



Seeing Through Another Lens

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I am a Hmong woman born in Thailand and raised in the United States. My family came to America as refugees when I was three years old. I am bilingual in Hmong and English. I have a master's degree in marriage and family therapy and practice in a nonprofit mental health organization. It is my hope to continue my education after a few more years of doing therapy. Ultimately, I would like to open a private practice and teach. As a woman of color and the daughter of refugee Hmong parents, I am continuously balancing the demands of my culture with mainstream expectations.

UNDERSTANDING AND EXPERIENCING PRIVILEGE: CRITICAL INCIDENTS

I was invited to a birthday party for a close acquaintance of a friend, Susan. (Pseudonyms have been used to protect the privacy of all individuals involved.) When I agreed to attend, my assumption was that this would be a typical college party with loud music, drinking, smoking, and socializing. However, when I arrived with my partner, I was shocked to find that almost everyone had a disability and was in a wheelchair. The only people without physical disabilities at this party were Susan, my partner, and I. Due to my limited experiences with people with disabilities, it had never occurred to me that they could hold the same type of parties as everyone else.

When my partner and I first entered the party, I felt awkward in trying to maneuver through all the people in wheelchairs to find a place to sit. As Susan introduced us to everyone, I became consciously aware that I had inappropriate ideas about what was acceptable behavior for interacting with people who have disabilities. I kept reminding myself not to stare or say anything that might be perceived as

offensive regarding individuals with disabilities and noticeable physical differences. My fixation with acting appropriately may have come across as rude because I did not make much eye contact with the people to whom I was being introduced.

Tim, a man who was a quadriplegic, was sitting next to me. He called a friend over to help him light a cigarette and hold it in his mouth. Their interaction was natural, but I found I felt protective of Tim. Inside, I ignorantly thought *your body is under physical strain already, and smoking will only make it harder*. This was the same thought I had when everyone started drinking.

It was difficult for me to view the people at the party as physically capable or healthy because of their disabilities. I became aware that I felt overly protective of them. For example, when Tammy wanted to go to the bathroom and had to manipulate her wheelchair down a small, cluttered hallway, I was worried that she might have a hard time. I had a compelling desire to get up and help her. When I saw that she creatively maneuvered her way to the bathroom, I felt foolish for not having enough faith in her capabilities to deal with such a minuscule task, a task that she undoubtedly dealt with daily.

During the course of the evening, everyone had consumed a large quantity of alcohol, and Tom wanted to impress all of us. He gracefully leaped out of his wheelchair to the center of the room, where he did a handstand. His performance was astonishing, and it shocked me. Despite his flawless efforts, I kept thinking that maybe someone should have assisted him in case he could not do it. I am ashamed to say this thought stemmed from my foolish assumption that a person with disabilities is completely dependent and helpless without his or her wheelchair.

Strauss and Quinn as cited in Pengra (2000) stated that some specific schemas (for example, how women should act, how people with mental retardation should be treated, what behavior is appropriate in the workplace) affect our perceptions and subsequent behaviors in terms of what to notice and how to act. These schemata provide the broad themes around which a person's own actions are organized and the actions of others are judged (Strauss & Quinn as cited in Pengra, 2000). Seeing others through these schemata then guides the analyses of and responses to situations and other people. For example, a schema about certain physical characteristics identifies some people as less valued. Therefore, it is probable that those characteristics will be noticed. In my ignorance, I failed to recognize at the party that the wheelchair is only a tool, and it does not define the person who uses it. Just like everyone else, people with disabilities are whole individuals, with or without their wheelchairs.

At one point during the evening of the party, I had a conversation with Tara, who informed me of her personal struggles with being labeled "disabled." She stated that many people do not treat her as a valued individual, instead seeming to focus only on her disability. In Tara's process of coming to understand her position as a woman with a disability, she told me that she has acknowledged and coped with stereotypes by not allowing society's misconceptions to affect her self-esteem and personal worth. One of Tara's fears was being a burden to others simply because she uses a wheelchair. Like most people, she also expressed wanting to be loved, accepted, and valued.

After my conversation with Tara, I gained a new understanding of how issues of privilege and oppression are comparable for people with disabilities and people

of color. Yet, I also understand how these issues are not the same, and how they should not be compared. I also gained an understanding of how my dominant culture status (able-bodied) automatically puts me in the category of privileged. In my role as a member of the privileged group, I inadvertently participated in stereotypical thinking and behavior. My experience at this party shows me that although I might be sensitive to discriminatory or oppressive issues that affect me as a woman of color, I am often unaware of similar issues that plague others.

In another situation in which I recognized my privilege, I was invited to a holiday dinner with many of the same individuals who attended the aforementioned party. When we arrived at the restaurant, Todd, the coordinator of the event, went to inform the host about the number of people in our party. The host was conversing with Todd about accommodations when I walked over to inquire about the waiting time. Immediately after I walked over, the host shifted his attention and questions from Todd, who was in a wheelchair, to me. The host attempted to set up arrangements with me, overlooking Todd, even though he was in front of me and had been dealing with the situation. Shortly after I noticed this, I indicated that I was only a guest and that Todd could answer his questions more accurately.

In my life, I have experienced both privilege and oppression. The holiday dinner scenario put me in a position of privilege in relation to Todd. The host presumed that I had knowledge and authority over our dinner plans because I did not have a visible disability. I did not earn the position of privilege; rather, it was offered to me regardless of its validity. In my interactions involving people with disabilities, I have experienced unearned power and advantage, and I have seen what being in a privileged position is like. I did not have to demand or work for respect; rather, it was simply given to me because I did not have a physical disability.

In contrasting situations, my partner and I have gone to restaurants, and he was given respect and authority because he is a Caucasian male and I am a woman of color. These discriminatory acts, whether conscious or unconscious, send messages of incompetence, dishonor, and irresponsibility regardless of merit and provoke in me feelings of anger and discouragement. I imagine that Todd, Tara, and others experience similar emotions when they are overlooked, disregarded, or patronized.

CONCLUSIONS AND LESSONS LEARNED

To understand the consequences of labeling, in comparing interracial relationships to those between able-bodied and people with disabilities, Liachowitz (1988) discussed Gordon Allport's classic study of prejudice. Several writers have used the concept of "stigma" to explain responses, both to racial and physical differences. There are clear similarities between biased responses to people with disabilities and to people of color. First, most people who diverge from either racial or physical norms share the problem of evoking unpredictable, but unusually negative, responses from the majority populations. Second, whether based on biological ascription or social attribution, minority groups often face a

common personal and political dilemma. Third, members of both groups are often forced to meet their need for belonging, and their need for personal and political recognition, by establishing or joining groups composed "of their own kind." Many nonmainstream members simply want the same opportunities afforded those ascribed to their mainstream counterparts.

Upon reflection, I realize that the party scenario helped me to begin my process of examining how I stereotype others because I associate myself with being able-bodied. The restaurant scenario increased my sensitivity in recognizing my own privilege. My recognition of how Todd was treated by the restaurant host was largely the result of my own experiences of being treated in a similar manner.

Although I am somewhat embarrassed and angered by these experiences, I am also very grateful for them. These experiences gave me the opportunity to gain insight into myself and refute my assumptions about the potential of people with disabilities. However, I did come to realize that one of my initial assumptions was true: It was indeed a typical college party, complete with loud music, drinking, smoking, and socializing.

REFERENCES

- Liachowitz, C. (1998). *Disability as a social construct*. Philadelphia: University of Pennsylvania Press.
- Pengra, L.M. (2000). *Your values, my values*. Baltimore, MD: Paul H. Brooks Publishing Co., Inc.