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More than a Disease: Positive Psychology Relevance to Social Work Practice with Gay Men of Colour

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Abstract

The early focus of traditional psychology was on the treatment of disease. With the introduction of positive psychology, the scope of professional practice expanded to include previously neglected areas of strength, optimism, and subjective well-being. The strengths-based approach used in social work shares similar concerns and ethical underpinnings to those of positive psychology. Yet, when it comes to gay men of colour, the field has been slow and uneven in its focus. By continuing to ignore the sources of strength that give rise to resilience among gay men of colour, social work runs the risk of remaining stagnant and nonresponsive to the needs of this population. Positive psychology relevance to social work lies in its reminder about the importance of a more holistic view of the human condition.

Keywords: Positive psychology; Social work; Strengths-based approach; Gay men of colour

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The preponderance of psychological research on gay men attests to the persistent patterns of discrimination and sometimes deadly violence directed at them, with consequences for their physical and mental health [1,2]. Positive psychology has contributed an understanding of the psychological resilience required for gay men to navigate the emotional complexities of sexual orientation and antigay violence reinforced in a neoliberal, heteronormative culture [3,4]. Discussion about the intercentricity of race and sexual orientation expose a deficit-based research that is silent or less focused on racial/ethnic groups [5,6]. That is, despite advances in sexual orientation research with white gay men, corresponding advances in knowledge about gay men of colour continue to lag behind.

From available research, two competing discourses are observable, each of which contribute to structural level disparities in empirical knowledge. The first discourse approaches the experience of white gay men from an asset-based perspective, capturing their strengths and challenges. The second discourse pathologizes gay men of colour by heavily focusing on deficit, exclusive of their strengths, capacities, and assets [5]. It crystallizes an academic body of research in which gay men of colour are invariably framed as either HIV/AIDS-affected persons or victims of pervasive racism [6]. However true this may be, such a perspective forecloses the possibility for hope and resistance, which in turn generates a sense of despair and powerlessness.

Decades of research, training, and education in positive psychology reminds us that gay men of colour are more than the sum of their problems. This field of practice is concerned with the promotion of individual well-being, and creating conditions that enable groups to flourish [7-11]. It would be wrong to infer from this that positive psychologists are oblivious or blind to the complexities of social life and human functioning. Critically, their work calls attention to the fact that effective rebalancing between the positive and negative aspects of life is necessary for the realization of optimal health [3,12]. Thus, a reductionist or one-sided explanation of human experience or condition, as is frequently the case with gay men of colour, would undermine the field's foundation in a holistic vision of wellness.

In social work, the strengths-based approach is equivalent to the strength/capacity perspective of positive psychology. Despite social work's theoretical recognition of clients' strengths and resources as crucial aspects of human growth and development [13], demonstration of this belief is often difficult to substantiate in practice. For example, social work practice with gay men of colour often follows a generalist intervention model, in which the unique circumstances of the group are subsumed into the experience of white gay men [6]. This approach negates the various forms of oppression experienced by gay men of colour within predominantly white gay communities and, most importantly, fails to understand the sources from which they draw their strengths to enhance their well-being. Consider the example of racism I mentioned above: this is not an experience relatable to white gay men. Yet, social work practice with gay men in general suggests that these groups' experiences are interchangeable, due to their shared same-sex identity. However, because historical and contemporary forms of discrimination structure the experiences of white and gay men of colour differently, the imposition of a Eurocentric view for understanding the racialized experiences of gay men of colour perpetuates oppressive practices.

The success of positive psychology interventions in traditional psychology, particularly in how they have broadened the field's focus beyond pathology/deficit to include factors that support overall health and wellness, can be instructive for social work practice with gay men of colour. Whiteness shapes organizational structures and professional values and practices [14], and the experiences of white gay men are taken as universal. Social workers are therefore not always sensitive to the needs of gay men of colour, and fewer understand their social and health-related needs. Even with sensitive interventions, there is the strong possibility that social workers might view gay people as a

monolithic group, resulting in them paying little attention to each group's unique needs. In such a situation, it is gay men of colour who lose out, since their concerns often take a back seat to the needs of white gay men.

What emerges from an examination of positive psychology with relevance for social work, therefore, is the need for a gay-affirmative practice sensitive to the needs of racial/ethnic minorities. Gay-affirmative practice, as understood here, is more than a simple acknowledgement of same-sex identity as a normal and positive expression of human sexuality [15]. Implied also is the need for a practice scholarship or praxis centered on an understanding of the factors that contribute to optimal functioning in gay men of colour, an area that has been largely neglected.

There is emerging evidence in the American literature concerning this focus area [16-17]. My own research with gay men of colour in Canada, particularly in relation to their experiences of racism in predominantly white gay communities, provides another illustration of what this kind of research might look like. I am interested in knowing how gay men of colour cope with the experience of racism. Despite the social reality of racism, and its adverse impact on gay men of colour, an understanding of the sources of strengths they draw on to thrive and maintain a valued self-identity is needed. Focusing on human strengths can stave off conditions that contribute to negative functional states [18,19]. The research on coping has been informative in this regard. It demonstrates that the appraisal of a negative situation or conflict, and an ability to put this information into the context of one's capability to deal with certain life stressors, can have a mediating effect [20].

Social workers, like positive psychologists, are uniquely positioned to work with gay men of colour in a way that meets their needs. In order for a quality client-worker relationship to be maintained, awareness about the limitations that result from the deficit model becomes crucial, as is the need to balance them with a strengths-based approach that values human strengths and virtues. To know a client's strength can help with understanding who he is. This is not an argument against denying the many unpleasant realities of life. On the contrary, it is an acknowledgement and a reminder to practitioners of the inherent talents possessed by clients, and of the shared responsibility to help them mobilize the strengths and resources needed to realize their ideal self. The overwhelming social conditions of inequality and marginalization faced by gay men of colour notwithstanding, the strength of character they display, and the sources of strength they draw on to deal with such issues, underscore the importance of knowing the factors that contribute to their resilience. This focus is consistent with positive psychology's broad interest in the question of what makes life worth living [21].

References

1. Meyer IH (2003) Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. Psychological Bulletin 129: 674-697.

2. Meyer IH (2010) Identity, Stress, and Resilience in Lesbians, Gay Men, and Bisexuals of Color. Couns Psychol 38.

3. Budge, SL (2014) Navigating the balance between positivity and minority stress for LGBTQ clients who are coming out. Psychology of Sexual Orientation and Gender Diversity 1: 350-352.

4. Lytle MC, Vaughan MD, Rodriguez EM, Shmerler DL (2014) Working with LGBT Individuals: Incorporating Positive Psychology into Training and Practice. Psychol Sex Orientat Gend Divers 1: 335-347.

5. Akerlund M, Cheung M (2000) Teaching beyond the deficit model: Gay and lesbian issues among African Americans, Latinos, and Asian Americans. Journal of Social Work Education 36: 279-300.

6. Giwa S, Greensmith C (2012) Race relations and racism in the LGBTQ community of Toronto: perceptions of gay and queer social service providers of color. J Homosex 59: 149-185.

7. James W (1902) The varieties of religious experience: A study in human nature. Longmans, Green & Co.

8. Allport GW (1958) Becoming: basic considerations for a psychology of personality. Yale University Press.

9. Maslow AH (1968) Toward a psychology of being. Van Nostrand.

10. Cowan E (2000) Psychological wellness: Some hopes for the future. In D. Cicchetti, J. Rappaport, I. Sandler, & RP Weissberg (Eds.), The promotion of wellness in children and adolescents. Child Welfare League of America Press 477-503.

11. Seligman MEP (2011) Flourish: A visionary new understanding of happiness and well-being. Free Press.

12. Hefferon K, Boniwell I (2011) Positive psychology: Theory, research and applications. Open University Press.

13. Saleebey D (1996) The strengths perspective in social work practice: extensions and cautions. Soc Work 41: 296-305.

14. Badwall HK (2014) Colonial encounters: Racialized social workers negotiating professional scripts of whiteness. Intersectionalities: A Global Journal of Social Work Analysis, Research, Polity, and Practice 3: 1-23.

15. Crisp C, McCave EL (2007) Gay affirmative practice: A model for social work practice with gay, lesbian, and bisexual youth. Child and Adolescent Social Work Journal 24: 403-421.

16. Choi KH, Han CS, Paul J, Ayala G (2011) Strategies for managing racism and homophobia among U.S. ethnic and racial minority men who have sex with men. AIDS Educ Prev 23: 145-158.

17. Han CS, Ayala G, Paul JP, Boylan R, Gregorich SE, et al. (2015) Stress and coping with racism and their role in sexual risk for HIV among African American, Asian/Pacific Islander, and Latino men who have sex with men. Arch Sex Behav 44: 411-420.

18. Gable SL, Haidt J (2005) What (and why) is positive psychology? Review of General Psychology 9: 103-110.

19. Ungar M (2006) Strengths-based counseling with at-risk youth. Corwin Press Inc.

20. Folkman S, Lazarus RS (1988) Coping as a mediator of emotion. J Pers Soc Psychol 54: 466-475.

21. Seligman ME, Csikszentmihalyi M (2000) Positive psychology. An introduction. Am Psychol 55: 5-14.