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Marginalization and oppression are common themes in the lives of people whose experiences exist outside those of a dominant group—themes that dictate rules for existence that ultimately may be seen as serving the interests of the group in power (Miller, 2003; Walker, 2004). Cultural competence is an emphasis for the counseling profession in work with marginalized communities. A growing body of practice-based discourse for work with the gay, lesbian, bisexual, and transgender community (Logan & Barrett, 2005; Savage, Harley, & Nowak, 2005; Satterly, 2004) has done much to inform the counseling profession of the needs of people with stigmatized sexual identities. This article introduces the concept of developmental trauma as the impact of marginalization for gay and bisexual men, beginning with a discussion of how rejection functions as a source of anticipation of ongoing rejection and pain. Next, the influence of developmental trauma as a mitigating factor in identity development for gay and bisexual males is examined, applying Eisenberger and Lieberman’s (2004) model of Social Pain/Pain Overlap Theory for describing the traumatic impact of marginalization on this population. The additional dimension of childhood sexual trauma is discussed in the following section, with a description of how sexual abuse interacts in exponential systems of stratification for gay and bisexual men who were sexually abused as children. The final section of the article emphasizes the counseling relationship as a corrective relational experience (Miller & Stiver, 1997) that invites safety in vulnerability as healing work for gay and bisexual men.
The Historical Context of Oppression in the Development of Shame

Histories, both cultural and personal, hold significance in structuring perception about what it means to be a gay or bisexual man. Historical events of cultural significance can include national movements and policies, such as the gay marriage amendments that are contemporary sources of state legislation and political emphasis (Reicherzer, 2005). Also relevant are experiences of other gay and bisexual men—including personal connections with those who have survived hate crimes, faced employment discrimination, or who have been estranged by families for gay or bisexual identities. Individual histories, however, provide the greatest source of direct evidence for what gayness or bisexuality means within a man’s life, and often include experiences of violent, painful mistreatment. These experiences often cluster around themes of shame, in which homophobia has become internalized (Dew, Myers, & Wightman, 2005), creating developmental disruptions across the lifespan. Hartling, Rosen, Walker, and Jordan (2004) illustrate the pervasive experiences of shame and humiliation:

With shame, we tend to blame ourselves for the damage we have brought on ourselves… It is advantageous to the dominant group to persuade the subordinate group that they are deserving of shame, that they are responsible for the damage they have brought on themselves, that they should blame themselves for some deficiency or supposed inferiority. (p. 107)

Rejection Sensitivity and Social Pain

Pachankis, Goldfried, and Ramrattan (2008) recruited 150 gay, mostly gay, or queer-identified men to participate in an examination of the phenomenon of rejection sensitivity. Participants were presented with hypothetical events, and asked to evaluate whether these events would be construed as negative and as a result of perceived sexuality. The likelihood of such negative events taking place, and the anxiety that these events presented, were scored. An additional battery of tests was given to examine a number of variables that included assertiveness, self-perception, and fear of negative social evaluation by the dominant culture. The researchers found that perceived parental rejection, internalized homophobia, and unassertive interpersonal behavior were related. Specifically, a multiple regression analysis presented a predictive value for parental rejection and internalized homophobia ($p<.01$), parental rejection and rejection sensitivity ($p<.01$). Additionally, internalized homophobia was considered to be a mediating variable between parental rejection and rejection sensitivity on assertive interpersonal behavior.

Pachankis et al. (2008) suggested that the degree of gay men’s rejection sensitivity influenced gay men to inaccurately perceive current social interactions and situations. Gay men were found to be more likely to expect negative interactions and rejection, and were more likely to assume that any rejection was based on sexual orientation. The researchers suggested that an appropriate therapeutic intervention would
include schema reconstruction (Pachankis et al., 2008) to support the client in shifting perception about the anticipation of negative events.

The rejection sensitivity phenomenon is further clarified by Eisenberger and Lieberman’s (2004) Social Pain/Pain Overlap Theory (SPOT). In developing SPOT, Eisenberger and Lieberman identified social pain as the pain that is felt in instances of social exclusion. Functional Magnetic Resonance Imaging results demonstrated that the anterior cingulate cortex, the region of the brain that identifies physical pain, was more active during exclusion than inclusion, and correlated positively with self-reported distress at being excluded (r=.88). An extension of the researchers’ work concludes that social rejection is key in high frequencies of social isolation, break-ups, and emotional pain descriptions in suicide notes.

**Gay and Bisexual Male Identity Development**

Consideration for the possible trajectories of identity development in gay and bisexual men must take place within the contextual understanding of the forces of rejection sensitivity and social pain. Vivian Cass (1979, 1984) outlined a theoretical model for identity development that moved through a stage progression of Identity Confusion, Identity Comparison, Identity Tolerance, Identity Acceptance, Identity Pride, and Identity Synthesis. The culmination of one’s identity development, therefore, was seen as moving from a process of confusion about sexual orientation, past a strong, clear-cut identification with a gay identity, into free movement in the dominant society without an “us versus them” mentality.

A limitation in the application of Cass’s model is the relative worth or healthfulness of moving from a state of strong politicized identification with gay culture into an identity that relies less on cohesion with the identity politics of being gay or bisexual. A problem in this is the allure for members of marginalized communities to seek social movement by adopting characteristics of the dominant culture (Robb, 2006) while trying to make their own distinct cultural identities matter less in the eyes of the dominant group. Walker (2005) described this effort of leaving out important identity components in order to appear favorable to the dominant group as “invisibility through disconnection” (p. 54). Individuals who adopt this strategy of disconnection often unwittingly collude with and mimic the actions, behaviors, and ideals of the dominant, heterosexist culture, even adopting terms such as straight acting to denote masculinity that is seen as favorable and contrasted with pejorative use of queen or nellie to describe characteristics that are viewed as feminine, and unfavorable (Wilchins, 2004). Thus, these gay and bisexual men unwittingly recreate a power structure that is modeled after that of the dominant culture’s oppression and marginalization—employing a hegemony that, in the end, serves the dominant group (Walker, 2005) by fracturing the gay and bisexual male communities. This trajectory of experience may be understood as an attempt to insulate oneself from the kinds of negative experiences that marginalization presents.
The Developmental Impact of Childhood Sexual Trauma in the Lives of Gay and Bisexual Men

Childhood sexual abuse is a social problem of epidemic proportion. Estimates of prevalence range between 6 and 62% (Finkelhor, 1990), with rates of men reporting sexual trauma in childhood ranging from 4 to 16% (Holmes & Slap, 1998). The trauma that is associated with childhood sexual abuse has been found to have an enormous developmental impact across the lifespan, resulting in long-term and complex psychological challenges for the survivor. These challenges include not only reliving the trauma through flashbacks, intrusive dreams, and somatic re-experiencing of trauma sensations, but also can include legacies of shame and degradation (Valente, 2005). A significant component of shame and degradation is silencing, in which the adult survivor continues to feel “silenced” from the shame instilled by a perpetrator who had used silence to isolate the survivor during childhood. This re-experiencing of silencing in adulthood is demonstrated in an inability to tell the story of abuse, but also in much of daily living, in which a victim experiences apathy and loss of voice in many types of relationships (Alaggia, 2005).

In addition to the trauma that is directly associated with abuse history, the structure of sexism and heterosexism creates a context in which men fear being perceived as victims (Alaggia, 2005). Additionally, the historical legacy for gay and bisexual men is one in which same-sex orientation has been treated as a disorder, a moral weakness, or the result of “recruitment” (Reicherzer, 2005). A consequence of this legacy is one in which gay and bisexual men have been socially, culturally, and politically positioned to justify and defend the nature of their sexualities, and to refute notions of sexual identity as a choice or a result of disruptive factors that occurred during child development (Saewyc et al., 2006).

Conjecture about causation, lacking basis in fact or evidence but charged by a homonegative culture, could be equally misattributed to abuse by either a male or a female perpetrator. Thus, the shame and secrecy of childhood sexual abuse is exacerbated by fear that disclosure of an abuse history would create an attack on a gay or bisexual man’s sexual identity, and position him to defend the credibility and authenticity of his and all other gay and bisexual men’s identities (Saewyc et al., 2006).

Practical Implications

Counselors are invited to hold consideration for the developmental impact of marginalization in clients’ lives. Oppression creates an environment of isolation, potentially disconnecting a gay or bisexual man from the dominant culture, the gay and bisexual cultures, and the man’s own identity. To mitigate this, these authors suggest negotiating with clients to create what Miller and Stiver (1997) called a growth-fostering relationship of mutuality and connection. Growth fostering relationships are experienced when both people in the relationship, the client and the counselor, believe that they matter and have positive impacts on the other. In a mutually-empowering counseling relationship, clients feel supported in vulnerability, and are willing to take risks by
disclosing experiences of social pain. When these experiences are perceived to have an impact on the counselor, the client feels invited to bring himself more fully into the relationship (Miller, 2003). Necessarily, this requires a counselor’s willingness to be authentic, and a willingness to use the counseling relationship as a corrective relational experience for restructuring a lived history of developmental trauma.

Working with adult survivors of childhood sexual abuse requires specialized skill and training. It is highly recommended that counselors do not undertake work with any sexual abuse survivors without specific training and supervision in this area. For counselors who do have experience in work with sexual abuse survivors, additional emphasis is given to not only supporting clients in vulnerability, but in empowering clients for determining how and what to share, and when. The counseling relationship gives the client a sense of power and voice that, in the legacy of childhood sexual abuse, was taken from the survivor (Kerl & Juarez, 2005). Empowerment, in this case, refers to assuring that clients are assisted in identifying features in the counseling relationship that feel safe, and that promote safety in sharing. Additionally, helping clients identify feelings about sharing what feels like too much, and addressing the in-the-moment experience of this, is essential to the work. Finally, consideration must be given to the exponential challenge for gay and bisexual men in naming sexual abuse histories, when to do so holds risks of having sexual identity misattributed to the abuse.

Summary

This article has provided a description of developmental trauma in the lives of gay and bisexual men, demonstrating how individual and social histories create meaningful contexts of identity development. The experiences of rejection sensitivity and social pain were explored as features in lives of mistreatment and social exclusion, demonstrating how histories of oppression create ongoing expectations of oppression in future interactions. Vivian Cass’s model of sexual identity development was illuminated for the purpose of examining exceptions to dominant beliefs about gay and bisexual male identity development, with an additional focus on the recreation of the dominant culture’s pattern of marginalization within the gay and bisexual male community. Following this, the experiences of gay and bisexual male survivors of childhood sexual abuse were discussed as complex interweaves of trauma and silence in a culture of homonegativity. In concluding, the role of the counselor in addressing the needs of gay and bisexual men was discussed, including direction for work with sexual abuse survivors.
References


