



SEXUAL ORIENTATION IDENTITY DEVELOPMENT IN WOMEN

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ABSTRACT

Many gay and lesbian people go through a “coming out” experience at some point in their lives. Psychologist often say this process includes several stages “in which there is an awareness of being different from peers (sensitization), and in which people start to question their sexual identity (‘identity confusion’). Subsequently, they start to explore practically the option of being gay or lesbian and learn to deal with the stigma (‘identity assumption’). In the final stage, they integrate their sexual desires into a position understanding of self (‘commitment’).” However, the process is not always linear and it may differ for lesbians and gay men.

INTRODUCTION

Different degrees of coming out :

One study found that gay men are more likely to be out to friends and siblings than co-workers, parents, and more distant relatives.

Coming out and well-being :

Same-sex couples who are openly gay are more satisfied in their relationships. People know about her sexual orientation, the less anxiety, more positive affectivity, and greater self-esteem she has.

Rejection of gay identity :

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Various studies report that for some religious people, rejecting a gay identity appears to relieve the distress caused by conflicts between religious values and sexual orientation. After reviewing the research, Dr. Glassgold of the American psychological Association said some people are content in denying a gay identity and there is no clear evidence of harm.

Fluidity of Sexual Orientation :

The American psychiatric Association (APA) states that “some people believe that sexual orientation is innate and fixed, however, sexual orientation develops across a person’s lifetime.” In a statement issued jointly with other major American medical organizations, the American psychological Association states that “different people realise at different points in their lives that they are heterosexual, gay, lesbian, or bisexual”. A report from the Center for Addiction and Mental Health states that, “For some people, sexual orientation is continuous and fixed throughout their lives. For others, sexual orientation may be fluid and change over time.” Lisa Diamond’s study “Female bisexuality from adolescence to adulthood” suggests that there is “considerable fluidity in bisexual, unlabeled, and lesbian women’s attractions, behaviours, and identities.”

Parenting :

LGBT parenting is when lesbian, gay, bisexual, and transgender (LGBT) people are parents to one or more children, either as biological or non-biological parents. Gay men face options which include: “foster care, variations of domestic and international adoption, diverse forms of surrogacy (whether “traditional” or gestational), and kinship arrangements, wherein they might coparent with a woman or women with whom they are intimately but not sexually involved.” LGBT parents can also include single people who are parenting; to a lesser extent, the term sometimes refers to families with LGBT children.

In the 2000 U.S. Census, 33 percent of female same-sex couple households and 22 percent of male same-sex couple households reported at least one child under eighteen living on their home. Some children do not know they have an LGB parent; coming out issues vary and some parents may never come out to their children. LGBT parenting in general, and adoption by LGBT couples may be controversial in some countries. In January 2008, the European Court of Human Rights ruled that same-sex couple have the right to adopt a child. In this U.S., LGB people can legally adopt in all states except for Florida.

Although it is sometimes asserted in policy debates that heterosexual couples are inherently better parents than same sex couples, or that the children of lesbian or gay parents fare worse than children raised by heterosexual parents, those assertions find no support in the scientific research literature. There is ample evidence to show that children raised by same gender parents fare as well as those raised by heterosexual parents. More than 25 years of research

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have documented that there is no relationship between parents' sexual orientation and any measure of a child's emotional, psychosocial, and behavioural adjustment.

These data have demonstrated no risk to children as a result of growing up in a family with 1 or more gay parents. No research supports the widely held conviction that the gender of parents matters for child well-being. If gay, lesbian, or bisexual parents were inherently less capable than otherwise comparable heterosexual parents, their children would evidence problems regardless of the type of sample. This failures in this research literature to disprove the null hypothesis, the burden of empirical proof is on those who argue that the children of sexual minority parents fare worse than the children of heterosexual parents.

Professor Judith Stacey, of New York University, stated: "Rarely is there as much consensus in any area of social science as in the case of gay parenting, which is why the American Academy of Pediatrics and all of the major professional organizations with expertise in child welfare have issued reports and resolutions in support of gay and lesbian parental right." These organizations include the American Academy of pediatrics, the American Psychiatric Association, the American Psychological Association, the American psychoanalytic Association, the National Association of Social Workers, the Child Welfare League of America, the North American Council on Adoptable Children, and Canadian psychological Association (CPA). CPA is concerned that some persons and institutions are mis-interpreting the findings of psychological research to support their positions are more accurately based on other systems of belief of values.

The vast majority of families in the United States today are not the "middle class family with a bread-winning father and a stay-at-home mother, married to each other and raising their biological children" that has been viewed as the norm. Since the end of the 1980s, it has been well established that children and adolescents can adjust just as well in nontraditional settings as in traditional settings.

Psychotherapy :

Most people with a homosexual orientation who seek psychotherapy do so for the same reasons as straight people (stress, relationship difficulties, difficulty adjusting to social or work situations, etc.); their sexual orientation may be of primary, incidental, or no importance to their issues and treatment. Whatever the issue, there is a high risk for anti-gay bias in psychotherapy with lesbian, gay, and bisexual clients.

Relationship Counseling :



Most relationship issues are shared equally among couples regardless of sexual orientation, but LGB clients additionally have to deal with homophobia, heterosexism, and other societal oppressions.

Individuals may also be at different stages in the coming out process. Often, same-sex couples do not have as many role models of successful relationships as opposite-sex couple. There may be issues with gender-role socialization that does not affect opposite-sex couples.

A significant number of men and women experience conflict surrounding homosexual expression within a mixed-orientation marriage. Therapy may include helping the client feel more comfortable and accepting of same-sex feelings and to explore ways of incorporating same-sex and opposite-sex feelings into life patterns. Although a strong homosexual identity was associated with difficulties in marital satisfaction, viewing the same-sex activities as compulsive facilitated commitment to the marriage and to monogamy.

Gay Affirmative Psychotherapy :

Gay affirmative psychotherapy is a form of psychotherapy for gay and lesbian clients which encourages them to accept their sexual orientation, and does not attempt to change their sexual orientation to heterosexual, or to eliminate or diminish their same-sex desires and behaviours. The American psychological Association (APA) offers guidelines and materials for gay affirmative psychotherapy.

Practitioners of gay affirmative psychotherapy states that homosexuality or bisexuality is not a mental illness, and that embracing and affirming gay identity can be a key component. Some people may find neither gay affirmative therapy nor conversion therapy appropriate, however. Clients whose religious beliefs are inconsistent with homosexual behaviour may require some other method of integrating their conflicting religious and sexual selves.

Sexual Orientation Identity Exploration :

The APA recommends that a client wants treatment to change his sexual orientation, the therapist should explore the reasons behind the desire, without any particular outcome. The therapist should neither promote nor reject the idea of celibacy, but help the client come to their own decisions by evaluating the reasons behind the patient's goals. One example of sexual orientation identity exploration is Sexual Identity Therapy.

After exploration, a patient may proceed with Sexual orientation identity reconstruction, which helps a patient reconstruct sexual orientation identity. Psychotherapy, support groups, and life events can influence identity development; similarly, self-awareness, self-conception, and identity may evolve during treatment. It can change sexual orientation identity (private

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and public identification, and group belonging), emotional adjustment (self-stigma and shame reduction), and personal beliefs, values and norms (change of religious and moral belief, behaviour and motivation). Some therapies include gender Wholeness Therapy. Participation in an ex-gay groups can also help a patient develop a new sexual orientation identity.

Developments In Individual Psychology :

In contemporary Adlerian thought homosexuals are not considered within the problematic discourse of the “failures of life.” Christopher Shelley, and Adlerian psychotherapist, published a volume of essays in the 1990s that feature Freudian, (post) Jungian and Adlerian contributions that demonstrate affirmative shifts in the depth psychologies.

These shifts show how depth psychology can be utilized to support rather than pathologise gay and lesbian psychotherapy clients. The Journal of Individual Psychology, the English language flagship publication of Adlerian psychology, released a volume in the summer of 2008 that reviews and corrects Adler’s previously held beliefs on the homosexual community.

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