


1-1-2004

Conceptions of Gay Male Life-Span Development: Past & Present

David J. Roseborough

University of St. Thomas, Minnesota, djroseboroug@stthomas.edu

Follow this and additional works at: http://ir.stthomas.edu/ssw_pub

 Part of the [Clinical and Medical Social Work Commons](#), [Psychological Phenomena and Processes Commons](#), and the [Social Work Commons](#)

Recommended Citation

Roseborough, David J., "Conceptions of Gay Male Life-Span Development: Past & Present" (2004). *Social Work Faculty Publications*. Paper 31.

http://ir.stthomas.edu/ssw_pub/31

This Article is brought to you for free and open access by the School of Social Work at UST Research Online. It has been accepted for inclusion in Social Work Faculty Publications by an authorized administrator of UST Research Online. For more information, please contact libroadmin@stthomas.edu.

Conceptions of Gay Male Life-Span Development: Past & Present

David Roseborough, LICSW

Author's Note

Correspondence concerning this article should be addressed to:

David Roseborough, LICSW
School of Social Work
University of Minnesota
105 Peters Hall, 1404 Gortner Avenue
St. Paul, MN 55108

rose0455@umn.edu

Abstract

Four of Erikson's eight psychosocial crises were used in this qualitative, exploratory study as an organizing framework. Using a semi-structured questionnaire, seven men were interviewed with the goal of understanding how they have navigated Erikson's life stages. Significant results included: an early sense of being different and a period of time between "coming out to self" and "coming out to another person", both complicating Erikson's sense of "social trust". The men also described finding non-biological ways of achieving generativity as well as the development of a strong internal sense of authority or locus of control. Other strengths gained included: achieving a broad base of social support or a "family of choice", and becoming role models themselves in response to a clear absence of positive role models during their own adolescence, which many identified as delaying their coming out. Finally, AIDS was discussed by many as a critical factor affecting how these men navigate each of Erikson's stages. Implications of these tentative findings are suggested for research, teaching, practice, and for psychosocial theory itself.

Introduction:

While the study of adult development is rather new (Merriam, 1984), the study of what life-span development looks like for gay and lesbian people is almost untouched. Strong historical reasons exist for both of these realities, the two most central of which include: (1) Freud's assumption that development ended at puberty, with the onset of the genital stage, and (2) the assumption of both Freud and subsequent theorists (i.e. Adler, Erikson, Jung, etc.) that heterosexuality constituted normative development, culminating in the heterosexual union. Freud's emphasis on early childhood as formative left adult development largely unexamined, except in so much as an adult played out unresolved childhood conflicts. Later theorists' belief that adult development meant *heterosexual* development resulted in homosexuality being labeled as a deviation from that norm, versus a normal developmental path in its own right.

Since these assumptions are only now being challenged (most powerfully in the 1973 declassification of homosexuality from the DSM – III), it is important as practitioners and teachers to know what the unique developmental paths are of gay and lesbian people. What does development look like for people whose lives are often not characterized by the traditional heterosexual “marriage and kids”, for people “whose lives have departed from heterosexual socialization patterns” (D’Augelli, 1994, p. 120)? What are the developmental tasks faced? What are the milestones and ritual markers? Who are the supports and what are the strengths gained? These questions are important in gaining an overall conceptual framework of what adult development looks like for gays and lesbians. For as D’Augelli (1994) points out, “earlier frameworks, which view lesbian and gay men as psychiatrically impaired and which dictate a focus on etiology have yet to

be replaced with frameworks that effectively suggest different fundamental issues for analysis...theory building and empirical research on lesbian and gay lives that is consistent with a human development point of view simply has not been done” (p. 120, 130).

Literature Review

Section I: Historical Developmental Perspectives on Homosexuality – Locating the Problem Within the Individual

In many ways psychologists and psychodynamically oriented clinical social workers have claimed Freud as the first developmental theorist. Freud postulated five stages of psychosexual development, beginning in infancy and ending around age twelve with the onset of puberty and ideally – sexual maturity (Freiberg, 1987). According to Freud, however, few made it to this point. Many got “stuck” at earlier developmental stages; most notable among this group were homosexuals. Freud postulated that gay men were victims of incomplete psychosexual development, unable to resolve the oedipal conflict, and arrested at an earlier stage of development (Beard & Glickauf-Hughes, 1994). Although he hedged on this view toward the end of his life, as in his 1935 “Letter to an American Mother” (in Isay, 1989), it is his earlier perspective that won favor and was adopted by most of Freud’s successors. It is this earlier view that can be seen in object relations theory, with Klein repeating Freud, positing homosexuality as an issue of an infant boy’s frustrated attempts to separate from his mother (Klein, 1932, in Beard & Glickauf-Hughes, 1994).

The implications of this thought have been far-reaching; it would be a mistake to see this premise as academic or removed. Isay (1989), a clinical professor of psychiatry at Cornell explains, “traditional psychoanalytic theory asserts that unimpeded normal

development leads to the mature expression of heterosexuality. Homosexuality, the theory holds, is caused by severe early developmental disturbances” (p. 4). He writes about the significance of this view, showing how it set the stage for later developmental theorists, and how its effects are still felt in training schools for analysts excluding gay practitioners, remaining “committed to the conviction that homosexuality is always pathological” (Isay, 1989, p. 14). Echoing D’Augelli, he shows how it has also “interfered with our being able to conceptualize a developmental pathway for gay men and thus has seriously impeded our ability to provide a psychotherapy that is neutral and unbiased by cultural expectations” (Friedman, in Isay, 1989, p. 5).

This belief that homosexuality is “stunted growth” is also still voiced by several renowned psychoanalytic theorists today. In 1981 Basch published what has become a “classic” instructional text for therapists in training called Doing Psychotherapy. It is a work which has achieved broad distribution and is used in many training programs for therapists. Writing this book eight years after the official declassification of homosexuality from the DSM-III, Basch (1981) describes a session with a client in which he told the latter of his nephew, “the possibility of Bobby’s becoming homosexual is much greater if he continues to be deprived of reasonable affection, including physical affection, from a male” (p. 49). Here Basch is simply reiterating the long-standing belief that homosexuality is the natural consequence of a distant father and a domineering mother, where the son fails to identify with his same-gender parent: his father. He remains “trapped” in a feminine identification and unable to sexually differentiate.

The influence of this early theory is enormous, and remnants of it can be heard from other contemporary authors. In Social Work Treatment, Streat (1986) contributes a

chapter on current application of psychoanalytic theory by social workers. In this chapter, he writes that the social worker acts, in therapy, as a “benign superego in the treatment situation and [to] encourage the client to explore and verbalize id wishes to ...homosexually seduce [so that] anxiety is reduced and the ego becomes stronger – strong enough to enjoy a more mature sexual relationship with someone of the opposite sex” (p. 22). He goes on to describe gay men as “defending against an oedipal conflict...identifying with an oral mother so that by feeding his sexual partner, he is vicariously ministering to his own oral hunger” (p. 28). Each of these above views echo Freud in asserting that it is heterosexuality that is normative. Homosexuality is a deviation. It is “stunted growth”: a normal aim directed against the “wrong object”: another male.

Contemporary Developmental Perspectives on Homosexuality – Locating the “Problem” Within the Gene.

In contrast to the above paradigm, a number of contemporary efforts have emerged which have sought to transcend this assumption of heterosexuality. Both Friedman (1988) and Isay (1989) have attempted to synthesize current scientific evidence that sexual orientation likely has a genetic component (Hamer, 1993; Pillard, 1993; Bailey, 1992; LeVay, 1993; Ellis & Ames, 1987; Money, 1987) with a revision of psychoanalytic theory. D’Augelli (1994) criticizes these neo-analytic efforts as “prescientific” and “not subject to formal disproof” (p. 119) on the one hand, while critiquing “scientism” (p. 119) on the other as ignoring the environmental, historical, and political contexts in which gay men develop.

Beginning efforts have been made in this direction, however, and include those of Kegan (1982) as well as of Driggs & Finn (1990). Kegan uses psychodynamic concepts,

particularly object relations, to talk about the developmental processes of internalizing truth and being more active in determining one's own meaning-system based on experiences with dissonance. He writes particularly about how minorities are uniquely engaged in this process due to many early experiences of dissonance. He illustrates this with the example of a young man questioning his sexual identity in The Evolving Self (1982) where the primary threat perceived by the man, Kegan says, is what being gay would represent: how it would put him at odds with the culture to which he belongs. Kegan connects the young man's struggle to the question "who really determines my identity?" Similarly, Driggs & Finn (1990) have shown how gay men appropriate and experience "births" of their own in artistic and creative expressions, beyond biological childbirth. These creative life-giving acts are all subsumed under the broader labels of spirituality and "generativity" (p. 120).

Some of the most thorough treatment of gay identity development from a developmental perspective (as opposed to Kegan and other psychodynamic theorists), has been done by Coleman (1982). Coleman focuses on the stages of the coming-out process, dividing it into five stages. These stages begin with a sense of being different, often as a child and with varying levels of denial, an end with "integration": a stage characterized by having integrated one's sense of self in gay and heterosexual communities. The final stage is one in which the individual is "out", and where the person can be oneself without hiding or bifurcating parts of his or her life. Coleman builds his model on the foundation of a similar model by Cass (1979), who proposed a six-stage model outlining various degrees of gay identity formation, including: confusion, comparison, tolerance, acceptance, pride, and finally synthesis.

Each of these models stresses the important point that assuming a gay identity happens in the context of taking on a socially stigmatized label and role (Bozett, 1981; Cain, 1991; Coleman, 1981; Paradis, 1992; Reiter, 1989). Paradis (1992) discusses how this is compounded by AIDS, in terms of the public's historic perception of AIDS as a "gay disease". He also points to the "lack of an opportunity to explore gay identity during adolescence" (p. 263). He echoes Kegan in pointing to a lack of public role models as one of the consequences of internalizing a socially stigmatized label. Lastly, Reiter (1989) suggests seeing this difficulty in achieving congruence between sexual orientation and sexual identity as the logical consequence of living in a heterosexist culture, and "as part of a normative stage of gay identity development" (p. 149). Like Kegan, she argues that "identity, not orientation, is open to choice" (p. 138).

These are examples of directions that are only beginning to be taken in applying developmental theory specifically to the experiences of gay and lesbian people. They are positive steps in that they shift the focus from etiology to life span development. They counter the notion of homosexuality as sin, crime, sickness, or deviation, and turn attention to gay identity as a normal developmental path in its own right. As Reiter (1989) points out, while sexual orientation is likely early and fixed, the process of internalizing a gay identity is a long and difficult one. What this process looks like at certain ages, though, or with more detail than a five or six-point progression, has not yet been done. As D'Augelli writes, it is now necessary to fill in some of the gaps, focusing on what development looks like at different ages and life stages.

Conceptual Framework:

Erikson's Psychosocial Model as a Direction for Future Developmental Perspectives on Homosexuality – Locating the Problem Within The Person – Environment Transaction

Erikson, like Freud, saw adult development in largely heterosexual terms. Erikson did, however, depart from Freud in some significant ways which make his psychosocial approach potentially useful in understanding gay identity development. He departed dramatically in the importance he ascribed to social influences in shaping human development, a primacy equivalent to that which Freud gave to sexuality as a motivating force. Whereas Freud saw society as predominantly a limiting force which regulated the unbridled desires of the individual id, Erikson saw society as having at least a potentially positive, growthful role to play in supporting individual development. Secondly, Erikson was more optimistic than Freud about the potential for human growth. Erikson did not share Freud's "cut your losses" mentality. According to Erikson, there is always room for healthy personality development, providing social support exists to foster it. In this way, Erikson's approach to development could be said to involve a more open energy system than Freud's. That is, the individual is driven by social forces outside of his or her internal sexual and aggressive drives. In these ways, Erikson provides a strong and relevant conceptual framework by which to understand gay men's development.

Method

This study employed a qualitative and exploratory methodology. I interviewed seven self-identified gay men, ages 40 – 55, in the greater Twin Cities area. To give some parameters to the study, I chose to limit it to a sample of men. I did this to

acknowledge that my results may not be easily generalized to the experiences of middle aged lesbians. I would anticipate many parallels, but I see these women as comprising a population meriting its own research. This study used purposive sampling. Participation consisted of an hour and a half semi-structured interview administered in person either at their home or a site of their choice. Questions were used which corresponded to and tried to draw out each of Erikson's eight psychosocial stages and how they might play out uniquely for these men. This article will speak to four of those stages. The interviews were audio taped and then coded for "recurring themes or "conceptual clusters" (Berg, 1989) using analytic induction (i.e. seeing how well these men's experiences matched with Erikson's psychosocial crises).

Some basic demographic information was collected as well. The sample consisted of seven mostly non-Native Minnesotan men of varied ethnic, racial, and economic backgrounds, who live in urban or suburban areas near a large gay community and who identify themselves as gay. Respondents varied in age from 40 to 52 (mean 46.57, SD = 4.39). Five of the seven respondents (71%) are caucasian, while the remaining two (29%) are African American. All respondents are male. A wide range of occupations are represented, including: a law professor, counseling psychologist, computer consultant, police officer, public administrator, administrative assistant, and a research lab technician. Religious representation varied, with three of the men (43%) having been raised Baptist, two Roman Catholic (29%), and the others: Episcopal (14%), and Methodist (14%). Only one of the men described any current religious involvement. Only one respondent was born in Minnesota. The others were from the East Coast, the Midwest and the South – all represented almost equally in thirds. One half were raised in

urban settings and one-half in rural settings. As a trend, most intentionally sought out and moved to a larger urban area. 43% are currently partnered (between 18-29 years) and the remainder are single.

Despite this diversity, this sample represents a small group of gay men who came of age prior to the advent of Stonewall and even before the word “gay” was applied to homosexual men. A second crucial variable affects these respondents’ perspectives: these men were in the age-bracket most devastated by AIDS in the 1980’s. Their experiences therefore likely differ significantly from gay men born after Stonewall, who will age in a very different social context. This change, however, also points to the importance of hearing from a time-bound group whose experiences may otherwise be left unheard. These men give voice to a very different social reality, to a grief and “silent war” of which many younger gay men are unaware.

Lastly, as a qualitative study, this project involved a non-probability sample and relied exclusively on self-reporting. I conducted and transcribed all of the interviews myself. Field notes were taken after each interview regarding initial themes emerging, tentative hypotheses, and remaining questions. I also wrote up a composite ecomap after each interview, to give me a spatial picture of what each man’s social support system looks like. The resultant themes are tentative and in many ways time and culture bound. They come from a group of Midwestern, urban-based, “out”, ego syntonic gay men who grew up in a very particular context. However, tentative hypotheses emerged from this data, suggesting directions for future research, both quantitative and qualitative.

Results

In order to be included, a theme had to have been discussed by several people. More common themes emerged than I would have anticipated. Important themes which emerged will be discussed below according to how they cluster around Erikson's four of Erikson's eight psychosocial stages.

Trust vs. Mistrust

Although most of the men interviewed identified first coming out to another person between the ages of 15 and 24 (mean age 24, SD =8.6), the majority (N=5) pointed to a sense of being different that went back much further: most often to childhood or to mid-adolescence (by age 16). This sense of being different goes back to early schooling (by age seven for several), and it is only later in life that it is named "gay" (mean age = 18) and shared with another (mean age 23). A few examples of this early sense of being different include:

[I came out] around age 30...I knew long before then that I was different...In retrospect, all the indications were there that I was a gay little boy...I remember in retrospect I know I had crushes in junior high on male friends. I was intensely more into male friendships than they were and developed jealousies and had excuses for sleepovers or for going over to their houses or having them over to my house. And particularly was attracted to them physically...and then I remember sublimating it for religious reasons more than anything else...praying that I would grow up normal.

I knew I was gay when I was thirteen years old...but when I actually came out was when I went to school at the university. I was eighteen years old. And I met a guy in the dorm the first week or so and within a month, I came out to him...well, I actually fell in love.

I never applied the word 'gay' to myself; I was always bisexual or had 'a sinful thought': never gay or homosexual. I'd never apply that [label] to myself.

Note that several years pass between when the boy "realizes" and when he discloses as a man. This realization that one is different is most often kept to oneself, and

it is one which causes dissonance, or conflict. The child realizes early on that his desires are in conflict with what the social world “other there” expects of him. In Erikson’s language, the period of trust vs. mistrust is characterized by a continual testing of this “fit” between the outside world and one’s internal sense of reality. At this stage, one seeks a sense of “social trust”, whereby the world is seen as safe and predictable, where there is a sense of consistency or continuity and a sameness between the world outside as it is presented and the world as one experiences it internally.

Significantly, most men in this group learned early that the world is not a “safe place” outside to tell their secret. They experienced a great gulf between who society and families told them they were and who they knew themselves internally to be. This sense of “dissonance” led to a great deal of internal conflict for these men.

One man said:

I remember very vividly at the age of sixteen having a conversation with myself: saying ‘you know exactly who you are , and what you are. And what you’re going to do is you’re going to forget about it. And you’re going to get married. And you’re going to have a family and do exactly what society tells you to do because it’s going to be way less hassle.’ That was a conscious decision I made at the age of 16.

Another man said succinctly:

You didn’t come out back then.

And another:

I became sexually active at seven, with some heterosexual boys. I really didn’t see anything wrong with what I was doing...but I noticed that no one else seemed to talk about it or do it. I guess I was just feeling so bad about having to hide my entire life that I went to my parents and said, ‘I think I’m queer.’

His family reinforced strongly society’s negative image of what it meant to be gay

when his parents sent him to a doctor, who “believe it or not gave me male hormones, which back then was one of the possible cures.” Another respondent pointed to this dissonance he sensed, but could not name at the time:

I think traveling...one reason I chose to travel a lot when I was younger was a sense that somehow I was looking for something and things didn't all fit together right. I couldn't put my finger on it at the time, but I think that was part of it, and then I started to come out. Traveling was a way of placing myself remotely from the community I lived in, so I could go out and meet new people and there was no risk associated with it.

Finally, one man spoke to how this tension pulled him apart and how he became depressed as a result:

I look at this as one of the most intense periods of growth I've ever gone through; it's appropriate to be depressed when the premises you've had about life are being cracked – and that's exactly what it was. It was realizing that if I continued down this track, I would not be living for myself; I would not be accomplishing whatever it is I'm supposed to do.

For these men to achieve a positive sense of self-acceptance, they had to learn to trust themselves, and to deprioritize the messages from the outside which devalued them. Several men described quite powerfully his process of gaining an internal locus of control and of learning to define themselves. When asked what they have learned from being gay, several men said:

I learned that I'm o.k. Number one I learned that I don't have to live for anyone else, especially any group. I don't have to fit into what society says “these are norms to be happy; I don't need that. I am o.k. I'm fine.

The only thing I'm thinking is that you damn well better be true to yourself and you better tell yourself the truth about who you are. That's why teenagers are killing themselves is because they're afraid of telling even themselves about who they are. Because if you can tell yourself the truth about who you are – telling someone else is a joke.

You've got to give yourself permission to be loved by yourself and to like yourself.

It is important to feel inside honestly and learn to communicate that inside feeling outside.

And sometimes the pressures to follow that norm are overwhelming. So the individual has to find a voice and within that voice they learn to speak the truth of what they want in their life and that just makes people go through a tremendous amount of angst and agony...it is not always the mold that is presented to us that is the standard for success and being gay has challenged that.

It's a wonderful thing to know that I'm o.k. I don't think anyone can actually take that from me. You could tell me the rest of my life, "being gay is an abomination" and I'd laugh at you – 'yeah, next....'

A lot of people say that when they come out it's like a symphony: hearing symphonic music – when you realize that there's such a drastic difference between what society telling you you're supposed to have and what it is that you want. So that force, just pure life force for me – that was the strongest thing I had. This being true to myself is exactly what that said to me: and what you're dealing with has nothing to do with you are – all this stuff coming from other people is just something you have to deal with.

Powerfully, in this last example, the respondent is able to externalize society's negative messages about being gay. Like Erikson, he locates the problem not in himself, but in the person-environment fit. However, this internalizing of a positive self-image is a gradual one, and it takes work: often in the form of countering negative messages taken in, as we will see under "initiative vs. guilt."

We grow as a dependent child with parents or care-givers giving us rules in the form of 'do's' and 'don'ts'. As we grow forward and develop, we have to look into ourselves and decipher which parts we'll keep and which parts we'll throw away.

Initiative vs. Guilt

It is during this stage of "initiative vs. guilt" that Erikson says people become more themselves. It is a time, by his time-line, when parental voices are taken in and a stage in which social messages continue to be taken in, in the form of a super ego, experienced as a conscience. The self, he says, is divided for all people at this stage, and

this crisis is an extension of the previous one (autonomy vs. shame and doubt). However, gay men struggle especially here by being acutely aware of “guilt over goals contemplated” (i.e. sexual fantasies, imagined identities). A danger is that these men might continue simply to identify with the outside messages that gay is bad.

In relation to becoming more oneself: two stories in particular serve as metaphors for the process by which these men saw themselves grow in relation to being able to “put back out” or to relativize negative messages they had taken in about being gay. The first is offered by a couple, who in speaking about ritual, reflected on how their anniversary cards changed in content over the years:

We drug out all the cards one-day and you could see a progression. I guess our acceptance of ourselves and society’s acceptance of us had changed...our first anniversary cards would be things like, ‘L, Brian (not real name)’, or ‘L, Bill (not real name)’. We wouldn’t put the word love down on paper...there were times we’d just say ‘love’, and no name on it. Not that we really felt bad about ourselves, but we always had this fear that someone was going to pick it up.

In reviewing the progression of becoming more open about their relationship, this couple points to the relationship between their own self-acceptance and that of society’s. They speak to how they absorbed or “took in” society’s negation of their relationship, and how it was only over time that they were able to overcome these fears about how those “outside” might view their relationship. They point also to Erikson’s person-environment fit, where their relationship suffers from the hostile environment in which it is embedded.

Another man spoke powerfully to how he concretely internalized his mother’s message that “gay is bad” and the resultant trust of self and sense of self-authorship he gradually learned:

I can remember vividly a letter I got from my mother after coming out, you know, ‘God did not make you a gay child and I pray that when you are lying with a man that God will nag you until you realize how wrong you are’ and that did a major

mind fuck on me for six months...it really truly is mind control, because making a suggestion like that to somebody forces them to do that. It just makes you realize how powerful people can be on each other, how much force they can apply...Against that much force, I actually did what she said: I would hear her voice and I actually examined my feelings deep down and realized there never was any change...I ended up being that much more sure of myself. In the end she did me a favor. It built such incredible strength...I know who I am, no matter how much society says I should be like them, this is who I am.

This is a vivid example of outer messages being taken in, critically examined, and let go of, with the conscious decision to listen to one's own voice over the opinions of many "outside." This same man later said regarding relativizing these outer voices and learning to trust his own: "I've rearranged where my family lives in my mind." He relativizes the importance of his family's perspectives and successfully becomes, in Erikson's language, more himself.

Generativity vs. Stagnation

All of my sample falls into the age group facing Erikson's normative crisis "generativity vs. stagnation" (ages 34-60). Erikson characterizes this as a stage in which attention turns to taking care of others. As argued earlier, this stage has been especially defined by the heterosexual markers of "marriage and kids". However, Erikson himself argued that this task got carried out through other avenues (i.e. as a mentor, teacher, or leader). He described it as a spiritual time in which people sought to "give back" to their culture what they had internalized and uniquely made their own. All of this happens, Erikson argues, particularly in relation to teaching and giving to the succeeding generation. It is a care for those who come after oneself.

While two of the respondents had been married, most had not. To find out how each of these seven men achieved generativity, I asked each how he saw himself "giving back" or "giving life", either to the gay community or to society at large. I would usually

introduce it as a question when a respondent was discussing some creative project or volunteer work. I asked, “what (other) ways do you see yourself giving beyond yourself or trying to create life after your death? Do you have a desire to leave a ‘mark’ behind?” I found that these men have been very creative in finding ways to give and to “parent.” This giving took many forms and included: taking care of friends with AIDS, sponsoring people in Alcoholics Anonymous (AA), doing volunteer work for an AIDS organization, traveling with nephews and nieces, leaving money in one’s will to a gay organization, as well as teaching and mentoring college students in one’s profession.

Additionally, two men spoke of being “out” at work as a professor or police officer and therefore a role model for both gay and heterosexual students and colleagues. Another spoke of writing a play. For one, it was as simple as listening to a friend at a coffee shop who was having a hard time and “knowing in that hour that I made a difference.” For another, it was his very choice of profession: becoming a therapist, someone who would tend to others people’s psychological and spiritual growth.

One couple began answering this question by making the distinction Erikson did between biological and metaphorical “parenting”. This couple said of biologically bringing life into the world: “Anybody can connect an egg and a sperm. That’s not productivity; that’s reproduction.” That is, I think, a succinct and helpful distinction. Although these two men have no biological children of their own, they definitely see themselves as having a parenting role, which they carry out largely by sponsoring newly sober men (mostly heterosexual) and by caring for gay and heterosexual people with AIDS. By intentionally seeking out formative roles with heterosexual men, they also

echoed two other men who said they sought to be role models: the kind they identified missing in their youth:

One time there was this counselor who said, 'I really appreciate what you are doing with all these gay guys who are coming through this house.' 'But they aren't gay.' The first assumption is that we are there helping the gays get started in their sobriety. But they're not gay. It's a lot of comfort to be able to demonstrate to heterosexual kids and their families, cause we do get involved in their families, that this is a gay person who is helping you out here; this is not one of your straight buddies who kept you stoned all the time. There's a lot of comfort in that: a lot of pride, gratification.

In reaching out to heterosexuals, they are in a sense transcending or "reaching beyond themselves" – going outside of their communities and in this way achieving generativity.

Regarding their roles as sponsors in AA, one of the two said:

We're very active in AA and we sponsor some young men coming into the program; I consider them a part of my extended family. Because basically to us they are kids, because they are new in the program; you end up treating them like you would trying to raise your own kids. So they really are a part of the extended family.

The two also see themselves having something of a corrective role in terms of "re-parenting" other men who have lacked care from their own biological families: "I think we're more productive than many [heterosexuals] out there...the ones creating these kids with the problems to start with" or "one said, 'you're not my father.' 'No, but would you rather have me treat you like he did?' 'No.' 'Anything else?'"

We helped – when he was in the process of coming out, the one who calls us dad and dad; we get a father's day card from him.

This couple also spoke to a sense of connection true to Erikson with those who came before and a responsibility to those who will come after:

I had a real close friend in AA; he died. He helped me through a lot of struggling times. He was also gay. And I remember one time I asked, 'what on earth can I do to repay you for all of this?' And he said, 'just do it for someone else.'

Another man carries this out with a particular commitment to gay youth who will come of age in the years to come, with the hope it will be easier for them:

I used to work with the gay and lesbian youth task force; I was one of the founding members of that group. We set up a student scholarship that still exists.

Other men spoke of a desire to be a role model:

I like being visible at school in terms of being a competent teacher and being known as being gay. So I think that's valuable not only for the gay folk but also for the heterosexual students to realize that there are professional gay people. It's good for them to know that.

I think my big thing is sharing with people and being there for people.

Caring for friends with AIDS also turned out to be a big way in which these men give. Many of them are involved in AIDS-related service organizations, and several (n=3) had been in direct care giving roles for friends with AIDS. One man mentioned how it relativized for him the importance of his own life and his own need to be individually remembered.

Related to this, it is striking to me that in all of these responses, not one of the men expressed a desire to be remembered *personally* for his contributions. Not one of them felt an urge to leave behind the legacy of his name:

If things go as planned, after I retire...there will be enough to leave some to a gay organization. So there will be a little bit of a trust fund. But it'll be just a tiny little thing. But it'll be a little bit of a legacy. In terms of replicating myself, I have no interest in that – it's mostly just to be helpful. I don't even care about having my name attached to my own gifts. That's not important.

That's an ego trip I'm not on yet. I'm leaving two daughters behind. I'm leaving friends behind. I've made my mark on a lot of people; individually I've made my mark on numerous people; when I was at work with the patrol, I met people and they were surprised that I was who I was and nice and caring...my mark has been made.

When I got married I said, we will have two kids; we will replace ourselves and nothing more. Period. I mean I was firm on that.

One man understood the reason for this to be:

Because as a gay person there have been several times when the spotlight is shining on you so huge.

Many men spoke to the sense that “there’s some contribution to make here” and one man identified it as becoming pressing in his forties. A few men spoke to the impulse to give, or to make a contribution, and even to an intuitive sense of when they had done so. However, none of these men described a desire to be remembered personally – by name. I am not sure what to make of this, other than to speculate that gay men have often by this time in their lives come to peace with the idea of not leaving behind biological offspring (though many do), and therefore do not think in those categories or terms. This may also be another interesting area for future research. The men have, however, found many ways to give.

Ego Integrity vs. Despair

Erikson (1963) believed that this last crisis in life involves religious and spiritual questions. He argued that only people who have truly given, by taking care of other people or by generating new “products and ideas” (p. 268) (i.e. successfully resolving the previous stage: achieving generativity) can truly face death. The man who successfully resolves this stage accepts his own limitations and looks back at his life with contentment and a general acceptance. He does not wish for it to have been otherwise. He feels a connection with those who have lived before and those who will come after. The risk here is to despair, which Erikson frames as a loss of faith – to despair at one’s own life. To get at these questions with gay men, I asked, (1) what events do you look forward to

or fear in the future, and (2) what losses have you already faced and how have you coped with them or changed as a result? Do you have any regrets?

In terms of my first question, gay men spoke to looking forward to retirement, potential future relationships, retiring with and living with friends. One man discussed fearing a social backlash against gays and lesbians in the future and several fear “losing other friends to AIDS.” Several mentioned looking forward to traveling with their partners and friends. Traveling was a big topic, with four of the seven respondents (57%) seeing it in their futures. Again, friends are central. One man has already named his friends (as well as gay organizations) as “primary beneficiaries and as executors” of his estate.

Two men spoke to the gradual realization that they are aging and to the acceptance that this requires: “you have to realize that you’re getting older. It’s different: to really be o.k. with being old.” Again here I saw this internal sense of authority re-surface:

It’s like my hair and piercing my ear. If I live to be as old as my father, I have twenty odd years left, and these are some things I want to do. I’m not hurting anyone by doing them, so if you don’t like me for doing them, I’ll find somebody who does. And that’s sort of a bad attitude maybe, but hey – my time on this planet is winding up and I want to do what I want to do.

This man knows that time is limited and is sure enough of himself to be the one who determines how he spends it. In the language of Kegan, it is a move toward self-authorship. At the same time, in the language of Erikson, these men seem to be gradually letting go of individual power and are reaching beyond themselves. This can be seen in the ways they have achieved generativity, evidenced in the above section. Each of the men gives in an individual way, but most do so anonymously, and none expressed a

desire to have personal recognition for what they will leave behind (countering the notion of gay men as narcissistic). One couple discussed fears of one dying first and a desire for their ashes to be spread together. His partner discussed a regret at not having kids, but both agreed they had parented sufficiently through their roles as sponsors in AA.

One man echoed Erikson with particular clarity and practically defined this stage by describing his struggle to remain open to life and to new experiences without despairing:

I imagine my future with challenge and passion. And hopefully a lot of judgment as I grow older...the challenge to keep looking, questioning, examining my motives, my thinking, the paradigms I use, the models that I play off of. Challenging in the sense that I want to have some task, some direction, some project that will shake me up, make me uneasy to the point of pushing me forward. And so I want to have compassion so I can be open rather than sarcastic or what's that word I always forget? Jaded. Cause I think you really can. It's the old spinster stereotype: the lonely old lady who gets cynical about the world. I don't want to get there. And I struggle with that sometimes, when my heart gets hurt. I struggle with feeling like nothing's going to work...I'm too old...the window gets smaller...I think the window of opportunity gets smaller as age increases, and I just...I'm hopeful that I can jump through that window before it's too small to get my big butt through (laughs).

In relation to my second question, "what losses have you faced, and how have you coped or changed as a result of them?", the responses overwhelmingly focused on AIDS:

The greatest loss is the loss of AIDS...first because of the dynamic that it is so large. And second because it is so invisible.

This man points to two recurring themes: the sense that AIDS has affected everyone in his community, and secondly the dynamic that this grief is neither recognized nor legitimized by much of broader society. Many described the sense that they are in the midst of a war, viewing the lists of the dead, while the rest of society walks by, ignorant that the war is even going on. Regarding the first dynamic of the sheer magnitude of the loss:

It's a hell of a thing when people come up to you and say, "well you know...so and so is dead."...It's not like you wonder how they're doing or how their job is; you wonder if they're dead or alive.

Regarding the second dynamic of an invisible pandemic and of "silent grief":

It's like screaming in a silent room; nobody hears you.

And it happens silently in this society. In the heads of many people it happens to a population of people who deserve this death. They have broken God's law or some spiritual law and so there is no mourning for the people who died. There is no understanding of their lives. There is no appreciation for their goodness. There is nothing but contempt and these are real people. I think that's one of the saddest things I have experienced.

It is a loss so encompassing, that many of the men said that they were not even fully aware of or yet able to take in its significance:

Very innocently, we were going through some photo albums and he asked, well, where are all these people? And we kind of went through, and I would say, this is so and so and he died last year, and this is so and so and he's sick, not doing very well. This person's sick...this person's dead. He died five years ago and all of a sudden it was he who said to me, 'my God, all your friends...' and it did not dawn on me until he actually said that to me.

The men said that the losses had become so commonplace that they felt "normal." One man said simply, "you assimilate this into your life." One man spoke to the anticipatory grief that came with learning friends are HIV positive, saying that the real grief begins then, "and the rest of it is just being with the person while they complete their life, however much time they have."

A recurring theme, however, seemed to be the awareness that they are facing mortality prematurely. Many identified with their parents, but felt sadness and anger that they were facing what felt like a "normal" life-task for their parents at seventy or eighty, but not for them at forty to fifty-five:

We're facing the exact same issues that our parents are now.

There's a certain feeling that you're not old enough yet to be losing friends. You hear your parents talk about how they lose...my parents, my dad's approaching eighty and my mom is in her early seventies and they're talking about how their friends are dying and somehow that seems more understandable or more normal just because of the age, but you don't expect to lose a lot of your friends of your own age I'm at, and it started ten years ago.

Men also spoke to the related losses that went with AIDS:

Society has been incredibly ugly and cruel to people who are HIV positive. Insurance companies delete and shun; school systems expel and suspend; neighborhoods reject; neighbors turn away; friends leave; lovers depart. In our society today, there are few situations which provide such isolation as when you're HIV positive.

If you have full-blown AIDS, one of the greatest losses you feel is that people won't touch you. They no longer feel like you are a viable entity to be held. That's an awful thing. Human beings, in their very nature, are instinctually toucher-beings. We need to be held as infants; we need to be held as children. We need to be held as adults. And what happens if you have AIDS is that no one wants to touch you.

And lastly, two men spoke to the impact of losing a large percentage of men in their age group on their friendships and on the formation of romantic relationships:

I don't know how to verbalize what that loss is. It's like this, David. People tease me about liking younger men, o.k. But the flip side is 'if all these people who died premature deaths were here, what would dating be like today?' I can't even begin to imagine. Just because I'm so used to the fact that in my age group, there's been...a lot of people gone. When I go out, the number of people I'll see in the forty-year age group; it's a tougher crowd. I don't know how much that affects me. It affects me, though.

In terms of how these men have coped with and what they have learned from facing the losses associated with AIDS, most of the men (n=5) spoke to learning that life involves loss. AIDS relativizes the importance of other things, and reminds them of the importance of friendships as sustaining:

I've lost a lot of good friends to AIDS. How has that affected me? It's made me realize how valuable close friendships can be and how much you miss people when they're gone.

Two men spoke to the struggle not to quit feeling or caring for people:

It's like a bad train ride you can't get off. People keep dying and you keep going to funerals and you get somewhat numb and you're resistant to going to funerals because there have been so many, and I think there's a tendency to kind of ahhh...protect oneself. And that's what I think I've done.

And you cope by sharing. This [the interview] is a coping in itself.

Finally, most of the men also spoke of losses in addition to AIDS, which included the loss of (and rebuilding of) self-esteem at different points in their lives as well as the loss of their own relationships – losses which are also often not validated or understood as “real losses” (i.e. disenfranchised grief). People also discussed the heavy losses of identity and of the security that went with being connected to one's biological family and religion of origin:

The ones that really get you are family, the loss of affection, or of understanding even – that's a true loss.

And finally, the loss of the ability to be affectionate in public:

One of the things that is tragic, I think, about being gay, is the loss of public expression. If you're heterosexual you can walk down the street holding hand in hand, have your arm around somebody's waist. You can kiss in public; you can sit and be touching in movies and things like that; about the only thing we don't do is we don't do intercourse in public. If you're gay, your world is very different.

These men spoke to multiple losses which are invisible to much of broader society and to their biological families. They thus spoke to learning to cope by turning to gay friends, which again become family, and to turning inward to find spiritual resources outside of their religions of origin. These men are successfully facing a task in middle age that Erikson reserved for the end of life. It is one which has made these men strong, or given them what Zuhl (1995) calls “crisis competency” (i.e. a strong internal capacity to handle difficult situations, often prematurely). One man summed this up by saying he

had been reading that one characteristic of people who live long or achieve “longevity” is that they successfully face and learn to cope with losses early in their lives. Regarding losing friends to AIDS, he said:

It’s helped me to adapt the skill, I mean it’s a terrible way to have to do it, but those who are going to do well have realized that you’re going to suffer losses.

And finally,

I’ve got to think that with all these testings that we’ve had, I mean I think gay people ought to live to be 120 years old. (laughs)

Discussion

I will attempt to suggest a few implications of the above for research, teaching, theory and practice by drawing some broad strokes. To get at this, I asked respondents “what supports weren’t there that you wish had been? What was missing that would have helped you in your coming out?” I asked these questions to get ideas for future supports and resources that can aid gay men in their development and which many or most found lacking. I will trust the rest to the reader: that you will have had your own ideas sparked in reading the above.

Let me say first, however, more generally that gay men can be helped most by society: by friends, family and care givers alike coming to see gay men and women not as deviates, stunted in their psychosexual growth, but as human beings, developing in their own way. These men saw many of the problems they faced as human problems, not so different from what their heterosexual friends and peers are facing, albeit sometimes at different ages, often prematurely – before they would have planned to do so. They too sought meaningful social, familial, and romantic relationships. The social, political, and religious context in which they have developed, however, has presented some unique

struggles and in Erikson's language: an often "non-nutritive" environment in which to develop.

These men's struggles in achieving social trust and their experience of learning to trust their own sense of self over and against negative external messages may have implications for positively framing what it means to be gay. Gay men might learn that there is a positive pay-off for all of that difficult work they do. Their ability to think critically and to trust themselves can be framed as strengths. These men can be helped too by externalizing the negative messages about being gay, and by understanding them not as "conscience", "guilt" or as "proof that gay is bad", but as social prejudices that have been taken in, and now need to be consciously evaluated and "put back out." By locating the problem in the person-environment transaction, and not in the person, victim blaming is avoided and empowerment is possible. It demonstrates also that service providers need to appeal to internal more than external sources of authority when working with gay clients..

The fact that the majority of these men have left organized religion points also to the need for churches and religious bodies to be accountable for the messages they are sending and for the effects these messages have. It points to the need for gay men to have gay-affirming environments in which to worship if they are going to be a part of such religious communities. It should also "red-flag" ministers and therapists that this is potentially a source of emotional injury for many gay men.

It points, too, I think, to the need gay men have for non-church related rituals and for spiritual "tools", especially in facing their multiple losses. Gay men can benefit from creating their own rituals which are meaningful to them and by finding ways that they

can “join with something greater” outside of a church context (i.e. rituals among friends), as so many in this study have successfully done. Gay men can be helped to frame their individual faith narrative, and can be referred to authors such as Fortunato (1982) who have used both psychodynamic and narrative approaches in helping gay men to compose their own faith narrative, and thus to put themselves “back into the story” (i.e. to reappropriate the symbols, and to make their faith “their own”).

“Initiative vs. guilt” seemed to be most characterized by the conscious process of re-externalizing negative messages about what it means to be gay. Supports identified as most relevant here focused on having positive images out there to take in about what it means to be gay. Respondents stressed the importance of “visibility”: that gay pride parades, “libraries full of books”, “activities with people who are out and supportive of it” and society in general ‘talking about it’ are all important.

In terms of achieving generativity, these men can be helped simply to see the ways they already do give life and “give back.” Gay men can be helped to frame the ways they already parent and contribute, for what I found was that these men are all already doing so. Gay men in general can be helped by society granting them a place in the family, and by not equating “family” with “nuclear, child-bearing, and heterosexual.” Gay men are as much a part of their families as are their siblings who marry and bear children.

Finally, the themes that emerged in relation to ego integrity vs. despair focused largely on AIDS. This portion of my interviews points to the reality of how many of these men are in direct-care positions for people with AIDS. These men need to be supported emotionally and institutionally in their natural care-giving networks. They

face enormous grief, which is often unseen, invalidated and disenfranchised. The men can be helped by having their care-giving roles appreciated, their relationships validated and their grief heard. This grief is not far under the surface. Few men brought up AIDS in the interview, but when I asked, a few cried or got teary. AIDS and its related losses are important topics to raise in an assessment, or to consider in therapy.

It is finally a testament to the strength of these men who have not only survived but thrived in the face of social oppression. Contrary to the myth of the gay man as narcissistic, self-absorbed, and youth conscious, these men have transcended their own concerns, begun to accept the reality of their aging with comfort, have cared for their sick, served as role models, and as one summed up:

That's where I think our gay friends are our strongest help...we build each other back up, better than anyone else can.

Where the implications of the above for Erikson's psychosocial theory itself? Though my goal was not to rework Erikson, my data do suggest a few implications for psychosocial theory as it is understood and taught in social work curriculum. I would say that my results lend support to Erikson's contention that people do navigate certain life stages, that attention does turn to different concerns with age. I saw this evidenced by these men deprioritizing the gay label and reprioritizing a desire for intimacy with age. However, these men's experiences also challenge Erikson's notion that such tasks are carried out in a uniform order or within the strict age-delineations Erikson identified. This is evidenced by many of the men in my sample feeling that a lack of role models and of social supports delayed their coming out and thus their subsequent solidification of identity, initial dating, and achievement of intimacy. Erikson did allow for such variations, however, arguing that humans cross-culturally navigate these eight

“universal” crises, but that the content of each stage, or the way it is resolved depends as much on the cultural side of the equation as on individual ego strength.

I would say my research also supports the emphasis Erikson gives to development as something life-long and as something socially informed. Development for the men in my sample seems to have been influenced by society as much as by sexuality. Though my research does question the “uniformity” and “universality” with which theorists such as Erikson speak about human development, it is a reminder of the importance of examining the impact of culture on identity development, as opposed to seeing development as strictly an intrapsychic unfolding.

This last point demonstrates the need for more explicit treatment in social work theory courses (i.e. Human Behavior and the Social Environment) as to how identity development varies across variables such as race, class, gender, sexual orientation, and society’s understanding of each. The above research points, I hope, to the need for psychosocial theory to take account of more groups’ experiences as they challenge, complement, and eventually change existing categories of what constitutes “normative” development.

References

- Basch, M. (1981). Doing Psychotherapy. NY: Basic Books.
- Beard, J., & Glickauf-Hughes, C. (1994). Gay identity and sense of self: Rethinking male homosexuality. Journal of Gay & Lesbian Psychotherapy, Vol. 2 (2), 21 – 37.
- Berg, B. (1989). Qualitative Research Methods for the Social Sciences, 2nd Ed. Boston: Allyn and Bacon.
- Bozett, F. (1991). Gay fathers: Evolution of the gay-father identity. American Journal of Orthopsychiatry, 51(3), July, 552-59.
- Cain, R. (1991). Stigma management and gay identity development. Social work, 36(1), 67-73.
- Cass, V. (1979). Homosexual identity formation: A theoretical model. Journal of Homosexuality, 4, 219-35.
- Coleman, E. (1982). Developmental stages of the coming out process. Homosexuality and Psychotherapy. NY: Haworth Press, Inc.
- D'Augelli, A. (1994). Lesbian and gay male development. In Greene, B., & Herek, G., (Eds.), Lesbian and Gay Psychology: Theory, Research, and Clinical Applications. Thousand Oaks: Sage.
- Driggs, J., & Finn, S. (1991). Intimacy Between Men. NY: Plume.
- Ellis, L., & Aimes, M. (1987). Neurohormonal functioning and sexual orientation: A theory of homosexuality – heterosexuality. Psychology Bulletin, 101, 233-58.
- Erikson, E. (1963). Childhood and Society. NY: Norton.

- Frieberg, K. (1987). Human Development: A Life Span Approach, 3rd Ed. Boston: Jones and Bartlett Publishers, Inc.
- Hamer, D. (1993). Towards a genetic basis of homosexuality. Lecture delivered at the Harvard Medical School Symposium on the Biological Nature of Homosexuality and the Psychological Development of Homosexual men and Women. March 6.
- Isay, R. (1989). Being Homosexual: Gay Men and their Development. NY: Avon Books.
- Kegan, R. (1982). The Evolving Self: Problem and Process in Human Development. Cambridge: Harvard University Press.
- Levay, S. (1993). The Brain and sexual orientation. Lecture delivered at the Harvard Medical School Symposium on the Biological Nature of Homosexuality and the Psychological Development of Homosexual men and Women. March 6.
- Merriam, S. (1984). The Nature of Adult Development. Information series no. 282. Columbus, OH: ERIC Clearinghouse on Adult, Career, and vocational Education. The National Center for Research in Vocational Education.
- Money, J. (1987). Sin, sickness, or status? Homosexual gender identity and psychoneuroendocrinology. American Psychologist, 42, 384-99.
- Paradis, B. (1992). Seeking intimacy and integration: Gay men in the era of AIDS. Smith College Studies in Social Work, 61(3), 260-74.
- Pillard, R. (1993). Is sexual orientation genetic? Data from twins, siblings, and adoptees. Lecture delivered at the Harvard Medical School Symposium on the Biological Nature of Homosexuality and the Psychological Development of Homosexual Men and Women. March 6.

Reiter, L. (1989). Sexual orientation, sexual identity and the question of choice.
Clinical Social Work Journal, 17(2), summer, 138-50.

Strean, H. (1986). Psychoanalytic theory. In Turner, F. (Ed.).
Social Work Treatment, 3rd Ed. NY: The Free Press.

Zuel, T. (1995). Lecture at the Minnesota Social Service Association. Spring.
Bloomington, MN.