

**Understanding Misogynoir and its Impact on the Mental Health of Black and Mixed Race  
Black Cis, Trans, Queer and Lesbian Identifying Women. A Counsellor's Guide to  
Exploring Misogynoir.**

by

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### **Abstract**

The unique mental health concerns of Black women in Canada are understudied in the field of psychotherapy. Misogynoir is a term coined by Dr. Moya Bailey to highlight the gendered anti-black racism and discrimination that exist at the intersection of being black and female-identifying. Given that more Black women are accessing counselling services, this paper explores the concept of misogynoir, its history, and its enduring and profound impact on the mental health of Black women. Through an exploration of existing literature and qualitative research, this paper delves into the various manifestations of misogynoir, including an in-depth look at the popular controlling stereotypes, microaggressions and systemic discrimination. Moreover, this paper highlights unique ways that misogynoir as a form of anti-blackness impacts Black women's stress, anxiety, depression, and other mental health issues. The research shines a light on the importance of addressing and acknowledging misogynoir in the counselling room. By understanding the nuanced experience of Black women and centring their voices in the discussion surrounding mental health, this paper advocates for a more inclusive and culturally competent approach to supporting the well-being of Black women that is rooted in an understanding of intersectional, critical race and Black feminist theory.

*Keywords:* misogynoir, anti-blackness, microaggressions, white fragility, racial colorblindness, racial gaslighting, racial stereotypes/epithets, respectability politics.

### **Dedication**

I dedicate this work to every Black woman who has ever sought mental health care/support and felt misunderstood, unheard, dismissed, misrecognized, unseen and mistreated. I speak for you and represent you. I dedicate my work to my daughter in hopes that my work will enrich your understanding of mental health and what it is to receive culturally competent and safe mental health care.

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## Chapter One

### Overview of the Topic

As the field of psychology and psychotherapy has expanded to include the voices of racialized minority scholars, we have witnessed a more nuanced and robust approach to conceptualizing the mental health challenges and lived experiences of those outside of the dominant discourse. Coined by Dr. Moya Bailey using the principles of intersectional theory, misogynoir provides a name/label that describes the gendered racism and discrimination that exist at the intersection of being Black and female-identifying (Bailey, 2021). While misogynoir might be a novel concept for those outside of the Black community, its roots can be traced to the colonization and the transatlantic slave trade and continue to define and inform how the larger society perceives women (Bailey, 2021). The concept of misogynoir brings to the forefront racial stereotypes/epithets that are used to characterize Black women in disparaging and dehumanizing ways, resulting in adverse psychological and physiological concerns (Bailey, 2021). Consequently, counsellors from the dominant culture seeking to practice from a lens that is rooted in denouncing anti-black and anti-racism need to understand the role of misogynoir in the unique lived experience of Black womanhood (Thompson et al., 2004).

Historically, Black communities have been placed at a disadvantage regarding their mental and physiological health, which can be attributed to multiple factors such as enslavement, oppression, colonialism, racism, segregation and being used as "guinea pigs" in scientific experiments (Gamble, 1993, p. 36). These adverse experiences have resulted in an ambivalence towards accessing culturally sensitive mental health services, especially in a field where the service providers are predominantly white (Nia, 2022). Consequently, therapists seeking to provide cross-racial therapy must move beyond a model of social justice as a means of recognizing and addressing the limitations of traditional therapeutic approaches. One key aspect of this shift is acknowledging intersectional identities and the fact that an individual may experience multiple oppressions simultaneously.

While sexism and racism are often narrowly defined as acts of oppression and discrimination, it is undeniable that repeated and persistent experiences of these forms of discrimination are stressful and traumatizing and result in long-lasting physiological and psychological concerns. It is, therefore, essential that therapists working with Black women increase their cultural competence, conceptualization of intersectionality and treatment outcomes by understanding the sociopolitical context of the controlling stereotypes that define Black womanhood. Some of the well-known controlling stereotypes that will be covered in this paper are the Jezebel, Mammy, the Angry Black woman, the Strong Black woman, Welfare Queen and the Drug Mule and the impact each has had on the psychological health of Black women. It is, however, essential to note that most of this research findings are based on data collated in the United States as opposed to Canada. Given the lack of Canadian-based data, this invites one to question whether it is even relevant for Canadian counsellors to know, which I would argue positively yes, given that Black Canadians face a disproportionately higher rate of discrimination and racism in Canada and being aware of the nuanced experience of our client is an integral part of providing inclusive and competent mental health care (Cenat et al., 2021; British Columbia Association of Clinical Counsellors Code of Ethical Conduct, 2014).

On the world stage, when most people think of Canada, they do not think of racism but rather multiculturalism, which, according to Cole (2015), connotes a "colourblind society" (para. 2). However, as Cole (2015) points out, multiculturalism does not mean the absence of discrimination and racism especially for Black individuals that continue to experience widespread state violence and harassment such as "carding" or "walking while trans/black" (Este et al., 2018, p. 1; Maynard, 2017, p. 140). Unfortunately, racial profiling is not the only form of racism that Black Canadians face; a 2021 study of Black Canadians between the ages of 15 and 40 found that four in ten participants would report experiencing some form of everyday racial discrimination at least once per week (Cenat et al., 2021). These racialized experiences would happen in the context of living day-to-day life, such as going to the bank to

access a loan, seeking employment, accessing health care services, and going to school, to name a few (Cenat et al., 2021). Equally important, it was found that every day, significant acts of discrimination and rates of frequencies were reported amongst female participants, signalling gender as a factor in the types and forms of racism and discrimination one is subjected to. It was also found that 50.2% to 93.8% of participants reported being a victim of microaggression (Cenat et al., 2021).

Currently, Black Canadians account for 3.5% of the total population and, according to Cenat et al. (2021), are "the most discriminated among all minority groups" (p. 3). Statistically, pervasive racial discrimination and microaggression have been associated with increased stress response, leading to an inability to cope with stressors, chronic mental concerns and increased physiological health problems (Busse et al., 2017). Additionally, it has also been found that experiencing racial discrimination is associated with a higher rate of mortality for the Black population, with a death rate of 1.6 times higher than that of their white counterpart (Williams, 1999). The differentiation in mortality rate amongst Black women has been associated with Arline Geronimus's "weathering" hypothesis that a lifetime of discrimination results in high levels of stress hormones that are toxic to the bodies of Black women, resulting in Black women aging earlier and faster, going into menopause sooner, increasing incidents of chronic diseases mainly metabolic and faring poorly in childbearing (Yup, 2022, para., 1-6). Despite the odds being stacked against Black Canadians, they fail to engage in mental health care, citing as their primary reasons the lack or limited availability of Black mental Health providers and experiencing significant racism when interacting with healthcare professionals (Cenat et al., 2021; Mental Health Commission of Canada, n.p).

While the solution to addressing the mental health care needs of Black Canadians, specifically Black women, is as simple as gaining access to Black service providers, the fact of the matter is that we are a dime a dozen and, as such, are incapable of meeting the needs of our own. Therefore, the solution lies in having existing counsellors provide mental health care

that is anti-racist and intersectional, as therapeutic alliance and cultural competency are the most significant predictors of therapeutic success (Cabral & Smith, 2011; Owen et al., 2011). Additionally, according to Chang & Berk (2009), matching client and therapist based on race/ethnicity is neither sufficient for "therapeutic effectiveness nor is matching inherently problematic," instead, factors such as cultural values, competency and worldview have been shown to moderate the impact of racial differences in a client-counsellor relationship (p. 522). Therefore, this paper is a resource for Black and non-Black counsellors to learn about the lived experience of Black women and how these controlling stereotypes impact how we show up and the concerns we bring to the therapeutic space.

### **Purpose Statement**

The purpose of this capstone project is to thoroughly explore the intricate phenomenon of misogynoir and its profound impact on the mental health of Black and mixed-race Black cis, trans, queer, and lesbian-identifying women. Going beyond mere exploration, this capstone aims to culminate in the development of a counsellor's guidebook that educates and empowers mental health professionals on what misogynoir is and how to adapt clinical practices to effectively navigate the complexities of misogynoir within therapeutic space using an intersectional frame. This capstone recognizes the centrality of racism and sexism in shaping the mental health outcomes of Black women. It highlights the critical need to address misogynoir in Black clients presenting for services as a means of fostering inclusivity and culturally sensitive counselling services to Black women.

For this capstone project, it is imperative to acknowledge and bring awareness to the prevalence of the many controlling stereotypes that disproportionately impact and dehumanize Black women. These stereotypes often perpetuate harmful narratives surrounding the intelligence, sexuality, and overall worth of Black women, contributing to the unique challenges they face. By shedding light on these stereotypes, the guide seeks to equip mental health

professionals with an understanding of the socio-cultural context in which misogynoir manifests itself, thus enabling more targeted and effective therapeutic interventions.

In recognizing the limited representation of Black mental health providers, the guide aims to address existing disparities in access to culturally safe and competent mental health care. Limited access to Black mental health providers becomes particularly crucial when considering the controlling stereotypes that may influence societal perceptions and the dynamics within therapeutic relationships. Therefore, the guide is a valuable resource for all counsellors, especially those seeking to engage in cross-racial therapy, emphasizing the importance of dismantling stereotypes and providing equitable, empathetic support to Black and mixed-race women.

Moving beyond a social justice lens, this project underscores the importance of integrating knowledge about misogynoir into the broader framework of mental health care. The guide can become a tool for challenging and reframing harmful stereotypes, encouraging mental health professionals to adopt an intersectional approach that considers the unique intersections of race, gender, and other social locations. In doing so, counsellors can contribute to dismantling the systemic barriers that perpetuate the mental health disparities faced by Black and mixed-race Black individuals. By actively addressing and challenging these stereotypes, counsellors can create therapeutic environments where clients feel seen, heard, and validated in their experiences.

Essentially, this capstone project strives to contribute to the evolving knowledge base of mental health care by addressing not only the overarching concept of misogynoir but also the controlling stereotypes that underpin it. Through this guide, mental health professionals can play a pivotal role in dismantling harmful narratives, creating affirming and culturally competent therapeutic spaces for Black and mixed-race Black cis, trans, queer, and lesbian-identifying women.

### **Theoretical/Conceptual Framework**

Black feminist thinking and critical race theory (CRT) are two theoretical frameworks that show promise for comprehending Black women's intersecting identities and social location and explaining how their therapeutic needs might be effectively met in the therapeutic environment. Black Feminism, also known as Afro Feminism, seeks to contextualize and shed light on the lived experience of Black women from the standpoint of being marginalized based on race, gender, class, and social identity (Howard-Hamilton, 2003). Three fundamental frameworks inform Black feminist thought. According to Collins (2002), the three frameworks are the experiences of black women, intersecting experiences between and amongst Black women, and commonalities that exist no matter the diversity in class, religion, age, sexual orientation, and social location. Most importantly, Black Feminist thought highlights, contextualizes and dispels the erroneous and false narrative of Black womanhood by educating others on the history of racial discrimination, systemic oppression and the controlling stereotypes that continue to punctuate how Black women are perceived (Collins, 2002). Essentially, Black feminism allows Black women to reauthor and redefine their stories from within based on Black culture, values, and experiences (Howard-Hamilton, 2003).

With multiculturalism and cultural competency at the forefront of how counsellors in Canada market themselves to potential clients, CRT provides a model for cross-racial, culturally safe, and competent counselling services and ethical decision-making. Premised on six central tenets, CRT highlights race as a social construct but remains pervasive and central to maintaining the ideals and superiority of the dominant culture (Trahan & Lemberger, 2014). Consequently, racism continues to be a part of the social fabric of society despite laws and legal policies that claim "neutrality, objectivity, colour blindness, and meritocracy," as evidenced by racial profiling and microaggressions (Howard-Hamilton, 2003, p. 22). Additionally, CRT posits that legal advances for Blacks tend to advance the interest of the dominant white group, connoted by the principle of "interest convergence/material determinism" (Trahan & Lemberger,

2014, p. 116). CRT also provides a framework for counsellors to understand differential racialization and intersectionality (Trahan & Lemberger, 2014; Howard-Hamilton, 2003). Finally, CRT advocates for therapists, especially those working cross-racially, to engage their clients in "narrative storytelling" as a means of allowing Black women permission to take up space by describing their experience with racism and sexism (Trahan & Lemberger, 2014, p.117). When Black women are empowered to tell their stories, it helps build therapeutic alliances. Narrative storytelling provides the counsellors with a better understanding of the client's worldview while avoiding pitfalls such as racial gaslighting, colorblindness and stereotyping (Trahan & Lemberger, 2014).

### **Contribution to the Field**

As a Black woman in the field of psychotherapy, it is my objective observation that little emphasis is placed and known about the Black experience in Canada. As an immigrant turned naturalized Canadian and a Black woman, it was vital for me to bring to the forefront a racialized experience that has not only limited my willingness to access mental health resources but one that has painted me and many of the Black clients in that now see me for counselling as too loud, too aggressive unattractive, castrating and not dateable because of my race and gender. Having had the lived experience of being born in a nation-state of Black people, I would come to realize that my Canadian experience of being frequently asked where I am from, having the command of my native language, English, be stereotyped as "good" and my presence in dominantly white spaces and being "mistaken as the help" was not figments of my imagination but the lived experience as someone that is racialized and discriminated against. Given the limited focus on Black women and the factors that negatively impact our mental health by exploring and documenting Black women's experiences with misogynoir, I hope to raise awareness of misogynoir on the presenting concerns of Black women. Increasing awareness is crucial for recognizing and acknowledging Black women's unique challenges.

The information gathered from this capstone can enhance cultural competence among psychotherapists by providing insights into the specific cultural, social, and historical factors that contribute to misogynoir, such as slavery and controlling stereotypes. A culturally competent therapist is better equipped to understand and address the diverse needs of their clients, fostering a more inclusive and effective therapeutic environment. Most importantly, the knowledge gained can inform the development or modification of therapeutic approaches that are sensitive to the lived experience of Black women. Understanding the impact of misogynoir can guide cross-racial counsellors in creating safe spaces for exploration and healing and address individual and systemic aspects of mental health challenges.

At the educational and practice level, this capstone can contribute to advocacy efforts by shedding light on the unique mental health challenges and disparities faced by Black women in Canada. Advocating for Black women's mental health challenges to be included in the school curriculum and counselling practice can result in the systemic change needed for the creation of a more equitable mental health system that meets the diverse needs of all individuals regardless of race or gender. Furthermore, integrating misogynoir into clinical training can better prepare future counsellors to work effectively with diverse intersecting populations, no matter the counsellor's race or ethnic background, contributing to a more responsive mental health professional.

Lastly, sharing the findings with the community can empower Black women by validating their experience and providing a platform for their collective voices to be heard and understood. Engagement with the community can also facilitate collaboration between mental health professionals and community leaders in promoting culturally sensitive community-based mental health initiatives for black women of all ages and backgrounds.

### **Reflectivity and Positionality Statement**

As an emerging Black female counsellor and naturalized Canadian citizen, my understanding of misogynoir is intricately shaped by my immigrant background. Navigating

multiple identities, I bring a unique perspective to counselling, recognizing the layered impact of sexism and racism within the Canadian context. My commitment lies in dismantling stereotypes and biases and fostering a safe space that acknowledges the distinct challenges faced by Black women. Drawing on personal experiences, I strive to create an environment where clients who look like me feel heard, understood, seen, and supported in navigating the intersections of race and gender. Too often, we have our experiences dismissed as being dramatic/a misunderstanding as opposed to one rooted in antiblackness and gendered racism. Through continuous self-reflection, I aim to be mindful of power dynamics, contributing to the ongoing dialogue on the complexities of misogynoir and empowering Black women in both personal and professional realms—a narrative of self-disclosure. As a student, I strive for reflexivity throughout the project, regularly revisiting values, assumptions, and motivations. The goal of reflexivity is not to remove bias but rather to highlight it and acknowledge the challenges/discourses that may arise through the capstone project process.

### **Definition of Terms**

***Antiblackness*** is "the beliefs, attitudes, actions, practices, and behaviours of individuals and institutions that devalue, minimize, and marginalize the full participation of Black people" (Comrie et al., 2022, p.1).

***Microinsults*** are described as "behavioural and verbal expressions that convey rudeness and insensitivity and demean an individual's racial heritage or identity. When professors, for example, comment to Black students with tones of surprise that they are very articulate, the underlying message is that Blacks as a group are unintelligent" (Sue et al., 2008, p. 329).

***Microinvalidations*** "invalidate, negate, or diminish the psychological thoughts, feelings, and racial reality of Black individuals. When Blacks are told that "people are people" and that "we are all human beings," the inherent message is that their experiences as racial cultural beings are not valid" (Neville et al., 2000, p. 60).

**Misogynoir (pronounced mi-soj-uhn-nwar)** is the blending of the word "misogyny," which is the hatred of women, and the French word for "black" "noir" to describe the "unique co-constitutive racialized and sexist violence that befalls Black women as a result of their simultaneous and interlocking oppression at the intersection of racial and gender marginalization" (Bailey, 2021, p.1).

**Racial Colorblindness** is the ideology that suggests the most effective approach to combat discrimination is treating all individuals equally, regardless of race, culture, or ethnicity (Williams, 2011). It entails believing that racial identities and differences should not influence decision-making, perceptions, or behaviours (Apfelbaum et al., 2012). The rationale behind advocating colour blindness is simple: if individuals or institutions do not acknowledge race, they cannot exhibit racially biased behaviour (Apfelbaum et al., 2012). The idea is that colour blindness can disrupt the usual processes through which bias manifests itself (Apfelbaum et al., 2012).

**Racial gaslighting** -the term gaslighting was derived from the 1944 mystery-thriller film of the same name and was used to connote a husband's manipulative and controlling behaviour toward his wife for his gain (Davis & Ernst, 2020). The term was later added to the Oxford English Dictionary and is defined as "the action/process of manipulating a person by psychological means into questioning his/her own sanity" (2016). The term made its way to popular discourse and has been used to highlight the various ways gaslighting can manifest itself. According to Davis and Ernst (2020), racial gaslighting is defined as "the political, social, economic and cultural process that perpetuates and normalizes a white supremacist reality through pathologizing those who resist" (p. 3).

**Racial microaggressions** are described as "the brief, commonplace, and daily verbal, behavioural, and environmental slights and indignities directed toward Black individuals, often automatically and unintentionally" (Constantine, 2000, p.1).

**Racial stereotypes** are broadly defined as "reflexive and exaggerated mental pictures that we hold about all members of a particular racial group" (University of Notre Dame, 2020). These rigid stereotypes tend to ignore or discard any information inconsistent with the stereotype we have developed about the racial group (University of Notre Dame, 2020).

**Respectability politics** is an attempt by already marginalized groups to police themselves internally to align with the dominant culture's norms (Kendall, 2020). For instance, white women policing black women creates the idea that only some women are worthy of protection (Kendall, 2020).

**Weathering** can be defined as "the result of chronic exposure to the social and economic disadvantage that accelerates normal aging and earlier onset of unfavourable physical health conditions among disadvantaged (vs. advantaged) persons of a similar age" (Forbes et al., p. 1). Weathering is directly associated with higher mortality and morbidity rates amongst blacks in comparison to their white counterparts (Geronimus, 1996).

**White Centering** connotes the idea that white norms, culture, ideals, values, and more form the standard for how everyone views the world and experiences life (Saad, 2020). According to Cadet (2020), white centring is a form of white privilege where white people do not want to engage or experience recognizing their privilege and how that diminishes the humanity of BIPOC folks.

**Tone Policing** is the act of focusing on the tone of what is said by an individual with privilege as opposed to the content of what is said (Saad, 2020). For example, stating "why do you always sound angry?" as opposed to the reason focusing on the content. This is, according to Saad (2020), a way to have the BIPOC person cater to the "white gaze" (p. 69).

**White fragility** is a "state in which even a minimum amount of racial stress becomes intolerable, triggering a range of defensive moves/response such as anger, guilt, fear and behaviours such as becoming argumentative, silence, and withdrawal from stress-inducing situations" (DiAngelo, 2018, p. 2).

**Outline of the Capstone Project Chapters**

Chapter one provides a general overview of the subject matter of misogynoir and highlights my personal interest in the topic. Most importantly, chapter one introduces my social location and underscores the importance of counsellors seeking to engage in cross-racial counselling with black women. They need to be aware of the phenomenon of misogynoir and how it might show up in the counselling space. Chapter Two is a literature review that delves into the specifics of misogynoir and its historical roots and explores the pervasive and controlling stereotypes perpetuated over time. From the Jezebel to the Sapphire, these stereotypes in chapter two highlight how these stereotypes have deeply ingrained themselves in societal narratives, influencing the lived experiences of black women and our willingness to access counselling services. Chapter Two covers specific forms of misogynoir in Canada, mental health disparities that Black women face and an overview of how racism negatively impacts the health and well-being of Black women. Chapter Three synthesizes the findings of the literature review in the form of an easy-to-read guidebook that highlights what misogynoir is and how counsellors safely explore the topic and its impact on the mental wellness of Black cis, queer, trans and lesbian-identifying women.

## **Chapter Two – Literature Review**

Misogynoir is a pervasive and harmful form of discrimination that emphasizes the intersection of racism and sexism levelled at Black women. This literature review delves into the specifics of misogynoir, its historical roots and the pervasive and controlling stereotypes that continue to define and impact Black womanhood. From the Jezebel to The Sapphire, these controlling stereotypes affect the mental health of Black women, forming the basis of this investigation, which aims to shed light on the psychological toll that misogyny has on Black women. Furthermore, the unique manifestation of misogynoir in the Canadian context adds a layer of complexity, necessitating an exploration of the unique interplay between racism, mental health, and the specific challenges faced by Black Canadian women. Counsellors working with Black women will find this literature review to be a valuable resource as it provides an in-depth understanding of misogynoir that is essential for cultivating therapeutic and culturally competent approaches for addressing the unique needs of this population.

### **Misogynoir Explained**

Misogynoir is a term coined by queer Black feminist scholar Moya Bailey by fusing the word "misogyny" with the French word for black "noir." The term is used to describe the intersectionality of racism and sexism to form a unique type of discrimination that only Black women and Black transwomen face (Bailey, 2021). Misogynoir is a specific type of misogynistic anti-blackness that has roots in racism and the subjugation of Black women (Bailey, 2021). Conventionally speaking, misogyny is an extreme form of sexism that is typically defined as the hatred of women and, in many ways, can be viewed as a way of controlling and punishing women who challenge the status quo, especially in a traditionally male-dominated society or sphere of life (Bailey, 2021). Misogynoir draws attention to the ways that institutional prejudices, cultural stereotypes, and stereotypes themselves support Black women's marginalization and abuse (Bailey, 2021).

While recognition goes to queer feminist Moya Bailey for coining the term misogynoir, the philosophical underpinnings may be traced back to Sojourner Truth. Truth, who was an enslaved African woman turned abolitionist and advocate for the rights of black women, in her 1851 speech entitled "Ain't I a Woman," eloquently describes the inequalities she faces as a Black woman in comparison to the life of privilege held and led by the White woman. For instance, Truth (1851) states:

That man over there says that women need to be helped into carriages, and lifted over ditches, and to have the best place everywhere. Nobody ever helps me into carriages, or over mud-puddles, or gives me any best place! And ain't I a woman? Look at me!

Truth's statement highlights that womanhood is not uniformly experienced and that one's race and gender inform the treatment one receives.

Kendall (2020), in her book *Hood Feminism: Notes from the Women that a Movement Forgot*, echoes a similar sentiment in highlighting that the feminist movement panders to the writings and voices of white women, effectively erasing and, in some cases, silencing the voices of other women. Written from the perspective of a Black feminist and her personal experience, popular culture, historical underpinning, and current statistics, she highlights the need for an intersectional lens to be applied to better understand the policies, practices and institutional structure that oppress, disadvantage, and discriminate against women with intersecting identities (Kendall, 2020).

For many outside of the Black community and the Black feminist movement, the term misogynoir is relatively unknown and nuanced. However, its presence runs rampant in ways that should be recognizable to all. Take the hashtag #SayHerName, created in 2014 to raise awareness about police violence perpetuated against Black women, particularly in the United States, but has gained traction worldwide with the expansion and help of the Black Lives Matter movement (Asare, 2020). The SayHerName hashtag highlighted Black women and girls often "unnoticed, untold and overlooked" stories (Asare, 2020, np). Case and point the many

underaged women that musician R Kelly sexually assaulted despite years of mounting accusations, especially considering his illegal marriage to the then 15-year-old R&B singer Aaliyah at the age of 27 (Asare, 2020). The claims of these women would not be validated until the release of the 2019 documentary *Surviving R Kelly*, which resulted in the singer's 31-year sentence for child pornography, racketeering, and sex trafficking convictions (Asare, 2020; Murray, 2023).

According to Asare (2020), when Black women share their pain, abuse, trauma, and incidents of assault, they are "largely shunned, criticized, and ignored. These experiences are questioned, scrutinized, and dissected more than any other group (n.p)." For example, the shooting of Megan Thee Stallion by Canadian Rapper Tory Lanez. In the aftermath of this public revelation, Megan received a slew of public criticism and death threats referring to her as a "snitch" and was accused of lying by other notable rappers such as Drake, 50 Cent and 21 Savage (Asare, 2020; Barrón-López, 2022, n.p). In the own words of Megan, Thee Stallion, "Because I was shot, I have been turned into some kind of villain, and he's the victim" (Barrón-López, 2022, n.p). Megan Thee Stallion's assault, along with the public criticism of other notable Black women such as Megan Markle and Brittany Griner in their darkest moments, goes to show that even fame and notoriety do not insulate Black women for misogynoir.

Bailey (2021), in her work, found that at the heart of misogynoir lies several degrading and reductive tropes that have been used time and time again to limit Black women and dismiss their individuality. These tropes are rooted in slavery and the White man's characterization of Black women, which continue to be played out on screens across the world, creating a false narrative of who the Black woman is. These tropes include the Jezebel or hypersexual Black woman, the Mammy or overly nurturing Black woman, the Sapphire, or the Angry Black Woman (ABW) and the Strong Black Woman (SBW). Other commonly known tropes are the Welfare Queen, the Breeder Woman, and the Hot Mama (Bailey, 2021)

According to Bailey (2021), during slavery, Black women were presented as being overtly promiscuous to justify their rape and enslavement, which gave rise to the Jezebel stereotype. After slavery, Black women were portrayed as asexual, obese, castrating, unattractive and undesirable to make them seem less threatening to white relationships, resulting in the Mammy stereotype. Then, in the 1920s, the Angry Black Woman trope began as a means of criticizing Black men for being lazy and incompetent. How ironic since the industry of slavery was built on the physical strength of black men and women. Consequently, these stereotypes have served to define and dehumanize Black womanhood, influencing not only how Black women are perceived but also how they are treated and are used as weapons to denigrate and undermine Black women. It is, therefore, essential that therapists seeking to provide counselling services to Black women understand how misogynoir might be influencing a client's presentation and concerns so that they do not inadvertently/unknowingly engage in racial gaslighting, tone policing, white-centring and defensiveness when seeking to help clients navigate racialized trauma (Bailey, 2021).

### **Historical Roots of Misogynoir**

The historical roots of misogynoir can be traced to the transatlantic slave trade, colonialization, and the distorted view held by European explorers of Africa and Africa premised on racism and pseudo-race theory (Olusga, 2015). Deemed inferior, barbaric, and backward, African men and women were subjugated, exploited, stereotyped, and dehumanized as a means of justifying their enslavement (Olusga, 2015). Enslaved Black women were not only subjected to forced labour and servitude but were also used and only valued for their reproductive capabilities (Reece, 2023). As property, Black women were forced to bear children and were often impregnated by force (i.e. rape) or as a part of their duty or role as enslaved women as soon as they were able to (Reece, 2023). Their children were needed to replenish/increase the enslaved workforce, giving rise to the commodification of Black women's bodies for economic gain (Reece, 2023).

African women, along with their children, were nothing more than property, reinforcing their objectification and exploitation (Reece, 2023). However, Black women fulfilling the role of “breeders,” as they were called, would also earn the name of Jezebel (Collins, 1991, p. 131). A Jezebel is hypersexual and promiscuous, with an insatiable appetite for sex not just from Black men but also from white men (Collins, 1991). Her insatiable appetite for sex would be provided as a justification as to why Black women could never claim that they were raped, essentially justifying the sexual exploitation of Black women, perpetuating a harmful narrative that is still dominant in today’s societal view of Black women as lewd and hypersexual.

The Jim Crow Era and segregation laws would serve further to institutionalize white supremacy, systemic racism, and sexism, further marginalizing Black women (Baciu et al., 2017). The legalization of racialized segregation and discriminatory practices in government sectors such as education, employment and healthcare would create an additional layer of oppression that would strategically place Black women at the bottom of the barrel, limiting their economic viability and access to resources as there were often different rules for men and women even amongst individuals of the same race (Baciu et al., 2017). The denial of educational and economic opportunities to Black women cemented the perception that Black women were intellectually inferior and only suited for domestic labour, which can be seen in the number of Black women only working as maids during this era (Armstrong, 2012). These systemic barriers promoted race and gender base oppression and had enduring effects on educational and economic disparities.

Misogynoir is also rooted in the negative portrayals of Black women in film, television, print, music videos and social media. As Bailey and Trudy, 2017 point out, media representation plays a crucial role in how Black women are perceived, effectively reinforcing harmful stereotypes and defining Black womanhood. Negative images of Black women can be traced back to minstrels, which depicted Black women as aggressive, abrasive and lacking in intelligence to movies such as *Gone with the Wind*, which shows Black women as the Mammies

to Blaxploitation movies and gangsta rap videos that depicted Black women as little more than prostitutes (Collins, 1997; Pilgrim, 2002). These images have been seen worldwide and contribute to the devaluation and objectification of Black women. Moreover, understanding the historical roots of misogynoir requires recognizing the deep-seated patterns of oppression and discrimination faced by Black women.

### **Stereotypes/Archetypes**

Racial stereotypes are broadly defined as "reflexive and exaggerated mental pictures that we hold about all members of a particular racial group" (University of Notre Dame, 2020). These rigid stereotypes tend to ignore or discard any information inconsistent with the stereotype we have developed about the racial group (University of Notre Dame, 2020). Stereotypes of Black womanhood grew out of the natural consequences of slavery, subjugation, and oppression (Rosenthal & Lobel, 2017). Much like the transnational sale of goods and services, the advent of American television programming and music has led to what Carl Jung refers to as the "collective unconscious" perception of Black womanhood for entertainment (Bobroff, 2020, p.16). Stereotypes affect people's judgment of and behaviours towards others (Rosenthal & Lobel, 2017). Consequently, the impact on Black womanhood is far-reaching and, for the most part, has been at the centre of the ongoing mistreatment and dismissal of the humanness of Black men and women alike.

When racism and sexism are blended and hurled at Black women, it leads to a general perception that their lives are not as valuable or that they can be treated without respect. This anti-blackness and misogyny form the concept of misogynoir and is often overlooked. Therefore, it is important to use an intersectionality framework to understand the stereotypes about Black women (Rosenthal & Lobel, 2017). Womanhood, as mentioned, is not uniformly shared or experienced, and there needs to be more acknowledgment of this particular type of discrimination faced by Black women. Racial gaslighting and racial sexism are things that no other race of cis, trans, queer and lesbian-identifying women experience. It is, therefore,

important that those seeking to work with Black women, no matter their cultural background, understand and acknowledge the intersectional layers of discrimination to address oppression.

Emerging counsellors must first understand that race and gender play a significant role in the mental or physiological concerns of Black women presenting for service. Awareness of these challenges is key. Therefore, it is essential to listen, unpack, acknowledge, empathize and most importantly, to learn to recognize misogynoir and to call it out in our practice and the spaces we occupy. One way to start this process is by understanding the stereotypes that plague Black women namely the Mammy, Jezebel, Sapphire/ABW and the SBW, how they show up, how they are harmful to the mental health of Black women and, most importantly, how they are systematically entrenched. Finally, counsellors must also be aware of the unique experiences of Afro-Canadian women.

### **The Sapphire AKA the Angry Black Woman**

In the aftermath of slavery, Black women became victims of negative stereotypes that have become a staple of mainstream culture. One such stereotype is that of the Angry Black Woman (ABW). According to White (1985), the image of the Angry Black Woman is rooted deeply in American culture and chattel slavery. The ABW stereotype portrays black women as rude, loud, mean-spirited, nagging, emasculating, irascible, aggressive, too straightforward, dominating and overbearing (Motro, 2022; Bailey, 2021; Pilgrim, 2008; West, 2008). The ABW stereotype was popularized on mass media via radio and television but had its roots in minstrel shows (Bailey, 2021; White, 1985). At the height of these minstrel shows, Black women were often played by white men who donned blackface in fat suits to make them look less feminine and, ultimately, less human (Bailey, 2021). These white men would go around on stage fighting or irrationally screaming at the men around them in response to unavoidable circumstances, no matter how small or inconsequential (Bailey, 2021). Minstrels' portrayal of Black women as frightening and domineering would lead to the ABW stereotype becoming entrenched in the social and cultural fabric of society.

The 1930s show Amos' n' Andy cemented the ABW stereotype in popular culture through the character of Mrs. Sapphire Stevens (Bailey, 2022). The brainchild of Freeman Gosden and Charles Correll, two white actors who effectively mimicked and mocked what they thought to be black behaviours and dialects (Pilgrim, 2008). The show's success and the racial characterization of Black women as emasculating and aggressive were not only associated with that character but with Black women on and off the screen. It is also important to note that it did nothing for the image of Black men either, portraying Black men as lazy, con-artist, ignorant and financially inept, to name a few (Pilgrim, 2008). While boosting Sapphire's anger for laughs is easy, it translates very differently in real life. For instance, two of the most famous and influential women, Michelle Obama and Shonda Rimes, have been referred to in the media as ABW.

For the First Lady Michelle Obama, these allegations came from a book written by Jodi Kantor, who painted Ms. Obama as a "tough political player" who had "cross words" with then Chief of Staff Rahm Emanuel and former Press Secretary Robert Gibbs (Heavey, 2012, para. 3). Kantor's book, along with the anti-democratic and anti-black rhetoric of Fox News correspondents such as Sean Hannity, Bill O'Reilly, Rush Limbaugh, Laura Ingraham, and other conservative talk show hosts, added fuel to fire that Ms. Obama was, in fact, the ultimate ABW and often questioned what she had to be angry about (Pilgrim, 2008). According to Pilgrim (2008), as a public figure, Michelle Obama did not fit the mould that white Americans had or knew a Black woman to be. Objectively speaking, she was the antithesis of all the Mammy or Jezebel given that she is a lawyer with an elite educational background, a conscientious and loving mother to her two daughters, married to a successful lawyer and then future president of the United States, a straight size, attractive, in good physical health and a dark-skinned woman who is a civil rights and community activist (Pilgrim, 2008).

Given that the First Lady did not fit the mould of the dominant historical caricature of the Black woman, she would be judged in the media for her traits. Furthermore, her words would be misconstrued as "unpatriotic, ungrateful and radical" when she spoke at a Milwaukee,

Wisconsin political rally, stating, "For the first time in my adult life, I am proud of my country because it feels like hope is finally making a comeback" (Pilgrim, 2008, para. 24). For the media and white America, this statement communicated hatred toward her country and fellow white citizen, which the *New Yorker* commemorated with a cover depicting Ms. Obama as Pam Grier look-alike sporting an afro with a machine gun slung over her shoulder pumping her husband, who is dressed in a traditional Muslim thobe and head cover Taqiyah despite it being widely known that he is of the Christian faith. Not only was this insulting to the Obamas and black people, but it also showed a lack of regard for the Muslim faith and sent a message to Muslim people that their faith and religious practices should be feared.

Additionally, it is crucial to understand that misogyny towards Black women does not just come from white Americans. It is also hurled at Black women by our Black men. For instance, Mrs. Obama also faced similar rhetoric and retribution from Black conservatives such as Mychal Massie (2008), who referred to the Obamas as "devoid of creditable position" (para., 9). He proclaimed that in comparison to other first ladies such as Jackie Kennedy, Nancy Reagan, Barbara Bush, and Rosalind Carter, Mrs. Obama was "just another angry black harridan who spits in the face of the nation that made her rich, famous and prestigious (Pilgrim, 2008, para. 27)." According to the Oxford Dictionary, a harridan is a "strict, bossy or belligerent old woman." The use of the term harridan in combination with angry and Black, in my opinion, sort to belittle the status of the First Lady, dismiss her opinions as invalid, and most importantly sort to reduce the first lady to a harmful, reductive and dehumanizing racial stereotype. Additionally, Massie's 2018 statement is indicative of the popular narrative that people with money, power and fame are not allowed to address/complain about the social injustices of the world and, most importantly, highlight internalized misogyny that, unfortunately, Black men hold towards Black women.

The myth of the ABW has far-reaching consequences that are not only in the media but can be seen in the medical field and the workplace. Unfortunately, not all therapists understand

the unique experiences and social-political dynamics that affect Black women and are often ill-prepared to work alongside Black women. For example, when Black women express anger in the workplace, they are automatically seen as having a personality flaw, less capable and worse performers rather than being attentive to detail and tenacious (Motro, 2022). The expressions of anger, especially in the workplace, are a luxury that Black women have not yet earned.

### ***Impact of the Angry Black Woman Archetype***

The notion of the ABW is not only pervasive but damaging to the private and public persona of the Black woman and has consequences for how we experience and navigate the world. Black women are often perceived as inherently angry, confrontational, aggressive, and emotionally irrational as opposed to being assertive, setting boundaries and stating their needs, especially in tenuous situations. The impact of this archetype is far-reaching, extending to interpersonal relationships, professional settings, and wider societal perceptions (Woods-Giscombé, 2010). Unfortunately, Black women who confront this narrative are often dismissed and silenced as being too sensitive, limiting the emotional range afforded to Black women and making it difficult to have an open dialogue about the negative implications of being perceived as an angry black woman (Woods-Giscombé, 2010; Cooper, 2018). This archetype has implications for mental health as Black women feel pressure to suppress valid emotions or concerns (Woods-Giscombé, 2010; Cooper, 2018).

### **Reclaiming and Redefining the Angry Black Woman Narrative.**

When it comes to anger, men are allowed to be angry because it is tough and macho. White women are allowed to be angry when demanding change or calling for action, yet when Black women express dissatisfaction or even a hint of anger, they are immediately seen and treated as sapphires. Being labelled an ABW/sapphire is a label that most Black women fear (Ashley, 2014). However, Black women have many reasons to be angry and should be afforded the right to express their anger and frustration and have those concerns heard and addressed accordingly (Ashley, 2014). For starters, Black women are more likely to die during childbirth

(Working Together to Reduce Black Maternal Mortality | Health Equity Features | Cdc, 2023), earn less money, accrue less wealth (National Partnership for Women and Families, 2022), overrepresented in the correctional system (Goodwin, 2020) and under-represented in the corporate setting, are less datable and have poor success on dating apps (Brown, 2018); are less likely to get married more likely to be refused pain medication when they seek health care; less likely to be interview for a job especially if they have a black-sounding name and more likely to be stopped and frisked (Nolan, 2021). In a bid to avoid these labels, Black women not only suppress disclosures of anger but also minimize and, in many cases, ignore the impact of suppressing their anger on their lives (Ashley, 2014). As a result, Black feminists opted to educate and encourage Black women to reclaim and redefine how they view and ascribe meaning to the ABW term.

According to Wade (2022), the historical use of the term ABW/the sapphire serves no other purpose than to render the Black woman invisible and silent. Moreover, by weaponizing the ABW stereotype, one seeks to discredit Black women by signalling that they are overreacting and being hypersensitive (Cooper, 2018). The act of circumventing one anger has been drilling into every little Black girl since birth despite, as Wade (2022) puts it, being born in rage because of systemic oppression, sexism, discrimination, and trauma. By reducing a Black woman's anger to only affective expressions, we miss the opportunity to explore what is beneath the anger. For instance, the constant stress, and the threat of racism, the lack of acceptance or shame levied on the existence of Black women, according to Ashley (2013), results in a state of hyperarousal which elicits a fight or flight response that is often perceived as anger or aggression. Furthermore, Wade (2022) views the exploration of a Black woman's anger as adding context to the reality of being a Black woman and legitimizing their experiences.

Anger is crucial to the Black woman's survival (Wade, 2022). Without anger, according to Wade (2022), it is very likely that Black women and men would still be enslaved, as it is well

known that slavery did not end because our white overlord just magically had a change of heart and decided to stop slavery. Slavery ended because Black people staged rebellions and fought for equal rights and freedoms. For instance, women like Rosa Parks, Ida B. Wells, Harriet Tubman, and Sojourner Truth used organized and justifiable actions to express their outrage over social injustice (Ashley, 2013). Black feminist such as Cooper (2021), in her book entitled *Eloquent Rage*, reminds us that anger is a source of energy that fuels our ability to fight for what is right and just. Cooper (2021) speaks of Serena Williams eloquent rage as the driving force behind her dominance as a powerful tennis player. However, the media critics would disagree as was depicted by a sexist and racist caricature of Williams by one Mark Knight of Australia's *Herald Sun*; she would be dubbed as another Angry Black Woman because she retaliated.

Williams was accused of receiving coaching from the stands by her coach, which amounted to cheating. In frustration, Williams would break her racket and call the referee a "thief" after he took a game point away when she did not cower down during her 2018 US Open Final match. While I agreed that Serena was angry, the onslaught of negative racialized commentary and "anti-Black caricatures of the Jim Crow era only served to re-enforce the idea that Blacks were inferior and Black women could only be sexualized, nurturing, or full of rage" (Cameron, 2018, p. 23). Imagery such as cartoons produced by Knight have and will continue to reinforce anti-blackness and support the oppressive systems on which they were founded (Cameron, 2018).

Ironically, when Aryna Sabalenka was caught on camera angrily pounding and breaking her racket after losing in the final match to Coco Gauff in the US Open final on September 9, 2023, none of the news headlines read Angry/bitter White woman. The headlines following Aryna's angry outburst, for lack of a better word, were tame compared to those used to describe Serena's outburst. Aryna's actions were described as a disappointment, an outburst, frustration, and a heartbreaking defeat (Kane, 2023). These headlines represent how enduring racist stereotypes are and how, when assigned to a Black woman, they conjure anti-black imagery

and unfounded racialized stereotypes that stifle a Black woman's right to express her emotions without fearing the consequences of her actions.

### **The Strong Black Women**

The amalgamation of strength, independence, resilience, emotional fortitude, nurturing, and invulnerability characterizes the Strong Black Woman (SBW) archetype, which shapes black women's behaviours and self-perceptions (Geyton et al., 2020). Rooted in the colonization, enslavement and forced migration of Africans, the characterization of Black women as inherently strong supported the justification that Black women are physically and emotionally stronger than their white counterparts and, as such, can bear more hardship, pain, struggle and mistreatment at the hands of others and systems of oppression robbing Black women of their humanity (Geyton et al., 2020).

The SBW archetype can be traced to another trope, "the mammy," and the "strength" and fortitude she must muster to survive despite the adversities she has to face (Geyton et al., 2020, p. 6). Moreover, the idea behind showing strength can be attributed to the intersectional and multilayered lived experience of being Black and female. Black women must navigate racism, sexism, and oppression during and beyond enslavement. While rejecting weakness and reliance on others, the SBW character lends itself to required displays of strength and emotional repression (Geyton et al., 2020). When striving to live up to the demands of their families, workplaces, and broader social circles, Black women who internalize the SBW narrative frequently endure silent suffering (Geyton et al., 2020). The quiet suffering may be attributed to what West (2008) has conceptualized as performative strength, which is the idea of appearing strong but not feeling strong and can also be traced back to slavery. Enslaved men and women had to adapt psychological and behavioural strategies to not only appear content to mask the dehumanizing and brutal conditions of slavery but also as a way of masking discontent as resistance was not entertained (West, 2008). Therefore, emotional suppression symbolizes resilience, independence, and survival (West, 2008).

### ***Impact of the Strong Black Woman Archetype***

Performative strength, according to (Carter and Rossi, 2019), even extends to maintaining aesthetic beauty standards. Black women spend an inordinate amount of time and financial resources making sure they present as "put together" or resilient as a means of maintaining the motif of the SBW/ superwoman. According to Carter & Rossi (2019), these beauty ideals are rooted in the dominant culture, which sees outward appearance as an indication of how well one is doing, which can signal performative strength for Black women. Carter & Rossi (2019) highlight an excellent example of performative strength using a scene from Shonda Rhimes's hit television series "How to Get Away with Murder" where the lead character Annalise Keating is a brilliant legal strategist who is unflappable and confident in the courtroom. However, when she is alone in the privacy of her home, we can see a "softer and more vulnerable side of Annalise when she sits down and can remove her wig, clothes and makeup, which is symbolic of her being able to remove her daily performative armour so to speak.

According to Anyiwoo (2022), the SBW is sociocultural and may have served as a positive aspirational coping and survival mechanism in the face of engendered racialized discrimination and marginalization passed on from Black mother to their daughters. The narrative is that Black women are mentally and physically stronger than their white counterparts, which is often about their experience with chattel slavery (Harris-Lacewell, 2001). Socialization around being perceived as an SBW starts for most young girls in the pubescent years as a lesson on how to navigate racism and sexism and is thought to help Black girls manage stress, increase their cultural pride, and promote resilience (Anyiwoo, 2022). Other perceived benefits of this schema include the cultivation of a "positive self-image, sense of self-efficacy, and commitment to caring for one's family" (Hunter & Watson, 2016, p. 426). A similar practice happens for young Black boys on how to navigate how they should respond and behave if they

are racially profiled by the police so that they return home alive (Maynard, 2017). Unfortunately, these practices are viewed as a rite of passage in the Black community.

Racial discrimination and sexism are detrimental to the mental health of Black women, and despite being rooted in a strength-based approach to combating/coping, the impetus to be perceived as an SBW has been linked to unfavourable results for mental health. For instance, Black women who ascribe to this schema were found to be emotionally inhibited and had lower self-esteem (Harrington et al., 2010; Stanton et al., 2017). Some Black women reported that because of being perceived as strong, they had internalized the SBW schema and reported receiving less emotional support, emotional burnout, emotional self-neglect and more psychological distress, such as exhaustion and stress-related mental health concerns (Watson Singleton, 2017). Another study found that SBW schema is associated with mental health challenges such as increased depressive symptoms, anxiety, hostility, sensitivity, and loneliness (Donovan & West, 2015; Liao et al., 2020; Stanton et al., 2017). While not explicitly, the intersectionality of Black women as identity as both women and members of the Black community leads to Black women prioritizing communal needs over personal aspiration, effectively limiting personal agency (Donovan & West, 2015). Additionally, the SBW archetype has the undertone of empowerment, activism, and advocacy for social change at its core, but changing the burden of social change can be exhausting and leads to emotional burnout (Watson Singleton, 2017).

The physiological obstacles, along with racial disparities and limited access to sufficient healthcare, as well as social, political, and economic marginalization linked to the Strong Black Woman (SBW) archetype, are also significant. Wood-Giscombe (2010) points out the limited understanding of the connection between stress, coping mechanisms, and health outcomes. However, Black women encounter elevated rates of adverse health effects. Examples include heightened occurrences of cardiovascular diseases, obesity, lupus, and unfavourable childbirth

outcomes, which detrimentally affect both the mother and child, contributing to premature mortality (Wood-Giscombe, 2010).

### **The Mammy Archetype/Over-Nurturing Black Woman**

The Mammy archetype has cemented its place as an enduring offensive racialized caricature of Black womanhood during slavery. The Mammy was an essential part of the white family as she was often depicted as a pitch-black, happy, obese, asexual, large-breasted, elderly, uneducated Black mother figure, who was at times coarse but a loyal servant to her white master and doting wet nursing their children while harbouring and treating her own children with disdain (Green, 2018). She was a model of what a good, honourable, and faithful enslaved person would look like, reinforcing the hierarchical structure of white superiority and black contentment with being enslaved (McElya, 2007).

Unfortunately, this romanticized fictional view of this doting and faithful enslaved woman would find her way to our television screen and in minstrels by way of degrading and dehumanizing blackface performances. The Mammy caricature would gain even more notoriety and become an enduring stereotype in 1893 when she became the face of the well-known Aunt Jemima pancake mix, which was only rebranded in 2021 amidst the outcry of the Black community (McElya, 2007; Wallace Sanders, 2009). The Mammy caricature was used to serve the political, social, and economic interests of white America, popularizing the idea that all Black women were less than and only lived to serve their white families (McElya, 2007). These ideals legitimized economic discrimination because they implied that Black women were only fit to be domestic workers and were happy to be house servants.

Created by white Southerners post-Antebellum, the Mammy was deliberately constructed to suggest the asexuality and ugliness of Black women as a means of dismissing any claims of sexual exploitation on the part of white enslavers despite the numerous accounts of the same (Green, 2018). The de-eroticization of Black women afforded white wives a sense of safety and helped them maintain a false sense of superiority over Black women (Green,

2018). However, it is noteworthy that no matter the physical appearance of the “help,” Black women and girls remained vulnerable to sexual assault at the hands of white and Black men (McElya, 2007, p. 96). Additionally, during the Jim Crow era, with the only race-based job segregation, only domestic jobs were afforded to Black women (Green, 2018). Consequently, black women were only allowed to work in the occupational status of a house servant. The portrayal of the Mammy can be seen in the role played by Hattie McDaniel in the movie *Gone with The Wind*, which won her an Oscar for Best Supporting Actress and in *The Help*, played by Viola Davis. More recent and possibly more well-known representations of the Mammy can be seen in Tyler Perry’s portrayal of *Madea* and Martin Lawrence as *Big Momma*.

### ***Impact/Legacy of the Mammy***

According to Collins (2004), the intersection between race and gender continues to affect multiple facets of Black women's lives, which is referred to as "new racism" (p. 5). New racism refers to a situation of permeance and change that continues to maintain structural and systemic modes of oppression and discrimination despite the apparent social, political, and economic change (Collins, 2004). Moreover, the imagery of Black women and men has been fuelled by the global reach of mass media, which has led many to generalize about the attributes of Blacks, resulting in transnational racial inequality (Wingfield, 2007). The theme of being a controlling black woman has now shifted to Black professional women, who are now referred to as the "Modern Mammy."

The modern Mammy in the workplace setting is expected to sacrifice her personal needs to show her loyalty to her employer or institution (Wingfield, 2007). Black women are expected to conform, or risk being referred to as the "educated Black bitch or Black bitch" (Collin, 2004; Wingfield, 2007). According to Collins (2004), the educated "Black bitch" is a Black, educated, professional woman "with money, power, and good jobs [who] control their bodies and sexuality" (p. 145). Nonconformity to the stereotypical expectations of the sacrificial employee leaves Black women vulnerable to and subject to gendered racism (Wingfield, 2007).

Much of the dysfunction in Black families has been levied on the backs of Black mothers. In the 1960s, Black motherhood became the poster child of irresponsible procreation and single parenthood, all under the guise of manipulating the system for a bigger welfare cheque, giving rise to another trope, the Welfare Queen (Roberts, 1997). The Welfare Queen was also called the "Bad Black Mother" (Collins, 2004, p. 26). Additionally, even the violence perpetuated by Black men was attributed to single-parent Black households, effectively massing the culpability of the justice system that unfairly and disproportionately criminalizes and incarcerates Black men (Dowd, 1995; Collins, 1991). Consequently, single Black mothers face more scrutiny when they seek to access government services and are often treated poorly by service providers for simply being Black single parents (Collins, 2004).

Most importantly, the Mammy caricature left many with the view that Black motherhood was the antithesis of white motherhood, further creating a subjugated hierarchical structure between white and Black women (Collins, 1991). While motherhood, in white dominant society, was celebrated, the relationship between a Black mother and child was viewed as one devoid of nurturing, care, and tenderness (Collins, 1991). Furthermore, the relationship between Black women and men continues to perpetuate this negative stereotype. According to Collins (1991), Black single motherhood is often blamed on the Black woman as she is often viewed as "too strong, castrating and unfeminine," leading to a generalized view that Black men abandon their women based on them being too domineering and aggressive (p.73).

Unfortunately, this negative matriarchal view of Black women as partners has impacted Black masculinity and has resulted in many Black men rejecting partnership/marriage to Black women while actively seeking partnership with white women and women of other races based on being too assertive and domineering (Collin, 1997). For instance, according to Banks (2011), a study found that seven out of ten Black women are unmarried, and three in ten will never be married. However, Black women, especially those with a darker skin tone woman, face an additional barrier to finding partnership: colorism (McClinton, 2019). McClinton (2019) points out

that on dating apps, darker skin-toned women are picked over because of the internalized idea that beauty and attractiveness are associated with lighter skin and approximation to whiteness, i.e. Black women who can pass the brown paper bag test. The brown paper bag test was rooted in internalized racism and had its birth in Black elitist university culture as a means of choosing a suitable mate, as anyone darker was viewed as unclean and unintelligent (McClintion, 2019; Gates Jr & West, 1996).

### **The Jezebel Archetype**

The Jezebel archetype emerged as the antithesis of the Mammy. While the Mammy was viewed as the asexual good and faithful wet nurse and maid to her white enslaver, the Jezebel was viewed as salacious, alluring, lewd, worldly, beguiled, tempting and a seductress who lacked self-control, morality, modesty, and self-respect due to her hypersexuality (Collins, 1991; Pilgrim, 2002). The Jezebel stereotype emerged as a justification for non-consensual sexual relationships between white enslavers and Black enslaved women (Collin, 1997; Pilgrim, 2002). Despite enslaved women being property with no rights, a Jezebel was conceptualized and portrayed as a woman who had an insatiable need for sex that she desired not only Black men but also white men, which meant that she could not be and was not a victim of rape by white men (Pilgrim, 2002). The hypersexualization of Black women served to reinforce the institution of slavery, where nakedness on the part of women was viewed as a lack of morality, incivility, and a lack of sexual restraint despite the enslaver's part in keeping these men and women unclad for sale (Pilgrim, 2002). Additionally, because Black bodies were the property and essentially the producers of future enslaved people, they were frequently pregnant, which gave credence to the idea that Black women were promiscuous and the hyper-sexualization of Black girls (Pilgrim, 2002). Essentially, the Jezebel stereotype was used to excuse sexual exploitation and to rationalize the enslavement, forced reproduction and sexual coercion of Black women.

At the heart of the Jezebel trope lies the objectification and exploitation of Black women's bodies and the oppression of their sexuality to justify white superiority (Collins, 1997).

Unfortunately, the objectification and sexualization of Black women did not stop with the abolition of slavery. The enduring legacy of the Jezebel stereotype has now become the "modern-day Hoodie Mama and Gold-digger (Collins, 1997). The "hoodie Mama" is the reincarnated version of the Jezebel but without the institution of slavery (Collins, 1997, p. 734). Whereas the gold-digger uses her body and sexual prose to trap wealthy men as they exploit them for money (Collins, 1997).

Blaxploitation movies of the 1970s that portrayed Black women as sexually aggressive deviance did nothing to help the view that Black women were not always sexually available (Pilgrim, 2002). These movies typically depicted the glamorized lifestyles of pimps/outlaws or rebel heroes and the Black women they engaged with, who were often depicted as little more than prostitutes (Pilgrim, 2002). The sex scenes in these movies were often graphic and exploited the sexuality of light-skinned Black women such as Pam Grier, even in the leading role of Foxy Brown and or Coffy. Blaxploitation movies resulted in the Jezebel replacing the Mammy as the dominant image of Black women in mainstream media (Pilgrim, 2002). The Jezebel caricature can also be seen in the gangsta rap era, where predominantly light-skinned girls pranced and danced around nothing but their underwear, giving rise to the employment of Black women in the role of video vixens (Pilgrim, 2002). These portrayals of Black women unfortunately continue to dominate how Black women as a group are perceived.

### ***Impact of the Jezebel Stereotype.***

The enduring and regrettable perpetuation of the Jezebel racial and sexual stereotypes continues to manifest itself today through a political and cultural landscape and unjustly shapes the perception that many people have of Black women and girls. An alarming example of this is the perception that Black girls as young as five are often unfairly perceived and deemed as less innocent than their white counterparts of a similar age and are presumed to possess more knowledge related to adult subject matters (Epstein et al., 2017; Moses, 2021). Furthermore, Black women experience workplace sexual harassment at a rate three times higher than their

white counterparts and are disproportionately at a higher risk of sexual violence (Barlow, 2020). For instance, when Black survivors of rape report said incident, they are often considered to be more sexually promiscuous than white women, are more likely to have the experience invalidated as rape, are often held responsible for their assault, and are more likely to be discouraged from reporting said incident to the authorities in comparison to white victims of sexual violence (Foley et al., 1995; Donovan, 2007). Having one's experience questioned and scrutinized leads to a "culture of silence" and an internalized view that, as a victim, they are not worthy of support, primarily if their presentation reflects those associated with the Jezebel stereotype (Kelley, 2023, p. 140). Furthermore, media portrayal exacerbates the objectification of trafficked Black women compared to their white counterparts, reinforcing harmful stereotypes (Anderson et al., 2018).

Unfortunately, the current cultural climate fails to empower Black women to reclaim control over their sexual agency. Consequently, Black girls face restrictions on their freedom and are not afforded the same liberties as white girls, as they must constantly worry about their attire and how their bodies are perceived (Moses, 2021). Additionally, studies have shown that sexualization and objectification result in cognitive and emotional mental health challenges, such as decreased confidence and comfort in one's body, which can result in negative body image issues such as guilt and anxiety (American Psychological Association, 2007). Sexualization is also linked to eating disorders, low self-esteem, and mood-related mental illnesses such as depression (APA, 2007). Furthermore, a girl's ability to develop a healthy sexual identity may be negatively impacted by being sexualized at a young age (APA, 2007). The legacy of colonization and slavery has established a society where Black women endure routine objectification, harassment, and abuse without adequate consequences. The Jezebel stereotype and the hypersexualization of Black women and girls contribute to the social acceptance of violence against them, underscoring a distressing and longstanding issue.

### **Misogynoir and Dominant Racial Stereotypes in Canada**

Canada, as a country, has positioned itself in the world as one of the best places to live and work. For instance, a Google search for Canada's position in the world reveals that Canada is ranked the second best in the world, just behind Switzerland amongst 85 other countries based on ten sub-categories (U.S. News, 2022). Regarding categories, Canada is ranked second overall regarding racial equality and sixth regarding women's issues (U.S. News, 2022). As an immigrant and a Black woman who has called Canada my home for over two decades, I do not dispute this ranking; I am also aware that there are limited studies and published data that adequately highlight the plight of Black cis and transgender women as it pertains to our intersectional existence as being Black and female-identifying and how we are treated as a racialized minority. However, according to Maynard (2017), there is much evidence to suggest that misogynoir is alive and well in Canadian society and is often perpetuated by government institutions and agencies in a manner that devalues our humanity within a larger continuum, resulting in systemic and structural oppression and discrimination perpetuated predominantly through state violence.

The issue of racialized oppression and harm to Black cis and trans women is not only complex but, in Canada, is largely invisible, and it is often shrouded in bureaucratic red tape, laws, and legislation. According to Maynard (2017), state violence has been perpetuated against impoverished Black women on welfare, giving rise to the stereotyping of Black women as "Welfare Queens/Cheats" (p. 132). The use of stereotype "Welfare Queens" was used to demonize all Black women in public assistance programs as women who were defrauding the public assistance built on the backs of hard-working taxpayers, leading to increased government surveillance of the lives, homes, and relationships (Maynard, 2017, p. 132).

The stereotype was made famous by President Ronald Regan and other conservative politicians in the 80s based on the actions of one woman, Linda Taylor, who had defrauded the social assistance program out of \$154000 while driving a Cadillac and wearing expensive coats

(Maynard, 2017; PBS Newshour, 2019). Used as a political popularity tool, the idea of welfare cheat would make its way to Canada in what was deemed as a predominantly fabricated attempt by Canadian politicians to identify and repress undeserving welfare recipients (Maynard, 2017). Given the history of exploitation and devaluation of Black women, these women were the most impacted by measures to stop and expose welfare fraud, as they represented the bulk of low-income earners (Maynard, 2017). The push to investigate and crack down on welfare fraud in Canada was based on the unfounded and unsubstantiated claims made by an immigration officer who alleged that Somalian refugees could easily collect up to "\$100000 in fraudulent" welfare claims (Maynard, 2017, p. 132).

The widespread push to stop welfare crime resulted in massive "cutbacks in social assistance benefits and the criminalization of welfare" recipients, resulting in added hardship and children being removed from the homes of those convicted of said crime (Maynard, 2017, p. 133). Convicted immigrants were at times deported, and many would report intrusive incidents of racial profiling and intrusion in the personal lives of recipients, breaching any imaginable rights to privacy (Maynard, 2017). Additionally, given the far-reaching hand of the investigator, no duty of care was taken when investigating this offence. As such, some investigators resorted to physical intimidation, breach of privacy laws, threats, and harassment (Maynard, 2017, as cited in Carruthers 1996, p. 244). Women in intimate partner relationships who had identified themselves as single feared having an intimate partner, while those in abusive relationships remained in them due to fears of losing their benefits (Maynard, 2017). Unfortunately, these practices continue today, resulting in undue hardship, but they do nothing to improve the social standing of Black women living in poverty.

Another misogynist, racial-based gender state practice is the policing of Black women's bodies in public spaces. Rooted in the Jezebel stereotype that labelled Black women as hypersexual, many Black Canadian women in public spaces are assumed to be involved in the sex trade, I being one of them and can be found in the stories of Audrey Smith and Stacey

Bonds (Maynard, 2017). These practices result in a higher level of racial profiling for Black women for possible prostitution offences, leading to higher incidences of criminal charges levied for those involved in the sex trade (Maynard, 2017). The level of racial profiling is higher for Black trans women, resulting in what Grant et al. (2011) refer to as "walking while transgender" (p. 263). While there are not many Canadian statistics on the matter, Viviane Namaste, a Canadian transgender feminist scholar, has written extensively regarding the heightened levels of profiling amongst racialized and immigrant transgender women (Namaste, 2005). Additionally, Black cis and transgender women face increased scrutiny and profiling from Canada's immigration and border protection agents under Bill C-10, which gives Border agents the power to refuse entry or work permits to Canada on the suspicion that these women could be potential/possible sex workers (Maynard, 2017).

While these laws and regulations, on the surface, appear to be geared towards protecting vulnerable women, Maynard (2017) argues that they are based on "respectability politics," creating a "duality" between those who are wrongfully profiled and those engaged in sex work, resulting in a Black woman's "humanity" being "contingent on sexual purity" (p. 140). By demonizing sex work, we risk marginalizing and stigmatizing women and limiting their source of income and security (Maynard, 2017). Moreover, given the criminality of sex work, many have been the recipients of interpersonal violence from aggressive clients but refuse to report these incidents to law enforcement, resulting in sex workers feeling unprotected and silenced (Maynard, 2017).

Misogynoir also shows up in the number of Black women incarcerated due to the war on drugs. Black women are overrepresented in the prison system because they are frequently profiled by law enforcement and border guards. For instance, in the 1980s, when then Prime Minister Brian Mulroney declared a war on drugs, Black women, mostly of Caribbean descent, were searched at a rate five times that of Caucasian travellers on suspicion of drug trafficking (Maynard, 2017). Women using their bodies to transport/courier illicit substances are referred to

as "drug mules," which is not only innately derogatory but also reflects racialized gender bias (Maynard, 2017, p. 144). Understanding the bias associated with being referred to as a "drug mule" is particularly important when we reflect on the history of slavery, especially as it pertains to Black women being viewed and treated more like "animals than humans" with limited intelligence and to have a higher pain tolerance (Maynard, 2017, p. 146).

Additionally, being likened to or reduced to a harmful label reflects how undervalued Black women are and ignores the economic hardship that drives these women to high risk relatively low-paying modes of work (Maynard, 2017). Unfortunately, gender-based poverty is higher for racialized, gender diverse, disabled and single mothers, constricting their agency and limiting their choices (Maynard, 2017). Therefore, racially profiling Black female travellers from third-world countries is yet another way of labelling black women as "good" or "bad" while ignoring the structural and systemic issues that continue to oppress Black women. Profiling practices of the Canadian government and law enforcement agencies resulted in the widespread belief that Black women are criminals engaged in the sex and drug trade while comfortably living off social assistance as they seek to defraud the system should be understood as racialized gender violence that dehumanized Black women and their experience to harmful and demeaning stereotypes that influence how they are treated and perceived by others.

### **The Complexity of Racism and its Impact on Health and Wellness.**

Racism has predominantly been defined as a set of actions, behaviours, attitudes, and beliefs as well as cultural and institutionalized policies that rationalize the oppression, marginalization, and domination of a set of people based on their genetic phenotype, for instance, the colour of one's skin as inferior (Clark et al., 1999). While this definition captures the historical and primary intent and act of racism, Black psychologists have identified that the definition is limited and fails to account for the different ways in which racism is experienced, institutionalized, acculturated, and reinforced within societal norms, behaviours, and social

constructs (Lewis, 2023). Consequently, models have emerged to redefine and name the various manifestations of racism alongside an intersectional framework that seeks to illuminate the confluence between racism, sexism, and misogyny (Lewis, 2023). Most importantly, the rich intellectual work of Black psychologists and feminists has sort to defined, named, and identified the impact of racism on the psychological and physiological health of Blacks. As such, models such as the Biopsychosocial Model of Racism and the Multidimensional Conceptualization of Racism-Related Stress have been used to highlight the link between racism and health (Lewis, 2023; Clark et al., 1999 & Harrell, 2000).

Despite the many attempts of Black psychologists to have the Diagnostic and Statistical Manual of Mental Disorders (DSM) recognize extreme bigotry as a mental health disorder, there is no mention of racism, racial abuse, prejudice, or bigotry in the text or index (Toussaint, 2002). However, despite the absence of racialized diagnoses, Black psychologists have expanded the definition of racism to provide a more comprehensive overview of the far-reaching mental and psychological impact of racism. The biopsychosocial model posits that an environmental stimulus that is appraised as racist produces an "exaggerated psychological and physiological stress response" (Clark et al., 1999, p. 806). Once a stimulus is appraised as racist, stress and coping responses are activated, dependent on several mediating and moderating factors such as skin tone, age, gender, socioeconomics, and self-esteem (Lewis, 2023).

Clark et al. (1999) also states that mediating variables such as adaptive and maladaptive coping skills and strategies explain the link between health and racism, which include psychological stress responses such as anger and sadness. There is also a heightened risk of a physiological stress response when one encounters racism over a prolonged period. Physiological stress responses result in the activation of the hypothalamic-pituitary-adrenal (TPA), which results in increased cortisol levels in the body, and with increased stress comes increased cardiovascular activity that can result in strokes and hypertension (Clark et al., 1999).

The Multidimensional Conceptualization of Racism-Related Stress is another model that is widely referenced and used to explain and establish a link between racism and health. Developed by Dr. Shelly Harrell, the model stress and coping framework theorizes that there are six types of race-related stressors, namely a racism-related life event such as being called a racial slur, vicarious racist experience such as bearing witness to a racist incident, daily racist micro-stressors such as those associated with microaggression, chronic-contextual stressors such as limited access to safe housing, collective experiences such as the impact of George Floyd's death being broadcasted on television and around the world, and transgenerational transmission such as the impact of colonization and the racialized trauma Blacks experience from being used as enslaved people (Harrell, 2000; Lewis, 2023). Like Clark's model, Harrell's model also highlights five domains and variables that result in race-related stress and health outcomes, such as hypertension, anxiety, and posttraumatic stress disorder, along with other functional and social factors such as low on-the-job and academic performance (Harrell, 2000). Additionally, while not explicitly stated, Harrell's (2000) model is potentially the first model to posit that other forms of discrimination, such as sexism, can impact one's psychological and physiological health and well-being.

The work of Harrell (2000) and Clark et al. (1999), along with a review of empirical studies, would provide evidence and confirmation that experiencing racism has a biopsychosocial impact. For instance, a large-scale metaanalysis of 333 articles by Paradies et al. (2015) found that racism is associated with poorer mental, general, and physical health, which includes depression, anxiety, increased blood pressure, low infant birth weight and engagement in unhealthy behaviours such as smoking and increased consumption of alcohol. Likewise, in a metaanalytic of 134 samples, Pascoe and Smart Richman (2009) found that the same results, including increased psychological distress and increased symptoms of depression and cardiovascular activity related to increased stress response and subsequent heightened

cortisol levels, but were unable to establish a direct causal relationship between perceived discrimination and health. Moreover, these studies consistently found that individuals who experienced more frequent acts of discrimination and stress related to racism had more of a psychological than a physiological impact (Paradies et al., 2015; Pasco & Smart Richman, 2009).

Although the work of Harrell (2000) and Clark et al. (1999) identified that demographic variables might influence perceptions of racism, absent from these two models is the intersection between racism and sexism. Coined by Kimberle William Crenshaw (1989), Intersectionality highlights the complex intertwining nature of social identities, systems of oppression and discrimination unique to Black women. Therefore, Black women not only experience racism and discrimination solely on the colour of their skin but also based on their gender. Categorically, the intersection between racism and sexism results in gendered racism (Essed, 1991). Gendered racism in patriarchal societies continues to affect Black women and women of colour unfairly and unjustly in staggering proportions due to "inequitable social institutions" (Laster Pirtle et al., 2021, p. 169). For instance, Laster Pirtle and Wright (2021) pointed out that gendered racism was at the heart of many of the inequalities black women faced during the COVID-19 pandemic. According to Laster Pirtle and Wright (2021), because many Black women already occupied disadvantaged positions in the household and held occupational status/jobs in healthcare institutions, they were not only at a higher risk of contracting but also of spreading the virus. In Canada, while our deaths from COVID-19 were far less than those of the United States, according to a Statistics Canada report higher COVID related mortality was higher amongst racialized populations, with Blacks accounting for 49 deaths per 100,000 population, which was lower in all other racialized populations (Government of Canada, S. C., 2022).

Misogynoir is grounded in intersectionality theory and seeks to highlight the misogyny and bias directed at Black women resulting from an oppressive system that seeks to limit and

denigrate Black women (Bailey & Trudy, 2018). Technically, the concept dates to slavery and slave ownership, where derogatory terms were used to describe enslaved Blacks, such as "ape," "monkey," "beast," and even "dog" (Hart, 2014, p. 665). Consequently, the physical attributes of Black women have been and still are commented on in disparaging ways that reveal the repugnant history of anti-black sexist misogyny. The history of the transatlantic slave trade coupled with mainstream media, characterization, cartoons, minstrel shows and commodification of the Black woman's persona and body in reductive ways has been universally ascribed, ignoring the complexities of Black experience, their emotions, and the full depth of Black women's stories. While generalizations have their place, they are also shortcuts and, in the case of Black women, limit our individuality, are discriminatory and limit our progress as a marginalized race of people despite these tropes being rooted in the Black American experience. These tropes are not only harmful but also result in internalized misogyny, psychological and physiological concerns.

### **Mental Health Outcomes and Disparities Experienced by Black Women**

The emotional and psychological health of Black women, according to Waldron (2020), needs to be conceptualized broadly and must include a cross-sectional analysis of intersecting factors such as "genetic factors, state violence and other structural inequities and oppressions based on race, gender identity, sexual orientation, citizenship, socioeconomic status, and other identities" as they provide evidence and a backdrop for understanding the trauma that Black women experience that places them at increased risk of experiencing mental health challenges (p. 12). For instance, the trauma experienced by Black women can be traced to race and gender-based violence (i.e. homophobia and transphobia), their interaction with the state and state institutions, as well as their intimate and other familial relationships (Waldron, 2020).

A factor that can significantly impact one's mental health is migrating to a foreign country. According to Okeke-Ihejirika et al. (2019), African women who migrated to Alberta, Canada, had their mental health significantly impacted by the stressors they experienced as they tried to

transition and integrate into Canadian culture. Stressors identified include the devaluation of their credentials, language barriers, and economic stressors related to the inability to find suitable employment and the shift in gender roles that left some women susceptible to intimate partner violence and race and gender-based violence (Okeke-Ihejirika et al., 2019).

Consequently, many of these women experienced higher rates of depression when compared to their male counterparts, especially given the lack of social support (Okeke-Ihejirika et al., 2019).

Additionally, it was also found that African immigrant women with a history of trauma pre-migration had elevated rates of anxious distress, mood disorders, complaints of stress-related physical and psychological ailment such as chronic pain and symptoms associated with post-traumatic stress disorder (PTSD) such as hypervigilance and poor sleep due to night terrors especially as it pertains to the sexual violence they experienced (Okeke-Ihejirika et al., 2019). Furthermore, when compared to other women, it was found that African American women were at an increased risk of experiencing PTSD due to the prevalence of infant mortality (Hauff, 2017).

Depression and mood-related mental health concerns tend to be high in Black women, which Martin et al. (2013) found to be associated with “racial disparities, microaggressions, poverty, cultural socialization, social health, obesity, and diabetes, and exposure to interpersonal and community violence” (p. 3). The study also reports that Black women have a tendency towards masking their dysphoria and other mental health challenges due to the self-imposed pressure to face and overcome adversity all while keeping it together, i.e. maintaining productivity at work, taking care of the family and meeting social obligations (Martin et al., 2013). For low-income Black single mothers, the risk of depression is even higher. Depression can be linked to social, economic, mental, and psychological factors such as self-esteem, postpartum depression, income and housing insecurity, and having a special needs child, to name a few (Atkins et al., 2020; Waldon, 2020).

Gender minority Black women are said to experience more significant mental health challenges in comparison to their heterosexual peers and white sexual minority counterparts (King et al., 2008). While the studies are limited, they suggest that Black sexual minority women experience higher levels of depression, especially among trans women (Calabrese et al., 2015). Studies also show that depressive symptoms among trans women positively relate to an increased risk of suicide attempts and ideations (Bukowki et al., 2019). Some of the factors contributing to the depressive state of transwomen include IPV associated with their intersecting identity, gender-based discrimination, stigma, economic hardship associated with discriminatory hiring practises, being involved in sex work and other socioeconomic factors (Bulowki et al., 2019). Childhood victimization, childhood physical abuse and IPV amongst Black bisexuals and lesbians have also been identified as putting these women at an increased risk of meeting the clinical diagnosis criteria for life-long depression (Waldron, 2020).

Anxiety was also found to be high in Black women. It was closely related to perceived racialized discrimination concerning IPV and social and environmental insecurities such as adequate housing and or residing in high-crime areas (Lacey et al., 2015). It was also found that anxiety was higher in highly-educated African-American women when compared to their less-educated counterparts (Lacey et al., 2015). Additionally, less educated Black women were not only at a lower risk of developing anxiety, less likely to develop a substance use disorder, and reported few incidences of suicidal ideations and other mental health disorders (Lacey et al., 2015). Sexual minority Black women, especially those belonging to the LGBTQ community, were also found to have a higher prevalence of anxiety and depressive/mood-related disorders that are typically co-morbid with substance misuse (Sutter & Perrin, 2016).

African American college and university students enrolled in predominately white institutions report high levels of psychological stress as it pertains to intellectual incompetence, also referred to as the impostor phenomenon (IP) (Bernard et al., 2017). The distress experienced results in feelings of (real/perceived) alienation, social isolation, and racial

discrimination. Other mitigating factors include pre-existing gender and race-based inequalities and socialization differences that could potentially increase one's susceptibility to the impact of IP (Bernard et al., 2017).

Black women also report experiencing incidents of gender-based racial microaggressions that are rooted in stereotypes associated with misogynoir (Gomez, 2015). According to Donovan et al. (2013), 96% of the women recruited for the study reported experiencing some form of microaggression numerous times a year, primarily when they attempted to access services and in workplace settings. These forms of microaggressions take the form of microinsults (e.g. You are pretty for a Black girl.), microinvalidations (e.g. Your Canadian? You don't look Canadian!), microassaults (e.g. We don't serve your kind.) (Sue, 2010). Microaggressions are harmful and result in feelings of invisibility, powerlessness, forced compliance and a sense of pressure to be a representative of all Black folks to avoid being reduced to a stereotype (Sue et al., 2008). Gomez (2015) highlights that the impact of racism and discrimination is a stressor that is often externalized in the form of depressed mood, anger, and hypervigilance, which adversely impact the mental health of Black women.

### **Limitations of the Study**

As a Black woman and a settler on the stolen and unceded land of the First Nations people, I am acutely aware of the impact of colonialization and oppression on people of colour such as myself. While much is known about the experience of Canada's First People, little is known about the lived experience of Black individuals who have come to call Canada home. The lack of knowledge regarding anti-blackness can be attributed to a culture of silence, modulation of the school curriculum to exclude topics regarding race and racism and a nationwide confabulation of multiculturalism as an indication that racism does not exist (Maynard, 2017). The lack of acknowledgement that despite Canada being a multicultural country, racism exist and is embedded in the social fabric of Canadian society allows scholars to take a colourblind approach to addressing race-related topics such as misogynoir (Maynard,

2017). Consequently, when one attempts to explore the race and gender base experiences of Black women in Canada, little or no information is available. Hence, the writer, who is Black and has lived experience with the phenomena, is forced to rely on studies out of the United States to provide evidence of the phenomena and its impact on the lives of Black cis and sexual minority women (Maynard, 2017).

Misogynoir explores the complexity of intersecting identities as they pertain to race and gender, class, sexuality, and other potential factors. As such, studies that examine these concerns are still relatively nuanced, primarily since the lived experience of Black women, predominantly Black sexual minority women, was traditionally not studied (Spates, 2012). Additionally, the lived experience of Black women in Canada is unique, and as such, generalizing the findings of American-based studies can be problematic as there is little to no information to support how these factors manifest themselves in the Canadian context (Polit & Beck, 2010). Without specific data and qualitative studies on the experience of Blacks, it is challenging to draw robust conclusions about the phenomena (Polit & Beck, 2010). Additionally, the cultural experience of misogynoir can vary across cultural and regional contexts within Canada. Therefore, generalizing the findings from one country, community, or region might result in an oversimplification or misrepresentation of the issue (Polit & Beck, 2010).

Historical context is always essential to synthesize the evolution of misogynoir and, specifically, the Canadian experience. However, the information was sparse, focused primarily on state violence and racial profiling and was not well-documented (Maynard, 2017). Regarding what was documented, it was noted by the author that the information provided was also not well supported by evidence but rather by antidotal account and inferences made based on the nature of the incidence, which introduced an element of bias in the literature review and its findings (Avery et al., 2022). Moreover, given the experiential nature of misogynoir, the existing literature might carry biases or gaps in the research. Therefore, a critical analysis lens must be applied to these studies to provide a nuanced and accurate representation of the issue.

Despite the limitations, conducting a literature review on misogynoir in Canada and in general is essential for shedding light on a crucial intersectional issue that is still evolving in the counselling space as more and more people of color access counselling services. As a means of providing culturally safe and sensitive counselling services to Black women, counsellors need to be aware of these challenges and work towards addressing them while contributing to the ongoing discourse on the topic.

### **Conclusion**

In conclusion, this literature review has provided a comprehensive examination of misogynoir, highlighting its historical underpinnings, the perpetuation of stereotypes, and the profound impact on the mental health of Black women. The unique manifestation of misogynoir in Canada has been explored, emphasizing the complexity of racism and its implications for the well-being of Black women. As counsellors strive to create inclusive and effective therapeutic environments, a nuanced understanding of misogynoir becomes paramount. This knowledge equips counsellors to navigate the mental health disparities faced by Black women, fostering culturally competent and empathetic interventions. However, it is essential to acknowledge the limitations of this study, including the need for further research and exploration of intersectionality within the diverse spectrum of Black women's experiences. By recognizing the significance of this information, counsellors can actively contribute to dismantling the harmful impacts of misogynoir and promoting the mental well-being of Black women in their care.

### Chapter Three

#### Discussion

Black women may face unique challenges related to both racism and sexism, known as gendered racism. These intersecting forms of oppression can contribute to mental health issues and may also affect help-seeking behaviours. Additionally, given that most mental health practitioners are often white/white presenting, making them representative of a dominant oppressive culture, many Black women frequently feel unsafe accessing their care. Take the story of Chaya Baku, who wrote a candid and eye-opening recount of why she left her white therapist in an article of the same name (Baku, 2017). Baku's counsellor, after reading her innermost thoughts, feelings and challenges around openly discussing race-related concerns with her therapist, became "adversarial, hostile, combative and blaming," ultimately ending their one-and-a-half-year counselling relationship (Baku, 2017, para., 4). While this is an unfortunate outcome for Baku, her story is symbolic of the challenge Black and Brown folks face, no matter their gender and or sexual orientation, in finding and accessing culturally competent, trauma-informed, and intersectional mental health care. It is, therefore, important that cross-cultural therapists and therapists from within the diaspora provide mental health care to Black women to understand racialized concepts that describe and explain the lived sociocultural and political experience of this population, such as misogynoir.

While the term misogynoir has only been around for the last sixteen years, it is evident that labelling this form of engendered racism and oppression has been around for centuries, as evidenced by the controlling stereotypes that continue to personify false narratives of Black womanhood. Unfortunately, these false narratives intentionally and unintentionally enter the therapy room, resulting in harm. According to Kelly & Green (2010), cultivating an atmosphere of safety creates ease around disclosing and gives the client permission to share their discomfort around sharing their most intimate fears, emotions, thoughts, and experiences that brought them to therapy in the first place. However, suppose a counsellor is unaware and

uninformed about the "misrecognized, invisible, hypervisible, distorted, and unseen" experiences of BIPOC folks. In that case, they run the risk of bringing their white fragility, racial gaslighting, colorblindness, white and white privilege, silence, and exceptionalism to the therapy room (Baku, 2017, para,11). Consequently, this Guide aims to highlight the importance of understanding misogynoir and its profound impact on the mental health of Black women. It addresses stereotypes, health impacts, counselling approaches, therapeutic modalities, racialized mistakes to avoid, and the impact of micro-aggressions, microinsults, and microinvalidations on Black women's mental health.

### ***Diasporic Considerations and Context***

Black women are not monoliths. We are complex and nuanced, and our experiences are as diverse as the colours of the rainbow and as different as a fingerprint. Non-monolithic means that cultural background, beliefs, values, and experiences shape a Black woman's identity. Consequently, it is not only harmful but irresponsible to stereotype Black women as a homogenous group. Stereotyping, as aforementioned, robs Black women of their individuality. Providing mental health care to Black women should be approached from an intersectional framework; as such, this guide cannot and should not be comprehensively adopted for use by counsellors without an in-depth assessment of the client's therapeutic needs. One consideration is the complexity and experience of mixed and biracial Black women.

Black women who identify as mixed/biracial Black have a unique experience with misogynoir that intersects with gender, race, texturism and colourism. All these different "isms" impact how Black women are treated in society and the mental health challenges they may encounter. Women are deemed by society as being white-passing, often experiencing exoticization and fetishization, which is an objectification of their bodies and identity (Hunter, 2005). The experience can be dehumanizing, especially since it is perpetuated by all constructed racial identities. Additionally, white-passing individuals often benefit from white

privilege and are not always subjected to equal/similar acts of discrimination or marginalization as non-racially ambiguous individuals (Hunter, 2005).

The biracial/mixed individuals' lived experiences can either be bolstered or diminished by the lightness of their skin and the texture of their hair. The texture of one's hair texturism and the lightness of one's skin colourism can determine whether one is accepted into the fold or tossed out, leading to intra-racial discrimination further, exacerbating the effects of misogynoir. Many of these women often come to counselling with added concerns related to racial identity.

Counsellors need to ensure that they do not subject clients to identity policing, which speaks to the pressure that many mixed races face to choose how they identify because of outdated white supremacy laws such as the one-drop rule or the need to conform to certain racial or cultural expectations. Identity policing results in increased scrutiny and invalidation of one's blackness based on physical appearance and cultural practices. Therefore, counsellors need to be comfortable with talking about race in a manner that reflects empathy and understanding of the complexity of what it means to be biracial/multiracial. It would also be prudent for counsellors to assess these clients for feelings of loneliness and social alienation.

Consideration should also be given to shadeism in the Black community, where Black women with deeper skin tones are discriminated against and marginalized by the Black community and other races (Perry, Pullen, & Oser, 2012). Skin pigment is associated with beauty standards and worth (Kerr, 2005). Deeper skin-toned women are often automatically viewed as less intelligent, attractive and desirable, lending to stigmatization and devaluation (Perry, Pullen, & Oser, 2012). These beauty standards can lead to darker-skinned women receiving differential treatment in various arenas of life, such as healthcare, such as the misconception that Black women have a higher pain threshold than their white or lighter-skinned counterparts. Additionally, given the privilege associated with lighter skin, dark-skinned women often experience internalized negative stereotypes and biases leading to shame, self-hatred,

self-doubt, and feelings of inferiority (Perry & Oser, 2013; Thompson & Keith, 2009). Internalized stigma may even limit one's access to resources and willingness to engage in mental health care (Ahad et al., 2023). Counsellors from the diaspora and outside must be aware of these systemic inequalities and their impact on their client's physical and mental health and adopt culturally responsive and affirming practices that cultivate safety and authenticity in the therapeutic environment. Emphasis should be placed on empowering darker-skinned women to take up space, assert their worth, reframe the narrative and advocate for their needs, which is essential for healing, personal growth, self-confidence, and social/systemic change. The focus on empowerment fosters resilience and supports a practice that moves beyond social justice.

Identifying as or being viewed as Black trans-females also comes with its unique challenges that counsellors need to be mindful of. Consideration must be given to how transphobia, racism and misogyny lead to further marginalization, violence, harassment and discrimination (Maynard, 2017). Transwomen statistically are at high risk of becoming victims of hate-related violence, sexual violence, physical assault and even murder (Maynard, 2017). In healthcare, access to adequate and gender-affirming care is challenging for transwomen (Jefferson et al., 2013). Additionally, transwomen also experience rejection and alienation from their biological family and have a more challenging time finding gainful employment (Jefferson et al., 2013). The inability to procure meaningful employment leads to economic marginalization and a loss of family and community. Therefore, it is vital that counsellor center the needs and experiences of Black transwomen in a manner that supports resilience by providing an affirming and empowering safe space for healing and authentic self-expression.

Context matters. All Black women need a therapeutic environment and a counsellor who will seek to provide care that is unique to their concerns. Therefore, while the guide can be used as a blueprint for working with themes associated with misogynoir, it is imperative that practitioners take the time to get to know the client, remain curious about their lived experience,

and ask thoughtful, culturally responsive questions to ensure that their treatment plans and interventions address the client's concerns.

### **Application**

The subject of misogynoir is not only complex and expansive but dates to chattel slavery, requiring extensive research, especially given the limited race base data available in Canada and acknowledgement of the need for an expansion of race base mental health care beyond those offered to Canada's First people. As a settler residing on stolen land who now calls Canada home, I am acutely aware that while this country is accommodating and multicultural, the core values and structure of public services, such as healthcare, are rooted in the dominant culture as Canada was once a self-governing state within the British Empire. The lack of race-based Canadian data on gender-based discrimination and racism has left a gaping hole in the field of psychotherapy to address the mental health concerns of BIPOC Canadians. Fortunately, Canada borders the United States, and the lived experiences of Black Canadians and Black Americans in many ways mirror each other, especially with both countries' history with chattel slavery, the global export of mass media, culture, and position as a superpower. Many of our Canadian textbooks exploring the history of Blacks in Canada confirm this parody, allowing the writer to use this race-based data along with the limited and antidotal account of misogynoir to create a comprehensive guide for counsellors to learn more about misogynoir and how to broach therapeutic care as they walk alongside the client in their healing journey. The Guide will be available in the form of a guidebook.

### **The Guide**

The Guide will be titled **Understanding Misogynoir: A Guide for Counsellors** and presented as a guidebook. The title aims to invite curiosity about the topic and its relationship to counselling, a field that is diverse and responsive to the needs of BIPOC folks.

**Cover Page**

The cover page will feature a group of Black women with the title **Understanding Misogynoir: A Guide for Counsellors**. The picture was created to highlight that this guide centers on the unique mental health concerns of Black and Black-identifying women. The cover picture seeks to connote that this guide was written by a black woman and centers the voices and work of Black authors in its creation.

**Section 1 – Misogynoir and its History Around the World and Canada**

This section will start with a definition of what misogynoir is and why counsellors need to be aware of its impact on Black-identifying women accessing mental health care. Additionally, the reader will be provided with a brief history of misogynoir around the world and in Canada. Although much of the information for this section was attained using American data, it is more important for counsellors to be aware of Canada's history with misogynoir as they might find this content more relatable and transferable to their practice. The information to be included in this section will highlight chattel slavery and the controlling racialized epithets/stereotypes that continue to define Black womanhood in modern-day society.

**Section 2 – Controlling Racial Stereotypes and Examples of Misogynoir**

This section will cover Controlling Racial Stereotypes that continue to plague Black people. Each stereotype will be listed and briefly described. Additionally, the guide will highlight stereotypes studied in Canada, as these may be more relevant and foster a more in-depth understanding of misogynoir. To help the reader grasp the concept I have included two examples of two famous and affluent Black women, tennis player Serena Williams and former First Lady of the United States of America, Ms. Michelle Obama, who were both subjected to misogynoir in the media. Each example comes complete with cartoon caricatures taken from various media sources and an explanation of the respective imagery. Please be advised that these images are being used for educational purposes and are in no way meant to cause distress to the reader.

### Section 3 – Impact of Misogynoir

This section of the guide will highlight the health-related, psychological, and sociocultural outcomes of misogynoir. The health-related impacts will cover both the psychological and physiological impacts of gender-based racism, such as PTSD, low self-confidence, untreated pain, and death from pregnancy-related complications. Sociocultural impacts are perception-based, such as black women only having children for the sole purpose of collecting a welfare check or being deemed unfit mothers. The page will also cover the Impact of micro-aggressions, microassaults, microinsults, and microinvalidations as it pertains to mental health because of internalized racial bias. Each will be briefly defined, with a description of its mental health impact and providing counselling-related examples.

### Section 4 – Counselling Approaches

The page will cover counselling approaches. Suggested approaches are:

- **Culturally Competent Therapy:** Acknowledging and validating the unique experiences and challenges faced by Black women. Culturally competent care is characterized by recognizing the significance of culture, evaluating interactions across different cultures, remaining attentive to the effects of cultural disparities, enhancing cultural understanding, and adjusting interventions to address specific cultural requirements (Whaley & Davis, 2007).
- **Intersectional Approach:** An intersectional approach recognizes the interplay of race, gender, sexuality, and other identities in shaping individual experiences rather than isolating one aspect of one's identity. It allows the counsellor to examine how various social identities intersect and influence experiences of marginalization (Sheldon et al., 2022).
- **Trauma-Informed Care:** Understanding the impact of racial trauma and providing appropriate support and interventions. Trauma-informed care (TIC) is a counsellor's strategy for comprehending the effects of traumatic experiences on individuals and

adjusting service components accordingly. It involves implementing a care model that prioritizes empowerment, choice, collaboration, trustworthiness, safety, and person-centred approaches to alleviate the enduring effects of trauma (Ranjbar et al.,2020).

- **Empowerment and Resilience Building:** Fostering strengths and coping strategies to navigate systemic oppression and discrimination.

Section four will highlight some of the traditional and culturally specific therapeutic modalities that may be suited for addressing misogynoir and working with Black women, such as narrative therapy and Sistah/healing Circles. Each approach will be listed, and a brief description of the therapy and the concerns that it may address will be provided.

### **Section 5 – Common Racialized Mistake**

Section five will also discuss common racialized mistakes that counsellors may make when working with Black women, such as colorblindness, naming their white privilege, avoiding discussing race, over-relating to the client and racial gaslighting, to name a few. Additionally, this page will provide the reader with suggestions for therapeutic practice when working with Black women, such as creating a safe and affirming environment and being mindful of power dynamics.

### **Section 6 – Resources**

This section will include resources such as books, websites, podcasts, and articles that would help counsellors, especially those practicing cross-culturally, talk about race, learn about race relations in Canada, and provide culturally safe and competent care to Black-identifying women. One way that counsellors can stay mindful of racism and how it may enter the therapy room is to engage in anti-racist and anti-oppression work by making commitments to how they will continue to educate and show up for their clients. A list of commitments will be added to guide the practice of counsellors working with BIPOC folks.

In conclusion, understanding and addressing misogynoir is essential for promoting the mental health and well-being of black cis, queer, trans, and lesbian-identifying women. By

providing culturally competent and affirming care, counsellors can support Black women in navigating and healing from the impacts of systemic oppression and discrimination.

### References

- Ahad, A. A., Sanchez-Gonzalez, M., & Junquera, P. (2023). Understanding and Addressing Mental Health Stigma Across Cultures for Improving Psychiatric Care: A Narrative Review. *Cureus*, *15*(5), e39549. <https://doi.org/10.7759/cureus.39549>
- American Psychological Association. (2007). Sexualization of Girls is Linked to Common Mental Health Problems in Girls and Women-Eating Disorders, Low Self-esteem, and Depression. *APA Task Force Reports*
- Anderson, J. R., Holland, E., Heldreth, C., & Johnson, S. P. (2018). Revisiting the Jezebel stereotype: The impact of target race on sexual objectification. *Psychology of Women Quarterly*, *42*(4), 461-476.
- Anyiwo, N., Stanton, A. G., Avery, L. R., Bernard, D. L., Abrams, J. A., & Golden, A. (2022). Becoming strong: Sociocultural experiences, mental health, & black girls' strong black woman schema endorsement. *Journal of Research on Adolescence*, *32*(1), 89-98. <https://doi.org/10.1111/jora.12707>
- Apfelbaum, E. P., Norton, M. I., & Sommers, S. R. (2012). Racial color blindness: Emergence, practice, and implications. *Current directions in psychological science*, *21*(3), 205-209.
- Armstrong, T. E. (2012). *The hidden help: Black domestic workers in the civil rights movement*. University of Louisville.
- Asare, J. G. (n.d.). *Misogynoir: The Unique Discrimination That Black Women Face*. Forbes. Retrieved July 29, 2023, from <https://www.forbes.com/sites/janicegassam/2020/09/22/misogynoir-the-unique-discrimination-that-black-women-face/>.
- Ashley, W. (2014). The angry black woman: The impact of pejorative stereotypes on psychotherapy with black women. *Social Work in Public Health*, *29*(1), 27-34. <https://doi.org/10.1080/19371918.2011.619449>

- Atkins, Rahshida, Rufan Luo, Mary Wunnenberg, Cynthia Ayres, Terri H. Lipman, Victoria Pena-Cardinali, Latisha Hayes, and Janet A. Deatrck. "Contributors to depressed mood in Black single mothers." *Issues in Mental Health Nursing* 41, no. 1 (2020): 38-48
- Avery, D. R., Dumas, T. L., George, E., Joshi, A., Loyd, D. L., van Knippenberg, D., ... & Xu, H. (2022). Racial biases in the publication process: Exploring expressions and solutions. *Journal of Management*, 48(1), 7-16.
- Baciu, A., Negussie, Y., Geller, A., Weinstein, J. N., & National Academies of Sciences, Engineering, and Medicine. (2017). The root causes of health inequity. In *Communities in action: Pathways to health equity*. National Academies Press (US).
- Bailey, M. (2021). *Misogynoir transformed: Black women's digital resistance*. New York University Press. <https://doi.org/10.18574/9781479803392>
- Bailey, M., & Trudy. (2018). On misogynoir: Citation, erasure, and plagiarism. *Feminist Media Studies*, 18(4), 762-768.
- Banks, R. R. (2011). *Is marriage for white people? How the African American marriage decline affects everyone*. Penguin.
- Barlow, J. N. (2020). Black women, the forgotten survivors of sexual assault. *American Psychological Association*.
- Bernard, D. L., Lige, Q. M., Willis, H. A., Sosoo, E. E., & Neblett, E. W. (2017). Impostor phenomenon and mental health: The influence of racial discrimination and gender. *Journal of counseling psychology*, 64(2), 155.
- Bobroff, G. (2020). *Knowledge in a Nutshell: Carl Jung: The complete guide to the great psychoanalyst, including the unconscious, archetypes and the self* (Vol. 4). Arcturus Publishing.
- Brown, A. (2018, January 9). "Least desirable"? How racial discrimination plays out in online dating. *NPR*. <https://www.npr.org/2018/01/09/575352051/least-desirable-how-racial-discrimination-plays-out-in-online-dating>

- Bukowski, L. A., Hampton, M. C., Escobar-Viera, C. G., Sang, J. M., Chandler, C. J., Henderson, E., ... & Stall, R. D. (2019). Intimate partner violence and depression among Black transgender women in the USA: The potential suppressive effect of perceived social support. *Journal of Urban Health, 96*, 760-771.
- Busse, D., Yim, I. S., Campos, B., & Marshburn, C. K. (2017). Discrimination and the HPA axis: Current evidence and future directions. *Journal of Behavioral Medicine, 40*(4), 539–552.
- Calabrese, S. K., Meyer, I. H., Overstreet, N. M., Haile, R., & Hansen, N. B. (2015). Exploring Discrimination and Mental Health Disparities Faced by Black Sexual Minority Women Using a Minority Stress Framework. *Psychology of Women Quarterly, 39*(3), 287-304. <https://doi.org/10.1177/0361684314560730>
- Carter, L., & Rossi, A. (2019). Embodying Strength: The Origin, Representations, and Socialization of the Strong Black Woman Ideal and its Effect on Black Women's Mental Health. *Women & Therapy, 42*(3–4), 289–300. <https://doi.org/10.1080/02703149.2019.1622911>
- Cénat, J. M., Hajizadeh, S., Dalexis, R. D., Ndengeyingoma, A., Guerrier, M., & Kogan, C. (2022). Prevalence and effects of daily and major experiences of racial discrimination and microaggressions among black individuals in Canada. *Journal of Interpersonal Violence, 37*(17-18), NP16750-NP16778. <https://doi.org/10.1177/08862605211023493>
- Chang, D. F., & Berk, A. (2009). Making cross-racial therapy work: A phenomenological study of clients' experiences
- Collins, P. H. (1997). Mammies, matriarchs, and other controlling images. CP Gould's In *Gender: Key concepts in critical theory* (pp. 76-106).
- Collins, P. H. (1991). Controlling images and Black women's oppression. *Seeing ourselves: Classic, contemporary, and cross-cultural readings in sociology, 4*, 266-273.
- Collins, P. H. (2004). *Black sexual politics: African Americans, gender, and the new racism*. Routledge.

- Comrie, J.W., Landor, A.M., Townsend Riley, K., & Williamson, J.D. (2022). Anti-blackness/Colourism. Boston University. <https://www.bu.edu/antiracism-center/files/2022/06/Anti-Black.pdf>
- Constantine, M. G. (2007). Racial microaggressions against African American clients in cross-racial counselling relationships. *Journal of Counseling Psychology*, 54, 1–15
- Cukor, George. 1944. *Gaslight*. Burbank, CA: Turner Entertainment: Warner Bros.
- DiAngelo, R. (2018). *White Fragility: Why it's so hard for white people to talk about racism*. Beacon Press.
- Donovan R. A., Galban D. J., Grace R. K., Bennett J. K., Felicié S. Z. (2013). Impact racial macro- and microaggressions in Black women's lives: A preliminary analysis. *Journal of Black Psychology*, 39, 185-196.
- Donovan, R. A. (2007). To blame or not to blame: Influences of target race and observer sex on rape blame attribution. *Journal of interpersonal violence*, 22(6), 722-736.
- Dowd, N. E. (1995). Stigmatizing single parents. *Harv. Women's LJ*, 18, 19.
- Epstein, R., Blake, J., & González, T. (2017). Girlhood interrupted: the erasure of black girls' childhood. *Available at SSRN 3000695*.
- Foley, L. A., Evancic, C., Karnik, K., King, J., & Parks, A. (1995). Date rape: Effects of race of assailant and victim and gender of subjects on perceptions. *Journal of Black Psychology*, 21(1), 6-18.
- Forde, A. T., Crookes, D. M., Suglia, S. F., & Demmer, R. T. (2019). A systematic review of the weathering hypothesis as an explanation for racial health disparities. *Annals of epidemiology*, 33, 1-18.
- Gamble, V. N. (1993). A legacy of distrust: African Americans and medical research. *American journal of preventive medicine*, 9(6), 35-38.
- "Gaslighting, n.2."2016. OED Online. Oxford University Press, March. <http://www.oed.com/view/Entry/255555?rskey=qdZFWb&result=2&isAdvanced=false>.

- Gómez, J. M. (2015). Microaggressions and the Enduring Mental Health Disparity: Black Americans at Risk for Institutional Betrayal. *Journal of Black Psychology*, 41(2), 121-143. <https://doi.org/10.1177/0095798413514608>
- Hauff, N. J., Fry-McComish, J., & Chiodo, L. M. (2017). Cumulative trauma and partner conflict predict post-traumatic stress disorder in postpartum African American women. *Journal of Clinical Nursing*, 26(15-16), 2372-2383.
- Hill Collins, Patricia. (2004). *Black sexual politics: African Americans, gender, and the new racism*. Routledge. <https://doi.org/10.4324/9780203309506>
- Howard-Hamilton, M. F. (2003). Theoretical frameworks for African American women. *New directions for student services*, 2003(104), 19-27.
- Gates Jr, H. L., & West, C. (1997). *The future of the race*. Vintage.
- Green, E. (2018). Melanie Klein and the black mammy: An exploration of the influence of the mammy stereotype on Klein's maternal and its contribution to the "whiteness" of psychoanalysis. *Studies in Gender and Sexuality*, 19(3), 164-182.
- Geyton, T., Johnson, N., & Ross, K. (2022). 'I'm good': Examining the internalization of the strong black woman archetype. *Journal of Human Behavior in the Social Environment*, 32(1), 1-16. <https://doi.org/10.1080/10911359.2020.1844838>
- Government of Canada, S. C. (2022, August 30). COVID-19 mortality among racialized populations in Canada and its association with income. <https://www150.statcan.gc.ca/n1/pub/45-28-0001/2022001/article/00010-eng.htm>
- How Megan Thee Stallion's court battle highlights misogyny targeting Black women*. (2022, December 27). PBS NewsHour. <https://www.pbs.org/newshour/show/how-megan-thee-stallions-court-battle-highlights-misogyny-targeting-black-women>
- Jefferson, K., Neilands, T. B., & Sevelius, J. (2013). Transgender women of color: discrimination and depression symptoms. *Ethnicity and inequalities in health and social care*, 6(4), 121-136. <https://doi.org/10.1108/EIHSC-08-2013-0013>

- Kelly, J. F., & Greene, B. (2010). Diversity within African American, female therapists: Variability in clients' expectations and assumptions about the therapist. *Psychotherapy: Theory, Research, Practice, Training*, 47(2), 186.
- Kelley, S. M. (2023). Post-Sexual Assault Decision Making: Centering Black Women's Experiences. *Feminist Criminology*, 18(2), 133-155
- Kerr, A. E. (2005). The paper bag principle: Of the myth and the motion of colorism. *The Journal of American Folklore*, 118(469), 271-289.
- Kendall, M. (2020). *Hood Feminism: Notes from the Women That a Movement Forgot*. New York: Penguin Books
- Lacey, K. K., Parnell, R., Mouzon, D. M., Matusko, N., Head, D., Abelson, J. M., & Jackson, J. S. (2015). The mental health of US Black women: The roles of social context and severe intimate partner violence. *BMJ Open*, 5(10).
- Laster Pirtle, W. N., & Wright, T. (2021). Structural gendered racism revealed in pandemic times: Intersectional approaches to understanding race and gender health inequities in COVID-19. *Gender & Society*, 35(2), 168-179.
- Liao, K. Y. H., Wei, M., & Yin, M. (2020). The misunderstood schema of the strong Black woman: Exploring its mental health consequences and coping responses among African American women. *Psychology of Women Quarterly*, 44(1), 84–104.  
<https://doi.org/10.1177/0361684319883198>
- Martin, A., Boadi, N., Fernandes, C., Watt, S., & Robinson-Wood, T. (2013). Applying Resistance Theory to Depression in Black Women. *Journal of Systemic Therapies*, 32(1), 1-13. <https://doi.org/10.1521/jsyt.2013.32.1.1>
- Massie, M. (2008, February 26). Michelle Obama: Angry black harridan. *WND* commentary. Retrieved from <http://www.worldnetdaily.com/index.php?fa=PAGE.view&pageId=57312>.
- Maynard, R. (2017). *Policing black lives: State violence in Canada from slavery to the present*. Fernwood Publishing.

- McClinton, D. (2019). Why dark-skinned black girls like me aren't getting married. *The Guardian*, Guardian News and Media, 8.
- Moses, H. (2021). MOSES: Oversexualization of Black Girls, Women Must Stop. *The Georgetown Law Center on Poverty and Inequality*.
- Motro, D., Evans, J. B., Ellis, A. P. J., & III, L. B. (2022, January 31). The “angry black woman” stereotype at work. *Harvard Business Review*. <https://hbr.org/2022/01/the-angry-black-woman-stereotype-at-work>
- Nia, N. (2022). *Mental health support often difficult to find for people of colour, advocates say: Many racialized people must not only navigate long wait times in an overwhelmed mental-health care system but face the added challenge of finding culturally sensitive therapists in a white-dominated profession*. *The Globe and Mail*.
- Okeke-Ihejirika, P., Salami, B., & Karimi, A. (2019). African immigrant women’s transition and integration into Canadian society: Expectations, stressors, and tensions. *Gender, Place & Culture*, 26(4), 581-601.
- Olusoga, D. (2015). The roots of European racism lie in the slave trade, colonialism—and Edward Long. *The Guardian*, 8, 2015.
- Paradies, Y., Ben, J., Denson, N., Elias, A., Priest, N., Pieterse, A., ... & Gee, G. (2015). Racism as a determinant of health: a systematic review and meta-analysis. *PloS one*, 10(9), e0138511
- Perry, B. L., Pullen, E. L., & Oser, C. B. (2012). Too Much of a Good Thing? Psychosocial Resources, Gendered Racism, and Suicidal Ideation among Low Socioeconomic Status African American Women. *Social Psychology Quarterly*, 75(4), 334-359.
- Pilgrim, David. "The Mammy Caricature". Jim Crow Museum of Racist Memorabilia. Ferris State University, Michigan.

- Polit, D. F., & Beck, C. T. (2010). Generalization in quantitative and qualitative research: myths and strategies. *International Journal of Nursing Studies*, 47(11), 1451–1458.  
<https://doi.org/10.1016/j.ijnurstu.2010.06.004>
- Poussaint, A. F. (2002). Yes, it can be a delusional symptom of psychotic disorders. *The Western Journal of Medicine*, 176(1), 4-4.
- Ranjbar, N., Erb, M., Mohammad, O., & Moreno, F. A. (2020). Trauma-informed care and cultural humility in the mental health care of people from minoritized communities. *Focus*, 18(1), 8-15.
- Reece, A. J. (2023). The Commodification of the Black Female Body. *Political Science Undergraduate Review*, 8(1).
- Roberts Dorothy. *Killing the Black Body*. New York: Random House, 1997. Print.
- Rosenthal, L., & Lobel, M. (2016). Stereotypes of Black American women related to sexuality and motherhood. *Psychology of Women Quarterly*, 40(3), 414-427.
- Saad, L. (2020). *Me and white supremacy: Combat racism, change the world, and become a good ancestor*. Sourcebooks, Inc.
- Shelton, K., Lyn, M. K., & Endale, M. (Eds.). (2022). *A Handbook on Counseling African American Women: Psychological Symptoms, Treatments, and Case Studies*. ABC-CLIO.
- Spates, K. (2012). "The Missing Link": The Exclusion of Black Women in Psychological Research and the Implications for Black Women's Mental Health. *SAGE Open*, 2(3). <https://doi.org/10.1177/2158244012455179>
- Sue, D. W. (Ed.). (2010). *Microaggressions and marginality: Manifestation, dynamics, and impact*. John Wiley & Sons.
- Sue, D. W., Capodilupo, C. M., & Holder, A. M. B. (2008). Racial microaggressions in the life experience of Black Americans. *Professional Psychology, Research and Practice*, 39(3), 329–336. <https://doi.org/10.1037/0735-7028.39.3.329>

- Sutter, M., & Perrin, P. B. (2016). Discrimination, mental health, and suicidal ideation among LGBTQ people of color. *Journal of counseling psychology*, 63(1), 98.
- Trahan, D. P., Jr., & Lemberger, M. E. (2014). Critical race theory as a decisional framework for the ethical counselling of African American clients. *Counselling and Values*, 59(1), 112–124. <https://doi.org/10.1002/j.2161-007X.2014.00045.x>
- Truth, S. (1851). <https://thehermitage.com/wp-content/uploads/2016/02/Sojourner-Truth-Aint-I-a-Woman-1851.pdf>
- Thompson, C. (2009). Black women, beauty, and hair as a matter of being. *Women's Studies: An Inter-disciplinary Journal*, 38(8), 831-856.
- Thompson, V.L., Bazile, A., & Akbar, M. (2004). African Americans' perceptions of psychotherapy and psychotherapists. *Professional Psychological Research and Practice*, 35(1), 19-26.
- Wallace-Sanders, K. (2009). Southern Memory, Southern Monuments, and the Subversive Black Mammy.
- Wade, J. H. (2022). Embracing the Sapphire: Black Women's Rage in Speculative Fiction. *CLA Journal*, 65(1), 106-121.
- Watson-Singleton, N. N. (2017). Strong Black woman schema and psychological distress: The mediating role of perceived emotional support. *Journal of Black Psychology*, 43(8), 7
- West, L. M., Donovan, R. A., & Daniel, A. R. (2016). The price of strength: Black college women's perspectives on the strong Black woman stereotype. *Women & Therapy*, 39(3–4), 390–412. <https://doi.org/10.1080/02703149.2016.1116871>
- Whaley, A. L., & Davis, K. E. (2007). Cultural competence and evidence-based practice in mental health services: a complementary perspective. *American Psychologist*, 62(6), 563.
- White centring*. (2020, July 17). Change Cadet. <https://www.changecadet.com/blog/2020/7/17/white-centering>.

- White, D. G. (1985). *Ar'n't I a woman? Female slaves in the plantation South* (1st ed). Norton.
- Wingfield, A. H. (2007). The Modern Mammy and The Angry Black Man: African American Professionals' Experiences With Gendered Racism In The Workplace. *Race, Gender & Class*, 14(1), 196-212. <https://www.proquest.com/scholarly-journals/modern-mammy-angry-black-man-african-american/docview/218856945/se-2>
- Williams, D. R. (1999). Race, socioeconomic status, and health the added effects of racism and discrimination. *Annals of the New York Academy of Sciences*, 896(1), 173–188. <https://doi.org/10.1111/j.1749-6632.1999.tb08114.x>
- Woods-Giscombé, C. L. (2010). Superwoman Schema: African American Women's Views on Stress, Strength, and Health. *Qualitative Health Research.*, 20(5), 668–683. <https://doi.org/10.1177/1049732310361892>
- Yup, K. (2022). Black women excluded from critical studies due to "Weathering" Retrieved 20 January 2024, from <https://medicine.yale.edu/news-article/black-women-excluded-from-critical-studies-due-to-weathering/>.



**Appendix A- Guide Book**



**Understanding Misogynoir:  
A Guide for Counsellors**



**Misogynoir** is a term coined by queer black feminist scholar Moya Bailey by fusing the word "misogyny" with the French word for black "noir." The term is used to describe the intersectionality of race and gender to form a unique type of discrimination that only black women and black transwomen face. Misogynoir is a specific type of misogynistic anti-blackness that has roots in racism and the subjugation of black women (Bailey, 2021).

#### Why is it important for Counsellors to understand Misogynoir?

Understanding misogynoir is crucial for psychotherapists for several reasons:

1. **Cultural Competence:** Psychotherapists must be culturally competent to serve clients from diverse backgrounds. Understanding misogynoir allows therapists to recognize and address the unique challenges faced by Black women in therapy.
2. **Intersectionality.** Misogynoir highlights the intersection of racism and sexism experienced by Black women. Psychotherapists must understand this intersectionality to provide holistic and effective therapy, considering the complexity of clients' identities and experiences.
3. **Trauma-Informed Care:** Many Black women have experienced trauma related to misogynoir, including

microaggressions, stereotypes, discrimination, and violence.

Psychotherapists must be sensitive to these experiences and provide trauma-informed care.

4. **Empowerment and Advocacy:** By understanding misogynoir, psychotherapists can empower Black women to articulate their experiences, validate their feelings, and advocate for their needs within therapy and society at large.

#### The History of Misogynoir Around the World and in Canada

The roots of misogynoir can be traced back to centuries of colonialism, chattel slavery, and white supremacy. During slavery, Black women were subjected to sexual violence and exploitation by white slave owners while also facing gender-based discrimination within their own communities. This historical legacy has contributed to the perpetuation of misogynoir in contemporary society.

In the 20th and 21st centuries, misogynoir manifests itself in various forms, including media representation, systemic inequality, and interpersonal interactions. For instance, media representations have also played a significant role in perpetuating negative stereotypes about Black women, from minstrel shows to modern-day film, television, and music, contributing to their devaluation and objectification. Black women are often hypersexualized and stereotyped in the media, reinforcing harmful narratives that dehumanize and marginalize them. Additionally, they face disproportionate rates of violence, poverty, and incarceration compared to women of other races.

**Controlling Racial Stereotypes**

**Mammy**

- Depicts black women as nurturing, obedient, and self-sacrificing caretakers.

**Strong Black Woman**

- Expect black women to be resilient, enduring, and self-reliant, discouraging vulnerability and seeking help.

**Wealth Queen**

- Portrays black women as materialistic, gold-digging, and seeking financial gain through relationships or relying on government welfare systems to support themselves and their children.

**Jezebel**

- Stereotypes black women as hypersexual, promiscuous, and sexually aggressive.

**Angry Black Woman or Sapphire**

- Perpetuates the image of black women as hostile, confrontational, and emotionally volatile.

**Drug Mule**

- Dehumanizes black women, associating them with drug trafficking and criminal activity.

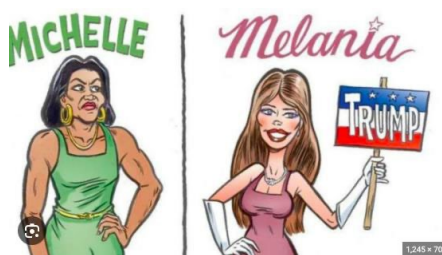
**Examples of Misogynoir**



This Mark Knight cartoon published by the Herald Sun on Monday received widespread criticism for reducing both Serena Williams and Naomi Osaka to "racist" and "sexist" stereotypes. (Mark Knight/Herald Sun/The Associated Press)

**Serena Williams**, one of the most accomplished athletes in tennis history, faced a disturbing wave of misogyny and racial bias when she broke her tennis racket during a match. Despite being widely regarded as a legend of the sport; her outburst was met with disproportionately harsh criticism compared to her male counterparts. This reaction exemplifies the intersection of misogyny and

racism, known as misogynoir, that Williams and many other Black women athletes confront. The incident highlights the ongoing challenges they face in a sports world still grappling with issues of gender and racial equality.



**Michelle Obama**, as the first African American First Lady of the United States, faced a barrage of misogynoir, particularly regarding comparisons of her physical appearance to that of Melania Trump, who succeeded her in the role. Despite Mrs. Obama's grace, intelligence, and numerous accomplishments, her appearance was often scrutinized in ways that underscored racial biases and double standards. She was often characterized in the media as being masculine, castrating, and angry. Meanwhile, Melania Trump, a white woman, received markedly different treatment, with her appearance being lauded and her fashion choices celebrated. This stark contrast highlights the pervasive impact of misogynoir, where Black women are subjected to harsher judgment and devaluation based on their physical attributes, perpetuating harmful stereotypes and inequalities.

**The Impact of Misogynoir**

- The Angry Black Woman narrative has left many feelings dismissed for showing emotion, leading to emotional suppression.

The Strong black woman (SBW) persona has helped many navigate the stress of racism and sexism but has also resulted in low self-esteem, increased depressive symptoms, anxiety, hostility, sensitivity,

- and loneliness as one tries to stay or present as “strong and independent.”
- The SWB has also been linked to emotional burnout, receiving less emotional support, the inaccurate perception that black women have a higher pain tolerance and emotional self-neglect.
- Higher rates of stress-related illness in black women, such as cardiovascular disease, obesity, and lupus.
- Unfavourable childbirth outcome for both mother and child.
- Being labelled as unfit mothers who have children for the sole reason of receiving government assistance.
- Un-nurturing to their children and chastising and belittling towards their men/partners, making them “undatable.”
- Young black girls are deemed as “less innocent” than white girls, leading to them being viewed as promiscuous.
- Black women face higher incidents of. Sexual violence is less likely to be believed, and most of these incidents go unreported.
- The over-sexualization of black women has led to more black women being trafficked into sex work than white women.
- Oversexualization is linked to cases of eating disorders, anxiety, low self-esteem, and the development of mood-related disorders.
- Racial profiling of Black transwomen by law enforcement on suspicion of being engaged in sex work.
- Overrepresentation of black women in the criminal justice system.
- Undue scrutiny during travel by border agents on suspicion of drug trafficking.
- Increased profiling of black women receiving government assistance.
- Race-related stress in black women is linked to PTSD.
- Characterizations of black women rob them of their individuality and integrity

and ignore the complexity of the black experience.

### Impact of Micro-aggressions, micro assaults, Microinsults, and Microinvalidations.



- **Micro-aggressions:** Subtle, often unintentional, comments or actions that convey hostility, discrimination, or stereotypes. They contribute to feelings of invalidation, marginalization, and stress.
- **Microinsults:** Racially demeaning comments, behaviours, or slights that undermine the dignity and worth of black women. They erode self-esteem and contribute to feelings of powerlessness and invisibility.
- **Microinvalidations:** Dismissive or negating remarks or behaviours that invalidate black women's experiences, feelings, or identities. They reinforce feelings of exclusion, isolation, and disconnection from mainstream society.
- **Microassaults:** Name-calling, avoidance, or deliberate discriminatory acts, which is an explicit kind of racial denigration designed to cause harm to the intended victim. For example, using racial epithets, such as calling someone “coloured” or “Oriental.”

### Counselling Approaches for Working with Black Women

- **Culturally Competent Therapy:** Acknowledging and validating the unique experiences and challenges faced by black women. Culturally competent care is characterized by recognizing the significance of culture, evaluating interactions across different cultures, remaining attentive to the effects of cultural disparities, enhancing cultural understanding, and adjusting interventions to address specific cultural requirements (Whaley & Davis, 2007).
- **Intersectional Approach:** An intersectional approach recognizes the interplay of race, gender, sexuality, and other identities in shaping individual experiences rather than isolating one aspect of one's identity. It allows the counsellor to examine how various social identities intersect and influence experiences of marginalization (Sheldon et al., 2022).
- **Trauma-Informed Care:** Understanding the impact of racial trauma and providing appropriate support and interventions. Trauma-informed care (TIC) is a counsellor's strategy for comprehending the effects of traumatic experiences on individuals and adjusting service components accordingly. It involves implementing a care model that prioritizes empowerment, choice, collaboration, trustworthiness, safety, and person-centred approaches to alleviate the enduring effects of trauma (Ranjbar et al., 2020).
- **Empowerment and Resilience Building:** Fostering strengths and coping strategies to navigate systemic oppression and discrimination.

### Traditional Therapeutic Modalities

- **Cognitive-Behavioral Therapy (CBT):** Addressing negative thought patterns and developing coping skills to manage stress and anxiety.
- **Narrative Therapy:** Exploring personal narratives and challenging oppressive societal narratives that perpetuate misogynoir.
- **Mindfulness-Based Interventions:** Cultivating self-awareness, self-compassion, and emotional regulation.
- **Group Therapy and Support Networks:** Providing a safe space for black women to share experiences, validate each other's feelings, and build community.

### Culturally Specific Therapies



- **Afrocentric Therapy:** Incorporates African cultural values, rituals, and traditions into therapy to promote healing and empowerment.
- **Black Feminist Therapy:** Focuses on the intersectionality of race, gender, and other identities, emphasizing social justice and empowerment.

- **Sistah Circle:** A supportive group therapy model specifically designed for black women, that provides a space for collective healing and empowerment.

#### Racialized Mistakes to Avoid

- **Colorblindness:** Ignoring or downplaying the significance of race and its impact on mental health and well-being.
- **Pathologizing Cultural Norms:** Misinterpreting cultural expressions and behaviours as pathological or abnormal.
- **Assuming Homogeneity:** Treating all black clients as a monolithic group with identical experiences and needs.
- **Cultural Appropriation:** Borrowing cultural elements without understanding their significance or context.
- **Invalidating Experiences of Racism:** Dismissing or minimizing experiences of racism and discrimination faced by black clients.
- **Overrelating:** The issue may arise from assumptions of shared experience or cultural understanding.

#### Suggestions for Therapeutic Practice

- **Create a Safe and Affirming Environment:** Establish trust, empathy, and rapport with clients by validating their experiences and identities.
- **Educate Yourself:** Continuously educate yourself on the intersectionality of race, gender, and other identities, and actively challenge your own biases and assumptions.
- **Be Mindful of Power Dynamics:** Recognize and address power imbalances in the therapeutic relationship, centring the client's autonomy and agency.
- **Advocate for Structural Change:** Advocate for policies and practices that

promote equity, diversity, and inclusion within mental health systems and institutions.

#### Resources

To understand the lived experience of black women, here is a list of resources that offer valuable insights into the concept of misogynoir and its impact on Black women's lives and experiences.

##### Books:

Misogynoir Transformed: Black Women's Digital Resistance by Dr Moya Bailey

A Handbook on Counseling African American Women: Psychological Symptoms, Treatments, and Case Studies by Kimber Shelton, Michelle King Lyn, Mahlet Endale

Using Race and Culture in Counseling and Psychotherapy: Theory and Process, by Janet E. Helms, PhD

"Sister Outsider: Essays and Speeches" by Audre Lorde - Contains essays that explore intersecting oppressions, including those experienced by Black women.

"Eloquent Rage: A Black Feminist Discovers Her Superpower" by Brittney Cooper - Discusses the intersection of race and gender, including the experiences of Black women.

"When Chickenheads Come Home to Roost: A Hip-Hop Feminist Breaks It Down" by Joan Morgan - Explores the portrayal of Black women in hip-hop culture and media.

"Hood Feminism: Notes from the Women That a Movement Forgot" by Mikki Kendall - Addresses issues of race, class, and gender, including the marginalization of Black women within feminism.

##### Podcasts:

"The Black Joy Mixtape" - Hosted by Amber J. Phillips and Jazmine Walker, this podcast discusses a range of topics relevant to Black women, including misogynoir.

"The Nod"—Hosted by Brittany Luse and Eric Eddings, this podcast explores Black culture and experiences and often discusses issues of race and gender.

"Intersectionality Matters!" - Hosted by Kimberlé Crenshaw, this podcast delves into intersectional feminism, including the experiences of Black women.

"Tea with Queen and J." - Hosted by Queen and Janicia, this podcast offers frank discussions on race, gender, and pop culture from a Black feminist perspective.

#### Articles:

"The Misogynoir Must Stop" by Moya Bailey - An article by the creator of the term "misogynoir," discussing its origins and impact.

"The Anatomy of Misogynoir" by Tobi Oredein - Explores the concept of misogynoir and its manifestations in various contexts.

"Why Misogynoir is a Problem We Need to Talk About" by Aja Barber - Discusses the intersections of racism and sexism faced by Black women.

"5 Black Women on Misogynoir and #MeToo in the Workplace" by Kenya Downs - Features interviews with Black women discussing their experiences with misogynoir and workplace harassment.

Whiteness Matters: Exploring White Privilege, Color Blindness and Racism in Psychotherapy, by Margaret Clausen, PsyD

#### Videos:

"Black Feminism & the Movement for Black Lives" by Kimberlé Crenshaw - A TED talk discussing the importance of centering Black women in social justice movements.

"Misogynoir: The Erasure of Black Women" by The Root - A video essay exploring the concept of misogynoir and its effects on Black women.

"We Real Cool: Black Men and Masculinity" by bell hooks - A lecture that touches on the intersection of race, gender, and power dynamics.

"For Harriet" YouTube Channel - Hosted by Kimberly Foster- features videos discussing various issues facing Black women, including misogynoir.

#### Therapist Commitment for working with Black women.

I will acknowledge that my clients of colour possess insights into racism that surpass my own understanding.

I will admit when I lack knowledge or comprehension and commit to educating myself without relying on my clients to teach me.

I will demonstrate the humility to apologize for errors and mistakes when they occur.

I will understand that supporting people of color as a therapist and ally is an ongoing journey of self-reflection and education, not a task with a finite end.

I will address how racism impacts power dynamics in therapy and strive to mitigate any imbalances to the best of my abilities.

I will keep in mind that racism could be a factor contributing to my client's mental health struggles.

I will acknowledge the justified distrust people of colour may have towards white therapists like myself and actively work to earn their trust.

I will recognize the diversity within communities of colour and understand that experiences of racism vary among individuals.

I will pay attention to intersecting forms of oppression my clients of colour may face beyond racism.

I will remain mindful that the field of psychotherapy has been predominantly shaped by white perspectives, thus inherently biased.