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“SOMETIMES WE ARE PREJUDICED
AGAINST OURSELVES”:¹

INTERNALIZED AND EXTERNAL HOMOPHOBIA
IN THE TREATMENT OF AN ADOLESCENT BOY

Abstract: The painful experiences of an adolescent boy treated in analytically oriented psychotherapy are used as a lens through which we can consider the effects of homophobia, their internalization, and their entanglement with intrapsychic processes. Controversies in the psychoanalytic literature on internalized homophobia are also considered. Homophobia within the developmental literature and the nascent state of conceptualizations of healthy homosexual development are addressed as concerns for treatment and pedagogy. I examine elements of my countertransference, including an overly cautious attitude toward exploring contradictory or complex aspects of my patient's sexuality due to a concern not to replicate homophobic attitudes. I also discuss some of the implications for coming out at a young age, as this boy did.

Keywords: homophobia, internalized homophobia, homosexual, gay, adolescence, adolescent development

THIS ARTICLE CONSIDERS THE PAINFUL EXPERIENCES of external and internal homophobia for an adolescent boy and his poignant use of the analytic setting to begin to name and claim his sexuality. I will also discuss aspects of my experience with this boy in relation to the impact of homophobia within psychoanalytic developmental theories. The historical pathologizing of homosexuality within developmental theories and the nascent state of psychoanalytic views of healthy homosexual development requires analytic clinicians to consider our internalization of homophobia and its potential effects on our patients. Paradoxically, my concern for the harm caused to this boy by homophobic attitudes

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made it harder to consider divergent or contradictory aspects of his sexuality. When harm has been done to a child by some form of prejudice, it can evoke a protective reaction on the part of an analyst. However, this protectiveness toward a child stands in tension with their need to be seen as complex and sometimes contradictory.

A serious consideration of normal homosexual development began only recently. "Much has been written about 'homosexuality'—or, to be precise, about its causes and cures—but until recently there has been almost no attention given by psychoanalysts to the experience of growing up gay and to the normative life courses of gay men and women" (Roughton, 2002, p. 735).² This article is one of an increasing number of efforts to redress that gap (e.g., Corbett, 1996; Hegna, 2007; Lingiardi, 2001; Isay, 1989; Friedman & Downey, 2002). The paralysis of thought regarding homosexual development shortchanges us all. My patient's increasing elaboration of a gay identity is part of the excitement of adolescent developments that I would like to convey in this article. It was just over a decade ago that the American Psychoanalytic Association (1999) adopted a "Position Statement on the Treatment of Homosexual Patients" asserting that:

(1) Same gender sexual orientation cannot be assumed to represent a deficit in personality development or the expression of psychopathology. (2) As with any societal prejudice, anti-homosexual bias negatively affects mental health, contributing to an enduring sense of stigma and pervasive self-criticism in people of same-gender sexual orientation through the internalization of such prejudice. (3) As in all psychoanalytic treatments, the goal of analysis with homosexual patients is understanding. Psychoanalytic technique does not encompass purposeful efforts to "convert" or "repair" an individual's sexual orientation. Such directed efforts are against fundamental principles of psychoanalytic treatment and often result in substantial psychological pain by reinforcing damaging internalized homophobic attitudes.

The experience of homophobia is acutely painful—as is any rejection we suffer on the basis of something intrinsic to us, such as sexual orientation, race, religion, or gender. The case material is intended as one lens

² There has been important work on normative homosexual identity formation done by nonpsychoanalysts. See, e.g., Cass (1979), Troiden (1988), Martin (1991), and Savin-Williams (2005).

through which we may consider the effects of homophobia, their internalization, how they become entangled with intrapsychic processes, and the protective but harmful measures used to handle rejection (in this boy, school avoidance and narcissistic defenses). These defensive formations became understandable in light of the homophobia this boy suffered and internalized, as well as the lack of sufficient concern in his environment for his needs. Without an appreciation of the effects of homophobia, a boy like this could easily be seen as more disturbed than he really was. In Straker's (2006) words: "psychoanalysis . . . needs to extend itself beyond an analysis of the wishes and passions themselves, to an understanding of how . . . we come to be gripped in the coils of toxic social histories in order to make our unthinking performativity of these histories more thinkable" (p. 740).

Internalized Homophobia

Divergent emphases have emerged in the psychoanalytic literature on internalized homophobia. Moss (2002), in an article on internalized homophobia in men, argues "the most powerful clinical use of the term depends upon its applicability to any man [or presumably woman], without limitation to those whose primary object choice is homosexual" (p. 21). He describes internalized homophobia in men as a movement from a personal subjective experience of homosexual impulses, which, if threatening, is defended against by a movement towards identifying with "masculine" group hatred towards homosexuality. He notes that the conventional usage of the term "internalized homophobia" "aims to describe and to partially account for a sexual identity characterized by persistent, structured negative feelings, particularly shame and self-loathing. Implicit . . . is the idea that such feelings represent the dynamic outcome of an internalization of the dominant culture's attitude toward homosexuality" (p. 22). Moss recognizes that the advantage of this definition is that gays and lesbians bear the brunt of the pain from homophobia and that this definition recognizes the difference between victims and perpetrators. He argues, however, that internalized homophobia is a symptom also applicable to heterosexual identified patients, albeit of less virulence than that for gay patients. Roughton, in a response to Moss, contends that "internalized homophobia is . . . not just about sex, but about self-concept. . . . What is needed therapeutically is not to discover what the 'symptom' substitutes for, but to alter one's basic concept of self" (Roughton, 2002, quoted in Moss, 2002).

Moss emphasizes internalized homophobia as a symptom related to renouncing threatening sexual impulses, whereas Roughton (following Malyon, 1982) emphasizes self-concept. Both levels of thought seem clinically and theoretically useful, although Roughton's assertion of internalized homophobia as a term primarily applicable to homosexuals seems compelling to me. Although it is undoubtedly true that heterosexuals can be prejudiced against their homosexual inclinations, that pain seems of a different order than for people whose basic sense of self is deeply connected to their homosexuality, both at the levels of sexuality and identity.

Nonetheless, I find Moss's reminder that the concept of internalized homophobia relates not only to relatively accessible dimensions of experience but also to profoundly unconscious dynamics essential. He points to the complex manner in which the internalization of social, cultural, and familial rejections combines with intrapsychic issues:

Internalized homophobia is a symptomatic structure. Conceptually it is best thought of as a multilevel phenomenon. At a minimum it refers both to the widespread internalization of the dominant culture's interdiction against homosexuality and to a particular individual's defensive and possibly idiosyncratic employment of the interdiction. (Moss, 2002, p. 49)

That is, the internalization of prejudice meets the complexities of psychic reality and developmental processes, intermingling into complex states of shame and superego judgment. Harris (1996) pithily expresses it as follows: "Homophobia, like many aspects of ideology, is both in us and we are in it" (p. 363).

Adolescence

Adolescence is the phase of all phases in which the struggle with both sexuality and identity is engaged, and the result is either development or various forms of defendedness (or even collapse). Adolescents come up against societal and familial expectations and prejudices, which interact with their intrapsychically determined wishes, fears, defenses, and developing identities. Typical fears and confusions can be far more likely to rigidify into internalized homophobia if an adolescent does not have an environment that facilitates and contains his or her sexuality.

Winnicott (1965) called our attention to the critical role of cultural experience and the family environment on the developing personality (in addition to intrapsychic factors). He saw the "maturational processes"

only developing insofar as there is a “facilitating environment.” Winnicott describes the characteristic nature of the maturational process as the drive towards integration. In adolescence, we could see this as an increasingly integrated sense of bodily experience, object relations, and self-concept. Ideally, an adolescent could integrate a sense of what is most compelling, for instance, in terms of sexual orientation, without having to eschew divergent impulses and inclinations as also part of the self.

As analysts of adolescents we have the dual tasks of working with parents to help them engage with the needs of their child, and to provide a facilitating environment within the treatment for the adolescent’s developing sexuality. Winnicott (1961) sees the analyst as, ideally, similar to a competent mother who allows her child to develop in her or his own fashion without a preconceived path. This enables the patient free play with her or his own thoughts and feelings. Winnicott reminds us that adults must not abdicate, or adolescence cannot really occur. My experience with the boy I will discuss echoed Winnicott’s observation that “we may surely think of the strivings of adolescents to find themselves and to determine their own destiny as the most exciting thing that we can see in life around us” (pp. 146–147).

Mid-adolescence (the developmental stage of the boy I will present) is characterized “by the emergence of the adolescent’s gendered and sexual self from the family into the social world. Middle adolescents move out from their families into the world of their peers to explore how their more definitively shaped bodies work” (Levy-Warren, 1996, p. 70). External and internalized homophobia can clearly interfere with the tasks of mid-adolescence. My patient’s withdrawal would have delayed the important experimentation with internal and external experiences that takes place through deepening friendships and first romances. Adolescents try things on, and in doing so they see what fits. Internalized homophobia stunts the free play of fantasy and waylays trial actions.

Malyon (1982) suggested that the most likely developmental pathway for adolescent males (his research sample was solely gay males) “is an interruption (sometimes temporary, but often lasting a decade or more) of the process of identity formation” (p. 61). He viewed peer group norms and prevailing social attitudes as incompatible with homosexual identity formation, resulting in a “bi-phasic process for most gay males” (p. 62), with the final consolidation of sexual identity not occurring until the time of coming out.

Phillips (2001, 2002) described a common finding that during mid-adolescence, gay males were “falling in love with and pining away for heterosexual adolescent boys” (2002, p. 131). He sees this as a progressive effort on the part of the homosexual boy to rework aspects of his Oedipal attraction and rejection from his father. He cites Isay’s (1989) conceptualization of a developmental pathway for gay men that entails homoerotic fantasies from at least age 4 or 5, analogous to Oedipal struggles in heterosexual boys, except with the father as the object of desire.

I would underline Isay’s (1989) emphasis on the importance of gay peer relations, at any stage, but especially in mid-adolescence. How could an adolescent conceive of the possibilities of what it means to be gay unless he or she has peer relationships in which to experiment?³ Isay expressed concern that “on the whole, analytically oriented psychotherapists have little understanding of the importance of these attachments for the enhancement of self-esteem” (p. 62). Peer relationships also allow teens a valuable route to developing their own identities: “[S]ocial stigmatization is particularly damaging to the adolescent and young adult because of the importance of peer acceptance in the task of separation from parents” (p. 66). I will explore these issues through the experience of my patient, Mario.

Mario

“Mario” is a 14-year-old Italian American boy whom I’ve treated in twice weekly psychotherapy for 18 months. His father is a physicist and his mother is a homemaker. He has two brothers who are 3 and 5 years older than he is. His parents sought therapy for Mario because his schoolwork had deteriorated and he had become school avoidant. His parents said there had been a recent painful incident in which the father of Mario’s best friend did not want his son to see Mario because he thought Mario was gay. Mario’s parents said they did wonder if their son was gay, and that they would want him to know they would love him if he were. There seemed to be a serious lack of communication in the family, be-

³ Increasing depictions of gay lives in the media are of some help to gay teens in conceptualizing their futures. Denizet-Lewis (2009) described the positive influence of the Internet on gay middle schoolers: “Going online broke through the isolation that had been hallmark of being young and gay” (p. 39). Also of note are the “It gets better” video archives accessible to gay teens on YouTube. Gay adolescents, however, are still at a disadvantage when they do not have the opportunity to make the fumbling, awkward approaches to trying on aspects of identity and eroticism like their heterosexual peers.

cause they had not broached the issue at all, despite this painful incident. The parents described Mario as a quirky boy who likes modern dance and sometimes wears makeup. They described him as emotionally closer to his mother than to his father.

First Meeting

Mario is a slight boy. At our first meeting he was dressed in tight jeans with a fringed headband tied around his head. He seemed pretentious and defensive at first, expressing an intellectual interest in psychoanalysis. At times, his thinking seemed close to psychotic. For instance, in this first session he said:

“My way of thinking is that if you really believe something then it’s true. Like if I believe that chair is blue, then it would be blue. But I don’t quite believe it is, so it isn’t. The most extreme example is something I was reading about someone who turned into a werewolf. He believed he was a werewolf so he was. He was hairy and had big teeth.”

I replied: “You’re talking about complicated things, and maybe two different ideas. One is that you can change reality with your mind, and another might have something to do with perception—that if this boy felt like a werewolf because of his hairiness and teeth, he might start thinking he actually was a werewolf.”

Mario responded: “Yes, or like the placebo effect that some doctor gives someone a pill and their disease gets better even though there was nothing in the pill.”

I said, “I was thinking it might feel scary coming to a doctor like me—what effects I might have on you. I think of this as our thinking about things together. That you know a lot about yourself, I am getting to know you and we’ll think together.”

Mario replied: “I like the sound of that.”

My initial impression was that the sexual changes of adolescence (as represented by the werewolf) were very frightening to Mario, and that his anxiety at beginning treatment was intense. When these anxieties were commented on, he began to be able to speak in a more natural way about his problems. Later in this session, Mario said, “I have a Berlin Wall with people and I know it’s going to come down sometime—fall down or get pushed down. But I don’t know whether that’s a good or a bad thing. When I see rays coming through they’re red. Like people I don’t like and a sinister world.” I thought that he had a fear of something psy-

chotic⁴ breaking through, or perhaps was so frightened of his emerging sexuality that he experienced this natural development as potentially catastrophic.

Homosexuality: Coming Out in Therapy and Elsewhere

Mario did not immediately introduce the issue of his sexual orientation, but because of the difficulties being open at home, I raised the issue in the second session. I said I knew there had been a painful incident with a friend who had not been allowed to see him as his father thought Mario was gay. I said that I wondered whether such things were difficult to talk about in his family, and that I wanted him to know it was important for him to be able to figure out who he was sexually and in other ways and to let me know if he had any worries about my reactions. He quickly indicated that he thought of himself as gay. I said that part of his coming to treatment might have to do with being able to find a way to talk with his family about this issue. He agreed, but said he knew he had other problems as well. Aside from his fears about being accepted as a gay boy, the other issues apparent from the beginning were social problems and a range of fears and phobias, including a horror of meat, which he called “flesh.”⁵ Not being allowed to spend time with his best friend because of his perceived homosexuality was acutely painful. Mario also told me of numerous hurtful, if less extreme, incidents—such as his brother saying an openly gay professor was “disgusting.”

Soon after telling me he was gay, Mario also told his mother. He and his father did not talk about it directly. I encouraged his father to speak with Mario after Mario had told his mother, otherwise it might seem that there was something too difficult to speak of. Father sent Mario a letter saying he accepted him as he was, but, of course, the distance involved

⁴ “Psychotic” is used here in Laufer’s usage (1986) of psychotic manifestations in adolescence as distinguished from adult psychoses. Psychotic behavior and thought in adolescence must be understood in relation to the psychic strains of integrating new bodily capacities. Laufer considers adolescent psychotic phenomena to be parallel to adult psychoses only when the “adolescent has lost the ability to doubt” (p. 370).

⁵ The dynamic meanings of Mario’s horror of “flesh” were not clear at this point, although the intensity of his revulsion raised questions regarding psychotic aspects of his personality. One of the challenges—and interests—in treating adolescents is that their personalities are far more fluid than those of adults, and issues must be viewed with uncertainty regarding their transience or potential for more ongoing pathological significance. All teenagers are struggling with rapid bodily changes and these conflicts can spill over into the bodily based symptoms characteristic of adolescence, e.g., eating disorders, substance abuse, and cutting.

in not being able to talk directly still came across. A month or so later Mario came out at his school. He was 13, in 8th grade at a progressive, private school, and his coming out was generally viewed by peers and teachers as courageous.⁶ I thought this was an important step in claiming his identity. The school avoidance completely ceased. He acknowledged: "I feel quite differently about school now that I am able to talk about things." The presenting symptom of his school avoidance and academic decline abated after coming out in therapy and elsewhere, and these symptoms have not recurred.

Although I explicitly interpreted the probable link between Mario's school avoidance and the painful rejection he had suffered, it seemed to me that Mario's resumption of school attendance had more to do with his experience of finding a voice in therapy. Thus, he could go to school if he felt he could meet potential experiences of rejection with his own voice and perceptions. This made him feel less helpless in the face of prejudice.

Narcissistic Defenses and Beginning Intimacy

At times, Mario related to me in a rather self-important manner, as if he were a star and I his audience. His second regular weekly session had been disrupted by preparation for a dance performance. I think his not having a steady second time with me made him feel less accepted and secure and hence more reliant on rigid pseudo-adult, dramatic modes. Likewise, he was on the verge of finishing 8th grade and leaving the school he had attended for the past nine years. This sense of Mario's performing and relying on narcissistic defenses continued until we were finally able to secure the second session. This required significant work with his parents. Soon after this was accomplished he began to relate more consistently in a manner that felt intimate, and to be able to sustain vulnerability and some pain. Mario experienced the consolidated schedule as my taking his problems seriously, and then he could allow them into the room. In addition, knowing that he was not welcome by people

⁶ Denizet-Lewis reports (2009, p.39) that at least 120 middle schools across the country have formed "Gay Straight Alliance Groups" where gay and lesbian students and their straight peers meet to address anti-gay bullying and harassment. It is worth noting that Mario participated in the G.S.A. at his middle school. The increase of G.S.A.s in middle schools and high schools shows that these schools envision that some of their students are gay. The existence of these organizations makes it less burdensome to come out and may contribute to an eventual decrease in suicide rates among gay teens.

who were homophobic made his being welcomed by me particularly important. His brittle, pseudo-adult presentation started to soften.

As Mario approached starting at his new high school, his anxieties about being accepted mounted. He particularly feared being treated as a stereotype instead of a real person in relation to being gay. As his anxiety was peaking at the beginning of the high school term, his mother expressed concern that the second session each week was too expensive, putting our schedule in question just as he most needed a firm container for his anxieties. In this context, he forgot to attend a session just before starting high school. I found this explanation for missing the session was confusing and left me unsure of what had happened: whether either he or his mother had lied to me. He also related a story of a boy who had acted as if he liked Mario and instead went out with a girl. I said:

People tell me things in different ways—sometimes with words, for instance that something hurts, and other times they show me. On Monday, I was left alone, not knowing what was going on. I think it might have been a way of showing me how confusing it is for you to have someone say they like you and then to change their mind without any explanation.

Mario went on to talk about a number of guys he felt interested in or dropped by. His hurt at being turned down seemed magnified by his feelings about his homosexuality. He told me about a movie he had seen about eating disorders within the gay community and said: “We’re prejudiced against ourselves. I’m not prejudiced against others who are gay, but sometimes with myself.” He felt intense anxiety in reaction to the combination of a new high school, his mother’s disruption of the security of the therapy schedule, and his fears of being rejected for his homosexuality.

Rejection by Father

An important ongoing issue is Mario’s feeling of rejection by his father. Although the father states that he accepts Mario’s sexuality, he rarely spends time with Mario. The father is closer to Mario’s older brothers, who are evidently heterosexual. Mario’s father expresses considerable unhappiness at paying for Mario’s therapy (which has become quite important to Mario), but does not balk at paying for expensive cars and trips for the older brothers. Mario feels that financial restrictions apply only to him in the family. This tacit rejection by his father leaves Mario

feeling besieged—who he is and what he wants are not actively supported in the family. This rejection causes Mario to defend himself by acting as if he knows everything already and doesn't struggle with uncertainties and fears. At this point in the therapy I can comment on this defensive manner, and Mario is able to shift to describing his emerging sexual feelings more openly. Parenthetically, in these discussions, it is important to model that sexuality can be talked about openly. Although this is true in any therapy, it may be particularly true in treating gay adolescents who fear their sexuality will be frowned on.

Social and Romantic Issues

As Mario navigated high school, he continued to be open about his sexuality, but this was not easy at times. He told me:

Mario: I don't like it when people make assumptions about who I am because I'm gay. I met this girl in my class at school. She and I were e-mailing and at some point I said I was gay, and she stepped way back and said: "I knew a gay person once."

Analyst: I can see why it would feel bad to be treated as some very different kind of person, and especially when you're starting a new school.

Mario: Yes, and at my old school there were gay teachers. I had another kid I just met act like if you're gay you're immediately sexual, like you'd be immediately making out with someone.

Analyst: You want people to get to know you in a more individual way, including me.

Mario went on to describe stereotypes he contended with in gay friends as well. He had told a gay male friend about a straight male friend he valued and the gay friend responded: "gay guys don't have straight friends, it doesn't work that way." I emphasized that although his sexual orientation was an important part of him, it was one of many parts of him. I said that he might be concerned about what stereotypes he or I might have about him.

Mario has also experienced homophobia in larger cultural arenas. He campaigned against Proposition 8, and felt crushed when the ban on gay marriage in California passed. It was painful for Mario to be confronted with the fact that at that point the majority of Californians opposed gay marriage and, by extension, his hopes to be accepted on an equal footing in a gay relationship. Mario has expressed fears regarding HIV. These

fears seem part of a larger anxiety that he will not be looked after and prized as a gay boy—that others won't help to keep him safe. As I pointed out his fears that others and I won't look out for him, he has further softened and increasingly relates in a more intimate, serious manner. Although he has felt the rejection related to his homosexuality to be an extra burden to carry, I think at times he is able to feel I might help him with this challenge and work to keep him safe.⁷

In this year since he has come out, romantic relationships with other boys have also been complicated. He has had several romantic beginnings with boys, which have foundered because the other boys are still in the process of defining their sexual identities and are not ready to be seen publicly as gay. Although it is understandable that these other boys need time to come to terms with their sexuality and face the potential challenges of coming out in a homophobic society, this has added a level of frustration for Mario.

An important part of growing comfortable with one's sexuality in adolescence is to be able to experiment with it. This involves more than sexual acts. It pertains to all the wonderful and impossible aspects of teenage love. Mario has most recently been involved with a boy who is affectionate with him in private, but will not acknowledge him elsewhere. The other boy seems to be in a state of flux, saying that he is attracted to Mario, but does not otherwise consider himself to be gay. Although the other boy's struggle is understandable, such experiences add frustration to Mario's natural and healthy wish to express his affection. Experimentation can be more difficult for gay teens than for their heterosexual counterparts, both because the majority of their peers will be heterosexual, and also because potentially gay peers may be out of step in terms of their own coming out process.

Mario has increasingly been able to use his therapy to move in the direction of having a "theory of mind" (Fonagy, Gergely, Jurist, & Target, 2002), i.e., an awareness of his own mental states that contributes to understanding the mental states of others. Other boys' romantic withdrawals from him have been hurtful, but he has been able to use his own experience of internalized homophobia to understand others' struggles

⁷ Although Mario will also need to work to keep himself safe, including—but not exclusively—related to his sexuality (e.g., practicing safe sex and reading his environment to determine how safe it is to be openly gay), the current developmental issue is whether the facilitating environment (including me) can convey a sense that he is worthy of protection. This sense of value and protection can gradually be internalized into adequate self-protection.

with it. This has helped him to have a perspective that protects him from internalizing overwhelming feelings of rejection.

Some Thoughts from a Heterosexual Analyst Treating a Probably Homosexual Boy

My training as a child analyst a decade ago reflected the prevailing view of homosexuality and (especially) atypical gender identity within psychoanalytic developmental theory as developmental pathologies.⁸ I was skeptical of those positions at the time and have increasingly come to reject these prejudices as preconceived orthodoxies and essentially anti-analytic. Thus, in treating gay adolescents I felt concerned regarding value judgments contained in developmental “normativities” (Corbett, 2001). I agree with Harris’ view (quoted in Reis, 2003) that analytic approaches to developmental theory and gender theory are “riddled with problems of power ideology, values and ethics” (p. 297).

One such “normativity” is the expectation that adolescents take up their “proper” gender identity as well as “sex-appropriate drive” and eschew gender variance. I could cite numerous examples in the developmental literature of a seemingly automatic pathologizing of homosexuality or nontraditional gender presentation. For instance, Harley (1970) states “I endeavor, then, to apply infinite care, in the analysis of passive homosexual problems, to respect openly the boy’s attempts at active masculine behavior. . . . If he gives danger signals of regressing to the point of surrender to his passivity, I try to counterbalance this by emphasizing the other side” (p. 117). Likewise, Blos, in his classic work *On Adolescence* (1962), posits:

Heterosexual object finding, made possible by the abandonment of the narcissistic and bisexual positions of early adolescence, characterizes the psychological development of adolescence proper. More precisely, we should speak of a gradual affirmation of the sex-appropriate drive moving into ascendancy and bringing increasingly conflictual anxiety to bear on the ego. (p. 87)

⁸ I encountered a similar problem when teaching psychoanalytic developmental theory. Some conceptualization of what is “normal” is implicit in all developmental theories. These issues have been famously fraught in relation to female development and increasingly so in relation to homosexual development. It is incumbent upon analytic institutes to teach developmental theory within frameworks that question the normativities involved, or else we are in danger of proliferating misogynistic and homophobic developmental theories.

Conversely, Blos writes,

[i]n the girl, two preconditions favor homosexual object choice. One is penis envy, which is overcompensated by contempt for the male; in these cases the girl herself acts like a boy in relation to other girls. The second precondition is an early fixation on the mother; in these cases the girl acts like a dependent child, slavishly obedient and trusting. . . . In the boy, three preconditions favor the channeling of genital sexuality into a homosexual object choice during puberty. One is a fear of the vagina as a devouring castrating organ; we recognize in this unconscious concept a derivative of projected oral sadism. The second precondition resides in the boy's identification with the mother, a condition that is particularly apt to occur when the mother was inconsistent and frustrating while the father was either maternal or rejecting. A third precondition stems from the Oedipus complex which assumes the form of an inhibition or restriction summarily equating all females with mother and declaring introitus to be a father's prerogative. (p. 105)

More recently, Tyson and Tyson (1990) note that in early adolescence a best friend relationship "may initially provide an opportunity for both girls to elaborate fantasies about heterosexual escapades, [but] the dyadic oneness may lead to homosexual longings and experimentation. If so, this relationship may become so intense and gratifying that movement to a heterosexual position is delayed or thwarted altogether" (p. 275).⁹ Across the ocean, Klein (1922) saw this issue similarly: "what has to be done during puberty is to organize the incoherent partial sexual instincts of the child towards procreative functions" (p. 56). Needless to say, all of these theorists have made major contributions to the understanding of adolescence. But what I object most to in these descriptions is the absence of any hint of consideration of a healthy homosexual development

⁹ This citation is an example of Blechner's (1993a) point that although homophobia in psychoanalytic writing is less stark than it used to be, it can be "even more problematic . . . [when] well meaning psychoanalysts often do not recognize their biases and the way their conceptions of mental health conformed to the prejudices of society at large" (p. 630). I recognize that the developmental references I cite could be viewed as dated. All of these citations, however, were part of the required reading in my training in child analysis. Part of what is best about psychoanalysis is that wisdom is passed down from generation to generation. Prized theories of the previous generations are transmitted to candidates. Our internalization of theories is partly an identification with teachers and necessarily partly emotional. However, this handing down from generation to generation is relevant to why issues such as homophobia in psychoanalytic theory are slow to change and cannot be claimed to have changed fully because there may be less obvious examples in current literature.

or nonpathological meanings to same-sex love. Homosexuality is seen as a regressive developmental arrest.¹⁰ These views, it seems to me, run the risk of inflicting implicit moralizing, patronizing and unquestioning adherence to conventional value systems on our patients.

In a critique of this normativity, Corbett (1996) has discussed a complex mixture of feminine and masculine identifications in some boys who become homosexual. He notes: "The conflating of conformity with health has perhaps nowhere been more evident than in developmental theories of gender" (p. 440). Indeed, I felt the problematic developmental literature on homosexuality as a ghost lurking in my treatment of Mario. Conversely, Freud's (1905) radical notion of psychic bisexuality, both in terms of identifications and object choice, remained a touchstone throughout this case.¹¹

My concern regarding a stereotypic valuation for Mario of the "proper" gender identity and devaluation of gender variance led to some hesitance in my exploration of aspects of his masculinity. During the last year, Mario has been dressing in a less flamboyant and somewhat more masculine style. I found myself hesitating to mention this change because of the possibility of implying that his increasing masculinity is what I would value most in him. But, of course, an overly cautious approach also has its costs in a free consideration of possibilities. I finally mentioned my observation of his change in dress. I said that I could appreciate that his earlier "creative" dress had elements of freedom and experimentation to it, but that there might also be something significant to his increasing masculinity. His association was to a movie portraying a heterosexual couple who returned to their favorite spot over and over. We understood this association as implying a sense that he experienced our sessions as "dates" with important feelings of intimacy between us as a heterosexual couple. Finally, he also added that the boy he was getting increasingly intimate with was very masculine—seeming to imply that his object love

¹⁰ Drescher (2007) describes Freud's "theory of immaturity" as one that "juvenilizes diverse sexualities" (p. 219).

¹¹ Freud never fully resolved the tension in his thinking between biological essentialism (i.e., anatomy is destiny) and a radical view of the centrality of psychic bisexuality. There has been a subsequent argument in the literature on psychic bisexuality regarding its role as primary or defensive (against a sense of loss of omnipotence). My own view echoes Winnicott's sense of bisexuality as an area of play or transitional space, which is potentially neither concrete nor delusional. Like Corbett's "girlyboys," Mario seemed to value his penis and maleness while playing with identifications culturally associated with femininity.

involved a piece of seeking a masculinity he could internalize.¹² I relate this conversation not to settle the question, but to convey Mario's ease at considering multiple vertices. It increased my confidence that we could consider divergent aspects of his self with a sense of openness regarding their meaning or priority.

I also felt some conflict at times between a serious consideration of the effects of his experiences of homophobia, and considering possible meanings of Mario's gender identity or sexuality. Early in the treatment I was struck—and somewhat put off—by the flamboyance of Mario's dress (or, it might be more accurate to say, costumes). I felt jarred by his exaggerated presentation but also interested in remaining open in order to understanding its meanings. For instance, Mario's father would complain of Mario's wearing spandex shorts, or going out in dramatic outfits including capes. Over time, I came to feel that Mario's exaggerated dress was related to feeling unseen and interpreted it as a fear that I would only be interested in his surface. Eventually, this exaggerated dress subsided, as I mentioned above. I have also considered the possibility that Mario's feminine dress might be provocative in relation to his father—with both meanings of the word provocative. Clearly, Mario's father was put off by his dress, as I was. This could have an element of negative identification for Mario, i.e., "if you reject me for not being masculine I may as well go all the way with it." It could also be more simply a bid for his father's attention in the manner of a desirable female. Most recently, Mario has noticed that although he has felt rejected by his father, he has also avoided intimacy with his father when it is offered. In that sense, his dressing in a way that alienated his father (and me in the countertransference) was an unconscious effort to prevent intimacy. I also considered whether my unease with Mario's dress was related to his nontraditional gender presentation, and I think there is some truth to this. But I also have had a similar reaction to girls who arrive at my office dressed like Britney Spears. Although I feel sympathetic to the wish for a costume (and for the beginning of trying-on identities), it can also feel unintegrated in contrast to an individuality of dress that feels more playful. At other times, I felt charmed by Mario's idiosyncratic and creative style.

My point is that the reality of homophobia has made me cautious about inferring complex meanings to Mario's sexuality at times. I believe,

¹² Other meanings of his more masculine dress could also be considered, such as an adaptation to his high school environment or to the wishes of his current boyfriend, or even to rejecting important aspects of himself.

however, that this does Mario no favors. All of our sexualities are a multiply determined brew. It should not minimize the recognition of the hurt Mario has suffered through homophobia to view him, as any other patient, with full complexity and richness. An overly fearful attitude on my part due to the wish not to replicate homophobic attitudes could interfere with a full and free examination of sexuality.

At a recent panel of the International Psychoanalytic Association,¹³ I presented the case related here. The discussant commented that I had foreclosed too quickly that the boy was homosexual and that Mario's "coming out has the structure of an acting out behavior, where the concerns that could have unfolded, formulated and contained in the frame of the transference, are evacuated or 'resolved' by means of an action on his environment" (Barredo, 2009). It is possible that either my own or Mario's anxieties about his sexuality could lead some questions to be avoided and instead translated into actions. However, I also felt it likely that a similar issue might not have been raised in the presentation of a heterosexual adolescent. Could this be the quiet working of a heteronormative theory?¹⁴ All of our sexualities are too complex to reduce to one-word descriptions such as "heterosexual" or "homosexual." In that sense, such words are always oversimplifications. My concern, however, is that a probably gay adolescent's developing sense of sexuality could be treated with skepticism, and as a pathological structure.

Moreover, with adolescents, "acting out" must be thought about differently than with adults. It is part of the challenge of working with adolescents to struggle with the mixtures of progressive and regressive meanings in their actions. For instance, even destructive actions such as drug abuse can have elements of efforts at separation and new trial identifications, which are aspects of adolescent development. It is part of the challenge for analysts who treat adolescents to hear the multiple meanings of such actions. It is true that this boy came out without having carefully thought about the potential meanings ahead of time. I would say, however, that this is an important way that adolescents think—they try things on and see how they fit. I believe that Mario "tried on" coming out with

¹³ Panel on "Adolescent and analyst at work in the present space," International Psychoanalytic Association 46th Congress, Chicago, July 30, 2009.

¹⁴ Denizet-Lewis (2009) quotes Eileen Ross, the director of the Outlet program, a support service for gay youth in Mountain View, California, saying: "No one says to [heterosexual boys]: 'Are you sure? You're too young to know if you like girls. It's probably just a phase.' But that's what we say too often to gay youth. We deny them their feelings and truth in a way we would never do with a heterosexual young person" (p. 39). On this point, see also Cass (1979), Troiden (1988), and Martin (1991).

me and had some experience of applying the word “gay” out loud to himself—and it fit. He also came to find that there were some ways the word did not fit—e.g., he has expressed dislike at the substance abuse and promiscuity he sees as too prevalent in the gay community, and, as mentioned above, he experiences aspects of heterosexual love in our relationship. In addition, his claiming a voice in coming out—which seems to me a crucial part of claiming himself—e.g., the definitions and self understandings can be elaborated, now that he feels a right to his own view of himself.

Conclusion

Psychoanalysis offers a special opportunity for patients to distinguish between fantasy and reality and to evaluate the impact of societal stereotypes (group fantasies) on the internal world. For instance, Moss (1997) described the way in which HIV/AIDS could be used within a homophobic framework as a “natural” proof of homophobia. Such hateful and horrific ideas are potentially internalized by gay adolescents and entwined with intrapsychic processes. However,

. . . the psychoanalytic clinical literature, in addressing the upsurge in both the realistic and the fantasized dangers surrounding homoerotics, has maintained a steady, disinterested course . . . our recent literature on the points of convergence of HIV and homosexuality has remained essentially silent on the homophobias per se. (By “our” I mean the English-language literature appearing in the *International Journal of Psycho-Analysis*, the *International Review of Psychoanalysis*, *Psychoanalytic Quarterly*, this journal [the *Journal of the American Psychoanalytic Association*]). (p. 206)¹⁵

Moss comments further that

[w]e do not see what theory has not paved the path for us to see. For the most part, our clinical education, our received theories, have left us much less prepared, with either homosexual patients or with women to see, to theorize, to work and write clinically, on what may well seem to us the marginal problems of misogyny and homophobia. (p. 206)

I have discussed the multiple areas in which Mario has experienced homophobia: with peers, with potential romantic partners, with his fa-

¹⁵ For an exception to this silence, albeit not in the journals Moss cites, see Blechner (1993b, 1997).

ther, and in society. These multiple sources led to withdrawal (i.e., school avoidance) and brittle, narcissistic defenses to mask his fear of not being valued as a gay boy. Attention to issues related to feeling welcomed by me, awareness of the effects of rejection for his sexuality, and a particular necessity for openness in relation to discussing sexuality are important aspects of the treatment. Therapy may be the first place in which an atmosphere of openness, a facilitating environment, to the exploration of all aspects of the self may be experienced by some gay teens. I have also tried to convey the way that my concerns regarding “normativity” led at times to a cautious exploration of this boy’s sexuality.

As adolescents experiment, they need adults around them to contain and imagine their developing sexuality. Retrospectively, I was able to understand that Mario’s initial fear of catastrophe (the Berlin Wall coming down) represented his terror that his sexuality could break through in an uncontained manner. His association to the Berlin Wall coming down is a poignant one. When he expressed it, the idea was fraught with a sense of sinister forces. The real Berlin Wall, however, was also a perverse, repressive structure that needed to come down in order to reunite parts of a divided city. I believe Mario’s metaphor also foreshadowed the hope that such a change inside himself, although terrifying, could help to unite parts of himself alienated through internalized homophobia. If sexuality and love are subject to excessive repression, as may be likely for gay teens in homophobic settings, breakthrough experiences can occur (or be feared to occur), subjecting these teens to alarming experiences of disorientation.¹⁶ I believe that once Mario felt that he had a genuine opportunity with me to explore and name his sexuality, his fear of breakdown subsided.¹⁷ Concomitantly, I think Mario was able to gradually construct a more flexible and protective barrier—e.g., he could increasingly discriminate between what was constructive or destructive to take inside himself.

The experience of prejudice presents the person who suffers it a con-

¹⁶ I am aware that Mario’s early, and seemingly certain, consolidation of his sexual identity could be viewed as a defense against underlying confusion, disorganization, and psychotic thinking. There may be some element of truth to this view. His early naming of his sexuality, however, did not lead to a sense that threatening parts of himself had been further pushed away—and were therefore more dangerous. Instead, there was a sense that the danger had been reduced because a seemingly dangerous part of his self (i.e., the sexuality he feared was unacceptable to himself and others) was allowed to come forward.

¹⁷ I do not mean to imply that Mario’s dread regarding his homosexuality was the only reason for his fear of a breakdown. But, the strains of adolescence that make this period especially vulnerable to breakdown are increased when teens’ efforts to wall off their sexuality are heightened by internal or external homophobia.

fusion to sort out. It is hurtful to be hated or rejected, and the experience of hatred or rejection can be conflated with internal struggles, such as Mario's struggle to come to terms with his sexuality. In that sense, internalized homophobia is a particular problem. On the other hand, what adolescent does not have concerns about her or his sexuality? In that sense, Mario's anxiety about "flesh" is a universal one in adolescence. I have sat with any number of adolescents who all of a sudden clamp down because some aspect of their sexuality has come to the fore. Eventually, we may be able to understand what this has to do with beginning to menstruate or having a wet dream or a disturbing fantasy. Mario's horror of flesh might be thought of as representing greater accessibility to the psychotic elements of the personality in adolescence, but there is also an element of the normal in it.

Extreme feelings about one's body are ubiquitous in adolescence. Indicators of health in adolescence would have little to do with extreme feelings or images, but more to do with the gradual and emerging ability to integrate these feelings inside oneself. In that sense, a fear of one's homosexuality is little different than any other adolescent fear of one's flesh. Of course, in any fear or hatred related to the flesh in adolescence there can be more benign or far darker versions. An example of this range would be mild or transient eating problems compared with the destructiveness of serious eating disorders. The acceptance of bodily developments and related fantasies are challenging for all adolescents and are facilitated by their acceptance in analysis, in the family, and in society.

The age of coming out is a subject that deserves exploration. Coming out early with the aid of psychotherapy allowed Mario to free himself from social withdrawal and academic decline. Resumption of peer relationships allowed him the experimentation that is crucial in mid-adolescence. On the other hand, coming out earlier than many of his peers left Mario out of step and therefore subject to rejection in romantic relationships with boys who were not yet ready to come out themselves. Coming out is an intensely individual matter. Our role as analysts is to help our patients freely explore their sexuality. I believe that although coming out at a young age posed some difficulties for Mario, overall, it allowed him to take up the task of discovering his authentic self. Coming out at a later age can leave young adults with a feeling of having "missed out" on key adolescent experiences (Brady & Tyminski, 2009). Adolescence is a phase when "things happen" and they happen in "real time" (Brady, 2009), e.g., the first wet dream, first menstruation, or the first boyfriend or girlfriend. Mario's choice to name his sexuality allowed him to engage in

adolescence in a manner that added to his vitality and allowed him the opportunity for the bumps, bruises, and glories of adolescence that we all deserve.

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