

Gay and Lesbian Issues and Psychology Review

Editor
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The Australian
Psychological
Society Ltd.



ISSN 1833-4512

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Aims and scope

The Review is a peer-reviewed publication that is available online through the Australian Psychological Society website. Its remit is to encourage research that challenges the stereotypes and assumptions of pathology that have often inhaled to research on lesbians and gay men (amongst others). The aim of the Review is thus to facilitate discussion over the direction of lesbian and gay psychology in Australia, and to provide a forum within which academics, practitioners and lay people may publish.

The Review is open to a broad range of material, and especially welcomes research, commentary and reviews that critically evaluate the status quo in regards to lesbian and gay issues. The Review also seeks papers that redress the imbalance that has thus far focused on the issues facing white lesbians and gay men, to the exclusion of other sexual and racial groups. The Review encourages the elaboration of an expansive approach to psychological research on people of a diverse range of sexual and non-gender normative groups.

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EDITORIAL

DAMIEN W. RIGGS

Recently I gave evidence on behalf of the APS to the NSW senate inquiry on adoption by same-sex couples, in which I was called to account for the evidence base of the field of LGBT family studies referred to in the recently released APS literature review (Short et. al., 2007). I informed the inquiry that within the field of LGBT family studies there is a rigorous tradition of self-critique and ongoing examination that ensures the field is never able to rest on its laurels (e.g., Stacey & Biblarz, 2001). This issue of the *Review* is an example of such ongoing critique within the field of LGBTQ psychology more broadly

In the first paper of the issue Sakamoto, Chin, Chapra and Ricciardi examine the limitations of existing research on LGBTQ homelessness that has largely failed to provide adequate focus on the experiences of trans people. In response they outline their rigorously undertaken research working with Canadian transwomen exploring this group of women's experiences of marginalisation through homelessness, and the capacity of social welfare services to meet their needs.

In the second paper, Kane undertakes a large scale review of the dominant literature on gay men and body image, in which he explores the previous and current orthodoxies that appear to exist, and the limitations they place upon our capacity to truly 'see' the diverse ways in which gay men across a range of communities understand themselves and their bodies.

In the third paper Pearcey and Olson explore the experiences of US heterosexual women who are married or partnered with men who subsequent to marriage identify as gay or bisexual. Pearcey and Olson note the dearth of research on the experiences of this population

of women, and their findings highlight both the strengths they have, and the challenges they face.

In the fourth paper Erhart outlines two of the dominant understandings of the role of the internet in either opening up or closing down opportunities for the creation of safe spaces for LGBTQ people. She then goes on to explore how this plays out in a series of digital documentaries produced by queer families in South Australia.

In the final paper Meisner and Hynie provide a clear overview of current research on lesbian and gay ageing, and point toward some of the theoretical and methodological limitations of this field of gerontology, and conclude with some directions for the future of the field.

The issue concludes with two book reviews: one that examines bisexuality and polyamory and another that examines masculinity.

This issue of the *Review* is important not simply for its critical stance on the field of LGBTQ psychology, but for its inclusion of such an internationally diverse range of papers. As the *Review* goes from strength to strength, we look forward to continuing to publish such a broad range of stimulating and critical papers.

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A 'NORMATIVE' HOMELESS WOMAN?: MARGINALISATION, EMOTIONAL INJURY AND SOCIAL SUPPORT OF TRANSWOMEN EXPERIENCING HOMELESSNESS

IZUMI SAKAMOTO, MATTHEW CHIN, AISHA CHAPRA & JOSIE RICCIARDI

Abstract

The experiences of transwomen who are homeless are examined, focusing on the consequences of the profound marginalisation that they experience in their everyday lives and the support that they provide to each other as a form of survival. This study was part of a larger community-based, arts-based research project, Coming Together: Homeless Women, Housing and Social Support, which explored how transwomen and non-trans (biological) women who are homeless build support networks with each other in Toronto, Canada. Grounded theory was used to analyse multiple data sources including semi-structured interviews, narratives from feedback sessions and other public events, and data from arts-based research.

The results indicated that transwomen who are homeless experienced emotional and psychological injury in their everyday lives due to oppressive conditions such as transphobia, heteronormativity, poverty and the lack of stable and safe housing. Within social service environments, they were often told implicitly or explicitly that they 'do not belong'. The presence of transwomen within these spaces seemed to challenge the underlying assumption of a 'normative' homeless woman, leading some service providers to create informal and discriminatory rules to control their behaviour. However, far from being passive victims, transwomen with experiences of homelessness supported each other by constructing their own family-like networks, which not only provided instrumental and emotional support (e.g., listening ears), but also a basic sense of

protection and safety. Some of the exemplary social service efforts are noted. Recommendations for policy and practice rooted in empowerment and anti-oppressive principles are discussed.

Introduction

Transwomen [who are homeless] are at more risk of violence so they are always looking out for each other as some form of protection. Transwomen inform each other about which streets are safe, where's safe to stay and what parks and bridges are safe to access. (trans-identified service provider working with transwomen)

In North America, homelessness is a serious and pervasive issue (Allgood et al., 2003; Cheung & Hwang, 2004; Khandor & Mason, 2007; Wolitski et al., 2007). People who experience homelessness are negatively affected by intersecting oppressions such as poverty, lack of access to housing, sexism, racism and violence (Rafael, 2008). However, there is a scarcity of literature with respect to the experiences of individuals who face multiple forms of oppressions on the street; transwomen who are homeless are one such group. This paper aims to examine the experiences of transwomen when they face homelessness, focusing on marginalisation and the support that they provide to each other. Further, recommendations for social service practices and social policies are discussed so that social services can better meet the needs of transwomen with experiences of homelessness.

Given that terminology with respect to gender

is neither consistent nor uncontested, for the purposes of this paper, the authors have chosen to use the terms 'trans' and 'transwomen' because these words are commonly used within Toronto both among people whose gender identity is not consistent with the one to which they were originally assigned and among services and programs designed to serve them (519 Church Street Community Centre, 2006a; 2006b; Strang & Forrester, 2004; Trans PULSE 2008; The FTM Safer Shelter Project Research Team, 2008). 'Trans' is an umbrella term used to refer those who, "are gender variant or live outside society's gender norms," (Strang & Forrester 2004, p. 4), while 'transwomen' refers to those who identify themselves as transwomen (male to female or MTF), transsexuals, or as transgender. (We also recognize that individuals who share many of the same experiences around sex and gender as those who identify as transpeople or transwomen may not necessarily identify as such). Within this paper, we will also be using the words 'non-trans women' and 'biological women' interchangeably to refer to those whose sex and gender identities are congruent with those to which they were originally assigned. This decision is based on the fact that our project participants (including transwomen and transmen) often used the phrase 'biological women', while one of the trans-identified trans activists that we consulted suggested the use of the word 'non-trans women' to avoid overt emphasis of the bio-medical aspect of gender, although this is not a commonly used term. As none of the authors of this paper is from the trans community, we felt it important to observe these conventions and the ideas expressed by the people in the local trans community.

Homelessness

Adequate housing is essential to physical and mental health, as well as overall quality of life (Kothari, 2005; Raphael, 2008). Homeless is defined as "a condition of people who live outside, stay in emergency shelters, spend most of their income on rent, or live in homelessness" (City of Toronto, 2003, p. 2). The City of

Toronto, where the current study was conducted, endorsed a declaration acknowledging homelessness as a national disaster (City of Toronto, 2000). Statistics indicate that 32,000 different people slept in Toronto shelters in 2002, and approximately 6,500 individuals stayed in shelters on any given night in 2006 (Khandor & Mason, 2007). Research suggests that women are disproportionately impacted by homelessness (Cheung & Hwang, 2004). Although there is a lack of statistical data, transwomen are estimated to be overrepresented among people who are homeless in Toronto (Ontario Prevention Clearing House et al., 2006).

Transwomen and housing

Literature on the intersection of homelessness and transpeople is very scarce and many of the articles that speak to this issue, even tangentially, are US-focused, and may have limited transferability to the current study which was conducted in Canada. Much of the literature on transpeople and housing is couched with reference to broader LGBTQ (Lesbian, Gay, Bisexual, Trans, Queer) communities, in which the experiences of transpeople largely remain invisible. This literature tends to be focused, for example, on the housing issues of LGBTQ youth (Cochran et al., 2002; Freundlich & Avery, 2004; Quinn, 2002; Woronoff & Mallon, 2006) and those of LGBTQ elders (Cahill & South, 2002; de Vries, 2006; de Vries et al., 2006). Several articles have examined the issue of transpeople and health care, specifically around HIV/AIDS (Belzer & Radzik, 1997; Bockting & Avery, 2005; Garofalo et al., 2006; Kenagy, 2005; Operario & Underhill, 2005), and in these papers experiences of homelessness are typically only mentioned as a research sample characteristic. One notable exception to this overall trend is Mottet and Ohle's (2003) extensive practice guideline in which the authors outline practical changes that shelters can make to become more trans accessible.

Given the dearth of literature on the experiences of transwomen who are homeless, this

paper aims to explore, through multiple research methods, transwomen's daily experiences of marginalisation as well as the social support that they provide to each other. The specific questions guiding our inquiry are: what are the experiences of transwomen who are homeless? Compared to non-trans (biological) women, what issues do they face in particular? How do they support each other? What are the potential policy and practical implications of our results?

Context and Overview of the Current Study

This study is part of a larger, multi-method community-based research project entitled, "Coming Together: Homeless Women, Housing and Social Support," which explores how transwomen and non-trans (biological) women with experiences of homelessness build support networks with each other in Toronto, Canada. The research project draws from the guiding principles and methods of grounded theory (Charmaz, 2006), community-based, participatory-action research (Israel et al., 1998), and arts-based research (Finley, 2005).

Grounded Theory

Given the scarcity of literature on the experiences of transwomen who are homeless, we have adopted a grounded theory approach to build new knowledge from the 'ground-up'. Grounded theory (Charmaz, 2006; Strauss & Corbin, 1998) is a qualitative research methodology in which the process of data collection and analysis is conducted simultaneously to allow explanations of the phenomena to emerge from the data. In the current study, the constant comparative method (Charmaz, 2006) was used to examine the experiences of transwomen within the data to explore the diversity of experiences that transwomen shared, as well as across the entire data set to compare the experiences of transwomen with those of non-trans women who are homeless.

Community-Based Participatory Research

The research is grounded in community-based participatory research (CBPR/CBR) principles (Israel et al., 1998; Minkler & Wallerstein, 2004) and builds on over three years of a working relationship between a university, a community health centre, and a grass-roots women's drop-in centre. CBR starts with the reflection that traditional academic research has often failed the communities in which research is conducted, taking advantage of marginalised groups without returning knowledge to these communities. However, in recent years, there has been a strong movement toward engaging in research that not only builds academic knowledge but also produces knowledge that will directly benefit the communities in which research are conducted (Flicker & Savan, 2006; Israel et al., 1998). In our project, this meant that not only was the research project based on an equal partnership between the university researcher and community agency staff, but also that transwomen and non-trans women who have experienced homelessness were included in the research team in meaningful ways.

Arts-Based Research

In recent years, arts-based research has emerged as a method for qualitative research as well as participatory action research in the social sciences (Bochner & Ellis, 2004; Finley, 2005). Arguably, arts-based research is inherently political, thus often used to raise awareness about particular social issues (Eisner, 1997; Finley, 2005). Arts-based research allows participants to become artists who have the ability to create and have power over representing their world/worldviews, deciding what to show and what to keep hidden (Foster, 2007). Arts-based research ultimately gives marginalised populations the space to create representations of their world (Finley, 2005; Foster, 2007; Lincoln, 1995; Sakamoto et al., 2007; 2008). For the project presented herein, we used the innovative art modality of

staged photography (which included the use of theatre, costume, painting and photography) to allow for the increased inclusion of women with experiences of homelessness (for a fuller explanation of the use of staged photography, please see Sakamoto et al., 2007).

Research Team

According to the principles of CBR and grounded theory, it was considered important to be mindful of the social locations of the research team and advisory board members. The core research team included a university academic (Izumi Sakamoto), an experienced social worker in a community health centre (Josie Ricciardi), a community artist who has experience working with homeless women (Natalie Wood), a research coordinator with an anti-poverty activist background (Jen Plyler), and several research assistants (Aisha Chapra, Matthew Chin and others). Most research team members self-identified as lesbian/gay/queer, persons of colour, Aboriginal, and/or immigrants. However, only one member of the research team experienced poverty and none identified as trans, a limitation that was partially addressed through the establishment of the advisory board, the majority of whom were transwomen experiencing homelessness.

Advisory board

To ensure that this project was based on participatory, anti-oppressive and empowerment approaches (Gutiérrez & Lewis, 1999; Ristock & Pennel, 1996; Sakamoto & Pitner, 2005), an advisory board was formed consisting of transwomen and non-trans women who were experiencing homelessness. Advisory board members were recruited from the communities where the initial interviews had been conducted. Many of the members were asked to participate because of their reputations for supporting other homeless women. The advisory board members consisted of 7 women, of whom 5 identified as transwomen. The transwomen on the advisory board were between the ages of 25-50 with various life histories

and reflected multiple intersections of the diverse communities in Toronto and in Canada, including one Aboriginal transwoman, one Afro-Caribbean transwoman, and three Caucasian transwomen. Each advisory board member received a \$25 (or more depending on the time required) honorarium plus two public transit tokens every time they attended meetings, art-making sessions, and public shows.

Research process

Initial research activities included compiling an extensive literature review and conducting a series of in-depth semi-structured interviews with transwomen and non-trans women who are homeless and their service providers. Once the initial analysis was complete, the advisory board was formed to further guide data analysis and determine next steps in keeping with a cyclical, dialectic approach of grounded theory (Charmaz, 2006). In consultation with the community artist, the advisory board chose the arts medium of staged photography to generate and express the research outcomes. Within the research process, two groups of transwomen and non-trans women who have experienced homelessness were involved: those who became participants of three-hour long, one-time only, art-making sessions using staged photography; and the advisory board members who were involved for an extended period of time and also acted as peer researchers at art-making sessions and in subsequent data analysis and research dissemination processes. At four drop-in sites, research questions were asked, to which participants generously shared their personal stories in group discussions. These stories were turned into scenarios to capture the essence of the shared stories, which were then acted out in small work-groups, leading to a series of still images while photos were taken (i.e., *staged* photography). The participants (transwomen and non-trans women who have experienced homelessness) spontaneously played roles of script writers, actors, directors, painters, costume designers (using over 200 articles of clothes provided), and audience members. The research team took photo-

graphs of the scenes that the transwomen and non-trans women created. The resulting images were then reviewed with the advisory board and made into four posters highlighting key messages that came out of the art-making sessions. Subsequently, a research report (Sakamoto et al., 2007) was produced and numerous public and academic presentations were made, some involving transwomen advisory board members as speakers. After the production of the research report and posters, the research team and advisory board members returned to the four drop-in centres where art-making sessions took place in order to evaluate the research outcomes and processes. Drawing from this larger project, the current study focused on a subset of data, specifically on the experiences of transwomen.

Method

Data Sources

As discussed earlier, the study herein included multiple data sources to represent the process of the research project, which had multiple phases and components for triangulation purposes, and also to augment the relatively small number of transwomen represented in our research participants. These data sources are outlined in Table 1:

Data Collection Process and Participants

Ethics procedure

The study received approval from the University of Toronto’s Institutional Review Board prior to starting data collection, and the purpose and collection of the data for the research project were explained to all participants before they signed the informed consent forms in interviews, art-making sessions, and feedback sessions. Further, advisory board members went through the same process of informed consent in the beginning of their involvement as advisors.

Semi-structured interviews with service providers

The research team initially identified over 20 service providers and service agencies, including drop-in centres, shelters, hostels, and health centres that had rich experiences working with transwomen and biological women who are marginally housed or homeless. Out of the list, we began by interviewing a few service providers, who in turn recommended other service providers. Additional service provider informants were recruited as the research team determined knowledge gaps. The current study focused particularly on three of

Table 1: Data Sources

Form of Data	Participants
Semi-Structured Interviews (n=35)	5 transwomen with experiences of homelessness 15 non-trans women with experiences of homelessness 3 service providers working exclusively or extensively with transpeople 12 general service providers
Non-verbal and Verbal Data – Arts-based Research Session (n=8)	8 transwomen with experiences of homelessness
Feedback Session* (n=6)	4 transwomen with experiences of homelessness 2 non-trans women with experiences of homelessness
Narratives (n=4)	4 transwomen advisory board members

*Feedback session participants were recruited through a program serving trans people.

the fifteen interviews conducted with service providers: a transman, a transwoman, and a biological woman who is a strong advocate for transpeople. Further, we compared the information shared by the other twelve service providers to the information shared by service providers who had experiences working exclusively or extensively with transwomen or transpeople, which helped us to examine what is unique about transwomen's experiences with homelessness. These individuals included five service providers working mostly with Aboriginal women, and others working as outreach workers, social workers, nurses, counselors, program coordinators, administrators and a researcher, with a range of transwomen and non-trans women who are marginally housed or homeless. All formerly or currently homeless individuals received a \$25 honorarium (or more depending on the time required) plus two public transit tokens for their time and participation.

Semi-structured interviews with homeless transwomen and biological (non-trans) women

The service providers we interviewed earlier helped us identify and approach transwomen and non-trans women who have reputations of helping other transwomen and non-trans women, or who are generally connected to other transwomen and non-trans women. To

recruit transwomen specifically, a transwoman service provider working with existing programs for transpeople assisted us in securing rooms to conduct interviews so that the interviews could be done on site (at respective social service agencies). Overall, twenty face-to-face interviews were conducted with transwomen and biological women who were homeless, of which five interviews were with transwomen. For this study, the data from interviews with non-trans women were used for comparison purposes only to illuminate the experiences of transwomen.

Interview questions focused on transwomen and non-trans women's experience with homelessness and social support such as; "can you tell me a little bit about the most important people in your life?"; "in the places you hang out, are there people or groups of people that you don't like or stay away from?"; "is there anyone you turn to for help with the issues that you just mentioned?"; "how have you helped out any of your friends when they need it?" and "what issues are important to you and to other women in similar situations?". Since the number of transwomen interviewed was small, their specific demographics are not detailed here to protect their confidentiality and anonymity. Instead, for the diverse demographics of all 20 transwomen and non-trans women interviewed, please see Table 2.

Table 2: Study Participant Characteristics

	Ethnicity/Race	Age	Duration of Homelessness	Places of Living/Staying
All interviewees with experiences of homelessness (n=20)	9: Aboriginal 7: Caucasian 4: People of colour	11: 25-39 years old 9: 40-59 years old	7: up to 1 year 6: 1-5 years 2: 5-10 years 5: 10 years or longer	7: shelters/hostels 5: on the street 4: private housing 2: subsidised housing 2: with relatives or friends
Participants at feedback session focusing on transwomen's experiences (n=6)	3: People of colour 3: Caucasian	5: 35-44 years old 1: 45-55 years old	3: 5-8 years 2: 8-10 years*	N/A**

* One person did not respond to this question on the questionnaire provided.

** We did not ask this question at the feedback session.

Arts-based research data

As described earlier, arts-making sessions took place in four different drop-in centres across Toronto. In each site, eight to 15 transwomen and biological women participated, with a total of over 50 women participating in the four arts-making sessions. The resultant pictures used for the current analysis come from the particular session in which eight transwomen and one transman-identified staff person were present besides advisory board members (including three transwomen) and other research team members. The themes arising out of the arts-based research were analysed to describe the experiences of transwomen. On the advice of agency partners, we did not purposefully ask demographic information of these participants; since they were already being photographed, giving out demographic identities may have made them feel more vulnerable and may have jeopardised their sense of safety. Again, an honorarium of \$25 and two public transit tickets were given to each participant.

Feedback session data

After the data analysis and initial dissemination process were complete, the research team and advisory board returned to the four art-making sites for further feedback (member check/member validation process as in grounded theory). An honorarium of \$20 and two public transit tickets were given to each participant.

The data from one of the sessions that exclusively focused on transwomen's experiences are presented herein. A total of four transwomen and two biological women who were experiencing homelessness participated in this particular session. Demographic information was asked using a short pencil-and-paper questionnaire. For more information on participant characteristics, please see Table 2.

Narratives of advisory board members

In order to display the artwork produced

through the project and disseminate the research results further (which included the distribution of the posters and the research report), two public events were held (one at the University of Toronto, and the other at the central municipal government office building in Toronto, Metro Hall). Three transwomen spoke at these events. These narratives were recorded and later transcribed for documentation and analysis. Further, the advisory board members were invited to give feedback on the study process and findings. Three advisory board members (two transwomen, one biological woman) were present for this session. As discussed earlier, each time advisory board members spoke at public events or attended meetings (including the feedback session and art-making sessions) they received \$25 honorarium with two public transit tokens (for a longer engagement larger honoraria sums were offered).

Data Analysis

The interviews were audiotaped and transcribed for analysis. Initially, the researchers attempted to suspend our knowledge as much as possible (Caelli, 2001) by utilising culture review, horizontalisation and open, word-by-word or line-by-line coding techniques (Charmaz, 2006; Creswell, 1998; McLeod, 2001) so that the themes and categories unique to the current data were allowed to emerge. Multiple coding strategies were used, including open (initial), axial and thematic coding (Charmaz, 2006; Strauss & Corbin, 1998). First, one research assistant read all the transcripts and conducted inductive open coding. Next, a team member who conducted most of the interviews summarised these coded data by themes, conducting axial coding. The emergent themes were further compared and contrasted to each other by taking into consideration the complex intersecting identities of our participants (constant comparative method; Charmaz, 2006). Finally, another research assistant read all the transcripts and coding summaries, and conducted thematic coding for transwomen's experiences leading to sorting and further theorising. At

this point, the data from feedback sessions, advisory board members' narratives and data from arts-based sessions were all integrated into the interview data. The principal investigator supervised the data analysis process closely as different people took on coding tasks, especially at this final coding stage. As the data analysis continued, our emerging themes became hypotheses, which were then tested against the rest of the data, making the data analysis more deductive. NVivo qualitative software was used to assist in data management and analysis.

Results and Discussion

In constructivist-oriented, grounded theory approaches (Charmaz, 2006), the results and discussions are inter-connected and often difficult to tease apart. Therefore, both the results and discussion are presented in this section.

Marginalisation

Transwomen with experiences of homelessness were often marginalised in their day-to-day lives by the police, service providers, bureaucrats, and other people who may or may not have been homeless, including non-trans (biological) women and members of lesbian, gay and bisexual communities. Marginalisation is defined as "the context in which those who experience inequality, injustice and exploitation because of their social location live their lives" (Strega, 2007, p. 73). Some of these issues echo what have been reported in the small body of literature on social services with transwomen (Barbara et al., 2007; Martin, 2008; Mottet & Ohle, 2003). In some cases, these experiences occurred in informal and subtle ways, while in other cases they took place through formal and institutionalised channels. Homeless transwomen were subject to marginalisation within shelters and detox centres, on the street, in the 'gay village' and within the general public:

I couldn't as a transperson go to a regular soup kitchen kind of place. (transwoman

with experience of homelessness).

This sentiment of exclusion within social services was also echoed by the way in which service providers themselves recognised how social service workers perpetuate transphobia or the "societal discrimination and stigma of individuals who do not conform to traditional norms of sex and gender" (Sugano et al., 2006, p. 217):

There are a lot of transwomen living on the street only because they can't access shelters and are rejected by housing workers for subsidised housing. (service provider working with transwomen)

Transwomen in our study also pointed to the ways in which their experiences of marginalisation extended beyond social services environments and pervaded all aspects of their lives:

'What are you wearing? And how much do you make?' That's what qualifies you in the gay village. If you're a hooker or a transsexual, you don't qualify. (transwoman with experiences of homelessness)

Similarly, in the art-making session consisting of only transwomen participants, transwomen shared their painful experiences of being marginalised in their daily lives. The experience of employment and housing discrimination was common among the transwomen participants. In the staged photograph displayed in Figure 1 (next page), one transwoman's experience is featured in which she applies for a job and receives a positive response over the phone, but upon arrival at the office for an interview she is rejected outright.

One transwoman shared her experience of being marginalised and cut off from her biological family due to her gender identity, an experience that resonated with many participants in this art-making session. These transwomen participants further shared the need to hide behind masks to protect themselves when attempting to access jobs, housing and even social services. While they expressed

their experiences of multiple discriminations and oppressions through stories and arts, participants also talked about the social support they provided to each other for survival and acceptance.

Both of these themes (discrimination and social support) are highlighted in the poster shown in Figure 2. In this image, with the help of friends, two transwomen are destroying the masks (top centre). Further, transwomen came together and transformed the notion of 'family dinner'. The original stories shared in the art-making session centred on rejection, in which their biological families often did not accept them as transwomen and therefore treated them poorly or ostracized them. However, in working with others in the art-making session, these transwomen transformed the same 'family dinner' into a chosen family coming together to support each other (see Figure 2).

Figure 2: Poster featuring transwomen's experiences with homelessness, marginalisation and friendships from a staged photography session

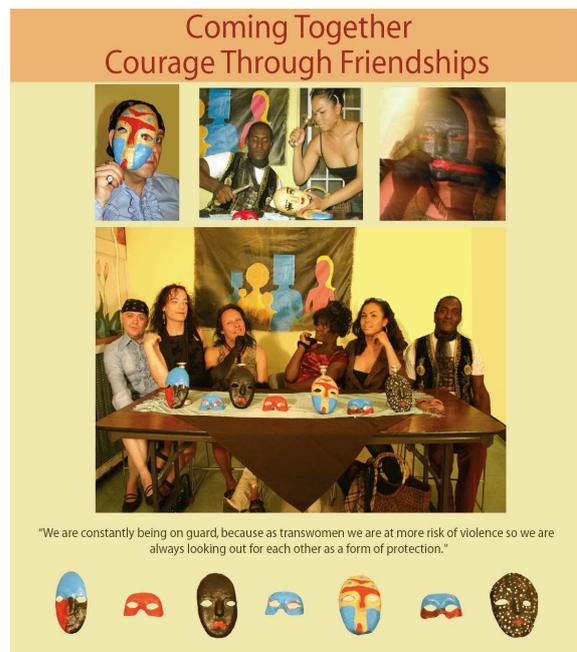


Figure 1: A transwoman and employment discrimination



A transwoman was rejected outright at a job interview despite the job openings and her qualifications, when the employer did not like her gender identity.

Similarly, the following narratives from interviews echoes the centrality of social support that transwomen provide for each other:

Other transwomen that I've know for a while, that I trust and who haven't done anything bad to me. I trust them and they trust me. They're my family too. They're actually way better than my original family. (transwoman with experiences of homelessness)

Since I've had a place now, I've actually offered my place as a safe place to stay for a couple of girls from the corner. I've offered one bio girl and one transgirl a place to stay. (transwoman with experiences of homelessness)

The theme of social support will be further elaborated in a later part of this paper.

A 'Normative' Homeless Woman?

'Oh, that's a whore, she's a tranny, can't be seen with her in the daytime, can't walk around with her'. Oh, f*ck off!...[H]ow dare you pass judgment on me! (transwoman with experiences of homelessness)

The above quote is an indication of the psychological and emotional injury that the transwomen in our study experienced as result of marginalisation related to the external violations and assaults inherent in transphobia and heteronormativity (which is based on the normalisation of a sex-gender binary equivalence; McCarl Neilson et al., 2000). It is important to note that 'injury' in this context should be conceptualised in relation to "nonpathological external and situational factors that affect one's mental health rather than as a mental disorder" (Carter, 2007, p. 17).

The manifestation of how these transwomen experienced marginalisation and emotional/psychological injury is evident in the ways in which they 'do not belong' within certain spaces, such as gender-specific shelters. It seemed as though the presence of transwomen within these spaces challenged an underlying assumption of a 'normative' homeless

woman, leading some service providers to create informal and discriminatory rules to control their behaviour. This theme can be captured in the word 'heteronormativity', which has been described as follows: "[t]he social norm of heterosexuality (or 'heteronormativity') presumes or attributes a heterosexual identity to all members of society, and furthermore, it presumes that heterosexual is the 'normal' sexuality from which all others deviate" (Fell et al., 2008, p. 127). The experiences of transwomen captured in our data takes this notion further, specifically elaborating on it from the perspective of transwomen, in that heteronormativity also operates in conjunction with transphobia as was highlighted in the following quote by a trans advocate about the shelter system:

We see this vacuum, this lack of policy, and in the vacuum, staff are inventing these strange policies. There's that one – we're going to make up a [male] name and give it to you [transwoman]. I'm sure it doesn't say that in their policies. Or we've heard... there was one where transwomen had to wear their breasts to breakfast.... It's this lack of leadership and there's a lack of policy in it. So people [shelter staff] inventing things. Oh, transwomen have to get seen by a doctor before they can come in [to a shelter] because maybe, to make sure that they've had surgery... These are all things that are hopefully on the way out. (trans-identified service provider)

Our trans interviewees indicated that shelter staff often have a higher standard of what is considered 'feminine' that is used to determine if their behaviours are appropriate or inappropriate:

I think transwomen are held up to a much higher standard of femininity. I don't think biological women in shelters who yell, who scream, thrown things, etc... I don't think that anybody says they're acting like men [about these biological women]. But... transwomen, the instant that they defend themselves, it's this, you know....you're either too masculine or too feminine or something. (trans-identified service provider)

It is important to understand these contexts of heteronormativity and transphobia in which transwomen suffer psychological and emotional injuries when they try to access social services that they are supposedly entitled to receive. On another note, during the interview process, one of the homeless transwomen in our study shared the following with the interviewer:

You're real. You can look at me when you talk. More than the monetary value, it means a lot to me that you're real.

The interviewer's genuine encounter with this transwoman might have led to this comment which, at the same time, highlights the prevalence of marginalisation that transwomen who are homeless may encounter with professionals in many other settings.

The Need for Change

In response to experiences of marginalisation and the consequent negative health impacts, both transwomen with experiences of homelessness and their service providers (who may or may not have lived experiences of being trans or homeless) articulated the need for increased and improved access to counseling, detox programs, and other social services. One transwomen with experiences of homelessness stated:

We still need to make shelters safer... When I come home I just want to be secure. I just want a place that I'm safe, in peace.

A trans-identified service provider also spoke of the need for change with respect to trans access to shelter and housing: in response to a question about what is needed to better support transwomen with experiences of homeless at the macro, mezzo and micro levels, she responded:

I think, one, the inclusion of transwomen into government policy, and two, give some transwomen and transmen priority in housing.

Many times there was an overlap of recommendations between those given by the transwomen with experiences of homelessness and their service providers, as both noted that systemic exclusion, discrimination, transphobia, and heteronormativity must be addressed in order to create change and reduce the various kinds of emotional and psychological injury that transwomen endure. In response to being asked about the issues that are important to her and to other women in similar circumstances, one transwoman with experiences of homelessness simply stated: "Respect. Respect for trans people in general. Respect for who we are". One service provider spoke about her experience of witnessing the operationalisation of transphobia within a social services and counseling context:

And a lot of it is body language, tone. You know, the non-verbal things that staff don't seem to understand. I remember when I worked at a women's shelter and at the front counter, a trans woman would come, she's coming for her [public transit] tickets and the staff person sitting at the desk, all of sudden they do a swirl in the chair. You turn to the back, you're not doing anything. And I'd stand there, and observe, and think, "wow." So by the time she gets to the counter, guess what she's doing? She's slamming it, 'Give me my f'ing tickets.' 'Oh no, if you keep it up you're going to be discharged.' No, but the precipitating, that's what it was and the look on your face and she saw that so by the time she reached that point, she's upset, of course, of course."

Dealing with the negative attitudes of social services staff can have a huge impact on how transwomen feel on a daily basis when they have to depend on the services that these workers provide. These subtle and not-so-subtle manifestations of transphobia and discrimination can lead to emotional injury at a daily level which could accumulate easily and one day explode. In recounting the following anecdote, this service provider also identified the key issues at stake:

It's about women being accepted as women in their self-identified gender. She doesn't have to have to go into the dining room, she doesn't have to do any of this stuff. So it's attitudes and it's training and it's a lot of ignorance.

Indeed, staff training on improving transpeople's access to social services was one issue that many mentioned. Transwomen in one of our feedback sessions at a drop-in centre discussed many changes that they would like to see. Two priorities identified were that community and social services must provide trained, sensitive, and understanding social workers, counselors, and social service workers who treated them as equals, and who were flexible and friendly; and that transwomen should be able to choose workers who are truly trans-positive. One of the discussants at the session stated that she was concerned about:

The lack of knowledge out there, I know agencies out there that should know better and don't have a clue, including a social worker. Professionals need to be trained.

Transwomen who participated in our project coped with the harsh realities surrounding them and the resultant psychological and emotional injuries by supporting one another in the processes of 'coming out' and 'transitioning', in essence by becoming one another's family and social support (as demonstrated through the results of the art-making session discussed earlier). Often, they do not seem to find this kind of social support in 'mainstream' agencies, in particular from health care services (such as hospitals, health centres, clinics).

Transwomen also demanded safety when it came to housing, especially in women's shelters where transwomen are still fighting for equity and access. They voiced that shelters must work hard to comply with *Toronto Shelter Standards*, which states that "transsexual/transgender (TG/TS) and intersexed people to access services that the individual identifies will best preserve their own safety and dig-

nity" (City of Toronto, 2002, p. 14). While the existence of this policy in itself reflects the significance and effectiveness of activism around transpeople's rights, transwomen consistently identified the systems and institutions in our society as the source of their emotional injury and advocated for training for social service employees as well as education and awareness in mainstream spaces such as malls, security companies, and the police as some examples. It is also important to be mindful that education and training has to take place within a broader anti-oppression framework, recognising the intersectionality of identities and that transwomen also have identities related to race, class, ability and sexuality; As one transwomen in our study stated:

I know people in the community that have learning disabilities, and they need help with more than their gender...it's not just that people are trans, they have other issues that they need help with.

Addressing the root causes of exclusion that impact diverse people who experience homelessness is important as oppressions intersect with each other. In addition to focusing on specific struggles and difficulties that transwomen face, which results in the psychological/emotional injury of transwomen with experiences of homelessness, it is also important to recognise the interconnectedness of oppression based on gender identity and class to other kinds of oppressions:

Trans access should be integrated with their other anti-oppression policies. So whatever their policies are around anti-racism, around disability, around all these other issues is what their policies need to be around trans access. (trans-identified service provider)

Other advocacy groups around trans issues echo the demands for basic human rights voiced by our research participants: respect, dignity, and the right to be treated according to one's self-defined gender (519 Church Street Community Centre, n/d).

For transwomen, being able to access women's services is essential for safety and survival. As a result of grassroots activism, shelters and drop-in centres have become more accessible to transwomen in Toronto. In particular, the Trans Access Project at the 519 Church Street Community Centre has been exemplary in their tireless training and advocacy efforts (see 519 Church Street Community Centre, n/d; Strang & Forrester, 2004). Yet, there is still a need for greater awareness-raising to break down barriers and challenge stereotypes and violence in other areas of social services including counseling services offered in community health centres, drop-in centres and other agencies. Also there is a need for more trans-only services, created by and for transwomen, such as counseling, housing, shelters and harm reduction services. However, these trans-only services should exist alongside other services for women that are accessible to transwomen. The creation of transwomen- or trans-only services was not seen as the only solution to increasing trans-access. Many transwomen wanted meaningful inclusion into spaces and services designed for all women if emotional and physical safety were secured, in addition to access to some trans-only services when they desired them, a recommendation which resonates with earlier reports (Strang & Forrester, 2004).

Social Support and Resiliency

My biological family fed me, housed me and clothed me. But my street family kept me alive. (transwoman advisory board member)

[I]f I hadn't dealt with this stuff when I did and met other people I would probably be dead. Not physically but dead inside. (transwoman with experiences of homelessness)

Despite experiencing marginalisation and emotional/psychological injuries, the transwomen we interviewed were not passive victims. Our findings suggest that transwomen (and other homeless women in general) supported each other by constructing their own

friend and family-like networks. Through social supports transwomen not only provided to one another instrumental support (e.g., food, cigarettes, a shower), emotional support (e.g., listening ears), informational support (which worker to see, where to get a free meal), and appraisal support (advice and feedback; cf. Berkman et al., 2000) but also a basic sense of protection and safety, one that the state often fails to provide for homeless women in general, and transwomen in particular.

Social support is a dynamic and interactive process that takes shape over a period of time (Jung, 1984). In the literature, social support is an expansive term and has come to mean many different things (Hupcey, 1998; Hutchison, 1999; Jung, 1984). For this project, we used a common definition of social support (as discussed above) to analyse how transwomen supported one another, and framed this concept from a strengths and empowerment-based perspective (Gutiérrez & Lewis, 1999). In light of the lack of social services that are trans-positive, and due to the fact that transphobia is so widespread in Canadian society, it was important to focus on how central social supports and social networks were to transwomen to survive and buffer the mental health impact of transphobia. It must be noted however, that these communities may be exclusionary in nature due to the severity of social exclusion and marginalisation that homeless transwomen face.

On another note, advisory board members who are transwomen articulated that participating in our research project itself was a positive and supportive experience for them. At a number of public presentations and at a feedback session, transwomen consistently spoke about their positive experiences of participating in the Coming Together project. They felt valued and empowered, and found structure in their days. Some used words such as 'healing' to refer to their experience in the project. The phenomenon of transwomen coming together, creating community and safe spaces with each other, thereby supporting their mental and spiritual health, was

something that the transwomen on our advisory board articulated:

...and then I went to see what was really going on [to an advisory board meeting]. It was very interesting, it was like you were in another world, you know what I mean, like you're seeing what you can accomplish and what's out there and things that you can do. It kind of put me in a different view of mind, like, to see that life is not always about doing drugs and having money but actually have a home, to have a fridge full of food, you know. It actually made you see like I can actually relax, be at peace with myself instead of running around sleeping on top of buildings, you know what I mean. (transwoman advisory board member speaking at the Coming Together opening exhibition)

As highlighted in this narrative, being on the advisory board for an extended period of time (from 3 months to 3 years) seemed to have fostered the building of social networks and a source of social support among them.

Limitations

The research study presented here used multiple, small sample data sources. In a grounded theory approach, data saturation is achieved before researchers stop collecting data (Glaser & Strauss, 1967). Data saturation for our study was reached through different data sources, but not through one source of data; this may limit the transferability of the results to other settings. Further, none of the research team members besides peer researchers (including the authors of this paper) identify as transwomen and only one has experienced poverty, which may have limited our ability to truly appreciate the experiences of transwomen who are homeless. However, the non-peer researchers hope that this limitation was partly augmented by the strong presence of advisory board members who are transwomen with experiences of homelessness.

Additionally, given that Coming Together pro-

ject was structured around the experiences of transwomen and non-trans women who were receiving social services largely designed for non-trans women, we did not collect information about the experiences of transmen who are homeless. However, we recognise the importance of these experiences and one of our future research agendas includes comparing them to those of transwomen. While we suspect that transmen also experience significant emotional and psychological injury due to transphobia and heteronormativity, the transferability of our results to transmen's experience with homelessness and marginalisation is largely unknown.

Conclusion

In this paper we have discussed the emotional and psychological injury that transwomen experience when housing and poverty are the issue. Many social services, including psychological care, were identified as inadequate, insufficient, and often even oppressive toward transwomen who were seeking help. Within social service environments, they were often told implicitly or explicitly that they 'do not belong'. The presence of transwomen within these spaces seemed to challenge the underlying assumption of a 'normative' homeless woman, leading some service providers to create informal and discriminatory rules to control their behaviour. However, far from being passive victims, transwomen with experiences of homelessness supported each other by constructing their own family-like networks, which not only provided instrumental and emotional support (e.g., listening ears), but also a basic sense of protection and safety. Some of the exemplary social service efforts are noted. Recommendations to improve these services were articulated by transwomen and their service providers. Such efforts must be undertaken within an empowerment-oriented and anti-oppressive perspective (Gutiérrez & Lewis, 1999; Sakamoto & Pitner, 2005) so that transwomen's emotional and psychological injuries are not treated as psychopathology, but rather, as individual-level experiences caused by structural-level oppres-

sions, including heteronormativity and transphobia held by individual practitioners as well as the social service system as a whole. Only then, can counselors and other social service providers start to offer much needed, adequate and effective care that transwomen who are homeless deserve to receive.

Acknowledgements

The authors would like to thank advisory board members, Regent Park Community Health Centre, Sistering – A Woman's Place, and 519 Church Street Community Centre as well as Natalie Wood, Jen Plyler, Rose Cameron, and Bixidu Lobo-Molnar for their generous contributions to the research. Funding was provided by the Wellesley Institute, Social Sciences and Humanities Research Council of Canada Institutional Grant, and Royal Bank Fellowship (University of Toronto Faculty of Social Work).

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UNMASKING THE GAY MALE BODY IDEAL: A CRITICAL ANALYSIS OF THE DOMINANT RESEARCH ON GAY MEN'S BODY IMAGE ISSUES

GRAEME KANE

Abstract

Gay men's body image issues are typically examined from two distinct paradigms: thinness and muscularity. These two conventional paradigms may be conceptualised as the old and new orthodoxy respectively. Much of the research findings of the old orthodoxy compared gay men and lesbians with heterosexual men and women, and tended to feminise gay men and masculinise lesbians. The research findings of the new orthodoxy on the other hand, have tended to portray gay men as seemingly conflicted by the competing demands of being thin and muscular. Both orthodoxies portray gay men as obsessed with their appearance and tend towards the pathologising of gay men. Furthermore, both assert the need for prevention and treatment programs to ameliorate the supposed distress gay men experience due to the pursuit of an unrealistic body ideal.

Unfortunately, however, both research paradigms almost universally fail to engage in any critical analysis of the dominant research they cite in the construction of the effeminate thin gay man desperately clinging to his youth or the body-obsessed low-fat gay man always working out at the gym. This article critically reviews the methodologies, data analysis and theoretical inferences of the research within both paradigms, and argues – echoing recent research in the field – that gay (and heterosexual) men's body image is a multifaceted construct that is better informed by a broad, diverse and complex worldview than simplistic and populist binary formulations of gender and sexual orientation.

Introduction

The struggle for sexual self-determination is a struggle in the end for control over our bodies. To establish this control we must escape from those ideologies and categorizations which imprison us within the existing order (Weeks, 1980, pp. 19-20).

The dominant body of research on gay men's body image issues can be organised into two distinct but related domains: the pursuit of thinness and the quest for greater muscularity. These two conventional paradigms may be conceptualised as the old and new orthodoxy respectively. The old orthodoxy emerged from early clinical studies (e.g., Herzog, Norman, Gordon, & Pepose, 1984; Schneider & Agras, 1987) and later larger non-clinical studies (e.g., Williamson & Spence, 2001). This research displayed a general tendency towards pathologising or feminising gay men to account for findings of the pursuit of an unrealistically thin and youthful body ideal. The new orthodoxy in many ways emerged from the old orthodoxy (e.g., Hospers & Jansen, 2005; Kassel & Franko, 2000; Yelland & Tiggemann, 2003), with the findings that gay men were conflicted by the pursuit of thinness but also the quest for greater muscularity. The new orthodoxy retained the concept that gay men were obsessed with their appearance and identified four main powerful determinants of the new unrealistic gay male body ideal: childhood gender non-conformity, minority stress, gay/gym culture and HIV. Both orthodoxies tend to ignore or marginalise the body of research that suggests that gay (and heterosexual) men's body image issues are diverse and multifaceted (e.g., Boroughs & Thompson, 2002; Duncan 2007; Ridgeway & Tylka,

2005).

The inspiration for a critical engagement - as represented in this paper - with the dominant research that makes up the old and new orthodoxies evolved from a poor fit witnessed between clients in the counselling room and the research participants reported in the dominant research studies. Furthermore, a close reading of the methodologies, data analysis and theoretical inferences called into question the transcendence of a monolithic gay male body ideal. This article positions itself within a semiotic inspired paradigm that seeks to examine the ideologies that masquerade as truth, not so as to immobilise that dominant research but to temper its universal applications and popularist assertions with a practitioner's worldview of diversity, complexity and evolving priorities. Another way of stating this: the commercial gay sub-culture may be a place of powerful cultural forces, but it cannot be said to account for all gay men and their lived experiences. Not all gay men are self loathing, ashamed of their bodies or obsessed with their appearance. And for those who are, perhaps their sexual orientation isn't the main factor feeding their dissatisfaction.

The Old Orthodoxy

There exists a large body of research that comprises the old orthodoxy, which includes early studies with small clinical samples (Fichter & Daser, 1987; Herzog et al., 1984; Schneider & Agras, 1987); review articles (e.g., Andersen, 1999); and non-clinical studies with small to large samples (Beren, Hayden, Wilfley, & Grilo, 1996; Brand, Rothblum, & Solomon, 1992; French, Story, Remafredi, Resnick, & Blum, 1996; Herzog, Newman, & Warsaw, 1991; Gettleman & Thompson, 1993; Russell & Keel, 2002; Siever, 1994; Silberstein, Mishkind, Striegel-Moore, Timko, & Rodin, 1989; Strong, Williamson, Netemeyer, & Geer, 2000; Williamson & Hartley, 1998; Yager, Kurtzman, Landsverk, & Wiesmeier, 1988). The early clinical studies of gay men's body dissatisfaction accounted for their findings as a result of the contribution of biology,

cultural pressures and/or abnormal psychosexual development. The early non-clinical studies tended to position heterosexual women as most obsessed with their appearance and being thin, followed by gay men, lesbians and finally heterosexual men (who were found to be the least concerned with their appearance and most satisfied with their bodies). The later non-clinical studies nominated internalised homophobia as an additional factor to the cultural pressures to be thin. However, many of the non-clinical studies have been criticised for their selection bias: being drawn from a narrow convenience sample (e.g., friends of one of the authors, Herzog, Newman, & Warsaw, 1991) or recruited with specific advertisements referring to eating disorders or eating patterns (e.g., Russell & Keel; Siever).

Early Clinical Studies

The theoretical doctrine that gay men are under greater cultural pressure than heterosexual men to be thin and attractive was promulgated by early researchers (Herzog et al., 1984; Schneider & Agras, 1987). The clinical sample examined in Herzog et al., for example, comprised 13 anorectic and 14 bulimic males. The inference that "the cultural pressure on the homosexual male to be thin and attractive" (p. 990) was premised on seven self identified gay men and five men conflicted about their sexuality. The study by Schneider and Agras comprised 15 male bulimics, four of which identified as gay and another four as bisexual.

The promulgation of the effeminate thin gay man was more overt in a study by Fichter and Daser (1987), which comprised a decade of clinical work with 42 males (29 with primary, seven with atypical and six with secondary anorexia). The authors stated that their "own hypothesis is that boys and male adolescents with atypical gender role behaviour have an increased risk for an anorexic or bulimic eating disorder" (p. 409). Perhaps not surprisingly, their data revealed that atypical gender role behaviour was observed in the "close and intimate relationship between the male patient

and the mother, who appeared to be sexually frustrated and otherwise frustrated by her husband" (p.415). Further, "during their childhood 13 (65%) preferred cooking, sewing, playing with dolls and cleaning to *tougher and more boyish games*" (italics added; p. 412). Boys, who are fortunate enough to enjoy a normal and uncomplicated psychosexual development, are unlikely to develop anorexia according to their study. Early clinical studies were likely to have had inflated numbers of gay men in their sample, due to the practice of greater engagement of this population with treatment services (Liddle, 1997; Murphy, Rawlings, & Howe, 2002). As Olivardia, Pope, Mangweth, & Hudson (1995) suggested, gay men "with eating disorders would be more likely than other men with eating disorders to seek treatment, leading to an inflated rate of homosexuality in clinical samples" (p. 1283).

A perplexing study conducted 12 years ago by Carlat, Carmargo and Herzog (1997) analysed the clinical data from an 800-bed hospital over a 14 year time period. Clinical data from the hospital, which had an outpatient service that supported 600,000 patient visits per year, identified 176 males, of which 135 had a confirmed eating disorder diagnosis. The authors conclude that the "high rates of homosexuality and bisexuality among males with eating disorders can serve equally as evidence for psychosocially or biologically based views of the etiology of eating disorders" (p. 1131), with homosexuality a 'risk factor' for being obsessed with one's appearance and remaining thin. A closer reading of the first table presented by Carlat et al. reveals that there were no gay or bisexual men diagnosed with anorexia during the 14 years of data collection. They were all heterosexual or asexual. The gay and bisexual men were diagnosed with bulimia or EDNOS. The absence of gay men with anorexia is perplexing and unaccounted for.

Early Non-Clinical Studies

There are seven distinct non-clinical studies that have produced similar findings in support

of the earlier clinical studies (Beren et al., 1996; Brand et al., 1992; French et al., 1996; Herzog et al., 1991; Siever, 1994; Silberstein et al., 1989; Yager et al., 1988;). These seven studies typically form the foundation of the promulgation of the supposition that gay men are more susceptible to body dissatisfaction than are heterosexual men. Due to the prominence and authority afforded these 'seven pillars' of the old orthodoxy, and in chronological order of publication, the various shortcomings in their methodology, data analysis and theoretical inferences are now examined.

Yager et al., 1988. These authors were interested in comparing attitudes (drive for thinness) and behaviours (self-induced vomiting, use of diuretics) in non-clinical samples of gay and heterosexual men. Their findings suggested gay men, more than heterosexual men, tended to be excessively concerned with being thin and to engage in associated behaviours. They account for their findings as "some homosexual males tend toward the effeminate from an early age" (p. 497), incorporating the theorising evident in Fichter and Daser (1987). Separate to the bias inherent in their theorising, are a number of concerns in respect to the methodology and data analysis. The authors recruited their numerically uneven sample of 48 gay men from a RAP group at UCLA while the 300 heterosexual men were obtained from four distinct groups (a health clinic, psychology class, dance majors and athletic teams). Close inspection of the data revealed that the standard deviations for the gay men differed enormously from those obtained for the heterosexual men on four of the eight scales and in the overall total score – in fact they were twice the value in most cases. Although the t-tests conducted assumed unequal variances, the marginal statistical significances obtained, the small sample size, and ratios of unequal variance, suggested that the findings needed to be more cautiously framed. Furthermore, although the degree of outliers is not stated, it would also appear from the range of means obtained overall that the comparison between gay and heterosexual men was done with asymmetrical sample distribu-

tions. As such, the statistical differences found may be an artefact of the violation of the normality assumption (for an excellent summary on the fundamental problems of conventional methods in respect to normality and homoscedasticity, see Wilcox & Keselman, 2003).

Silberstein et al., 1989. These authors promulgate the theorising outlined in early clinical studies, namely that heterosexual women and gay men are defined and motivated by their need to appear attractive to men, whilst heterosexual men are less interested in their physical appearance and weight. The study compared a sample of 71 gay to 71 heterosexual men and found a slight tendency for gay men to be more dissatisfied with their bodies than heterosexual men. Closer examination of the results reveal that the number of men who perceived their bodies as ideal, who wanted to lose weight and who wanted to gain weight, were practically identical for gay and heterosexual men. That is, no between group differences were found on this measure. It was not possible to clarify how well the two samples meet the assumptions for conventional methods from the data provided in the first table. The second table of data did however reveal that assumptions of normality and homoscedasticity for conventional methods were violated – the unequal sample sizes used for comparison were very small (ranging from 10 to 36); seven of the eight dependent measures variance ratios were too large, which would suggest that the statistical differences obtained were inflated and most likely Type I errors. This suggests that the claims made about the observed differences between gay and heterosexual men in this study need to be approached with greater caution.

Herzog et al., 1991. The study by Herzog et al. comprised a non-clinical sample of 43 gay recruited from the commercial gay scene (bars, newspaper and gay organisations) and 32 heterosexual males mostly recruited “through friends of one of the authors” (p. 357). The results in this study were complex and difficult to synthesise and in fact pointed to a greater diversity of body preference than

the authors acknowledged. Notably, the two groups did not differ in terms of body dissatisfaction on one measure, reported drive for thinness was not statistically significant, and both groups obtained very similar results on current and ideal body shapes. Yet the underweight ideal for gay men was promulgated based on the unrepresentative sample of gay men being on average underweight when compared to the friends of one of the authors.

Brand et al., 1992. Although the authors noted that gender is a more salient factor when accounting for weight concerns, this study’s finding that gay men and heterosexual women tend to be universally more preoccupied with their weight than lesbians and heterosexual men is invariably the typical outcome cited. The gay men in this study comprise a very small sample of 13 men in their mid-thirties attending a professional conference, while the larger lesbian sample of 124 was drawn from a music festival. They were compared to 172 heterosexual first year psychology students (133 were women) whose average age was around 19 years. This was an unrepresentative sample that warrants more clearly stated reservations about its applicability and universality when referenced in more recent studies (e.g., Gil, 2007; Tigge-mann, Martins & Kirkbride, 2007); as opposed to the straightforward assimilation of the old orthodoxy in quotes such as: “most empirical evidence shows that gay men... are more likely to suffer from eating disorders, compared to heterosexual men” (Gil, p. 2381).

Siever 1994. In this oft cited study, the author theorises that: “[g]ay men, like women, experience extreme pressure to be eternally slim and youthful looking” (p.252) in order to attract a male partner whereas, “because physical attractiveness is less essential in attracting a female partner, heterosexual men and lesbians are subject to less pressure to be physically attractive” (p. 253). While such theorising is likely to offend a sensibility that celebrates diversity and complexity (including modern scientific precepts that seek to avoid sexist and homonegative language or bias),

more concerning has been the failure of the multitude of researchers that cite Siever's study to critically engage this worldview or the data manipulation utilised to arrive at it (e.g., Andersen, 1999; Strong, Williamson, et al., 2000; Tiggemann et al., 2007). For example, the scores on the Eating Disorder Inventory (EDI) and Eating Attitudes Test (EAT) were adjusted in order to arrive at statistically significant results. Closer reading of the conclusion reveals that when "the statistical analyses... were rerun with the original [i.e., valid] scoring method for the EAT and the EDI... the magnitude and frequency of statistically significant effects were greatly reduced" (p. 257). Siever's obfuscation of his findings (and other's failure to critically engage with the limitations of his research) would suggest the need for some degree of scepticism towards the old orthodoxy's claim that sexual orientation (primarily in reference to gay men), is a risk factor for body image concerns and concomitant eating behaviour.

Beren et al., 1996. This study compared gay men and lesbians in their thirties to younger heterosexual men and women whose average age was 18. Gay men, like heterosexual women, were defined as motivated by their need to appear attractive to men, whilst lesbians and heterosexual men were presumed to be less interested in their physical appearance and weight as they are not the object of attention but the agent. This traditional gender binary active/passive construct is inappropriate when considering same-sex relationships. The suggestion that gay men and heterosexual women are focused on attractiveness as a means solely for sexual ends reduces human sexual and emotional relationships and their complexity. Although the authors acknowledged that body image issues are complex, they hint at the notion that some gay men desire less weight and others are interested in greater muscularity, without theorising as to why this might be so.

French et al., 1996. These authors conducted a large population-based study of 34,196 students aged between 12 and 20

years. The rates of body dissatisfaction and disordered eating behaviours were investigated, with the 81 gay and 131 bisexual males identified as having higher rates of dissatisfaction and engaging in more disordered eating behaviours than heterosexual young males. The 38 young lesbians and 144 bisexual females on the other hand were more satisfied with their bodies than heterosexual young women, however there were no differences in their disordered eating behaviours. Each of the four comparison groups comprised approximately 200 subjects – this being achieved by collapsing the male and female bisexual students into the gay and lesbian cohort respectively in order "to increase statistical power" (p. 122), a problematic act in and of itself. A closer reading of the management of the sample size reveals that 9.8% (i.e., 3,454 students) that identified their sexual orientation as "not sure" were omitted from the data analysis "due to a lack of a clear interpretation for this group" (p.121). It is perplexing that such a large sample was not examined or included in the data analysis, perhaps because the diversity of such a large group of young men and women may have eroded the between group statistical differences sought after and promulgated. The authors hypothesise that the young gay and bisexual men suffer from body image dissatisfaction and disordered eating not because of gay culture's insistence on being thin (as they were too young and sexually inexperienced to have been acculturated to this way of thinking), but because of gender non-conformity.

Later Non-Clinical Studies

An alternative theoretical explanation for the development of gay men's body image issues is put forward by Williamson, Hartley and Spence in the UK: internalised homophobia and the acculturation of gay culture's embodiment of perfection in the slim, boyish and attractive body (Williamson, 1999; Williamson & Hartley, 1998; Williamson & Spence, 2001). Williamson and colleagues acknowledged the methodological failings of earlier studies that comprise the old orthodoxy, but side with con-

vention and write that, "together they present a compelling body of evidence suggesting a markedly increased vulnerability of gay men to eating disturbance and body dissatisfaction" (Williamson & Hartley, p. 161). There is a failure to review studies that have found both significantly high levels of body dissatisfaction in heterosexual men including a diversity of body preference (e.g., Drenowski & Yee, 1987), and studies that have found some men are conflicted by the desire for muscularity and thinness (e.g., Blouin & Goldfield, 1995). It must be recognised that Williamson and colleagues do emphasise the importance of avoiding pathologising gay men as weak and narcissistic. It is not apparent, however, from their choice of measurements, recommended health education interventions, and insistence on gay men's obsession with the body, that the tendency to pathologise was avoided.

The uncritical acceptance of the old orthodoxy's results was recently and subtly demonstrated in a study by Russell and Keel (2002) that compared 64 gay and 58 heterosexual men and found homosexuality was a risk factor for disordered eating. The authors reviewed selective studies within the old orthodoxy to argue that the four studies that failed to show differences between gay and heterosexual men was due to the smaller average sample size of 65. This was compared unequally to the 12 studies that did show differences that had a larger average sample size of 100. Interestingly, the authors failed to review the body of research on heterosexual males with larger sample sizes, which has suggested that heterosexual males are not as satisfied with their bodies as so often promulgated (e.g., Drenowski, Kurth, & Krahn, 1995, whose sample was 2,088).

The New Orthodoxy

The new orthodoxy, as it applies to gay men, is relatively recent, however the proposition of muscularity as a concern for men can be traced back to the research conducted in the 1960s and 1970s by Lerner and colleagues.

The main findings from this body of research, as summarised by Mishkind, Rodin, Silberstein and Stiegel-Moore (1986), was that boys and college men's ideal body was encapsulated by the mesomorphic or muscular mesomorphic: a body "characterized by well-developed chest and arm muscles and wide shoulders tapering down to a narrow waist" (p. 547). The authors noted that between 75-90% of men were dissatisfied with their bodies overall or with some aspect of their body.

The creed of the new orthodoxy developed in response to the diverse research outcomes that indicated that some gay men were more focused than heterosexual men on being thin, while others were not. This "specific pattern of results has been somewhat ambiguous" (Kaminski, Chapman, Haynes, & Own, 2005, p. 181), and it was proposed that gay men are in fact conflicted by the dual demands of being thin and muscular (e.g., Boroughs & Thompson, 2002; Hospers & Jansen, 2005; Kassel & Franko, 2000; Yelland & Tigge-mann, 2003). The body of evidence of the old orthodoxy then becomes the foundational studies that are widely accepted into the new orthodoxy without critical analysis.

The rise of the image of the gym-obsessed low-fat gay man identified in research was a response to the effeminate, thin and youth obsessed gay man, who Harvey and Robinson (2003) speculated "looked lean, underweight and ill that emerged during the HIV/AIDS epidemic in the early 1980's. The stigma of HIV/AIDS may have pushed gay as well as heterosexual men to obsess about their body image and obtain a muscular physique" (p.298). Four main theoretical inferences are examined to account for the rise of the new orthodoxy: childhood gender non-conformity; the minority stress model; the role of gay culture; and HIV.

Childhood Gender Non-Conformity

The role of recalled childhood gender nonconformity was explored by Strong, Singh and Randall (2000) who compared 129 gay and 52

heterosexual men. Participants were recruited through social clubs and 'snowballing' (i.e., within the participant's social network). Whilst the authors did acknowledge the "heterogeneity in profiles of masculinity and femininity in gay males" (p. 430), they were more interested in a sub-type of gay male: those with childhood gender nonconformity and the resultant dissatisfaction with their bodies. It was theorised that this subtype of gay male tends to have "more female-typical occupations and hobbies" (cf., the old orthodoxy) (p. 428), and higher scores on femininity and lower scores on masculinity compared to heterosexuals. The supposed gender nonconformity of gay men is observed in their childhood dislike of sports, preference to dress as girls, and having female playmates, with research finding that "approximately 75% of 'sissy boys' identify as gay or bisexual in adulthood" (p. 429). It is expounded in the discussion that the results obtained "echo observations at community levels" as gay men high on masculinity and low on femininity "interviewed for pilot data expressed uniform lack of attraction to and frequent disparagement of feminine males" (p. 435). It is proposed that masculine gay males are the same as their masculine heterosexual counterparts: satisfied with their bodies due to childhood conformity to gender expectations. Yet such assertions run counter to the research that Strong et al. cite that shows that heterosexual men are not as satisfied with their bodies as is claimed (e.g., Drewnowski & Yee, 1987). It is possible that a cursory reading of the dominant research is at fault here. This is also evident in the introduction where the authors note that it is estimated that gay men make up between 2%-6% of the USA population yet "comprise 26%-33% of male-clinical eating-disordered patients" (p. 428). The statistic of 26% is calculated from the Schneider and Agras (1987) study which was comprised of just four gay men.

Minority Stress Model

A recent study of a non-clinical sample by Kimmel and Mahalik (2005) examined gay

men's body image dissatisfaction and masculine body ideal distress using Meyer's (1995; 2003) minority stress model. The theoretical underpinning, not dissimilar to the effeminate gay man of the old orthodoxy and the subtype expounded in Strong et al. (2000), is that gay men "seek ways to compensate for perceptions that they are less masculine" in the form of "a powerful physique" (p. 1185). There are three main areas of concern in this study: the method of recruitment, the unrealistic advice to practitioners, and the inconsistent theorising about body image dissatisfaction. The study comprised a large sample of 357 gay men aged between 18 and 74 years who were recruited over the internet by way of making obvious the main purpose of the study: to examine "body image *issues* in the gay community" (italics added; p. 1186). Secondly, the authors recommend that practitioners will be able to use the findings to educate gay men through outreach and treatment programs about the connection between body image issues and internalised homophobia, perceptions of stigma, and experiences of discrimination or violence, in an effort to work towards creating a world free of antigay violence and homophobia. No timelines or consideration of what would be needed to achieve these outcomes was proposed. They also recommend that practitioners could explore the role of gender and masculinity in light of the compensatory drive for a 'powerful physique'. Finally, as the minority stress model was found to account for only small variances in body image dissatisfaction (5%) and masculine body ideal distress (13%), they recommend that future research be conducted in order to "investigate other factors thought to relate to gay men's body image, such as the gay community's emphasis on slimness and youthfulness" (p. 1189). It is unclear how the pursuit of a 'powerful physique' and 'slimness' are compatible with the compensatory theorising about conformity to masculine norms.

Gay Culture – Gym Bodies

The promulgation of the gym active gay man obsessively working out in the gym is ob-

served in Yelland and Tiggemann (2003). The authors compared a non-representative non-clinical sample of 52 gay men, 51 heterosexual men and 55 heterosexual women. It was theorised that the gay male body ideal "involves being both thin and muscular" (p. 114), and that this contradictory ideal of both weight and muscularity helped explain the results in the old orthodoxy that gay men were not dissatisfied with their bodies to the same extent as women were found to be. Hence the authors developed a scale - Drive for Muscularity - along the lines of Drive for Thinness to examine this contradiction. Problematically, such theorising ignores the body of research that has previously shown a preference for muscularity and leanness (e.g., Mishkind et al., 1986) and other muscularity scales developed and published (e.g., Edwards & Launder, 2000; McCreary & Sasse, 2000). Whilst Yelland and Tiggemann acknowledge the complexity of the issue under examination in their study, their findings would appear to contradict their confidence in asserting a definitive account of 'a gay male body image'. For example, no differences were found between gay and heterosexual men on satisfaction with overall body shape, though gay men did desire greater muscle mass and to be thin. Whilst this suggestion may at least in part be valid, its legitimacy rests upon ignoring similar findings from a study of heterosexual male bodybuilders eight years ago by Blouin and Goldfield (1995). These authors compared 139 competitive and amateur athletics (43 bodybuilders, 48 runners and 48 martial artists) and found that bodybuilders utilised various purging, food restriction and muscle enhancers as they worked towards a more hypermesomorph body ideal that encapsulated both muscularity and thinness.

The ambiguity of results and paradoxical theorising about the conflicted gay man can also be seen in a recent study by Gil (2007), who examined the role that general well being and sexual satisfaction played in gay and heterosexual men's body image satisfaction. The convenience sample comprised 180 undergraduate students: 59 gay men from a sup-

port group, and 16 gay and 105 heterosexual men who were present at the author's introductory psychology lecture. The findings were variable, with a number of non-significant results: gay men in this study were less satisfied with their bodies but had higher scores on autonomy and sexual satisfaction. The author utilised the theorising of the old orthodoxy (with gay men being obsessed with their appearance and with being thin and the associated behaviours to achieve these ends), but with the new orthodoxy's doctrine of the pursuit of muscularity. Hence the author accounts for the unexpected smaller discrepancy between ideal and actual body image for gay men (compared to the heterosexual sample) by suggesting that gay men are more successful in achieving muscularity because they "work harder on their body shape" (p. 243). As well, it is suggested that gay men's gender nonconformity and perceived inferiority motivate them to conform to masculine norms.

In a recent study with a non-clinical convenience sample, Brown and Graham (2008) explore the gym active man as he exists in three Sydney gyms and two university social groups. The sample comprised 38 self-identified heterosexual men and 39 self-identified gay men. The authors are explicit in the narrow scope of interest: comparing gay and heterosexually gym-active men on several factors (body dissatisfaction, masculinity, femininity, reasons for exercise, narcissism). A close reading of the authors theorising reveals some unusual links. Following a review of the dominant research where the authors accurately point out some of the diversity of body image preferences - satisfied, want to be thinner, or want to be larger - they turn to theorise that the reason gay men exercise is to enhance their attractiveness and thinness as part of the dating ritual, whereas heterosexual men mainly exercise for fun, fitness and health (taken from Silberstein et al., 1989). This is later accounted for in the discussion, where it is stated that gay men's emphasis on the body (and to be thin) is observed in two popular television programs: "Queer as Folk" and "Will and Grace". It is theorised that Australian gay

men view these programs and hence are subject to the emphasis on the body. This therefore accounts for the similarity of data from North America and its relevance to Australia. Finally, Brown and Graham conclude their article with: "[p]rogams should be designed to improve male self image and possibly gyms should be encouraged to develop less competitive, more nurturing environments" (p. 104). It is unclear how such programs would cancel out the effect of the popular television programs the authors identify as the reasons gay men in North American and Australia exercise (to enhance dating). And if gyms are promulgated as competitive non-nurturing environments, it remains unanswered that heterosexual men exclusively claim that they exercise for fun, fitness and health. An earlier study by Edwards and Launder (2000) in the development of the Swansea Muscularity Attitudes Questionnaire tested on 303 heterosexual men revealed that the desire for muscularity was influenced by men's interest in appearing attractive and being confident about how they looked.

HIV

A more recent study by Tiggemann et al. (2007) comparing gay and heterosexual men's body ideal and body dissatisfaction provided an interesting contrast to the earlier study by Yelland and Tiggemann (2003). The sample size was larger (134 and 119 respectively), with a wider range of ages (18 to 60 years). The authors included in their theorising that age effects preferences for muscularity and weight, following on from a recent review article of men's body image dissatisfaction across the lifespan by McCabe and Ricciardelli (2004). In this review, the authors proposed that generally, younger men are focused on developing a more muscular shape while older men are more focused on losing weight. This finding was also observed in Tiggemann et al. (2007), who conclude that "the present findings suggest gay and heterosexual men experience their bodies in essentially the same way" (p. 20) and that "bodies are important to men, whatever their sexual orientation" (p.

21). The authors did note that gay men are more likely to nominate the ideal body as thinner compared to heterosexual men, and greater dissatisfaction with and pursuit of muscularity, with the latter point being ascribed to the impact of HIV.

The theme that men (and gay men in particular) strive to obtain a more muscular physique due to HIV is also found in Harvey and Robinson (2003). The authors were interested in examining the argument that men generally have become more interested in their bodies over the past two decades due to the influence of the media and the discovery of HIV in 1983. In their advice to practitioners, the authors note that gay "[c]ouples come together due to physical attractiveness but these relationships tend not to be longstanding because the basis is on attractiveness and not on interpersonal qualities"; and "[b]ased on the lack of longevity, it is vital for gay men to stay in shape in case their relationship ends and they want to look for other companionship" (p. 302). As can be seen in statements such as these, the influences of HIV, the pursuit of muscularity, rates of serial monogamy, and partner change as motivators for gym attendance in the gay community form much of the new orthodoxy's doctrine.

It has been theorised that HIV has influenced the type of muscularity desired – the athletic body that encapsulates a lean muscular ideal (Drummond, 2005b; Filiault & Drummond, 2007). Certainly, HIV can be said to play an important role in the maintenance of a muscular ideal for some gay men. However, it cannot be claimed to have *generated* it as claimed by Harvey and Robinson (2003) and Tiggemann et al. (2007). To argue otherwise runs the risk of being labelled as historically disingenuous. Larry Kramer's notorious and controversial novel *Faggots* published in 1978 describes a world populated with gym, sex and drug obsessed gay men who emerged following the heady days of the civil rights movements in the USA. His polemic was both a critique and challenge, and he was rightly or wrongly denounced for his negative portrayal

of gay men as obsessed with their bodies and what they could do with them. Furthermore, a controversial view, following the emergence of HIV as a concern for gay men in the 1980s, was put forward by Kleinberg (1987) in his feminist critique of the macho ideal of the 1970s. He argued the inverse of the relationship between the muscular body ideal and HIV: "paralleling the rise of the macho body has been the decline of the health of the male community – a nasty coincidence, if you believe in coincidence. The deeper truth, however, is that the very values that motivated us to look strong rather than be strong are the same values that elevated promiscuity as the foundation of a social identity" (p. 136). He argued that the incorporation of the masculine ideal was problematic for its uncritical assimilation of an ideal that in effect became a new closet for gay men. Kramer and Kleinberg's controversial views are not replicated here to argue a different truth, but rather to suggest that the muscular ideal pre-existed the emergence of HIV in 1983 and to propose otherwise is temporally inaccurate.

Understanding Diversity in Body Image

Men's body image issues are diverse and complex, and as a result often resist simplistic reductionist endeavours. Consideration of the various and seemingly inconsistent studies into gay and heterosexual men's body image issues communicate a picture of diversity. Both the old and the new orthodoxies contribute to this picture. So too have studies that have found no differences between gay and heterosexual men (e.g., Hausmann, Mangweth, Walch, Rupp, & Pope, 2004; Olivardia, Pope, Mangweth, & Hudson, 1995), insignificant or few differences due to sexual orientation (e.g., Borough & Thompson, 2002; Pope, Hudson, & Jonas, 1986; Olivardia, Pope, & Hudson, 2000), or observed commensurate levels of body dissatisfaction in men as compared to women (Davis, Brewer, & Weinstein, 1993; Drewnowski & Yee, 1987; Furnham & Calnan, 1998). For instance, Drewnowski and Yee obtained data from 226 college stu-

dents (128 women) with 85% of men and 85% women reported being dissatisfied with their bodies – with 40% of men wanting to lose weight and 45% wanting to gain weight (sexual orientation was not measured). More recent studies have shown that heterosexual men are concerned with a body that is both muscular and thin (Filiault, 2007; Olivardia, Pope Jr., Borowiecki III, and Cohane, 2004). And recent qualitative studies with Australian gay men have shown diverse reflections on their bodies, and the extent to which these measure up to an idealised archetype and what that archetype might be (Drummond, 2005a; Drummond, 2005b; Duncan, 2007; Filiault & Drummond, 2008).

Men's diversity of body image concerns was visually captured as a scatter plot in Figure 1 in an article by Drewnowski et al. (1995) – men with higher body mass index (BMI) desired to lose weight, men with average BMI reported being satisfied with their weight and men with lower BMI desired to gain weight. Furthermore, there was a degree of variability along this continuum. Sexual orientation was not measured in this study of 2,088 university-aged young men.

A significant contributor to the convention that gay men are more dissatisfied with their bodies than heterosexual men, and obsessed with their appearance, is the meta-analytic study by Morrison, Morrison and Sager (2004). The authors analysed the effect sizes of 20 studies (14 published), comparing 1397 heterosexual and 984 gay men to arrive at their conclusion. Fourteen different measures of body dissatisfaction were used by the 20 studies listed (an issue taken up by Cafri & Thompson, 2004). Six of the old orthodoxy's seven pillars analysed previously are included in the 14 published studies they review. Morrison et al. acknowledged the studies were not coded for quality "however one defines this rather vague construct" (p. 136), before rationalising that the studies they compared *did* possess some aspect of quality because they were "published in peer-reviewed academic journals" (ibid). The study by Beren et al. (1996)

changed the average weighted effect size from 0.18 to 0.74, with the authors arguing that even without this study, there are small but real differences between heterosexual and gay men on body dissatisfaction measures. Another interesting statistic is that 19 of the 36 effect sizes were obtained from eight out of the fourteen published studies whose recruitment methods were questioned by Hausmann et al. (2004) – three advertised interest in eating disorders or eating patterns and five from gay groups or gay newspapers. Using Morrison et al.'s definition of quality and removing the studies whose sampling recruitment method is suspect according to Hausmann et al., we arrive at six published studies of quality and six unpublished studies of unknown quality. Because Morrison et al. were interested in studies that compared gay and heterosexual men, and heterosexual women and lesbians, the work of Drewnowski and colleagues, and Olivardia, Pope and colleagues were excluded. And thus was promulgated the proposition that gay men are not only dissatisfied with their bodies, but more so than heterosexual men.

Finally, the diversity of men's body image concerns was explored in a qualitative study by Ridgeway and Tylka (2005). Thirty heterosexual male psychology students whose average age was 21 years, described a desirable body that was muscular, lean and tall. Being overweight, flabby, skinny or bony was judged undesirable (cf., review by Mishkind et al., 1986). Ridgeway and Tylka also explored general and specific areas of body concern and found most men are focused on their upper body and abdomen, but there was a diverse range of other concerns. The authors provide clear direction for the future of this field of study, when they state that: "professionals should (a) not oversimplify men's body image by conceptualizing it as one ideal characteristic or type, (b) recognize individual differences among men, and (c) construct instruments that include a variety of items representing the range of overall body qualities and body areas of concern to men" (p. 219).

Conclusion

In 1969 "gay community" was largely a political idea and a myth. Even then there was a community in the simplest sense of the word, but it looked like, as in the blind men describing the elephant, dependent on what you touched (Kleinberg, 1987, p. 133).

The genesis of this article is located in the counselling room that struggled to fit the dominant research on gay men's body image concerns with the men presenting with complex, diverse and evolving priorities in respect to their bodies. Some were satisfied with their bodies, others desired greater muscularity, and some wished to lose weight. Furthermore, their descriptions of the ideal body they aspired to were often idiosyncratic and resistant to a straight forward dichotomising. Hence the motivation in challenging the old and new orthodoxies that narrowly construct gay men's bodies was twofold: (1) to unmask the construction of a universally accepted gay body ideal; and (2) to critically review the dominant research that had for the most part avoided questioning its own ideology and constructs. The intent of unmasking the orthodoxies that construct gay men's bodies is not to engage in practices of censorship or de-privileging, but to come alongside the dominant paradigms and locate their inconsistencies, contradictions and assumptions that constrain an engagement with a broader worldview of gay men.

Researchers need to be mindful when substantiating the old theory that gay men are obsessed with muscularity or youthfulness, "depending on which old theory [they]'ve heard and/or want substantiated" (to paraphrase the opening in Kramer's (1978) controversial novel *Faggots*, p. 15). There is no single monolithic gay body ideal any more than there is a homogenous and easily identifiable gay culture; and body dissatisfaction can range from specific areas of the male body to the traditional global body dysphoria represented by anorexia. More importantly, almost any individual, regardless of gender or sexual orientation, can undoubtedly find some aspect

of their body that does not measure up to or equate with an ideal. And regardless of whether this ideal is promulgated by the gay media, gay community, or gym culture, an individual may lack the motivation or interest to do anything about it other than articulate that dissatisfaction. Research by the old and new orthodoxies has formed the body of evidence that has dictated the foundation of understanding of gay (and heterosexual) men's body image issues. A specific tenant that gay men are more dissatisfied with their bodies than heterosexual men is unfounded, even though it may well be the case that gay men's focus upon body image is to a degree different to that of heterosexual men. The simplistic equating of gay men with heterosexual women, and as obsessed with their appearance and weight in the pursuit of male attraction, is uncritically assimilated by newer research. Future research that looks to examine body image issues in gay men will need to critically engage the body of research it builds on; to ensure its methodology and data analysis are credible; and to resist the temptation of simplistic and populist formulations of gender and sexual orientation.

Author Note

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UNDERSTANDING HETEROSEXUAL WOMEN MARRIED TO GAY OR BISEXUAL MEN

MATT PEARCEY & MYRNA OLSON

Abstract

This study surveyed 90 heterosexual women who were married or partnered with a gay or bisexual man. The study aimed to better understand: a) the factors that led to their initial attraction and eventual marriage or partnership; b) their beliefs about the development of sexual identity and whether this was related to the nature of the relationship after their male partner's homosexual or bisexual feelings were revealed; and c) the correlation between their religious beliefs and their beliefs about same-sex relationships. The two most important factors in the decision to marry or partner for nearly a quarter of the women in this study related to the treatment they received from these males in addition to the attitudes and values these men portrayed. There was no statistically significant relationship found between the women's level of religious affiliation and their attitudes toward the morality of same-sex partnerships; however, 43% of the women considered themselves religious-spiritual, and 80% of them felt that same sex relationships were moral.

Introduction

It is typically a traumatic experience for women in heterosexual marriages or partnerships who learn that their partner identifies as gay or bisexual. Women in such mixed-orientation marriages (MOMs) typically enter into such marriages with the intention of making a lifelong commitment to their male partners, and the discovery that their husbands may not be able to sustain the marriage can be deeply distressing.

For gay or bisexual men in MOMs, research suggests that it is rarely the case that such

men report intentionally deceiving their wives about their sexuality (Higgins, 2002; Pearcey, 2005). Oftentimes, they have a vague notion of their attraction to other men, but this is not brought fully to their consciousness, or if it is, they attempt to suppress it in hopes of it diminishing over time. According to Pearcey (2005), some men in MOM report that they remember feeling attracted to their father's male friends when they were growing up or having a crush on another boy when they were teenagers. Memories such as these may have been repressed for years. For other men, marriage may often be seen as a vehicle for changing their sexual orientation. For these men, it is their belief that if they are married their sexual, emotional, and parental desires will be met (Higgins; Pearcey).

It is of course important that we place these findings about men in MOMs in their broader social context. For example, it is feasible to suggest that if being gay or bisexual were regarded positively by American society overall, some men in MOM may never have married (Buxton, 2004a; 2004b). Unfortunately, however, this is not the case, and considerable numbers of gay and bisexual men continue to enter into marriages with women. While these relationships typically look like heterosexual relationships, once the mixed-orientation status of these marriages is revealed, couples often experience ostracism from family and friends and a challenging period of self-examination, often ending in divorce (Pearcey, 2005). The extant literature on MOMs focuses largely on the experiences of gay and bisexual men and their experience of coming out in the context of a heterosexual relationship. There is a dearth of empirical literature regarding the experiences of women in mixed-orientation marriages or partnerships. In Pearcey's study

of gay and bisexual men, their wives' reported reactions to being in a MOM ranged on a continuum from anger to acceptance. The primary need for the present study was to give voice to heterosexual women who have been married or partnered to gay or bisexual men.

Related Literature

It is estimated that 90% of Americans desire to be married (Cherlin, 2004). This is despite the changing face of marriage and its meaning within western societies, as Cherlin summarises:

What has happened is that although the practical importance of being married has declined, its symbolic importance has remained high, and may even have increased. Marriage is at once less dominant and more distinctive than it was. It has evolved from a marker of conformity to a marker of prestige. Marriage is a status one builds up to, often by living with a partner beforehand, by attaining steady employment or starting a career, by putting away some savings, and even by having children. Marriage's place in the life course used to come before those investments were made, but now it often comes afterward. It used to be the foundation of adult personal life; now it is sometimes the capstone. It is something to be achieved through one's own efforts rather than something to which one routinely accedes. (p. 851)

There is a stark contrast between the rights of heterosexual people to marry, to create a socially approved and legalised family structure, as well as attain the high social status accorded such arrangements, and the lack of such rights for gay people. As a result, many men who are same-sex attracted may marry opposite sex partners with the aim of attaining the social status attached to marriage (Higgins, 2002; Pearcey, 2005).

According to Brettschneider (2005), marriage holds similar intoxicating properties for potential couples. Brettschneider wrote; "Within bourgeois ideology, monogamous marriage is presented as an ethical framework, and as a

positive form of focusing, of organizing and disciplining, sexuality" (p. 2). It seems unfathomable to many heterosexual women that gay men would knowingly marry straight women in order to achieve social status (Kaye, 2000). Yet according to Higgins (2002), there is a fallacy in this thinking. In Higgins' and Pearcey's (2005) studies of men in MOMs, a majority of the men did not come to consciousness about their same-sex feelings until well into the marriage. Most gay husbands believe that being married will resolve their same-sex attraction. Bisexual men, however, may want to negotiate both a relationship with their wives and with a man. Regardless of their orientation, it is usually a life-altering event which causes their same-sex feelings to come to full consciousness (Pearcey, 2005). For gay and bisexual married men, life traumas such as the birth of a child, mid-life crisis, loss of a job, or loss of a loved one, among other traumas, can cause a re-evaluation of one's life (Buxton, 2004a, 2004b; Higgins; Pearcey). In the process of this re-evaluation, often their repressed feelings for men come to the forefront.

It is of course important to make a distinction between how gay and bisexual men navigate their identities in society. While a number of heterosexual men may want to live an exclusively gay existence post disclosure of their same-sex attraction, for bisexual men the relationship decision may not be as clear. Bisexual men may find themselves struggling to find a place in either straight or gay culture, but not necessarily finding acceptance in either culture (Evans, 2003). Bisexual people often face biphobia from not only heterosexual communities, but also gay communities, as Potoczniak (2007) suggests: "By and large, the gay male community continues to hold tenaciously to the dichotomous, monosexual, and essentialist nature of sexual orientation" (p. 127). It is of interest to note that many formerly married bisexual men prefer to avoid labels entirely, instead choosing to identify themselves as men who sometimes have sex with men (Pearcey, 2005), which may be an attempt to avoid being confined to any particular social

category.

There is a dearth of empirical literature on the experiences of heterosexual women who have been married to gay or bisexual men. As Auerback and Moser (1987) note:

Little professional attention has been given to the relatively widespread situation of women who are married to homosexual men. The professional literature has focused almost exclusively on helping the homosexual husband through the coming-out process. There has been minimal concern for the psychological stress experienced by the heterosexual wife. (p. 322)

In their study conducted with heterosexual wives of gay or bisexual men, Auerback and Moser (1987) surveyed participants who were part of a support group for straight wives of gay or bisexual husbands. They ranged in ages from 20 to 50, and most of them had been married at least 10 years, and 70% of them had children. About 6% had suspected at some point during the marriage that their husbands were gay or bisexual. The wives reported feelings of anger toward gay men in general and specifically toward their husbands. They also reported feeling hurt and betrayed as they believed their husbands intentionally deceived them from the beginning of their marriages. After counseling, many of the women came to understand that their husbands did not have full awareness of their same-sex attraction until later in the marriage. Lastly, several of the women indicated low-level homophobia toward homosexuals in general. When probed about their feelings, it became clear that their negative feelings toward non-heterosexual men were centered on their fear of unwittingly becoming involved with another gay or bisexual man.

Methodology

This study grew out of a four-year interest in the experiences of individuals in mixed-orientation marriages (MOMs). It is a follow up to a study the first author conducted in 2002, which explored the coming out experiences of

gay and bisexual husbands. The purpose of this study was to investigate the experiences of heterosexual wives who were married or partnered to gay or bisexual men.

Study Design

The current study involved a cross-sectional mail survey of respondents. All respondents had already experienced the disclosure by their husbands regarding their sexuality. The exact length of time since that disclosure varied from approximately three months to over 10 years. This seemed to be a reasonable time span for the wives to begin to respond to and cope with this revelation. Admittedly, it cannot be guaranteed that all of these wives had reached a stable new relationship or achieved legal separation/divorce from their gay or bisexual husbands.

Data Collection Procedures

The 30-item survey used in this study was sent out to chapter leaders of the National Straight Spouse Network (NSSN). As Director of the NSSN, Dr. Amity Pierce Buxton was the gatekeeper providing access to this population. She e-mailed chapter leaders asking them to send the first author a request for blank surveys. The surveys were given out to individual respondents upon their request. Once completed, the surveys were mailed back to the first author by the chapter leader in a self-addressed stamped envelope provided and did not include a return address, ensuring anonymity. Nowhere on the survey were names of respondents indicated. Their participation was entirely voluntary. A resource number at the NSSN was provided, should the survey have raised traumatic memories that the respondent wished to discuss with someone knowledgeable about MOMs. Institutional Review Board approval was obtained for this study. In support of the IRB application, the first author provided a letter of support from Dr. Amity Pierce Buxton. A high return rate was expected on these surveys, as this population strongly desires a way to voice their concerns regarding MOMs

(Buxton, 2004a, 2004b).

Sampling Method

The data were drawn from 90 heterosexual women responding to the survey from across the United States. A convenience sample was the approach used here, because access to the entire population of straight spouses in MOMs, estimated by Buxton (1994) to be over two million, was not available. Instead, the listserv operated by the National Straight Spouse Support Network (NSSN) provided a subgroup of the larger population of heterosexual spouses.

It is often difficult to obtain data regarding mixed-orientation marriages, since many people do not readily self-identify as a straight spouse in a gay marriage. People who belong to this listserv do so anonymously. This online support group was brought about as a communication device for people who do self-identify as heterosexual spouses of gay or bisexual individuals. Given the difficulty of getting access to this population, this convenience sample is regarded as a practical approach to drawing a sample for this study. Convenience samples may not be representative of the full population, but should offer illustrative examples of people falling within that population.

Data Analysis

Each of the research questions was addressed by the use of descriptive statistics. The nature of the respondents' current relationships was elicited by 16 survey questions. These were combined to create an index of their current relationship and constituted the dependent variables for the study. Beliefs about the etiology of sexual identity were measured by five survey questions. These questions were combined to create an index of beliefs about the etiology, distinguishing between respondents who believed sexuality is beyond the individual's control and those who believed it is a deliberate choice.

Results

The 90 women responding to the survey were from all regions of the United States. Ninety-seven percent of the respondents were married to their male partners, while three percent were partnered but never married. Approximately 11% knew of their partners' gay or bisexual tendencies prior to the marriage or partnership. By the time the survey data was collected in 2004, 46 % of the married respondents had divorced, 17% remained married to their husbands, and 12% were legally separated. Finally, 26% of the women did not respond to the marital status question. While there is no way of knowing the reason for this lack of response, one could conjecture that many of these questions were highly personal in nature, and some may have not responded because there was no legal relationship.

Research Question One

What are the attitudes, behaviors, characteristics, and opinions of the surveyed heterosexual women in MOM?

As can be seen in Table 1, a relatively small proportion of women knew of their husband's sexual orientation before their marriage or partnership. In contrast, just over half the sample was not aware of their husband's orientation until at least 10 years of marriage or partnership.

Table 1. Awareness of Partners' Bisexuality or Homosexuality

	Frequency	Valid %
Before Married	10	11.4
Less Than One Year	5	5.7
One to Five Years	18	20.5
Fiver to Ten Years	10	11.4
Longer than Ten Years	45	51.1
Missing	2	
Total (N)	90	

In order to gain some insight into the sexual relationship the surveyed women had with their partners, the women were asked about sexual activity. Data from this question are presented in Table 2. It is important to note here that nearly half the women responding to the survey did not respond to this particular item. Of those who did, a majority indicated sexual activity lasted for the duration of the partnership, while the next highest group responded that sexual activity decreased abruptly.

Table 2. Nature of Sexual Activity During Partnership

	Frequency	Valid %
Continued Throughout	31	63.3
Decreased Gradually	1	2.0
Decreased Abruptly	13	26.5
Never Happened	4	8.2
Missing	41	
Total (N)	90	

The surveyed women were also asked about their feelings after becoming aware of their husbands' bisexuality or homosexuality. All 90 women responded to this question, with the data presented in Table 3. It is important to note here that many of the women chose more than one response to this question.

Table 3. Wives' Feelings Post Revelation of Partners' Bisexuality or Homosexuality

	Frequency	Valid %
Responsible	15	4.8
Angry	70	22.4
Resentful	62	19.8
Relief	40	12.8
Understanding	33	10.5
Compassion	44	14.1
Less Attractive	49	15.7
Total Responses	313	

From the table it can be seen that anger and resentment were the most common responses, though compassion was also frequently chosen.

The women comprising the sample for this study were also asked about their coping mechanisms after they became aware of their partners' sexual orientation. All 90 women responded to this item, with all but one indicating they sought mental health counseling. The remaining respondent indicated she used alcohol and/or drugs to help her cope.

Participants were also asked to report the status of their marriages after their partners' sexual orientation was revealed. These data are presented in Table 4. While it can be seen from the table that over half the sample reported they were either divorced or legally separated, 10.1% indicated they remained married or partnered and sexually exclusive.

Table 4. Marital Status Post Disclosure

	Frequency	Valid %
Remained Married and Sexually Exclusive	9	10.1
Married and non-monogamous	6	6.7
Legally separated	11	12.2
Divorced	41	45.6
Other	22	24.4
Missing	1	
Total (N)	90	

The women were also asked whether they believed their children should know about their husbands' sexual orientation and, separately, whether they supported their husbands "being out" to their children. As to the question of whether the women believed their children should be told of their husbands' sexual orientation, of the 75 responses received, 48 (64.0%) indicated their children should be told, while 27 (36.0%) believed their children

should not know. As to the question of whether the women were supportive of their husbands "being out" to their children, a similar result was found. Of the 82 responses, 55 (67.0%) indicated they were supportive, while 27 (32.9%) indicated they were not.

The final survey item relating to the first research question addressed whether the women who had married desired to marry again. For this item, only 50 (55.6%) of the women responded. Of this number, 38 (76.0%) indicated they would like to re-marry, while 12 (24.0%) indicated they would not.

Research Question Two

What factors and characteristics led to the initial attraction and eventual marriage or partnering of heterosexual women respondents with their husbands or male partners who were later found to be gay or bisexual?

One item from the survey was used to address the second research question, to which all participants responded. The data from the item are presented in Table 5. While it is important to note here that many of the women chose more than one response to this item, the two responses chosen most frequently dealt with how the husband treated the wife as well as the husband's attitudes and values. These categories are of limited value in determining what traits led wives to marry their husbands as the characteristics were not operationalised for the respondents.

Table 5. Factors Leading Wives to Marry

	Frequency	Valid %
Spouse Emotional Characteristics	11	12.4
Spouse Intellectual Characteristics	9	10.1
Attitudes and Value	20	22.5
Husbands Treatment of Wife	22	24.7
All Factors Selected	27	30.3

Research Question Three

This question has two parts. *First, is there a relationship between the heterosexual women's beliefs about the development of sexual identity and the nature of the relationship after their male partner's homosexual or bisexual feelings were revealed? Second, is there a relationship between the heterosexual women's beliefs about the development of sexual identity and the nature of the family relationship after their male partner's homosexual or bisexual feelings were revealed?*

To aid in answering the first part of this research question, the survey instrument included an item soliciting information about the women's beliefs regarding sexual identity, the data for which are presented in Table 6. While only 63 respondents chose to answer this item, it is of interest to note that 48 (76.2%) indicated a belief that individuals are born with a particular sexual orientation.

Table 6. Wives' Beliefs About Sexual Identity

	Frequency	Valid %
Born with Sexual Orientation	48	76.2
Sexual Orientation is Environmental	5	7.9
Do Not Know	10	15.9
Missing	27	
Total (N)	90	

The data from Table 4 were then organised according to the responses presented in Table 6 and are displayed in a more expanded form in Table 7.

The data from Tables 6 and 7 were then subjected to the chi square test of independence to determine whether a relationship exists between the survey respondents' beliefs about sexual identity and the post-disclosure nature of the marital relationship. There was no significant relationship between these two variables, $\chi^2 (12, n = 89) = 13.98, p > .05$.

Table 7. Relationship Between Marital Status and Wives' Beliefs About Sexual Identity

	Born with Sexual ID	Socialisation	Biology/ Social Processes	Unknown Etiology	Total
Married/ Monogamous	7 (14.9%)	0 (0.0%)	1 (3.7%)	1 (9.1%)	9 (10.0%)
Married/Non- monogamous	0 (10.6%)	1 (0.0%)	0 (3.7%)	6 (0.0%)	6 (6.7%)
Legally Separated	4 (8.5%)	0 (0.0%)	7 (25.9%)	0 (0.0%)	11 (12.2%)
Divorced	19 (40.4%)	3 (60.0%)	12 (44.4%)	7 (63.6%)	41 (45.6%)
Other	12 (25.5%)	2 (40.0%)	6 (22.2%)	3 (27.3%)	23 (25.6%)
Total	47 (100.0%)	5 (100.0%)	27 (100.0%)	11 (100.0%)	90 (100.0%)

The second part of the third research question asked if there was a relationship between heterosexual women's beliefs about the development of sexual identity and the nature of the family relationship after their male partner's homosexual or bisexual feelings were revealed. In order to answer this part of the research question, an item on the survey instrument solicited information about the family's relationship with respondent's husband after the husband's sexual orientation was revealed. These data are displayed in Table 8.

The data from Table 6 were combined with those from Table 8 to provide a clearer view of the possible relationship between the wives' view of the etiology of husbands' sexual orientation and the husband's relationship to the family post-disclosure. These data are displayed in their reorganised form in Table 9. Data from Tables 6 and 8 were subjected to a chi square test of independence to determine

if there was a relationship between the respondents' beliefs about sexual identity and the post-disclosure nature of the family relationship to the gay or bisexual partner. There was no significant relationship between these two variables, $\chi^2 (9, n = 70) = 13.56, p > .05$.

Table 8. Family Relationship with Husband Post Disclosure

	Frequency	Valid %
Wives	5	7.1
All Children in Family	16	22.9
Some of the Children in Family	5	7.1
Narrative Responses Only	44	62.9
Missing	20	
Total (N)	90	

Table 9. Relationship of Family With Husband and Beliefs About Sexual Identity

	Born with Sexual ID	Socialisation	Biology/Social Processes	Unknown Etiology	Total
Wife Continued Relationship	3 (8.6%)	1 (33.3%)	1 (4.2%)	0 (0.0%)	5 (7.1%)
All Children Continued Relationship	8 (22.9%)	0 (0.0%)	0 (0.0%)	4 (50.0%)	16 (22.9%)
Some Children Continued	1 (2.9%)	1 (33.3%)	3 (12.5%)	0 (0.0%)	5 (7.1%)
Narrative Only	23 (65.7%)	1 (33.3%)	16 (66.7%)	4 (50.0%)	44 (62.9%)
Total	35 (100.0%)	3 (100.0%)	24 (100.0%)	8 (100.0%)	70 (100.0%)

Research Question Four

Is there a relationship between the heterosexual women’s religious beliefs and their beliefs about the morality of same-sex relationships?

To aid in answering this question, an item on the survey instrument solicited information regarding the women’s religious/spiritual orientation. The data from this item are presented in Table 12. As can be seen from the table, most of the respondents identified themselves as either spiritual or both religious and spiritual. A survey instrument solicited information regarding the women’s belief about the morality of same-sex relationships, the data for which are presented in Table 9. As can be seen from these data, a clear majority of respondents believed same-sex relationships are moral. These data were also subjected to a chi square test of independence to determine if there was a relationship between the respondents’ religious beliefs and their beliefs about the morality of same-sex relationships. There was no significant rela-

tionship between these two variables, χ^2 (9, n = 70) = 13.56, $p > .05$.

Summary

A majority (58%) of the women in this study revealed they felt angry, resentful, and less attractive upon finding out about their husband’s same-sex attractions, while only 24% indicated relief and understanding upon finding out. Although no statistically significant relationship was found between the wives’ level of religious affiliation and their attitudes toward the morality of same-sex relationships, it is interesting to note that 43% of the women considered themselves religious-spiritual, while 80% of them felt that same-sex relationships were moral. Nearly a quarter of the women in this study indicated that the two most important factors in the decision to marry or partner, even above physical and intellectual traits, were related to the treatment they received from these males as well as the attitudes and values these men portrayed.

Discussion

There is little empirical literature on the experiences of heterosexual women who have been married to gay or bisexual men, even in the 22 years since Auerback and Moser (1987) first noted this gap in the literature. Because of the complexities of attraction, it is not simple to evaluate what drew the heterosexual women in this study to their husbands or male partners. However, this study has captured some indicators of what drew the respondents to their male partners and the subsequent nature of their relationships after disclosure of the male partners' same-sex attraction.

In this study, the wives in MOMs expressed feeling anger (22.0%), resentment (20.0%), less attractive (16.0%), understanding (11.0%), and relief due to 'problem identification' (13.0%) once they found out about their husbands' sexual orientation. Nearly 70% of the women in this study believe that people are born with their sexual identities. In the Auerback and Moser (1987) study, several of the women indicated low-level homophobia toward homosexuals. When probed about their feelings, it became clear that their negative feelings toward gay men were centered on their fear of unwittingly becoming involved with another gay or bisexual man.

The women in the present study existed on a continuum of acceptance to rejection with regard to their husbands' homosexuality and bisexuality. It appeared that the wives who were more accepting were told about their spouses' newly identified sexual orientation soon after it was discovered.

Limitations

One cannot readily generalise the results of this study across all categories of women in MOMs, because these women were self-selected from an electronic support group for straight spouses of gay or bisexual men. Their attitudes, perceptions, and feelings may not be representative of a cross-section of women

in MOMs. However, what little literature (e.g., Auerback & Moser, 1987; Buxton, 1994) there is about the experiences of heterosexual women married to gay or bisexual men seems to support some of the findings from the current study.

Another limiting factor of this study relates to the small sample size. Although 90 participants is larger than any other study done on this population, the findings would have been more generalisable given a larger sample size. Additionally, in the process of conducting this study, it became apparent that other variables would have shed light on the experiences of women in MOMs. For example, detailed demographics to include the wives' income before divorce as compared to after the divorce.

This study was also limited by the very nature of the topic and method itself. Conducting a mailed survey (which was confidential) did not allow for follow up with each respondent to clarify answers. Further, the respondents may have been reluctant to share more deeply about their experiences given the fact that this was a mail survey as opposed to a face-to-face interview.

The final limiting factor was the lack of analysis on 11 of the survey items. Questions 5, 6, 9, 10, 14, 18, 21, 22, 25, 26, and 27 were not given analysis in this study. The decision to exclude the analysis of these questions was due to a shift from a focus on counseling. There were originally five research questions, two of which focused on coping mechanisms of which the aforementioned 11 survey questions were a part.

Conclusions

Respondents reported that learning about their husband's same-sex attraction was a traumatic experience, the degree to which depended upon how the respondents viewed the etiology of same-sex attraction. It would be interesting in a future qualitative study of women in MOMs to understand from each of the respondents a more full-bodied story of

courtship, marriage, and post-disclosure. These stories might reveal themes from the detail about what attracted them to their male partners. Additionally, it would be revealing to understand how those individuals involved in MOMs have arranged their relationships after the husband's disclosure of same-sex attraction.

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'PINK PARENT' PICTURES: IN THE DIGITAL DOMAIN

JULIA ERHART

Twenty-three years ago in the popular movie *Manhunter*, the idea that a home movie would be seen by a stranger in an editing lab was sufficiently anxiety-provoking as to form the basis of a horror film. Briefly, in that movie one of the video editors in the company turns out to be a serial killer who goes after the families in the videos he works on. As such, *Manhunter* both reinforces and plays upon the rock-solid boundaries that (in 1986) separated the 'private' family realm (where home movies are made) from the 'public' realm of everywhere else. The basis of the movie's horror is indeed the collapse of these boundaries, when the distinction between public and private begins to blur.

In 2009, we don't send movies 'out' for processing anymore, and with the materialisation of the blogosphere, Myspace, Facebook, Friendster and the hundreds of other publicly-accessible social networking sites, our concern with privacy appears to have shifted. Happy snaps, baby pictures, and friendly advice, on the one hand, and bitchy commentary, flames and backstabs, on the other, are posted energetically and frequently within the digital domain for all to see. Apparently, the merging of private and public that was so unthinkable in *Manhunter* is entirely commonplace in 2009. Even as we complain about the blurring of boundaries, there is no doubt many of us dependent on the public social space afforded by digital technologies for updates, gossip, rumour, and virtual networking.

What I want to do in this paper is explore some of the opportunities arising from on-line content delivery in terms of its usefulness and meaning-making potential for a specific community of on-line digital documentary makers. Specifically, I will look at four streaming digidocs which are linked to a blog on the internet that belongs to local South Australian film-

maker Sonja Vivienne and her company Incite Stories; Vivienne also facilitated the digidocs' production.¹ The makers of the 'digidocs' I will go on to discuss are from what I have termed in my title a 'Pink Parent' community, by which I mean a community of queer- or non-heterosexual-identified parents and their children – specifically a queer dad, two queer mums, and the daughter of a mum and two dads. I have picked this community firstly as it is one I know something about, being a parent in a same-sex couple of two young children. But there is another reason I want to look at the example of this community: the Pink Parent community in South Australia where I reside is currently defined by stunningly contradictory yet solidly pressing needs; for privacy and control on the one hand and for transmission and broadcast on the other. Now, while these issues have been of interest to lesbian, gay, and queer communities for a very long time, and may well be perceived to be of waning urgency more than thirty years after the decriminalisation of homosexuality, such is principally the case for adult-oriented queer communities, not, I would argue, for those including children.² Due to the legislative gap in South Australia and elsewhere for non-heterosexual-identified parents and carers of children, such people enjoy fewer rights (and potentially require greater closeting) than queers whose lives are exclusively adult-focussed. The increasing prominence of children in (what were previously adult-focused) gay communities infuses new urgency into old needs for legislative change and possibly so-

¹ www.familyvalues.katalyst.com.au/

² Even in terms of adult legal standing, it is worth remembering that South Australia extended legal recognition to same-sex couples only as of 2007.

cial acceptance more broadly. And because of the lack of legal protection, Pink Parent communities may rekindle old needs for privacy. In so doing, these communities are well-placed to take advantage of the many opportunities that on-line delivery has to offer, for agitation and digital consciousness raising, while working creatively in very distinct ways with its limitations. But what precisely does the on-line delivery format have to offer Pink Parent communities? What are the promises and what are the limitations?

From Utopia to Scepticism and Back Again: Pink Parents on the Net

Type the words 'queer blog' or 'queer social networking site' into Google or any other popular search engine and you will be led to literally hundreds of sites from everywhere around the world. While many of these can lead you to conversations of interest to same-sex families, typing the words 'queer parent blog' or 'queer parent social networking site' will yield more specifically tailored sites. A quick glance at YouTube is indicative. For example, on March 20 2009, I typed 'queer parent*' into YouTube and got 234 hits. 'Same-sex parent' received 174, and 'lesbian parent' got 847. The winning category of all the ones I typed in was 'lesbian mother', which received 2070 hits (though on closer look many of these were for porn videos). With the exception of the videos called up by that particular category, a sizeable number of the YouTube videos I found appeared generally sympathetic and relevant to non-heterosexual parenting communities (there were also a number of coming-out-oriented stories by LGBTQI adult children to their own parents).³ Though obviously some of the

aforementioned links took me on a proverbial wild goose chase, there is no doubt that queer parents are active on all spaces the internet has to offer.⁴ The advantages of such participation, for queer parents and others more generally, has continued to consume bandwidth since its inception. Let me now go on to detail the contours of the debate.

Two competing views dominate assessments of on-line participation; the web-utopian view and the web-sceptic view. The web-utopian view promotes the understanding that on-line communication, broadly speaking, is a socially and often politically powerful tool that fosters group integration and "connection effects" for individuals who otherwise would experience isolation (Yzer & Southwell, 2008, p. 80). Digital storytelling, it is argued, is a positive, alternative "medium of knowledge production" that enables rather than obscures "traditional forms of expert research" (Oppermann, 2008, p. 171). The internet, it is suggested, makes it possible for people to 'reach out' and build relationships with individuals who otherwise would be "deterritorialized... diasporic, and transnational" (Appadurai, quoted in McLelland, 2002, p. 402).

Of the volume of web-utopian research, a number of articles specifically address the opportunities for queer networking. The internet, it is proposed, is useful for queer communities for countering the aforementioned isolation factor, but also on account of the new opportunities for personal presentation and performance that cyberspace is able to offer. Because of the absence of empirical identifying features, internet spaces are attractive to

³ As with much You Tube material, the social and artistic aims of the videos I came across was heterogeneous, including excerpts of favourite TV shows like *Queer as Folk* as well as personal parenting stories as well as outraged responses to recent discriminatory legislation in the USA.

⁴ And increasingly so: when I first searched YouTube on September 24, 2008, the number of hits I received was nearly half of those I received when I searched the same categories in March 2009 (for instance, in September, 'queer parent*' got 121 hits, 'same-sex parent' got 99, and 'lesbian parent' received 524 hits).

those wishing to explore or 'queer' identities. As Daniel Rellstab claims, internet play space (internet relay chats in particular) "ease fears of playing with gender in a way that is not so common in real life" (2007, p. 767). In agreement with this view is Larry Gross who goes so far as to call the Internet itself "somehow queer" (quoted in Mitra and Gajjala, 2008, p. 401). Though Gross's idea of the queerness of the internet is not one I want to take up, the issue of re-presentation is one I want to come back to (from a slightly different angle). But let me first offer a gloss on what I'm calling the web-sceptic view.

The issues that emerge in the web-sceptic view are too diverse to be covered in this short space. Criticisms of on-line activity have been long-lived and wide-spread and have included the following: (panicky reports of) biological-behavioural disturbances such as depression, disrupted sleep, and sexual dysfunction, accusations of narcissism, declining social competence, increased loneliness, and boredom, and – most interestingly – the chipping away at our common ethical code. The latter is one of the more interesting accusations levied, and it goes something like this: because of the gap between the veritable glut of information now available on the web (profiles, commentary, diary entries, personal photos) and the public understanding of that information's availability, it is the internet's fault when journalists trawl the web for diary entries of people involved in traumatic events and profitably report on them. When reporters find details of serial killer victims, drug overdose victims, or victims of Virginia Tech shooter Seung-Hui Cho and reproduce them to the benefit of the perpetrator (or reporter), many have identified this as a loss of privacy and held the internet responsible.

Of all the cultural catastrophes the internet has been credited for, most relevant to my discussion is the issue of the erosion of personal privacy. Basically, people who enjoy the changes brought about by media convergence – the participatoriness, the connectedness, the challenges to mainstream media hegemony –

have complained about the loss of control over information that appears to have come with that. A prime example is Gillian Anderson who, when thoughts written for her official website were broadcast out of context wrote: "What happened? When did Everything and Everything become mass public consumption? Since when have I been writing a BLOG!?!??? What happened to PERMISSION?!?! I am so naïve. So, needless to say, I am a bit aflumoxed, flummoxed, aflutter? Angry, about the situation and what is safe to write about anymore" (quoted in Fletcher, 2007, p. 42). Though information such as Anderson's has actually been readily available since 1995 and the Usenet era (Boyd, 2008, p. 14), on-line technologies have indeed enabled a change in the ways information is currently captured and stored. On blogs and social networking sites especially, there has been a shift in what Danah Boyd refers to as the 'architecture' and indeed efficiency of information dissemination. With that shift users (like Anderson) have lamented the loss of control.⁵

While the matters I am discussing here affect all users, some user groups are especially susceptible to the losses of control and shifts in privacy brought about by media convergence. Let's return to the group I started my paper with. Paramount in the definition of the 'Pink Parent' community is that it is a community that contains non-consenters (that is children), in other words people who legally cannot either agree to or refuse participation in the public media realm. How is *any* parent media-maker to approach representing their kids? Though some in the documentary community have voiced scepticism about *any* ethical representation of non-consenters, I believe the issues are less clear-cut (see also Winston, 2000). Partly this is because the issues under question are so contentious, such as those

⁵ Another prime example is the 'News Feeds' feature on Facebook, which received heavy criticism when it was first introduced in 2006 (Boyd, 2008, p. 13).

relating to age of consent (perhaps a seven year old can't give consent, but what about a thirteen year old?), questions of psychological well-being, and children's rights. Yet despite these contentions, the world is full of images of children who have exercised relatively little choice in their media participation, from baby models in Kmart ads, to toddlers acting out in *Supernanny*, to infants held by son-in-laws of political candidates – and no-one makes a big deal about that. But to return to my topic: what are the issues Pink Parent on-line media makers can control and ought to think about?

Pink Parent Digidocs: Objectives and Styles

Presumably Pink Parent media makers adjudicate the same representational dilemmas all parent media-makers do: what and how much of a child's life to show; what and how much of a child's life not to show; whether to disclose identifying information (first names, last names, addresses); what and how much behaviour to leave in or edit out. As a community of non-heterosexual parents, makers would further be potentially accountable to safeguard the interests of children who may neither yet know what it means to be 'out' nor may in the future wish to have been 'outed'.

Brushing up perhaps awkwardly against these needs is a second, key, competing requirement. As families that have no legal status, as I have said, in the eyes of South Australian law, the same-sex family digidoc makers that I discuss in this paper would have at least potentially a political brief to get their message out, loudly and clearly, powerfully and memorably, to the widest audience possible. Speaking theoretically, the digidocs would have an outreach or even agitation responsibility to raise community consciousness and awareness of issues of discrimination and homophobia – and this is expressed directly in the written material in the filmmaker's blog that surrounds each digidoc. How to accomplish that while negotiating what was referred to earlier as the new architecture of information dissemination?

Let me turn now to the specific style and content of the digidocs and to Sonja Vivienne, who, as I said, facilitated the digidocs' production. Vivienne is a documentary filmmaker, writer, director, producer, and owner of the production/distribution company Incite Stories. The company's brief is to foster film and digital production with an agitation and/or activist content – both by Vivienne herself as well as by others. The words on Vivienne's website put it best: "Incite Stories makes films and digital content that challenge our perceptions of the world. We also offer a range of services, including script editing, teaching/mentoring and production consultancy.... Take a tour and we hope that, in some small way, you are inspired to change your world!" (<http://incitestories.com.au>). Although I have not interviewed Vivienne for the writing of this essay, the digidocs appear to have been produced in the same spirit and with similar objectives as claimed on the website – to express, inform, and activate, from a personal point of view.

Each digidoc is at most three minutes in length, made up mostly of still photographs, a small amount of hand-written text, music and, in each case, a voice-over. Low bandwidth appears to have been a priority with each work – these are formally compact, small-format objects that pack a powerful punch. From a technological perspective, each object is relatively simple in form, requiring hardware and especially skillsets out of reach for many community members, but not excessively so.⁶ Organisationally, each of the works appears as an address to a third party that is spoken by the digidoc maker her- or himself. Though the person to whom they are addressed differs from digidoc to digidoc, each is real and important and it is clear that their relationship matters to the respective digidoc maker. This gives each work a sense of relevance and intimacy, almost like we are listening in on a per-

⁶ Especially given Vivienne's expertise as teacher/mentor.

sonal conversation. Thematically each of the digidocs takes on a significant topic, such as rejection (by family members and schools), family discord, non-acceptance, depression, rape, and childhood sexual assault. Though I have called the digidocs 'small format', these are certainly not small themes; they are striking and memorable; each is clear and articulately voiced. Though the issues they raise are confronting and complex, the representations are evocative but not ambiguous.

With regards to the digidoc-making process, there is an opportunity for makers to report in artists' statements that accompany the digidocs on Vivienne's blog. In one case, the act of creating the digidoc is reported as itself therapeutic. As Tanya writes, it was a "thrilling, exhilarating creative discovery of self-expression". Common to all of the digidocs is a sense that there is something to say, a case to make, or possibly a record that needs to be set straight. As Kate puts it in her artist statement, "I decided to make this documentary to not only give the children of same-sex parented families a voice, but to show and express the extent to which same-sex parents and their children are not only excluded, but made to feel invisible in environments such as child-care centres and primary and secondary schools". For these reasons, the digidocs exhibit signs of urgency and persuasion well beyond that of most work in the blogosphere, all-the-while demonstrating thoughtfulness about the loss of control (and privacy) discussed earlier.

While all of the works are highly controlled objects in the best sense of that word (meaning they make their choices carefully and thoughtfully), the approach to privacy – how much of a family to show – is not uniform across them. Age, individual comfort levels, and legalities within relationships would be major determinants upon the styles of representation opted for. In some of the videos, the concealment of identity is not an option because of its association with a conservative closeting agenda (Kate's video, Sonja's video): blurriness is what a school does when it can't

(or won't) see you properly, or what someone does when they think you might embarrass them. In these works, the choice to show the maker's daughter (Sonja's video) or name the maker's brother (Kate's video) forwards an impulse towards visibility as a guarantor of pride, an impulse that enjoys a long and rich history in a diversity of activisms – even as it has been contested (For a brief history of this contest, see Jagose 2002, pp. 1-24).

By contrast, in other works photos and names of children are conspicuously absent – represented instead by drawings and the pronoun 'you' (Damien's video). Though the reasons behind this choice are not spelled out, Damien's blurb suggests further factors and complexities that, even as they inhibit what can be shown, paradoxically give the digidoc its shape. As Damien writes, "this digidoc captures the complexities of our conception story in subtle ways that render our family visible for us to see, whilst not necessarily telling all of the story that other people might like to see. As such, it celebrates our family in a public way, whilst retaining the privacy that we wish and need".

While they appear contradictory, both Damien's response and Sonja's and Kate's responses to matters of privacy and control are equally valid, albeit differently motivated. As such, they provide answers to the challenge that Boyd (2008, p. 18) calls "social convergence" – the idea that on-line information can be accessed in an uncontrolled way by multiple, unpredictable, and unanticipated audiences, at any point in time. The question of privacy in the era of social convergence is indeed a vexed one, determined by context and a sense of overall control rather than by posing simplistic, one-size-fits-all, yes/no questions. Though computers understand privacy as zeroes and ones, our experience as humans is altogether more nuanced and contoured. It's this bumpy, murky middle-ground that these works, taken as a whole, so productively explore.

Conclusion

To sum up, I have tried to demonstrate some of the ways in which the digidoc makers referred to here have taken advantage of and in turn been influenced by the constraints of the on-line delivery platform – namely the small-scale format and the shifts in privacy capacity. Makers have responded in creative ways to the on-line delivery requirements, represented themselves, their kids, and their families in imaginative, original, and compelling ways. In the long run it is unclear whether the digidocs are utopian or sceptical about their status as web-objects: they are certainly opportunistic, taking advantage of the form to agitate, enlighten, share, and hopefully change. Albeit in different ways, each of them has lobbied for recognition and the right to exist – not such a small claim given the community's legal status.

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AGEISM WITH HETEROSEXISM: SELF-PERCEPTIONS, IDENTITY, AND PSYCHOLOGICAL HEALTH IN OLDER GAY AND LESBIAN ADULTS

BRAD A. MEISNER & MICHAELA HYNIE

Abstract

The proportion of older adults in the population is increasing. Accompanying this demographic trend is a growing interest in the antecedents of optimal ageing; however, there is a paucity of research investigating how the ageing process differs as a function of sexual orientation. It has been suggested that compared to heterosexual older adults, gay and lesbian older individuals may be at an increased risk for psychological maladjustment to ageing due to the combined effects of ageism with heterosexism. The purpose of this review is to critically appraise the literature on homosexual orientation, internalised homonegativity, ageing adjustment, and psychological well-being in later life. Published findings to date suggest important differences in psychological adaptation to ageing between and within gay and lesbian groups; in fact, two themes emerged from the literature: 1) crisis competence (the experience of one form of discrimination facilitates coping with another) and 2) accelerated ageing (the negative outcome of experiencing multiple forms of discrimination). These phenomena appear to be moderated by sexual orientation and gender. Some current theoretical and methodological limitations in the field are considered in an attempt to support future research.

Introduction

There are an increasing number of older adults in industrialised populations. This trend is primarily due to the ageing generation of 'baby boomers'; however, it is also associated with longer life expectancies, with figures indicating an increase in longevity of approximately three months per year (Oeppen & Vau-

pel, 2002). Accompanying this demographic trend has been an increased interest in the nature and predictors of well-being in the ageing process, with a particular focus upon the antecedents of optimal psychological health and well-being.

Amid ageing studies, however, there is a shortage of research that investigates the psychology of ageing in older homosexual individuals. A search of the PsycINFO database revealed that across all domains of psychology a total of 86,456 peer reviewed publications relate to either 'ageing', 'aging', 'elder', 'elderly', or 'older'; however, only 575 of these papers (0.7%) included key words such as 'homosexuality', 'homosexual', 'gay', or 'lesbian'. As a result of this relative dearth of research, scholarly journals such as the *Gay and Lesbian Issues and Psychology Review* (2006) and *Developmental Psychology* (2008) have recently published special issues that reiterate the need for knowledge on how sexual orientation influences human development throughout the life course, with a specific focus on the experiences of homosexual individuals.

A considerable challenge for any gay or lesbian individual is to develop, and foster, positive self-regard living as a homosexual within a largely homophobic society in which institutionalised and societal heterosexism continues to exist (Morrow, 2001). Over time, not only do older homosexual people likely encounter ongoing discrimination associated with their sexual orientation, they may also endure ageism that manifests itself via stereotyping, prejudice, and blatant discrimination. Moreover, there is some research suggesting that age discrimination is more prevalent in gay

communities (Fox, 2007).

Prevailing negative age stereotypes are detrimental for our elders, as negative attitudes toward older adults affect their psychological well-being. Garstka, Schmitt, Branscombe, and Hummert (2004) found that older individuals (presumably heterosexual) who perceived age discrimination experienced lower reports of self-esteem and life satisfaction compared to those who did not perceive ageism. However, ageing homosexuals may face even greater amounts of ageism than heterosexuals, and age-based prejudice in combination with sexuality-based prejudice may result in an even greater decline in psychological health in older gay and lesbian individuals compared to heterosexuals. In fact, older homosexual males and females are thought to be at greater risk for depression, mood and anxiety disorders, as well as body dysmorphic disorder. (Friend, 1991; Morrow, 2001). The purpose of this paper is not to thoroughly review the literature (this can be found elsewhere; see Boxer, 1997), but rather to critically appraise the existing literature on homosexuality, psychological ageing, and ageism. This is achieved by establishing a) the general themes in this area, b) whether there is agreement in the overall findings, and c) if there are any amendable limitations existing in the research to date.

Older Homosexual Identity

Friend (1987; 1990; 1991) has proposed a descriptive model of identity development in older homosexuals. The primary goal of this model was to attain a deeper understanding of the issues that older homosexual adults expressed in clinical and counselling settings. Three groups of older homosexuals were described, which were believed to represent variations in an identity state continuum. One end of the spectrum involves 'stereotypic older homosexuals' and at the other end, 'affirmative older homosexuals'. The point between these two extremes includes individuals who prefer to 'pass as heterosexual'. The main tenants of each of these three groups are de-

scribed by Friend as outlined in the following sub-sections.

Stereotypical older gays and lesbians

This group constitutes those older gay and lesbian individuals who conform to the popular negative stereotype of being lonely, depressed, and socially alienated (Friend, 1990). These individuals are thought to have poor self-esteem and self-worth. It is suspected that members of this group represent those who have a greater likelihood of having extreme internalised homophobia (Friend, 1991), which may result in tendencies toward isolation and invisibility (Morrow, 2001), particularly from homosexual-related environments. As a result, 'stereotypical' individuals have fewer interpersonal interactions with openly homosexual individuals in social contexts and may therefore never have had an opportunity to deconstruct their negative self-perceptions by challenging their own heterosexist belief system (Friend, 1991). Individuals who belong to this group are thought to be at greater risk for suicide and substance abuse due to their low self-esteem (Morrow, 2001).

Older gays and lesbians who wish to pass as heterosexual

Members of this group may marginally accept some aspects of homosexuality but still believe that heterosexuality is superior (Friend 1990; 1991). As a result, members of this group are assumed to experience internalised homophobia, but to a lesser degree than 'stereotypical' older homosexual adults. They may or may not identify themselves as being either gay or lesbian but they have a strong investment in either passing as non-homosexual or at least not appearing to be stereotypically homosexual (Friend, 1991). For this group, sexual orientation identification can be situational as some individuals may identify with being homosexual only within certain contexts.

For example, Morrow (2001) described some

homosexual individuals who wish to be perceived as heterosexual by their family and/or work colleagues but may choose to disclose their sexual preference to close friends. Because of this, there is a strict dichotomous compartmentalisation of one's perceived 'heterosexual life' and actual 'homosexual life' (Friend, 1990). Psychological issues experienced by members of this group are thought to be associated with the threat of having one's sexual orientation disclosed. Therefore, individuals who are passing as heterosexual may have increased anxiety, self-consciousness, and conditional self-acceptance (Friend, 1991). Also, it is thought that due to internalised homophobia, a complete and positive sense of self-acceptance remains compromised (Morrow, 2001).

Affirmative older gay and lesbian adults

Affirmative older homosexuals are those who have successfully reconstructed a socially-defined negative homosexual identity into an identity that is positive and self-accepting. As a result, these individuals have accepted their homosexuality and are more likely to publicly disclose their sexual orientation (Friend, 1990; 1991; Morrow, 2001). Members of this group are described as psychologically well-adjusted such that they are thought to have positive self-appraisal despite being part of a potentially stereotyped group. This self-worth develops from both a psychological deconstruction of heterosexism and the resistance of homophobia (Morrow, 2001).

Although there is some debate as to whether this three-part model best represents the psychological health profiles described above, Friend's connection between self-perceptions (i.e., self-directed homonegativity) and psychological well-being of older gay or lesbian individuals is an important one. This is of particular significance regarding how well an older homosexual person adjusts to the ageing process and how efficient they are at being able to manage experiences of age discrimination.

Ageing, Homonegativity, and Age Adjustment

Crisis competence

Due to the fact of living in a heteronormative society, homosexual people are often exposed to homophobic events throughout their life course (e.g., potential rejection from family, co-workers, friends, and heteronormative social and community groups). A homosexual person with positive self-perceptions has developed coping techniques to control the social stresses that are associated with being gay or lesbian and this skill is thought to transfer over to act as a defense against age-related stigma (Friend, 1991; Kimmel, 1978). This phenomenon is known as 'crisis competence' (also referred to as 'stigma competence', see David & Knight, 2008). Supporting the notion of crisis competence, Adelman (1990) surveyed older gays and lesbians in relation to their adjustment to ageing. Results indicated a positive association between satisfaction with being homosexual and positive age-related self-regulation, measured by life satisfaction, self-criticism, and psychosomatic problems. Also, a qualitative study by Orel (2004) found that psychological age adjustment was facilitated for homosexual men if they experienced difficulties with heterosexism. Those individuals whose sexual orientation was self-described as 'visible' indicated that their ability to deal with the losses associated with ageing was an extension of their ability to deal with the losses that often accompany 'coming out'. This indicates that learning to cope with homophobia may actually prepare gay and lesbian individuals to cope with ageing and this, in turn, may actually reduce the effects of ageism.

A recent investigation of stress and coping in gay males by David and Knight (2008) found that, compared to relatively younger individuals, older participants reported higher levels of homonegativity. It was discovered that an increased level of negative self-perception was not significantly related to coping techniques

(neither disengaged nor active) or depression. In fact, the older participants in this study experienced lower levels of anxiety in contrast to the younger participants despite having stronger negative self-perceptions. However, as the authors note, it is possible that these effects may be due to cohort effects, especially considering that homosexuality has different social connotations compared to decades ago.

Accelerated ageing

The ageing process itself is a personal, socio-emotional, and psychological construct that is guided by self-perceptions throughout later life development. Older gay and lesbian adults, particularly those with negative self-perceptions, may be more prone to the consequences of marginalisation associated with ageing and may be more susceptible to actual and perceived negative ageing outcomes such as experiences of loss and grief, physical deterioration, loneliness, not recovering from illness, dependency, etc. As a result, these individuals are thought to experience 'accelerated ageing'.

Accelerated ageing occurs when an individual with negative self-perceptions believes that they are older at an earlier age compared to their chronological age-matched peers who have positive self-perceptions (Friend, 1987). The conventional definition of 'old age' is 65 years and greater. However, Gorman (1992) discovered that the break between 'young' and 'old' for homosexual males was approximately 35 years. Another study found that older gay males believed that later life begins at 44 years (Shope, 2005). Bennett and Thompson (1991) believed that this 'accelerated ageing' effect is a result of gay male communities putting a great deal of importance on youthfulness. Their survey found that homosexual men are considered middle-aged and elderly by other homosexual males at an earlier age compared to heterosexual men in the general community. It has been suggested that accelerated ageing may be linked with compromised psychological well-

being along with feelings of chronic social oppression in a youth-dominated culture (Bennett & Thompson, 1991; Friend, 1990).

There is very little research on accelerated ageing as it pertains to lesbians. An investigation of gay and lesbian perceptions of ageing found that gay men were more negative than lesbians in their attitudes towards growing older (Shope, 2005). In fact, compared to forty per cent of gay males, sixty per cent of the lesbian women sampled in that study saw their ageing process in a positive light and one third reported their ageing process as 'fantastic'. Also, as noted above, Shope (2005) found accelerated ageing in older gay males; however, this same study did not find a similar effect for lesbians.

Some Current Considerations for Future Homosexual Ageing Studies

Theoretical domain

A notable criticism of Friend's model is that it suggests that older homosexual people who are 'in the closet' are more likely to experience psychological suffering (Adelman, 1990; Shope, 2005). For this to be true, Friend's model assumes a high level of homosexual orientation identification. If a homosexual person does not highly identify with being homosexual, the negative psychological effects (i.e., damaged self-esteem, impaired age adjustment, etc.) of internalised homophobia would neither apply to nor influence the self. In fact, previous research suggests that non-disclosure of one's homosexuality in later life, perhaps due to low self-identification, can be an adaptive form of self-preservation (Lee, 1987). Supporting this argument, David and Knight (2008) found that older gay males are less likely to disclose their homosexuality to others compared to younger participants. However, these older gay men did not report significantly worse mental health outcomes. Furthermore, it has been found that gay men who are secretive about their homosexuality may be happier and more satisfied than gay

men who have had a difficult time coming out (Adelman, 1990; Lee, 1987).

Methodological domain

As in any area of research, these findings are likely influenced by research methodology. The first studies that investigated the relationship between homosexual orientation and age adjustment were developed from practitioners' discussions with their gay and lesbian clients in domains such as clinical and counseling psychology as well as social work. Results from these studies therefore include only those individuals who are already experiencing psychological difficulties in some domain. As a result, these individuals may experience ageing very differently from other gays and lesbians who do not seek clinical services. The detrimental influences that homonegativity may have on ageing adjustment described by Friend has not yet been well examined in a non-clinical population, and its prevalence remains unknown.

Subsequent research recruited participants from active social groups in gay communities (e.g., Brown, Alley, Sarosy, Quarto, & Cook, 2001). However, involvement in the gay community and participation in gay-oriented social organisations have been related to acceptance of both one's own homosexuality and the ageing process (Friend, 1991; Quam & Whitford, 1992). Also, McFarland and Sanders (2003) hypothesised that socially engaged participants are more secure with their homosexual identity and are not representative of isolated homosexuals. As a result, participants who have been sampled through convenience sampling in homosexual communities are likely to highly identify with being a homosexual person and have developed coping strategies that permit positive self-regard. As noted above, those individuals who have developed successful coping strategies in the face of homophobia may generalise these skills to coping with age discrimination, and may therefore experience ageing differently from those who do not participate in gay and lesbian social organisations. However, they may be more

vulnerable to the potentially stronger negative age stereotypes held by homosexual communities (perhaps more so in gay male communities; Fox, 2007), and thus face greater risk of negative psychological ageing.

A major shortcoming of the research appraised here is its reliance on cross-sectional data. The social climate in which gays and lesbians have lived is assumed to play a large role in their psychological well-being, and this climate has changed in substantial ways in the last 50 years. Thus, it is very difficult to compare older and younger homosexuals because their experiences of discrimination are likely to be different. Furthermore, the same can be said for comparing results from the late 1970's to those drawn from recent research. The relationship between self-disclosure and well-being, for example, no doubt differs as a function of both cohort and year of study. To remedy the aforementioned inadequacies, up-to-date, longitudinal research is required in order to determine the prevalence and antecedents of the negative psychological effects of ageism and heterosexism that older homosexual adults may or may not endure. In particular, there needs to be a deeper exploration of the relationship between people's personal histories and social environment and their experience of the ageing process, and how this changes over time.

Although there is clearly value in studying the experience of homosexual ageing processes in and of themselves, the argument that the process is different from that of heterosexual adults requires direct evaluation. There seems to be a lack of such comparison in terms of individual experiences of ageing as well as coping with age and ageism. While some may consider comparisons between homosexual and heterosexual samples to be irrelevant for determining the experiences for homosexual men and women, such comparisons may have some important theoretical implications for ageing in general. For example, while much of the literature described above suggests that the combined effects of ageism and homophobia create a more difficult ageing process for

older homosexual adults, the research on crisis competence suggests that successfully coping with past discrimination may make older homosexuals more adept at dealing with ageism than are older heterosexual adults; thus, homosexuals may experience an easier ageing process compared to heterosexuals. Of course these findings do not minimise the importance of reducing discrimination in *all* ways at *all* levels; any person, regardless of their sexual orientation, should experience social and personal equality throughout their ageing process. Nonetheless, investigation on this topic may bring important and interesting insights into the study of coping and resilience and into the nature of ageing in different communities.

Clearly, the preponderance of the literature makes comparisons within homosexual groups (usually gay males) or between gay and lesbian older adults. However, Dorfman and her colleagues (1995) compared 56 homosexual and 53 heterosexual adults of 60 years or greater in terms of depression and social support. Results showed no significant differences between the groups in terms of depression or overall social support. Again, community convenience sampling and cross-sectional data may not truly represent the latent differences between homosexual and heterosexual adults but more research of this kind is required.

Finally, there is a surprising lack of gender analysis in this research. The process of ageing differs for heterosexual women and men. For example, stereotypes around ageing may be more negative for heterosexual women than men (Deutsch, Zalenski, & Clark, 1986). It is therefore not unexpected that the ageing process is also different for gay men compared to lesbians, but what is notable is that the effect of gender may be in the opposite direction in the homosexual population. Studies that do compare older gays and lesbians find large gender differences. This research reveals that lesbians appear to view ageing in a positive light, whereas gay men may face increased discrimination from within their own community at a level that is not faced by ei-

ther heterosexual men or lesbians. Additional research into the interaction between gender, sexual identity, and ageing self-perception is needed as it may point to the central role that social norms, stigma, and community play in the ageing process.

Conclusion

Three themes emerge from the research reviewed above. The first is that there may be important differences between and within gay and lesbian groups and these differences need to be explored further. Although Friend's categorical groupings may be subjectively based on the degree to which an older person feels they are able to disclose their sexual orientation, the relationship between self-directed homonegativity and psychological well-being of ageing homosexual individuals is significant. Certainly, research continues to find that a significant proportion of older homosexuals are socially and psychologically well adjusted to their sexual orientation (i.e., positive self-appraisal) and their ageing process (i.e., strong support systems, good physical health, good finances, and engaging in fulfilling occupations and hobbies; Brown et al., 2001). Other gay and lesbian older individuals, however, may not be coping well, and identifying the predictors of a challenging psychological ageing process is essential.

The other two themes are the following: First, that ageism and heterosexism may have a simple additive effect on psychological well-being and age adjustment (i.e., crisis competence), or, second, that their effects can be interactive, whereby they are worse than the sum of their parts (i.e., accelerated ageing). However, it is also possible that the effects actually cancel each other out, such that the skills learned from experiencing one negate the negative effects of the other. While both main effects and interactions are possible, the evidence is more supportive of a multiplicative effect in counselling and clinical settings than in studies in wider gay and lesbian communities.

Careful documentation of the amount of discrimination experienced among the general population of older gay and lesbian adults, both in terms of homophobic discrimination and discrimination due to age, would help in confirming some of the correlates of poor psychological adjustment to ageing. In the Australian context, exploratory research of this nature has taken place (Barrett, 2008) but this report focused on the experience of older homosexual adults who were using age-related care services, and thus had already self-identified as older adults. Research on the general population is still needed. Better still, documenting these effects over time would eliminate the cohort effects that challenge any study of ageing, to help untangle the complicated relationships that exist between psychological and social predictors of well-being in this population.

By incorporating some methodological and theoretical modifications, future research would more reliably explore the interconnection between homosexual orientation, stigma, coping, and internalised homonegativity throughout later life. This, in turn, may have a significant impact on an older homosexual person's psychological well-being and age adjustment. By enhancing the theoretical understanding of an older homosexual's ageing experience, applied researchers and mental health practitioners can assist in optimising older homosexual people's psychological well-being and their ageing adjustment process.

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BOOK REVIEW

DAMIEN W. RIGGS

Klesse, Christian. (2007). The Spectre of Promiscuity: Gay Male and Bisexual Non-Monogamies and Polyamories. Hampshire: Ashgate, pp. 208, ISBN: 9780754649069.

This new book written by Christian Klesse represents a timely intervention into the relative dearth of research on both bisexuality and non-monogamous and polyamorous relationships. Drawing on interviews conducted with bisexual men, gay men and bisexual women involved in negotiating non-monogamous and polyamorous relationships, the book highlights the considerable diversity within these groups of people, and the key contestations and issues that they raise as part of their relationship and sexual practices. As such, the book is important for the non-pathologising ways in which it represents these diverse experiences, and the contribution that it makes to a critical understanding of non-monogamies and polyamories.

Despite these strengths – strengths that will endear the book to those researching and living bisexualities, non-monogamies and polyamories – the book is limited by a number of shortcomings that undermine its scholarly and empirical aims. These may be summarised by the following three points: 1) recognition of, but failure to adequately attend to, the intersections of sexuality, gender, race, and class, 2) the limited introduction of a theoretical framework and the subsequent shortfall in application of this framework, and 3) a tendency toward under analysis of what appears to be rich and important data. In the remainder of this review I focus on these three points in turn.

In regard to the first point, Klesse rightly

draws the reader's attention to the need to examine intersections of identity, and suggests that this has been a shortcoming of previous work on sexuality. I would wholeheartedly endorse this critique, and have undertaken some of this work in my own research (e.g., Riggs, 2006). Yet whilst Klesse appears keenly aware of the need to theorise intersections of identities, and whilst at points in the book he examines issues other than those relating to sexuality, he does not do this in a sustained or integrated way: it is segmented off into particular sections of the book, and for the whole, race and class (for example) are separated from sexuality. There are three reasons why this appears to be the case.

First, Klesse devotes a chapter to outlining his position as a white bisexual researcher, and how this influenced his research practice, yet this chapter does not appear until almost a third of the way into the book, thus meaning that his whiteness and positionality more generally are not remarked upon prior to this point. One outcome of this is that the first two chapters of the book (which include strident critiques of other research that focuses singularly on sexuality) are not explicitly marked by Klesse's own subject position as a white man. Second, and relatedly, Klesse does not make use of theoretical frameworks that could have allowed him to more adequately examine intersections of multiple subject positions. Primary amongst these are the notion of privilege: race privilege, class privilege etcetera. Utilising these approaches to understanding intersecting identities would have assisted Klesse to provide a more sustained and integrated analysis of multiple axes of identity, rather than viewing them as what Barnard (2003) has termed 'problems of addition'. Fi-

nally, Klesse's presentation of extracts of data from the interviews he conducted is not adequately accompanied by demographic details of the participants. Hence only in places can we understand the power dynamics that might shape the lives of these participants: we are not often privy to their classed or racialised subject positions (unless they are marked as working class or non-white), nor are we always able to discern the gender(s) of their partners, and the implications of this for their experiences. These three points thus undermine Klesse's commitment to a politics of identity that emphasises intersectionality.

In regard to my second critique, and whilst I acknowledge that Klesse does indeed work up both an implicit and explicit theoretical account throughout his data analysis across four main analysis chapters, and that this is briefly prefaced by a summary of his theoretical framework and bookended by an exploration of this in the final chapter, there is not, at least in my reading, a clear explication and utilisation of a theoretical framework. Understandably, Klesse begins the book by critiquing the limitations of previous frameworks (i.e., their singular focus on one aspect of identity; their focus on the normalisation of queer people and relationships; the emphasis upon monogamous coupledness; the overemphasis on homogeneity within queer communities). But when he moves on to outline what he sees as a more productive approach to understanding queer lives (i.e., through the notion of 'publics' rather than communities, and through a focus on dissent within publics), we are only very briefly introduced to this approach, with little in the way of a sustained elaboration of it throughout the analysis chapters. In other words, whilst the notion of publics and counterpublics is implicit to the entire book, and whilst Klesse refers back to this framework at the beginning and end of most analysis chapters, he does not thoroughly integrate it or indeed use it in a sustained way as an analytic tool through his examination of the data. This results not only in the underdevelopment of the theoretical framework and thus limited scope for understanding its appli-

cation, it also means that the reader must constantly do this work themselves: of applying the idea of 'publics' to the data that is presented.

Finally, and in relation to the previous point about the under-application of theory to data, the book tends towards an under-analysis of the data presented. This occurs in a number of ways. First, whilst Klesse provides a chapter on how and why he did the research, his actual method is bracketed off as an appendix. This puts the importance of the method outside the scope of the main body of the book, which undermines the centrality of rigorous analysis to any project on a marginalised topic. In other words, and without resorting to the positivism of which Klesse is understandably critical, utilising findings from such important research will always be limited by the way in which they are presented. My call is of course not for tables or numbers or claims to generalisability, but rather for a presentation of the extracts that does greater justice to the participants and from which clearer research findings can be derived by future researchers in the field. A second point relates to the presentation of data. In places the data is almost presented as a justification for Klesse's position – the data at times almost appear as a side point to the argument Klesse is making. I do not believe that this was actually Klesse's intention, but the presentation of data (that is not clearly framed by either method or demographic information) results in an almost impossible requirement of the reader to understand it as the empirical experiences of individual people, rather than as props for Klesse's position. Finally, and relatedly, at points the data is under-analysed (i.e., salient features such as rhetorical structures or references to identity positions are ignored), whilst at other points it is overanalysed – more is made of, or extrapolated from, the data than would appear to be justified. Again, this is not a point about reliability or validity, but about needing a clearer analytic structure that would utilise the data more clearly as data, and thus as the source of many of the findings, not as supplemental to Klesse's theoretical position.

To conclude: I would reiterate my position that this is an interesting book. It covers a lot of ground and does an excellent job of outlining what is a complex and contentious field of research. Klesse deftly summarised many conflicting positions on the topics of bisexuality, non-monogamy and polyamory, and in so doing provides his own important interpretations of this area of research. His deployment of the concept of 'publics' is certainly interesting, and points toward future applications and interpretations of his data. Indeed, Klesse's other published work (i.e., journal articles) does much of this other possible work, such as by examining relationship manuals, exploring race privilege in queer communities, and critiquing the normalisation of queer lives. As such, it is surprising that much of this was not included in the book, and instead the reader is directed to other work by Klesse. But regardless of these critiques, I found this an enjoyable and easy book to read, and despite the possible mismanagement of data, the data nonetheless brought the arguments provided by Klesse to life in vibrant and stimulating ways. Klesse must thus be commended for providing a personal, political and intellectual engagement with what to date has been a largely under-examined field of research.

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BOOK REVIEW

SHAUN M. FILIAULT

Kimmel, M. (2008). *Guyland: The Perilous World Where Boys Become Men: Understanding the Critical Years Between 16-26*. New York: Harper, ISBN: 0060831340, pp. 352

Why is it that young (American) men seem so drawn to alcohol, video games, and pornography?

Michael Kimmel's *Guyland* stems from the observation that many young men (or 'guys') seem to be indulging in potentially destructive habits at alarming rates. This pattern of self-destruction is occurring at the same time as these men delay the developmental milestones that marked their fathers' and grandfathers' entry into 'responsible' manhood, such as career development and marriage. This explication of young men's lives is framed around the findings of hundreds of interviews Kimmel conducted with 'guys', as well as other stakeholders in the healthy development of young people. Through this analysis, Kimmel explores 'guy' behaviours such as alcohol consumption, casual sex, media use (particularly pornography), and employment trends. He also describes cultural semiotics that sustain these trends.

In describing the intersection between individual behaviour and cultural excuses, Kimmel posits his theory of 'Guyland'. According to Kimmel, Guyland is simultaneously the developmental period for males between ages 16 and 26, and the cultural milieu in which these men develop. It is argued that young men's behaviour is underpinned by a precarious sense of masculinity that must be constantly re-asserted through such risk taking behaviour as heavy drinking and promiscuous sex, to the foreclosure of identity, career, and relationship

development. However, these practices are excused by the dominant culture as boorish, 'boys will be boys' stupidity. Moreover, Kimmel suggests the broader culture, particularly other men, defend these practices as being integral for young men's developing sense of masculinity and manliness in a culture that is otherwise limiting Guys' ability to 'prove' their worth as men.

It is this dual explication of Guyland as both developmental period and cultural space that demonstrates the brilliance of Kimmel's argument. Guyland – as book and as theory – seamlessly melds the developmental theory of 'emerging adulthood' (Arnett 2000) with the heavily-cited notion of hegemonic masculinity (Connell & Messerschmidt 2005). The combination of developmental and cultural theory reminds the reader that gender does not emerge in a vacuum, and both individual human development as well as cultural systems must be considered when addressing masculine identities. Ultimately, individual men enact masculinity, even if this masculinity is both based upon and defended by cultural practices. Kimmel's text takes seriously this notion, and provides a model for the intersection of developmental and social psychologies. It also suggests hope for change, through both working with individual men and by confronting social norms. Moreover, this theoretical discussion is written in a highly readable fashion that stands in stark contrast to the often inaccessible language that has characterised recent social theory. The text is thus both informative and enjoyable.

Although exemplary in its thorough, qualitative investigation of men's lives, and its melding of theories, *Guyland* is not without fault.

The book is fairly heteronormative, in that it fails to address how gay men navigate the often homophobic and misogynistic nature of Guyland. Gay men are often described as the foils of Guys, rather than inhabitants of Guyland. The ways in which young gay Guys experience both the constraints of Guyland, and the cultural excuses for Guys, are largely unexplored. This failure signals a major weakness of the text and constitutes a gap within the theory of Guyland as an explanatory mechanism for contemporary young men's lives, particularly given the fact that many gay men participate in the high levels of drinking, pornography use, and casual sex as to the straight men Kimmel interviewed.

In addition to being heteronormative, *Guyland* is largely focused on North American Guys. Although Kimmel gives a cursory nod to the United Kingdom and Australia, its focus is on American men, particularly within the American university system. Thus, the generalisability of these findings is somewhat limited, and readers unfamiliar with American universities and American youth culture may feel somewhat alienated from the examples and case studies Kimmel discusses.

Despite those limitations, *Guyland* serves as an interesting and useful addition to the masculinities literature. It is written in a manner that is accessible even to a lay audience, but is underpinned with the methodological and theoretical depth the academic reader would expect from Michael Kimmel. Although it provides a scathing critique of contemporary Westernised (or at least American) masculinity, it also serves as a reminder that as a culture, we can change the practices of gender, but first we must have the strength to stop forgiving Guys' actions as just boys-being-boys, and view it as the destructive behaviour it is.

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CALL FOR PAPERS

On lesbian, gay, bisexual, and transgender issues for the International Congress of Applied Psychology in Melbourne, Australia, July 11th – 16th, 2010

The International Network for Lesbian, Gay, and Bisexual Concerns and Transgender Issues in Psychology (INET), an association of national, multinational, and international psychological organisations, is looking to facilitate a programme of lesbian, gay, bisexual, and gender identity (LGBT) related presentations at the International Congress of Applied Psychology (ICAP) 2010.

ICAP is calling for symposia in the first instance (deadline June 30th 2009), and then individual papers (deadline November 2009). To ensure that LGBT-related presentations are collected together, INET advises symposia applicants (and later applicants for individual presentations) to ensure that they identify their submission to ICAP by selecting the 'sexuality' or 'LGBT issues' keyword via the online submission process at www.icap2010.com

Suggested topics for symposia on LGBT issues that might be presented on at ICAP 2010 include, but are not limited to, the following:

transgender persons	intersex persons
Bisexuality	LGBT immigrants
marriage / family / parenting	LGBT sexology
discrimination / anti-gay violence	culture and religion
internet / virtual communities	health and LGBT people

If you are interested in making a contribution by organising a symposium, please do so via the ICAP website. If you are interested in presenting in a general symposium but are unable to field the four other papers required, please send the following information to Charlene Delong (mdelong@apa.org) *before June 1st 2009* and INET may be able to put you in contact with a member planning a symposium in which you could take part: Name, institution; E-mail-address; title/topic of proposed talk.

You should be aware that this is not an official initiative of the ICAP organisers, though they do of course welcome submissions on all topics pertaining to psychology. Decision to include specific symposia or individual papers will be at the discretion of the ICAP organising committee. Also, INET is not in a position to offer funding support for presenters, though please do visit the conference website to access any relevant information about travel or possible funding opportunities.

Please feel free to spread this call to other individuals and groups who might be interested.

We hope to see you in Melbourne in 2010!

CALL FOR PAPERS

QUEERHATE: HATRED, INTOLERANCE, AND LGBTQ COMMUNITIES

SPECIAL ISSUE OF GLIP REVIEW, DECEMBER 2009

EDITOR: CHRISTOPHER FOX

When we consider homophobia, biphobia or transphobia we often only think of the explicitly violent actions perpetrated towards LGBTQ people by non-LGBTQ others. Yet homophobia is constituted by so much more than explicit violence in the lives of LGBTQ people. As such, it is important that we consider the pervasiveness of heterocentricity and heteronormativity in our society, and their often mundane (though nonetheless significant) effects upon LGBTQ people. The social, institutional and cultural promotion of heteronormativity perpetuates an environment where heterocentricity and structural and cultural homophobia are left unchallenged, sometimes even within LGBT communities. For example, we only need consider how biphobia and transphobia may at times be as prevalent in LGBTQ communities as they are in the wider society.

This special edition of the *GLIP Review* will explore the experiences of gay men, lesbians, bisexuals, transgendered and queer individuals in relation to heterocentricity and homophobia. The issue will also encourage a focus upon how social norms impact upon non-LGBTQ people (such as the regulatory effects of the phrase 'that's so gay' upon all young people). Finally, this special edition seeks to encourage a focus upon everyday acts of homophobia in the lives of LGBTQ people. Full length empirical and theoretical papers (6000 words) as well as shorter commentary papers (2000 words) that address the following themes are welcomed:

- Experiences of homophobia in LGBTQ communities
- Deconstructions of homophobia
- Analyses of hate crimes, LGBTQ people, and the law
- Examinations of heterocentricity/homophobia in health care
- Examinations of heterocentricity/homophobia in education
- Homophobia and cultural representations
- Psychological practice and homophobia
- Discrimination *within* LGBTQ communities

Papers should be submitted to the special issue Editor via email by August 15th, 2009: Christopher Fox [C.Fox@latrobe.edu.au]. Reviews will be returned to authors by late September with final papers due late November. Please direct any questions or enquiries or abstract outlines to the special issue Editor.

Preparation, submission and publication guidelines

Types of articles that we typically consider:

A)

Empirical articles (6000 word max)
Theoretical pieces
Commentary on LGBTI issues and psychology

Research in brief: Reviews of a favourite or troublesome article/book chapter that you have read and would like to comment on

B)

Conference reports/conference abstracts
Practitioner's reports/field notes
Political/media style reports of relevant issues

Book reviews (please contact the Editor for a list of books available & review guidelines)
Promotional material for LGBT relevant issues

The Review also welcomes proposals for special issues and guest Editors.

Each submission in section A should be prepared for blind peer-review if the author wishes. If not, submissions will still be reviewed, but the identity of the author may be known to the reviewer. Submissions for blind review should contain a title page that has all of the author(s) information, along with the title of the submission, a short author note (50 words or less), a word count and up to 5 key words. The remainder of the submission should not identify the author in any way, and should start on a new page with the submission title followed by an abstract and then the body of the text. Authors who do not require blind review should submit papers as per the above instructions, the difference being that the body text may start directly after the key words.

Each submission in section B should contain the author(s) information, title of submission (if relevant), a short author note (50 words or less) and a word count, but need not be prepared for blind review.

All submissions must adhere to the rules set out in the Publication Manual of the American Psychological Association (fifth edition), and contributors are encouraged to contact the Editor should they have any concerns with this format as it relates to their submission. Spelling should be Australian (e.g., 'ise') rather than American ('ize'), and submissions should be accompanied with a letter stating any conflicts of interest in regards to publication or competing interests. Footnotes should be kept to a minimum. References should be listed alphabetically by author at the end of the paper. For example:

Journal Articles: Riggs, D.W. (2004). The politics of scientific knowledge: Constructions of sexuality and ethics in the conversion therapy literature. *Lesbian & Gay Psychology Review*, 5, 16-24.

Books: Kitzinger, C. (1987). *The social construction of lesbianism*. London: Sage.

Edited Books: Coyle, A. & Kitzinger, C. (Eds.) (2002). *Lesbian & gay psychology*. Oxford: BPS Blackwell.

Book Chapters: MacBride-Stewart, S. (2004). Dental dams: A parody of straight expectations in the promotion of 'safer' lesbian sex. In D.W. Riggs & G.A. Walker (Eds.), *Out in the antipodes: Australian and New Zealand perspectives on gay and lesbian issue in psychology* (pp.393-416). Perth: Brightfire Press.

References within the text should be listed in alphabetical order separated by a semi-colon, page numbers following year. For example:

(Clarke, 2001; Peel, 2001; Riggs & Walker, 2004)
(Clarke, 2002a; b) (MacBride-Stewart, 2004, p. 398)

Authors should avoid the use of *sexist*, *racist* and *heterosexist language*. Authors should follow the guidelines for the use of non-sexist language provided by the American Psychological Society.

Papers should be submitted in Word format: title bold 14 points all caps left aligned, author 12 points all caps left aligned, abstract 10 points italics justified, article text 10 points justified, footnotes 9 points justified.

All submissions should be sent to the Editor, either via email (preferred): damien.riggs@adelaide.edu.au, or via post: School of Psychology, The University of Adelaide, South Australia, 5005.