Minority, Multicultural, Race, and Ethnicity Concepts

Minority Groups Versus Multicultural Groups

Many Americans use the term *minority* to refer both to certain cultural groups' numbers in the population and to disadvantages in terms of socioeconomic status (Ho, 1987, 1992; Sue & Sue, 2003; Wilkinson, 1993). Thus in the United States, Anglo-Americans, or Whites, are not considered a "minority group" because there are too many of them (approximately 211 million in 2000) and as a group their socioeconomic status is higher than that of other racial/ethnic groups (U.S. Bureau of the Census, 2000). African Americans and Hispanics are often referred to as minority groups because they number approximately 34.6 and 35.3 million, respectively (U.S. Bureau of the Census, 2000), and their socioeconomic status, at the group level, is lower than that of the "majority" group (i.e., Whites). Other examples of "minority groups" in the United States, in terms of numbers and socioeconomic status, include American Indians, Asians, and Pacific Islanders (U.S. Bureau of the Census, 2000). Use of the term minority in regard to these groups, however, may not be appropriate for three reasons: discrepancies in income levels across these groups, the impact that these groups can have on other groups, and the connotation of "inferiority" that the term *minority* has in the minds of some members of these groups.

Discrepancies in Income Levels Across "Minority" Groups

Comparisons of the median income levels across "minority" groups (e.g., Asians versus African Americans) reveal discrepancies. For example, in

2001 the median income for the Asian and Pacific Islander population in the United States (persons of Japanese, Chinese, Filipino, Hawaiian, and other Asian/Pacific island heritage) was \$53,635, whereas the median income for African Americans in the same year was \$29,470. At that time, the national U.S. median income was \$42,228 (U.S. Bureau of the Census, 2002a). Thus, although both Asians/Pacific Islanders and African Americans are examples of "minority" groups in terms of their numbers (and in comparison with Anglo-Americans), Asians and Pacific Islanders have a median income far above the national average.

A similar point can be made through a comparison of income levels across subgroups within the same ethnic group. For example, in 2002 the median household income for the Mexican-origin population (a subgroup of Hispanics) residing in the United States was \$33,574, whereas the median income for Puerto Ricans (another subgroup of Hispanics) was \$27,564 (U.S. Bureau of the Census, 2002b). Although both these groups are part of the Hispanic "minority" group, it is evident that, as a group, Mexican Americans have a better standard of living than do Puerto Ricans in the United States.

Thus the term *minority* might be accurate regarding an individual's being a member of a group with a smaller number of people in it than the "majority" group, but it may not be an appropriate way to describe that person in terms of income level (which can vary both between "minority" groups and between subgroups within the same racial or ethnic group).

Impact of "Minority" Groups on Other Groups

Another problem with the use of the term *minority* is that it does not take into consideration the impact that the population size of a "minority" group can have on other groups (Wilkinson, 1986). For example, many African Americans and Hispanics reside in Florida. Currently, a major problem confronting African Americans in Florida is that in several areas of the state (e.g., Miami) they constitute a minority of the population, whereas Hispanics constitute a "majority" group. Both Hispanics and African Americans are examples of minority groups in relation to the total number of people in the United States, but in certain parts of Florida, Hispanics take on majority status. A similar situation exists in the Lower Rio Grande Valley of Texas, which is concentrated around the border between the United States and Mexico. In this region, Mexican Americans are in the majority; other Hispanics (e.g., Puerto Ricans, Cubans), Asians, African Americans, and American Indians are "minority" groups.

In addition, it should be noted that among all "minority" groups in the United States, the Hispanic population is now the largest; for the first time,

the 2000 U.S. Census counted more Hispanics (35.3 million) than African Americans (34.6 million) (U.S. Bureau of the Census, 2000).

The Concept That "Minority" Equals "Inferiority"

Mental health practitioners should be aware that some people object to being referred to as minorities or as members of minority groups because they feel that these terms imply inferiority and a sense of superiority on the part of those in the majority (i.e., Anglo-Americans). For example, in a letter to the editor of the San Antonio Express News, one Hispanic person wrote that "when an individual labels me a 'minority,' I feel small, weak and irrelevant. On the other hand, 'ethnically diverse American' is empowering and more accurate" (R. E. Martinez, 1993, p. 5B). McAdoo (1993a) points out that a major reason she advises others to avoid the term *minority* is that "it has an insidious implication of inferiority. . . . A sense of superiority is assumed by those of the implied superior status" (p. 6; emphasis added).

Thus the term *minority* may not be applicable when one considers issues of income level or the size of particular minority groups in relation to other groups, and it may be undesirable given the potential use of the term as synonymous with "inferiority" (Kim, McLeod, & Shantzis, 1992; McAdoo, 1993a; Wilkinson, 1986). Perhaps terms such as multicultural and *diverse* are more appropriate to describe the many different populations or groups that make up the U.S. population. These terms emphasize the differences among groups in terms of cultural values rather than the relative sizes of the groups. The use of such terms has been increasing gradually in the literature since I initially presented the reasons noted above in arguing that mental health practitioners and scholars should eliminate the use of the term minority (Paniagua, 1994; see, e.g., Ancis, 2003; Cuéllar & Paniagua, 2000; Gibbs, Huang, & Associates, 2003).

In the assessment and treatment of people with mental disorders, a practical guideline for practitioners is that, rather than focusing on the "minority" group per se, they should emphasize the ways in which individuals from diverse groups express their cultural values, their views of the world, and their views of their place in this society. For example, in the multicultural society of the United States, African Americans and Anglo-Americans are two examples of cultural groups. Other groups whose members mental health practitioners may see with less frequency include subgroups of Anglo-Americans, such as Greek, Italian, Irish, and Polish Americans, and West Indian Islanders (Allen, 1988; Jalali, 1988). This book summarizes practical guidelines for the assessment and treatment of four diverse groups often seen in mental health services: African Americans, American Indians, Asians, and Hispanics.

Race Versus Ethnicity

Many people use the terms *race* and *ethnicity* interchangeably, although this practice is somewhat controversial (Phinney, 1996). The two terms may be understood to apply to two different processes (Berry et al., 1992; Betancourt & Lopez, 1993; Borak, Fiellin, & Chemerynski, 2004; Garza-Trevino, Ruiz, & Venegas-Samuels, 1997; Wilkinson, 1993). An understanding of these processes is important for mental health practitioners who are involved in the assessment and treatment of individuals from multicultural groups. As Wilkinson (1993) defines these terms, race "is a category of persons who are related by a common heredity or ancestry and who are perceived and responded to in terms of external features or traits," whereas ethnicity often refers to "a shared culture and lifestyle" (Wilkinson, 1993, p. 19; see also Borak et al., 2004, p. 242; Casas & Pytluk, 1995, p. 162). Thus an individual may belong to a particular race without sharing ethnic identity with others of that race. For example, the fact that two African American clients (or two American Indian, Asian, or Hispanic clients) share a common heredity or ancestry does not mean that they necessarily also share the same ethnic identity (i.e., their cultures, values, lifestyles, beliefs, and norms may be very different). Differences in ethnic identities across clients of the same race may be explained in terms of the processes of internal and external acculturation (described in Chapter 2), which can have important implications for the assessment and treatment of the members of many diverse groups. Practitioners should not assume that two clients who share the same racial group will also share the same ethnicity.