

Towards lesbian and gay psychology



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**Celia Kitzinger,
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*present the rationale
behind the proposed
Lesbian and Gay
Psychology Section.*

REVIEWS of psychology books, journals and curricula (Kitzinger, 1990, 1993, 1996) confirm that lesbians and gay men are still an 'invisible' minority within the discipline and that the psychology of lesbianism and male homosexuality is rarely included within its scope and contents.

This is particularly true of British psychology: the lives of lesbians and gays are often not considered at all, or are discussed only within the areas of abnormal psychology or sexuality. Yet psychology could significantly contribute to improving the lives of lesbians and gays and of their friends and families; and, in turn, the discipline itself would be enriched by a better understanding of the diversity of people who constitute its 'subjects' (or 'participants').

The proposed Lesbian and Gay Psychology Section will help the discipline in its development towards becoming a true 'psychology of people' (Bronstein & Quina, 1988).

A brief history

Until the mid-1970s, the vast majority of psychological research presented homosexuality as a form of pathology, with lesbians and gay men characterised as the sick products of disturbed upbringings (cf. Rosario, 1997).

Most of these investigations were conducted on gay male samples and the findings generalised to 'include' lesbians; the overwhelming majority relied upon samples drawn from prisons, mental hospitals and psychologists' consulting rooms (Morin, 1977; Morin & Rothblum, 1991). This traditional psychology provided a grossly distorted picture of the lives, functioning and well-being of lesbians and gay men.

Since the mid-1970s, there has been an important shift towards the creation of a 'lesbian and gay psychology' that starts from the assumption that homosexuality falls within the 'normal' range of human behaviour. 'Homosexuality' was

removed as an official diagnostic category from the American Psychiatric Association's Diagnostic and Statistical Manual in 1973. In 1975, the American Psychological Association (APA) adopted the official policy that homosexuality *per se* does not imply any kind of mental health impairment, and urged mental health professionals to take the lead in removing the stigma of mental illness that had long been associated with gay male and lesbian sexual identities.

Nine years later, in 1984, the APA approved the establishment of a formal division, Division 44, within the APA, to be dedicated to the psychological study of lesbian and gay issues. Since the mid-1980s, lesbian and gay psychology has established itself within the mainstream of North American psychology.

More recently (in late 1995), a Special Interest Group in Lesbian and Gay Psychology was established within The Australian Psychological Society; and discussions have been taking place with a view to forming a similar group within the Psychological Society of Ireland.

Research on lesbian and gay issues has now moved well beyond simply demonstrating the 'normality' of lesbians and gay men. The field is no longer devoted solely to arguing the case for homosexuality as a normal variant of sexual behaviour, but rather attempts to investigate a wide range of issues of concern to lesbians and gay men.

Key texts outlining and defining the field of lesbian and gay psychology include Bohan (1996), D'Augelli and Patterson (1995), Garnets and Kimmel (1993), Greene (1997) and Greene and Herek (1994).

What are the research topics?

The key topics in lesbian and gay psychology over the last two decades are outlined below, with — in each case — some indication of the ways in which

they have changed and developed over this period. There is a large scholarly literature on all of the topics below (we would refer the interested reader to the key texts cited above for overviews).

1. Lesbian and gay identities: With the aim of facilitating (e.g. through counselling and psychotherapy) the development of healthy and mature lesbian and gay identities, psychologists have explored the processes through which people come to identify themselves as lesbian or gay, and the meanings which being lesbian or gay have for them. Stage models of lesbian and gay identity development are well established in the literature (e.g. Cass, 1979; Troiden, 1979).

Psychologists focus on how individuals can be helped to reach the highest developmental stage to achieve a healthy identity as a lesbian or gay man. One important part of this process is overcoming 'internalised homophobia'. The intersection of lesbian and gay identities with other identities based on class, ethnicity and disability has come to the fore in the 1990s, as has a new interest in bisexuality as a stable identity (Firestein, 1996).

2. Building healthy lesbian and gay relationships: Psychologists argue that models of healthy relationships based on heterosexual couples are inappropriate when applied to lesbians and gay men, who confront different challenges, both socially and psychologically.

Initially, research focused on comparisons between heterosexual and homosexual couple relationships; subsequently, attention has focused on lesbian couples or on gay male couples in their own right (Kitzinger & Coyle, 1995). Researchers have investigated the different chronological stages through which lesbian and gay couple relationships pass, from falling in love through to the consolidation of a relationship, its changes over time and its potential dissolution.

Another key area has been developing an understanding of the difficulties lesbians and gay men sometimes have in sustaining couple relationships. In the context of lesbian couples, for example, research has focused on: developing new models of sexuality; conceptualising and addressing problems of excessive closeness between partners ('fusion' or 'merger'); lesbian battering; and devising methods for couples therapy with lesbians.

Recent work has explored the diversity of lesbian and gay relationship formats and the psychosocial tasks and challenges that these may pose for the individuals involved (e.g. Davies *et al.*, 1993). There has also been a move to extend the concept of 'relationships' beyond the sexual arena to cover lesbian and gay friendships, support structures and communities.

3. Lifespan developmental issues: The psychologies of adolescence, mid-life and old age are all based on heterosexual samples. Lesbian and gay developmental research (e.g. Patterson, 1995) explores the different experiences of lesbians and gay men at various stages of life, including: the challenges of 'coming out' in adolescence, in mid-life and in old age; the ways in which issues around physical health and bereavement are experienced by lesbians and gay men of different ages; the impact of HIV/AIDS on (particularly) gay male identity; and age-related changes in orientation to work, identity, relationships and feminism.

4. Homophobia and anti-lesbian or anti-gay discrimination: Psychologists have asked why some people ('homophobes') react negatively to lesbians and gay men, and what can be done to alter this (e.g. Kitzinger & Perkins, 1993).

Early research focused on diagnosing individuals 'suffering' from homophobia using a variety of tests and scales. Homophobes were described as insecure, sexually repressed people with authoritarian personalities who purportedly differed from the rest of society in being prejudiced against gay people; therapeutic and education programmes were proposed to 'cure' them.

While neatly reversing the diagnostic label, such that it was now homophobes, rather than homosexuals, who were 'sick', this work was criticised both for its narrowly individualistic focus and for failing to differentiate between prejudice against lesbians and prejudice against gay men (Plummer, 1981).

Later, work on 'hate crimes' (Herek & Berrill, 1992) led to a broader understanding of lesbian and gay oppression as a social phenomenon, incorporated into the fabric of society, rather than caused by the actions of homophobic individuals.

Psychologists have explored the effects of homophobia (e.g. in the family, the workplace, the healthcare system), notably in terms of the resulting stress, depression and anxiety suffered by lesbians and gay men (Rothblum & Bond, 1996). Preventing heterosexism and homophobia is viewed as a key contribution psychologists can make to the primary prevention of psychopathology in lesbians and gay men.

5. Lesbian and gay parenting: Initially, research focused on whether and how far the children of lesbians and (to a lesser extent) of gay men can be distinguished psychologically from the children of heterosexuals — especially in relation to their psychosocial adjustment and their conformity with traditional gender role stereotypes. Because of its legal and policy implications (see below), this remains an important area of research.

Additionally, psychologists are

increasingly carrying out research directly rooted in the concerns of lesbian mothers and gay fathers (e.g. Patterson, 1995). Such concerns include coming out as lesbian or gay to one's children or managing different co-parenting arrangements (e.g. for a lesbian mother — with a woman lover; an ex-husband; a gay male sperm-donor; or a gay male co-parent).

6. Ethnic and cultural diversity among lesbians and gay men: Early psychological models were often drawn from research which used only white lesbian and/or white gay male participants, and the results were falsely generalised to all lesbians or gay men. From the mid-1980s on, psychology has explored the interrelation of ethnicity and sexual identity. This includes research which explores the specific characteristics of lesbians and gay men who are also African-American, Asian-American or Native American (e.g. Greene, 1997). Given the North American basis of lesbian and gay psychology, these explorations — to date — have been limited to cultural and ethnic diversity within North America.

7. Social constructionism vs. essentialism: Until the mid-1980s, lesbian and gay psychology was, almost without exception, rooted in essentialist theories. Sexual orientation was assumed to be an inner state or 'essence' which the individual 'represses' or 'discovers', 'denies' or 'acknowledges'. However, social constructionists (e.g. Kitzinger, 1987) pointed out the extent to which the very categories 'lesbian' and 'gay' were the products of a particular historical, cultural and political context.

Such an approach challenges the whole concept of 'the lesbian' or 'the gay man' (and equally, of course, of 'the heterosexual' or 'the bisexual'). Debates between social constructionists and essentialists in the 1980s left neither side convinced, and research now proceeds separately and in parallel within each framework.

Essentialists (e.g. De Cecco & Parker, 1995) argue (or assume) that sexual orientations or identities are innate or acquired in very early life, and that in acknowledging themselves as lesbian or gay, at whatever age, people are recognising their 'true selves'. Using the scientific method, they often compare 'lesbians' and 'gay men' with 'heterosexuals' across a range of measures and make statements about the differences (and similarities) between them.

Social constructionists, by contrast, reject both the concept of 'true selves' or inner 'essences', and the traditional methods of positivist social science. They explore instead the ways in which people actively construct narratives about their own sexual identities, and the discourses they use in talking about who they are and how they came to be

that way (e.g. Kitzinger & Wilkinson, 1995).

Although social constructionism is a very important strand of contemporary lesbian and gay psychology, essentialist theories continue to dominate the mainstream of the field.

8. 'Choice', flexibility and flux in sexual identities: With the social constructionist questioning of the very concept of 'the lesbian' and 'the gay man', psychologists have explored how individuals construct their identities over time and in relation to changing sexual activities and political commitments.

Psychology started with theories which conceptualised 'lesbian', 'gay male', 'heterosexual' (and sometimes 'bisexual') as fixed categories or models against which people matched their experiences to uncover 'true identities'.

By the 1990s, social constructionist psychologists were exploring the ways in which these categories are 'made real' through talk. The labels we use, and the assumptions embodied in everyday language about sexuality and sexual identity, affect how we understand ourselves. In particular, in line with the new interest in the social construction of dominant identities (e.g. whiteness or maleness), psychologists also began to investigate the taken-for-granted category of 'heterosexuality' and to explore the way in which heterosexual identities are constructed (e.g. Wilkinson & Kitzinger, 1993). What some now call 'Queer Theory' (e.g. Beemyn & Eliason, 1996) includes intersexuality (possession of inconclusive biological sex indicators) and transsexuality — although these categories are radically deconstructed by lesbian and gay psychologists, rather than essentialised as is typical of other psychological approaches.

Why do we need a Section?

Researchers involved in research relevant to lesbian and gay issues are currently dispersed across a number of different subsystems, including the Counselling Psychology Division and the Social, Developmental, Psychobiology and Psychology of Women Sections. A new Section is needed to provide an integrative forum which will enable psychologists adequately to address lesbian and gay issues across a whole range of traditionally disparate psychological research areas including: the psychology of prejudice and stereotyping, interpersonal relationships, ageing, adolescent identity development, media images, parenting, occupational issues and violence.

To date, British psychology has not offered a fertile ground for the development of lesbian and gay psychology. Despite this, recent years have seen an

increasing number of psychologists turning their attention to lesbian and gay issues, as represented in symposia and papers at Society conferences, and in publications in British-based and Society journals (including: Annesley & Coyle, 1995; Burke, 1995; Coyle, 1993; Milton & Coyle, 1998; Rivers, 1995). A European Association for Lesbian and Gay Psychology (EALGP) was founded in 1992 and has had symposia accepted for all of the subsequent European Congresses of Psychology.

We are not, of course, claiming that lesbians and gay men have unique psychological features — that they possess psychologies so different from those of heterosexuals as to merit special study in their own right. Rather, we believe that the development of a more inclusive psychology of humankind requires a focus on the particular issues confronting a traditionally under-represented group within psychology and on the integration of research endeavours currently scattered across the discipline.

The creation of a Section for Lesbian and Gay Psychology would contribute to the development of psychology as a whole and would establish a formal channel through which all Society members could benefit from work in this area.

What's in a name?

We have given a great deal of thought to the name of the proposed Section.

First, and most obviously, 'Lesbian and Gay' is the title used by the American Psychological Association's Division 44, and by the parallel grouping within The Australian Psychological Society. The term 'lesbian and gay psychology' is recognised internationally as referring to an identifiable body of work and to a specialist field of psychology: — quite simply, that is the name by which the field is already known. For that reason alone, we prefer it to alternatives which would make British psychological work in this area less readily identifiable as contributing to this field of expertise.

We have avoided the term 'homosexual' because, as the APA's (1994) *Publication Manual* points out, this is 'associated... with negative stereotypes' (p.51) and is also 'ambiguous because some believe it refers only to men' (p.51); the APA *Publication Manual* gives the terms 'lesbian' and 'gay' as 'preferred' (see also p.57). We have also avoided adding terms such as 'bisexual', 'transsexual' or 'transgender' to the Section's name — not because we wish to exclude these as areas of research, but because there is not yet an identifiable field of 'bisexual psychology' or 'transgender psychology' to which we would be seen as contributing.

It should be apparent from the outline above that bisexual, transsexual, transgender — and, indeed, heterosexual —

identities and practices all fall within the broad remit of 'lesbian and gay psychology' as it is currently understood.

Perhaps for this reason, it has periodically been suggested that we adopt the label 'Psychology of Sexuality' for the proposed Section (e.g. Adams, 1992). This is not, however, the name given to our research in the international arena, and use of it is likely to cause confusion with the sexological approaches common in North America. Moreover, the term 'sexuality' can be heard as implying a narrow focus on sexual practices, ignoring the broad range of psychosocial issues (employment, parenting, ageing, etc.) which constitute the core of contemporary lesbian and gay psychology.

We would also emphasise that by 'lesbian and gay psychology' we mean psychology which is explicit about its relevance to lesbians and gay men, which does not assume homosexual pathology and which seeks to counter discrimination and prejudice.

The phrases 'lesbian psychologist' and 'gay psychologist' mean (in this context) psychologists involved in this type of psychology — just as the terms 'social psychologist' or 'sports psychologist' refer to psychologists involved in other types of psychology. No implications are intended as to the characteristics of the psychologists themselves: a 'lesbian and gay psychologist' can be heterosexual, just as a 'social psychologist' can be anti-social, or a 'sports psychologist' a couch potato.

Like all of the Society's Sections, the Lesbian and Gay Psychology Section would of course be open to all members with a scholarly interest in this area. We would hope that the membership of the Section would reflect a range of diverse scientific perspectives, including biological, sociocultural, clinical, psychoanalytic and cognitive approaches to lesbian and gay issues.

Finally, psychological research across a wide range of topics is likely to have policy implications, and research on lesbian and gay issues is no exception (Gonsiorek & Weinrich, 1991). It is fully appreciated that, under the terms of the Charter, Sections cannot be involved in explicitly political activities. Equally, however, we have a responsibility to 'give psychology away' when it can be of use for the betterment of society as a whole. The development of lesbian and gay psychology in the UK provides the opportunity for the discipline to offer knowledge and skills to particular segments of the population, and we believe that the discipline as a whole can only benefit thereby. In sum, we think that our chosen name best signifies the overriding aim of the Section: the scholarly study of lesbian and gay issues within a psychological context.

Conclusion

Over the last three decades, psychology has dramatically developed and expanded its capacity to recognise human diversity. The rise of lesbian and gay psychology as a distinctive field is a welcome contribution to this ongoing development. We hope that you will add your support to this proposal by voting for the establishment of a Lesbian and Gay Psychology Section in the forthcoming ballot.

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The proposal for a Lesbian and Gay Psychology Section has been approved by Council, and Society members are to be balloted on the merits of establishing this new Section. For a more detailed statement of the aims of the proposed Section or a copy of the full proposal, please contact Sue Wilkinson at the address above.