stereotypes by some Asian men might make them more likely to reject intimate relationships with other Asian GBM and MSM, which would only increase the number of those not having their needs met. Simply put, internalized racism generates poorer sexual health outcomes for Asian GBM and MSM by increasing their risk of contracting STIs and reducing their ability to satisfy their sexual needs through external and internal fetishization.

In this paper, I argued that Asian GBM and MSM experience internalized racism as a result of marginalization from the predominantly white gay community in Canada, which in turn negatively impacts their health. Internalized racism refers to a situation where an individual holds "Whiteness" in higher regard than one's own ethnic minority identity, or feels ashamed for not being white. Such internalized hate reduces one's power to identify themselves and generates a cycle of marginalization. One health consequence of Asian GBM and MSM's internalized

¹⁰ Brennan et al., 396.

racism is negative perceptions of their body image. Along with these negative thoughts, internalized racism can lead to lower sexual health outcomes among Asian GBM and MSM by increasing their risk of contracting sexually-transmitted diseases or limiting these individuals' ability to satisfy their sexual needs through fetishization. This paper focussed on gay and bisexual Asian men, but future papers and research should examine the health outcomes of queer Asian women and non-binary people. Additionally, this paper centered around the negative experiences of queer Asian men; however, considering only these narratives produces an inaccurate portrayal of this community. As Yu-Te Huang and Lin Fang write, "The extant intersectional approach that seeks to produce a grand narrative of Chinese immigrant gay men's experiences of solely living oppressed and marginalized lives should be deemed a partial truth and contested."¹¹ Although this quote refers explicitly to Chinese immigrant gay men, the same could be said for other ethnic groups within the queer Asian male community.

¹¹ Yu-Te Huang and Lin Fang, "'Fewer but Not Weaker': Understanding the Intersectional Identities Among Chinese Immigrant Young Gay Men in Toronto," *American Journal of Orthopsychiatry* 89, no. 1 (2019): 36, 10.1037/ort0000328.

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