Coming out, Staying in, and Stepping in and out of the Closet: Questions of Black and Minority Ethnic-Queer Identities

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Coming out is a contentious issue, particularly for the Black and Minority Ethnic (BME) populations. The following questions attempt to address the three large issues here: (i) Is coming out necessary in the first place? (ii) If yes, who does the BME-Queer (BME-Q) individual come out to, and (iii) where does he/she come out (in) to?

The first question is related to the sexual identities that BME-Q individuals acknowledge, and the meanings they ascribe to sex and sexuality. Secondly, BME-Q people have to contend with poor comprehension of Queer sexualities and lifestyles in many BME communities. Finally, considering that the mainstream LGBT social venues are not immune to racism, the sources of socialisation with (coming out into) the majority LGBT community are limited. These factors make sexuality identity formation and coming out both problematic concepts and arduous processes for BME-Q people. Harmonious integration of multiple identities for BME-Q people is important for psychological wellbeing. This paper explores the issues of coming out in the BME context, using narratives from BME-Q individuals and examples from popular film.

A conservative estimate suggests that five percent of Britain’s population is lesbian or gay, and Black and Minority Ethnic (BME) individuals constitute 7.9 per cent (4.6 million) of the total population of the United Kingdom. BME-Queer (BME-Q) people are minorities within a minority population, or metaminorites, living in a predominantly White and heterosexual space. While BME-Q people may be visible on the basis of their ethnicity or religion, their sexuality is rarely, if ever, visible [compared to their White counterparts, both in society and in the mainstream and lesbian, gay, bisexual, and trans (LGBT) media]. Homophobia and heterosexism (from the society in general, and the BME societies in particular), and racism (from the society in general, and the majority LGBT community in particular), may have contributed to this status.

The historical contexts of “coming out” (of the closet) are within the framework of emancipation, identity, and protest. From its early conceptualisation of being a single, monolithic event, it is now considered as a process of development and identity formation. Models describing these processes have been reported, but have come under...

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3. The term Queer in this paper is used as an umbrella term encompassing all non-heterosexual sexualities, and is not a specific identity. The term was chosen over “non-heterosexual” because this term implies that there is only one type of heterosexuality, and it labels others against being heterosexual.
heavy criticism over the years for their linier paradigm, their “one-size-fits-all” approach (not taking into account Queer sexualities other than gay or lesbian, and not being culture-sensitive), and the suggestion of sexuality being an immutable phenomenon\(^5\). Some authors have also criticised the unbridled importance given to coming out in developing a queer identity\(^6\). Furthermore, the reported effects of coming out have been equivocal. Some studies have observed that Asian lesbians reported a sense of loss, both psychologically and socially, as a result of coming out\(^7\); while others found that Japanese gay men who had disclosed their sexual orientation to family members were more likely to express more positive attitudes and involvement with gay-related activities, which is beneficial in identity acceptance\(^8\). These discrepancies acknowledge the heterogeneity of BME populations and the diversity of their experiences.

Due to these and other reasons, coming out is a contentious issue, particularly for the BME populations, where a lot of the mainstream White British notions, identities, and behaviours related to sexuality may not be applicable\(^9\). The following questions attempt to address the three large issues here: (i) Is coming out necessary in the first place? (ii) If yes, who does the BME-Q individual come out to, and (iii) where/what does he/she come out (in) to? The answers to these questions are evident from BME-Q narratives, and are reflected to some extent in the media, particularly film. Excerpts from such narratives and examples from films are used to seek some answers to these questions. Many of the answers are not evident here; in fact, these questions only engender more questions. However, sometimes the answers can be experienced in asking the questions themselves. The aim of this paper therefore, is to facilitate such an experience.

**Is coming out necessary?**

This question is related to the sexual identities that the BME-Q individual acknowledges. If he/she acknowledges a (same-sex) sexual desire/act without subscribing to a minority sexual identity (e.g., LGBT), the whole issue of coming out may not arise.

“If I didn’t speak English, would I be ‘gay’?” Vikram asked. As a Queer individual whose first language is not English, Vikram only began to identify as being ‘gay’ after he began to go to a social group in his home city, where there were many people who spoke in English. He had, of course, had sex with men before, but that was just something he did. Living in England now, he has begun using the word “gay” when

\(^5\) For a good review of the criticisms levelled against coming out literature, see Rust (1993).
\(^9\) Although the term BME is used in this paper, most case vignettes and films cited reflect the experiences of Asian-British (South Asian, South-East Asian, and East Asian) males. This limitation is fully acknowledged.
What is this difference? Has Vikram really begun to identify himself as being ‘gay’, or does he merely use it as an adjective that is short-form to explain his sexual desires and behaviours? Is there a quintessential ‘gay identity’, or are there many? And if there are many, are these ordered hierarchically or concentrically, with one group forming the core or ‘in’ group, and the others constituting the fringe members? In the UK there appears to be such an ‘in’ group, which defines the ‘gay’ identity, perhaps due to its strength in numbers and its visibility. The visible constituents of this identity include youth, a toned physique, and the enjoyment of pop music and culture [which may also include special brands of clothing and artistes (at the time of writing Calvin Klein underwear and Kylie are ‘in’)]. However, other sub-groups emerge as ‘alternative’ (and sometimes, subversive) Queer identities that defy these norms (e.g., the Bear culture, BDSM, the DownLow or DL of North America, etc.). For the BME-Q individual, membership into one of these sub-groups is open, but is restrictive because of the exclusivity of such groups (which are sometimes based on a particular physique-type, sexual behaviour, or ethnicity). Therefore, for the naïve BME-Q individual two possibilities mainly exist: assimilation with a pre-existing group or the formation of a new one. Many individuals initially attempt the former strategy, as the formation of a new sub-group/identity is fraught with difficulties essentially because of the small numbers of ‘visible’ potential members. However, assimilation is also an arduous task primarily because of the stringent inclusion criteria applied for membership, some of them being difficult to achieve for the BME individual. For instance, the ‘ideal’ body image of members of the ‘in’ group is tall and athletic, which for some BME-Q individuals is difficult because of their genetic makeup and/or developmental history.

Many BME people maintain the cultural and social mores of their region(s) of origin more tenaciously than their counterparts who remained in their own countries. This has protective value for new immigrants, and their future generations, in forging a distinct identity and aiding in maintaining ethnic/cultural group cohesion. The counter-side of these groups is the stringent rules that emerge, demarcating individuals as being either members or outcasts. Infringements of group norms, by adopting certain “host” characteristics, are construed as betrayal. While some leeway is given for the adoption of a regional accent or language, and to a certain degree style of grooming and clothing, tolerance wears thin when it comes to issues of adopting “alternative” religious or sexual practices. The South Asian communities have a derogatory term for such outcasts: “coconuts” (Brown on the outside, but White inside).

Despite the threat of becoming this outsider, mainstream LGBT identities may be adopted by some BME-Q people, wholly or in part, as an attempt to fit in with the majority LGBT culture. The decision making processes to assimilate with the majority LGBT community is a complex one that is constantly in a state of flux. The “micro-tactics” employed by BME-Q individuals in negotiating multiple, oftentimes mutually

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10 The vignettes presented here are from personal stories and narratives gathered by the author over the last three years in various venues and situations. All names and identifying features have been changed.
incompatible identities, is a developmental process in itself; a skill that is acquired with practice\textsuperscript{11}. In the final analysis, the BME-Q person’s cost-benefit analysis, carried out in a non-conscious manner, determines his/her identities and behaviours in any given circumstance. These micro-tactics are also reflected in popular film. Wai Tung, a Taiwanese-American Queer character, in the film The Wedding Banquet, hides his long-term relationship from his parents by asking his partner to play the role of his landlord/roommate. A marriage of convenience is also played out in this film, which is yet another reflection of arrangements that BME-Q individuals make to live their private Queer lives. [The transactions between Wai Tung and his immigrant bride are noteworthy: the marriage permits him to remain in the closet, and permits her to remain in the country.] Similarly, Omar, the Pakistani-British Queer character, in My Beautiful Laundrette, masks his relationship with his partner as being one of ‘friendship’ in the context of an employer-employee liaison.

Andrew married a woman his parents chose for him, which permitted him to come to England. He has always been attracted to men and enjoys sexual contact with them. He identifies as being heterosexual, and rejects any notion of being “gay”. He experienced erectile dysfunction while attempting to have sex with his wife, which led her to ask for a separation. He wants to get married again and to have children, which will make him happy. He also attests that he wants to continue having sex with other men, but doesn’t feel the need to disclose this information to anybody else. He is currently being seen in therapy for his sexual dysfunction.

From Andrew’s cultural viewpoint he is not “gay”, and therefore does not need to come out by acknowledging or disclosing a Queer identity. Although he is in therapy for his erectile dysfunction, the sensitive therapist need not prescribe a coming out process to address this issue\textsuperscript{12}.

**Who does the BME-Q individual come out to?**

The BME-Q person has to contend with poor comprehension of Queer sexualities and lifestyles in many BME communities, where such sexualities are construed as “social deviance”, or a “Western disease”.

Jude had been appalled when he discussed his professional work with gay and lesbian people with his mother, and her asking him in all seriousness, “Are there many such gay people?” and more worryingly, “Where do these gay people live?”

The reasons for this lack of knowledge about Queer sexualities in BME societies are myriad. One major hurdle is the lack of discourse regarding sex in general amongst members in some communities. Sex is a private act and rarely is it acknowledged as

\textsuperscript{11} These micro-tactics have been described by Fisher (2003)

\textsuperscript{12} Shivananda Khan (2001) provides an excellent account of the different types of sexualities that exist among men who have sex with men in India.
being important for well-being, or for pleasure. Furthermore, visibility of BME-Q individuals in heterosexual spaces and in the mainstream media is poor. Regional films, particularly Bollywood productions, which are popular amongst the South Asian communities, have portrayed strong same-sex bonding, but mostly in the context of friendship or brother/sisterhood. Queer characters are mainly portrayed as fringe characters who are to be pitied or made fun of, or are portrayed as the victims of traumatic experiences which made them Queer\textsuperscript{13}. Strong familial, cultural, and religious backgrounds may make the process of coming out more arduous. Furthermore, many traditional societies consider marriage and procreation as a familial and social obligation. Associated to this communal obligation, there may be a sense of fear of rejection from the family, and being ostracised from the larger community also – a consequence that may be problematic particularly for young BME-Q individuals. However, despite these threats (or perhaps, because of these threats) BME-Q individuals seek another community to belong to. Thus through the process of acculturation, some BME people may come to identify themselves as being LGBT. To this extent, coming out may be beneficial, as studies have reported lower social and trait anxiety, and depression in people who are “out”. However, BME-Q literature on coming out is replete with inconsistencies.

Coming out was not a one-of event for Sam; he had to come out to his mother once a month (every time he visited her)! A recapitulation of this disclosure would be precipitated by the mother’s insistent matchmaking efforts, finding suitable brides from a coterie of friend’s daughters for Sam. Following functions/celebrations that their ethnic community organises periodically, Sam’s mother would ask him about the different “eligible” young women there, enquiring if he found any of them “suitable”.

This idea of Queer sexuality as being impermanent and heterosexual sexuality as being immutable is not specific to BME communities. In many societies some homosexual activity during teenage is not given much notice because of this very notion of impermanence. While it is true that for some people such activity may be considered as “experimentation”, a rite of passage before “the real thing”, the possibility of this activity as an emerging sexuality in its own right is rarely acknowledged by family members, clergy, and doctors.

Jude was unsure whether his parents knew he was gay. He hadn’t really come out to them, but sometimes he suspected they knew, and were simply in “denial”. His parents wouldn’t mind him bringing “friends” to stay over, but they also occasionally brought up the subject of “settling down” (which essentially entailed getting married). Jude believes that parents didn’t confront him about these “friends”, because they were worried that he might seek alternative accommodation.

\textsuperscript{13} A recent Bollywood production, Girlfriend (Director: Karan Razdan, 2004), portrays one character as a ‘lesbian-of-convenience’ till she finds a suitable man (note: she is not identified as bisexual), and her ‘Queer’ lover turns out to be a psycho-stalker.
Denial is an ego-defence mechanism that is commonly employed by family members when confronted with possibilities of a member not being heterosexual. Queer people sometimes use denial also, especially during the initial periods of sexual identity formation. Many Queer adolescents view their same-sex sexual desires or even behaviours as a transitory phenomenon, which can be ‘safely’ regarded as ‘normal adolescent sexual experimentation’. Although denial is considered the most basic of defence mechanisms, when initially used by the parents/family, it can be beneficial for the BME-Q individual. Such denial on the part of the others buys time for the BME-Q individual while he/she develops and/or comes to terms with the emerging sexuality, in a non-threatening, non-invasive environment. However, protracted parental or familial use of denial may be counter-productive, in that coming out may be a painfully drawn out process, with frequent vacillations between acceptance and rejection, and comprehension and disbelief.

Rahul’s parents were not convinced of his “gayness” and he was constantly asked if he had “changed his mind”. His mother would often pray for this change to occur, so that they would be proud grandparents one day. But Rahul himself felt that his parents were more concerned about what the neighbours and friends would think/say should they find out.

This sentiment of concern for what others would think is quite common, and some BME-Q individuals are requested by their families to keep their sexuality a secret, particularly to their own ethnic community, for fear of stigmatisation and retribution. This partial emergence from the closet poses problems not only for the BME-Q individual but also his/her parents/family, as it places them in a position where they then become custodians of a secret that they themselves have deemed too dangerous to disclose. If disclosed, the parents have to bear the burden of sympathy that their community offers them, or blame that they are conferred with; and if left undisclosed, they are prodded with questions of why they are not welcoming marriage proposals. Such questions are often couched in suspicion of the son’s/daughter’s (in)ability to procreate. Many parents need to weigh which of the two taboos (Queer sexuality v infertility) they would like to acknowledge. Some of these themes are explored in Nisha Ganatra’s film Chutney Popcorn. The Indian-American lesbian character in this film, Reena, is a free-spirit who in integrating into the majority LGBT community has become an outsider within her own ethnic community. Being out, her sexuality is not understood or accepted by her family, nor is her indebtedness to her family understood by her White girlfriend (through artificial insemination, she offers to carry her sister’s baby for her). This sister is a foil to Reena’s character, in that she portrays the ‘traditional’, dutiful Indian daughter/wife.

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However, establishing identities, especially when belonging to minority groups, is psychologically beneficial. In particular, the development of racial and sexual identities is important in coping with multiple frames of reference. These identities co-exist by being in the background or foreground in any given circumstance and/or time. The insightful and well-adjusted individual learns to juggle and/or incorporate these different identities harmoniously. However, having multiple, sometimes fragmented and compartmentalised existence, can have adverse psychological effects on the individual.

In fact, research has found that BME-Q youth feel a part of both their ethnic and Queer culture, but without feeling a complete sense of belonging in either. This lack of acceptance from either community can lead to feelings of isolation and estrangement, with resulting adverse psychological consequences. In order to ‘belong’, the BME-Q individual is sometimes forced to relinquish or even rebuke the alter-identity. This can be performed in a conscious, tactical manner to protect the physical self, or at an unconscious level to protect the ego (or the psychic self). ‘Internalised homophobia’, the self-direction of negative social attitudes which leads to self-devaluation, operates at the latter level. Most people identify with and are socialised in their own ethnic, racial, and cultural groups, before acknowledging a sexual identity. This identification can position the BME-Q individual at odds with anything that is construed as belonging to the other (here: White LGBT identities). Furthermore, such distancing is positively reinforced by the individual’s ethnic community, thereby enhancing the bonds he/she has within this community.

When families acknowledge Queer identities, the most acceptable “cause” for this is one that ascribes little or no involvement of the BME-Q individual him/herself, or the family, but places the onus onto an external agency. Many parents consider their child’s sexuality function of “fate” (or karma), or “God’s will” (particularly for Hindu families, where homosexuality per se is not considered a sin). Others find refuge in a medical model which makes the “condition” congenital. This conception of ‘aetiology’ absolves the parents and family of guilt and blame, and permits them to assume the role of the benign tragic hero/heroine. Other theories (such as social constructivist theories) that explain sexuality loosely in terms of something that may have been acquired (or worse still, chosen) are not generally accepted.

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20 Bob Tremble, Margaret Schneider and Carol Appathurai (1989) ___________

Where/what does the BME-Q person come out (in) to?

Considering that the mainstream LGBT social venues are not immune to racism, the sources of socialisation with (coming out into) the majority LGBT spaces and communities are limited. The experience of racism from society at large, the organisations that exist to support them, and LGBT spaces has been documented\(^{22}\). Racism (overt or covert) in majority LGBT social venues may further foster a sense of isolation for the BME-Q person. Some of this hostility towards BME people is related to the otherness that they represent for the ‘majority’ communities. While this otherness can be a source of celebration of diversity, it can also be a source of distrust and disgust because of the difference that they signify, which stems from factors such as ignorance and stereotyping. Some BME-Q people attempt to mitigate this difference by merging into the in crowd, at the expense of their own individuality. Such attempts to assimilate may be at the cost of losing connections with their ethnic culture, a loss that can have significant consequences.

Jason had fantasised going to a gay nightclub for weeks before he had such an opportunity afforded by the University LGBT group. He enjoyed the thrill of seeing semi-naked men dance, kiss, and pet each other, but his fantasies of meeting someone there were left unfulfilled. He learnt the dance moves and he found the ‘right’ clothes, in an attempt to fit in. But it was only after many such visits to such venues that he began to observe certain things: he was often overlooked by bar staff, most patrons ignored him, and some were hostile. “Even other Black people” did not seem to notice him. Spiralling into low self-worth, Jason stopped going to these venues till he discovered a Queer Asian nightclub in a larger city. He felt he was desirable in this space.

The politics of Queer desire in the context of race/ethnic identities is a complex and sensitive issue. Why is it that most White people desire White people, and “even other Black people” desire White people? There is some research evidence that suggests that this is related to ingrained racist/internal racist attitudes instilled in us from childhood\(^{23}\). But for the Black Queer individual, is this merely a function of desire for the White body, or a desire for the White experience in-toto that coupling with a White person affords? In commodifying people, just as an attractive partner is displayed with pride, so is the White partner for some Black Queer individuals. What makes the White partner such a prized possession? Does such interracial coupling foster a sense of security to the Black individual? But what are the costs? Some writers document the trade-off as being one of age and colour: The Rice Queen is the older White man who partners himself with the younger Asian man (the Potato Queen)\(^{24}\). Internalised racism also plays a major role in

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how much the BME-Q individual is willing to acknowledge and display his/her cultural/ethnic roots. Ana Kokkinos’ film Head On is set in Melbourne and has a Greek-Austrian protagonist. Ari, angst-ridden snapshot of life is perhaps a close reflection of a protracted second-generation BME coming out, with identities blurring at the boundaries of sexuality and ethnicity. He despises his Greek origins in public, but wants to celebrate it in private or in his own familial and ethnic milieu; his same-sex desires are robust, but shrugs away from any indication of intimacy.

Expecting support from their own ethnic communities is not an option that many BME-Q individuals entertain. While social support is known to buffer the psychological effects of stress, actual or even perceived lack of social support has been linked to psychological problems such as depression\(^{25}\). However, social support itself is a double-edged sword, in that while it has the potential to protect the individual, it also poses psychological costs in terms of indebtedness and obligations\(^{26}\). This is particularly pertinent for BME-Q individuals who have to negotiate identities between two or more (sometimes distinct) social networks, which can be problematic.

**Conclusion**

Coming out for the BME-Q individual is a complex process, that need not always follow the prescribed patterns and pathways that have been reported in literature. These complexities may be obscured further by the lack of a clear definition of coming out, because it inevitably calls to question what coming out entails. Most of these models have also failed to acknowledge the synergistic effects of race and sexuality in metaminorites, and their impact on identity development. For BME-Q individuals, coming out need not be the only way to experience an actualised Queer life, despite the seemingly incompatible identities they have. Same-sex sexual behaviours can be enjoyed even within the framework of a heterosexual identity, provided that the individual does not see a conflict in terms of sexual identity and behaviour, and views them as being distinct. When dual (or multiple) sexual identities are acknowledged, the BME-Q individual needs to consciously manipulate these in a way that helps him/her maintain control over situations. To this end, the Closet is a powerful space and tool where sexual identities and behaviours can be examined and negotiated. Traditional notions of coming out are also sometimes available to BME-Q individuals, but breaking into the mainstream LGBT spaces is a difficult process. Assimilation into such spaces provides one option for BME-Q individuals, but this is sometimes at the risk of losing or even repudiating other meaningful identities. Self-awareness and an understanding of one’s developmental and cultural histories may facilitate a harmonious integration of multiple identities for BME-Q people, which is essential for psychological wellbeing.


Bibliography


