

# The Luxury of Invisible Privilege

July 14, 2013 by Jackie Summers

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Jackie Summers examines the way racism reproduces – and how well-meaning people feed the disease by denying their privilege.

***“I’m no bully. I like niggers.”–JW Milam, acquitted murderer of Emmett Till***

My grandfather was not a demonstrative man. When my father was a child, Granddad—a piano tuner by trade—sat my father down, and had a very somber conversation with him about how to avoid being lynched.

Likewise, my father was not given to words, or displays of affection. I was about 13 years old when my father—a professional jazz musician—had a similar conversation with me: how (not) to address officers of law, so as to avoid being shot.

I admit: when this generational rite of passage made its way to me, I didn’t fully understand the implications. The essence of this ritual can be distilled down to three basic precepts:

- You’re a man now, and so responsible for your actions.
- While other people are responsible for their actions, don’t give them any cause to justify their preconceptions about you.
- Your mother and I don’t want to outlive you.

If you’ve never received a speech like this. If you’ve never felt compelled to teach your child he is perceived as a threat, regardless of his actions. If you believe the need for such things are outdated, hyperbole, or superfluous to the point of being overkill: Congratulations! You’re suffering from the luxury of invisible privilege.

[Lisa Hickey is on record as saying she’d like to “solve racism.”](#) A nobler sentiment you’d be hard pressed to find, but exactly how does one do this? What if racism, like most social ills, isn’t an equation that can solve for zero? While our progress as an ethical society can be argued for progress or regress, there is (at least) one place we can look historically and claim advancement: modern medicine. Whereas cases of polio and measles once decimated entire populations, we can unequivocally declare significant progress in curbing the spread of infectious disease.

So what happens if we treat racism like a disease?

To be clear, there is no cure for polio. Massive vaccination programs are responsible for containing the spread of the disease. We can gain some insight into how we might approach racism differently if we draw parallels.

A virus's sole purpose is to reproduce, but it needs a host to do so. Pathogens require certain nutrients to grow. And you can't spontaneously develop a viral infection; you have to catch it from someone.

The problem with many deadly viruses is diagnosis. Viruses can lay dormant for years. You can contract a disease and show no active symptoms. Here is where the real similarities between racism and infectious disease lie: instead of thinking of racism as a social construct—a system of group privilege which defends the advantaged—many people perceive racism as individual words and acts of race based bias. As long as individuals avoid committing these, they aren't racist.

This is racism in its dormant viral state. By this standard, no one is racist anymore.

If reading this line of argument makes you feel a sense of discomfort, you are likely experiencing what is known as “cognitive dissonance.” People want to believe they're good people. When something enters their psyche that might contradict this assurance, it is easier psychologically to construct a reality that suits your belief system, than to reexamine your beliefs. The logic goes something like this:

Racism is bad. I'm (or so-and-so is) a good person, so I (or they) can't be racist. This is the kind of mental gymnastics that allowed the Founding Fathers to not only own slaves, but make [constitutional concessions](#) for such. This manner of thinking can be used to justify any action as righteous, no matter how horrific.

This is the social equivalent of ignoring an enormous cold sore. The virus is manifesting, so you cover it with make-up.

If mental constructs can prevent one from acknowledging the existence of social constructs, just how does one diagnose for racism? You look for symptoms of invisible privilege. A very handy guide for this is the manifesto [Unpacking The Invisible Knapsack](#) by Peggy McIntosh, associate director of the Wellesley Centers for Women.

In light of recent events, number 15—“I do not have to educate my children to be aware of systemic racism for their own daily physical protection”—is of particular note.

This fairly comprehensive list tends to agitate individuals who'd prefer not to think of themselves as privileged. It impugns many essential, well protected beliefs about the self. So let's try something a little more accessible.

Last week, two videos went viral on the internet. The first showed police arrest [a man taking video of police activity](#). When the police approach him, he puts his dog into his car, and voluntarily puts his hands behind his back, submitting to arrest. When his dog jumps out of the open window of the car to protect him, the police shoot the dog.

It is incredibly telling that the outrage around this video focuses on the treatment of the dog, and not the human. If the obviously unjust killing of an innocent animal registers more deeply with your psyche than the unfair arrest of a black man, you might be showing signs of invisible privilege.

The second video shows [a young man who's stopped at a routine DUI checkpoint](#) in Tennessee. He insists on his constitutional rights, much to the ire of the police officers present. If you watch this and believe he was completely within his rights, you're correct. If you thought to yourself—as I did—that his actions violated everything my grandfather taught my father, that my father passed on to me, and had I done the same thing, I would likely have ended up in jail at best; at worst, dead—then you're aware that while we are all promised certain inalienable rights, the extension of such rights is not, and has never been, equal.

Identifying invisible privilege as a symptom of the racism virus is important because it demonstrates how people who seemingly do no harm can still contribute to a harmful system. Curiously, people will more readily admit to having herpes than being racists, although the transmission of both diseases is social.

How ironic that the former carries less stigma than the latter.

Identifying privilege as a luxury is important, because luxuries are things that are enjoyed. If a virus actually benefits the host, what would be the motive for getting treatment? No one gives up luxuries voluntarily.

As with infectious disease, while you may never personally show symptoms or be impacted negatively, you can still spread the pathogen. In other words:

- If you're not racist but you're a racist apologist, you're part of the problem.
- If you're not racist but you're racist tolerant, you're part of the problem.
- If all of your social interactions occur within the bubble of invisible privilege, and you genuinely believe your advantages are purely the result of meritocracy, you're not a racist... You're a carrier.

If you exist inside a system that benefits you to the detriment of others, and do nothing to challenge the status quo, you're enforcing it. The antibody for racism is compassion.