

# Gender Role/Identity Discord

By Brad Prunty

Psychological research spends a lot of its time with the question of identity. Recently, the question of sexual identity has come to the foreground. In the midst of this, gayness, transsexuality, transvestism, and boyhood discordant gender/role are prime subjects for investigation because they are different — which means that they are smaller groups within society at large. Boyhood discordant gender identity/role is important to gays, transvestites, and transsexuals because longitudinal studies (studies which follow a group of people for a long period of time) indicate that boys with discordant gender identity role almost always grow up to be gay, transvestite, or transsexual. The converse, however, is not always true — all gays, transvestites and transsexuals were not gender identity/role discordant when they were children.

Boyhood gender identity/role discord used to be called "boyhood effeminacy." That term was of course coined by male researchers, many of whom have realized since that not only is the term offensive to women, but it does not accurately describe their subject. The major researchers in this field are John Money of Johns Hopkins University, Richard Green of the State University of New York at Stony Brook, Bernard Zuger of the New York University School of Medicine, and R.J. Stoller. They will all pretty much agree to Richard Green's description of sexual identity:

1. An individual's basic conviction of being male or female
2. An individual's behavior, which is culturally assigned as male or female (masculinity or femininity)
3. An individual's preference for male or female sexual partners

These aspects of identity describe no norm but are qualities that everyone possesses. A gay male, for example, believes he is male, may be more or less masculine or feminine, in the stereotypical senses of the words, and prefers men as sexual partners. These qualities express an individual's view of him/herself as well as her/his behavior. This distinction becomes important in John Money's description of identity versus role. Sexual identity is described as self awareness, and individuality, "sameness, unity and persistence of one's individuality as male, female or ambivalent, in greater or lesser degree." By contrast, gender role is "everything that a person says or does, to indicate to others or to the self the degree that one is either male, or female, or ambivalent; it includes, but is not restricted to sexual arousal and response." Money then states, "gender identity is the private experience of gender role, and gender role is the public expression of gender identity." Discordant gender identity/role is discord insofar as the boys have a female gender identity, or what they think is a female gender identity, while their assigned sex and role (assigned by birth and social expectations) is that of a male.

Behaviorally, the boys begin acting out their identity as girls as early as age two or three. Typically, the boys will, by age four, habitually dress up in female clothes. They are often especially attracted to high-heeled shoes. They may use towels or the like to simulate long hair, as well as jewelry and cosmetics. Many children play dress-up but not in as insistent a manner as the discordant gender identity/role boys. Aside from dressing up, the boys will often mimic facial expression or vocal inflections of a close female, such as their mother. They only want to play girls in fantasy games with

other children, and typically, they only want to play with girls. When drawing a self portrait, they will often draw a stick figure of a girl. When questioned on the subject, the boys often say they wish they were girls.

Characteristically, discordant gender identity/role boys act out all or most of these behaviors persistently and, sometimes, when parental objection grows, insistently. At this point the therapists and researchers are called in to help. The child is not performing as his parents or teachers expect him to. All of this usually happens by the age of five or six. The nature of gender identity/role discord is simply that boys who are socially expected to act and think like little boys are acting and thinking like little girls. Parents and schoolteachers and peers all become pretty upset. The boy does not fit into his proper slot.

Cause, or etiology, of discordant gender identity/role is largely a conjectural matter, and thankfully, it is treated as such by most researchers. John Money and other sex researchers usually agree that gender identity is established by the age of five. This means that gender role, which is essentially assigned at birth, when the parents see the vagina or penis, is "grown into" by the time the child reaches five years of age. At or by five years of age, a little boy is usually very aware of the differences between how little boys act and how little girls act. A little boy is usually aware of how he should act as a little boy. Though it may seem incredible, age four or five is the time when gender role behavior in boys is most exaggerated. So, "normally," boys and girls are consistent in their assigned role and identity. This "proper" role and identity is often-times the result of following role models, which are often parents; i.e., mom or dad. The discordant boys, however, have taken on roles and identity from the opposite sex, usually their mothers. They ignore their assigned gender role.

Tracing etiology often begins with parents. Green lists 12 variables which, alone or together, may be present in any given case. Among these twelve are: parental indifference to cross-dressing, cross-dressing of the young boy by a female, absence of an older male as a role model, and maternal dominance/paternal powerlessness. Green also refers to one variable as the "necessary variable" (the factor which appears in all cases). This variable is the first one mentioned above — parental indifference to cross dressing at an early age. Typically, such behavior is regarded as cute. However, the cuteness wears off as the child enters school and more intensive socialization begins. The child is rejected because of his different behavior. Green feels that parents can be responsible for reinforcing gender appropriate behavior at an early age, or, at least, for not approving of extremely inappropriate behavior. This is consistent with Green's mode of treatment, which I discuss later, which is aimed at helping the child to conform to his appropriate gender role.

Treatment of discordant gender identity/role is a very complex issue. That the child will have conflicts with standard society is pretty much a given. The issues in treatment revolve around determining which is the course of action least harmful to the child. There are those who say that the damage incurred by not getting the child to adapt to normal behavior will result in his being a social outcast at a very early age. He may develop a myriad of psycho-

logical problems in his later adult life. There are those on the other side who feel that such treatment is more damaging to the child than any kind of social rejection from peers. These are the underlying issues in all modes of treatment. Interestingly, the categories are roughly parallel to those of which gay people are unfortunately aware: to change or not.

Richard Green and John Money were for many years colleagues and together wrote many articles on the present subject. However, they have not diverged in their opinions regarding the issue of treatment. In an early article, they state, "effeminacy [sic, early jargon] is a handicap that need not be accompanied by additional psychopathology." (1961) However, discordant gender identity/role is seen as precluding adequate peer involvement because it invites peer rejection. Treatment, then, is aimed at lessening the "symptoms." This treatment realizes the damage done by too little interaction with peers, and by peer rejection. What they advised is essentially redirecting the boy's behavior to more gender-appropriate behavior. Richard Green, in his recent book, *Sexual Identity Conflict in Children and Adults* stresses that such treatment "enables these boys to feel more comfortable in being male and to integrate into a male peer group." He points out, in regard to sexual orientation outcome, that the treatment of pre-transsexuals would "reduce their degree of alienation from a masculine social role." If the boys were pre-homosexual, treatment "could increase their opportunities (and capacity) for bisexuality, exclusive heterosexuality, or less feminine-appearing homosexuality in a culture which censures feminine males." His final point is that "intervention directed at reducing peer group alienation may expand sexual options." Clearly, there is an implicit bias here against gayness, and a very high value placed on conforming. The bias is in favor of the child conforming for his own mental well being. It is also aimed at preventing the child from developing a so-called alternative sexual lifestyle. Compared to Green's attitude, his actual treatment seems innocuous enough. Green advocates elementary discussions with the boys on sexual and procreative differences between males and females. A boy is made aware that his penis is functionally and procreatively different from a girl's vagina. He is made aware that this is common to all boys. Many times boys think that their penises may simply be removed and they will become a girl. Although his basic position is different from that of Green, Money recommends that the boys be made aware of this. He feels that, as a result, the behavior subsides. According to Green, however, treatment may go on for years with very little result; that is, the behavior changes very little. The result with treatment is that often times, the behavior simply becomes covert — done secretly. Thus, treatment aimed at helping the boy to identify with his own gender's typical behavior seems a bit hopeless. One suspects that the boy merely learns how socially wrong his behavior is. The boy's peer interaction may be no better, except that the boy has learned to "pass." The peers and teachers feel more comfortable, but what about the boy?

Money and Tony Russo, in an unpublished article which was read at the 1978 Toronto American Psychologist Associate convention, contend that non-jud-


Continued on Page 12

**Club 76**  
Lounge - Disco  
-Where everyone is welcome-  
Sundays 8-12  
LIVE BAND  
Rock 'n' Roll  
76 Batterymarch St.  
Boston  
542-3377

**Mardi Gras**  
**OPEN BAR**  
**Party**  
**Feb. 27**  
\$8 Admission



Share Man's Ultimate CLIMAX with a Friend



with our exclusive FAST ACTION SPILL GUARD TOP

HAPPY TRAILS PRODUCTS INC.  
P.O. BOX 475 CHICAGO, IL 60690

NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Please send 1 BTL. at \$6.00 Sub Total \$ \_\_\_\_\_  
2 BTLs. at \$10.00 Sub Total \$ \_\_\_\_\_  
Illinois resident add 5% sales tax \_\_\_\_\_  
Total \$ \_\_\_\_\_

Enclosed is my  check  money order (cash not accepted)  
or charge to my  VISA  Master Charge

Charge # \_\_\_\_\_  
Interbank # \_\_\_\_\_ Exp. Date \_\_\_\_\_  
I am of legal age and I realize that this offer is void where prohibited by law.

Signature \_\_\_\_\_

Dealer Inquiries Invited!  
Dealers Phone Toll Free  
(800)621-8295  
Available at better retail stores,  
coast to coast.  
Order by phone with your VISA  
or Master Charge  
(312) 787-6915

Distributed by  
© Happy Trail Products, Inc.

# Program Helps Lesbian Alcoholics

By Lisa Nussbaum

Myths die hard. Take the myths surrounding alcoholism, for example. Or those surrounding lesbianism. Bit by bit, the unbending taboos give way, the conspiracies of silence weaken. But combine these two cases — alcoholism and lesbianism — and you've handily compounded the myths and, correspondingly, the difficulty in eroding them.

While lesbian alcoholics may intersect with alcoholics as a whole and, in turn, with other women, lesbian and straight, they also stand apart from each of these groups because of being at once lesbians and alcoholics. Far too often, the lesbian stands on the periphery of group recovery programs which reach out to a predominantly heterosexual alcoholic population. She usually can easily detect any discomfort from group members or staff hinging on her lesbianism. Consequently, feelings of alienation may prevent her from seeking alcoholism treatment or postpone her receiving such treatment.

Given a choice, the lesbian alcoholic may pick either an all-gay or all women's recovery group setting as the one which best meets her needs for comfort, safety and support. In a paper presented at Rutgers University last summer on "Reaching the Lesbian Alcoholic," the author stated that "an alcoholism recovery group with a homosexual identity, while not for everyone, offers a forum for com-

plete openness and honesty about one's self and one's life."

Reinforcing the need for all-gay recovery groups, she added: "Many alcoholic homosexuals — women and men both — report a sense of outsidership and alienation when they discuss their participation in a group recovery situation. The advent of gay recovery programs steps around this issue totally, giving the individual the utmost freedom to express self."

Although the gap is beginning to narrow between what we can do to confront the issue of alcoholism among lesbians and what we are doing through consciousness raising, education, outreach and provision of services, we perhaps have only scratched the surface of possibility. We have ample opportunity to do more for lesbian alcoholics.

One such local group addressing the treatment needs of lesbian alcoholics is the Women's Alcoholism Program, now in its fourth year of service and based in Cambridge, Mass. The Program offers a full range of services, including weekly discussion groups, individual and group counseling, consultation, referrals, alcohol education and training for counselors of alcoholics.

Two women on the staff, Judith Lennett and Cheryl Qamar, each of whom facilitates a weekly discussion group, point to a distressing lack of sensitivity within the women's community to alcoholism. The Women's Alcoholism

Program, as part of a larger program known as the Cambridge and Somerville Program for Alcoholism Rehabilitation (CASPAR, Inc.), has access to backup staff and facilities, and thus has, perhaps, more resources than other groups of its kind to assault alcoholism on a variety of fronts. However, Judith and Cheryl stress the need for an expanded base of support in dealing with alcoholism. "We hope women do not depend entirely on our program for support," they said, adding that feminist groups need to take the initiative for establishing support groups for women who have drinking problem. For example, a group on the North Shore just began.

Contrary to the practice of detoxification centers which virtually ignore a lesbian's woman friend or lover, and invalidate the relationship, the Women's Alcoholism Program does not shut out those concerned with another's drinking. In fact, Judith facilitates a weekly open discussion group for lesbians who have been affected by another's drinking. The group meets every Wednesday, 6:30-8p.m. at 20 Sacramento Street, Cambridge.

Cheryl leads a second alcohol and alcoholism discussion group for lesbian alcoholics, Mondays from 6:30-8p.m. at the address listed above. She explains that women can freely come and go to the rap groups. Even though composition of the groups may change over time, the knowledge that they are always available and open lends continuity and stability to the groups.

In addition to facilitating a group, Cheryl periodically makes presentations to community agencies as diversified as welfare departments, health care facilities and women's organizations about alcoholism. The purpose of her presentations is to raise awareness as to the presence of women alcoholics, the signs and symptoms of the illness, and the means of giving help. Cheryl has in the past made presentations to lesbian counseling agencies. An appalling degree of ignorance and misinformation on the subject of alcoholism endures, said Cheryl, despite its status as the number one drug problem in the U.S. today.

The Program does not offer long-term counseling but will make referrals for this and other types of treatment. One staff counselor performs short-term counseling, and some of her clients are lesbians, Judith and Cheryl noted. Also, the Program maintains a 15-bed residential care facility, Womanplace, for sober alcoholic women. An AA-oriented halfway house, Womanplace, offers individual and group counseling, alcohol education and other services. No woman will ever be turned away from Womanplace for inability to pay, as arrangements along these lines can always be made. "We encourage women to use the services of Womanplace," Judith said, "but in the event that the house cannot accommodate a woman needing placement, we do our best to inform her of other houses in the area." They also follow up on the women who use any of our services, either by phone or letter, she added.

Some, but not all, women need hospitalization to get off of alcohol, Judith continued. Through outreach, they've been able to get to women in earlier stages of alcoholism and thus more effectively control the problem. They try to help an alcoholic woman believe that she can take care of herself

and not play into the patterns that reinforce drinking, Judith said. If she makes alcoholism recovery her first priority, she may then be able to put other phases of her life into a holding pattern. That is, they encourage her to "fix up her life so as to put as much energy into sobriety as possible." "You can put off making certain changes for a time," said Judith, "but you can't always get sober."

Recovering lesbian alcoholics seeking new support systems and lesbians who want drug-free space in which to gather have very limited options when seeking an alternative to the bars. The recognized need for increasing these options gave rise in 1976 to Amethyst Women (AW). The group sponsors social gatherings for

## Boys Continued from Page 10

mental treatment has a "strongly therapeutic effect over the years." The hypothesis behind this treatment is that "supportive counseling induces role acceptance and consistency, and consequent ego strengths that society as it treats people who are different will not induce." In other words, Money and Russo are saying that, in long range outcome, the boys can, through supportive counseling, and support from parents enlightened by the therapist, achieve a healthy ego identity, or self conception, despite the ill treatment by society. Money and Russo note in this same article a longitudinal study of men in their 20's who were discordant gender identity/role boys and received such treatment. Some of these men have made remarkable achievements, and all are healthy by any psychological standards. The treatment of the boy in an accepting manner respects the integrity and individuality of the boy. This treatment does not have a bias against the boy's becoming gay as an adult, (which, by the way, all of the boys in Money's and Russo's study did). Such treatment seems to encourage boys to adjust in a healthy way to their own role, apart from the standard role. Strength is achieved by the individual in himself, against the standards set by larger society.

In Zuger's sample, there seems to be, as he notes, a correlation between homosexual activity, in feelings and sexual activity, and decreased cross-gender behavior. The same is true of the boys in Money's and Russo's sample. In the follow up, all had ceased cross gender behavior except for costume parties and the like, and nearly all were living gay lifestyles. In both studies, there seems to be a correlation between emerging homosexual behavior and discontinued or lessened cross gender behavior. What this means is difficult to say. Zuger hypothesizes that there are in fact several types of gay men — that there are those who are "effeminate," those who are not "effeminate," and those who are just temporarily "playing" around. One wonders how necessary such categories are. The more important question raised by the change in behavior is whether the change comes from adaptation to social norms and pressures, or whether it represents some kind of continuity in the individual boy's experiences.

John Money and Tony Russo interpret their data according to the latter point of view. They advocate labeling gender identity/role as heterosexual, sexual, or homosexual rather than as male or female. Under these categories, discordant boys, in the pre-homosexual cases, could be tracked as pre-homosexual gender identity with a mixed male and fe-

male role, or something like that. The significance here is in the separation of homosexual development, without negative bias against it, from heterosexual development. The question regarding discordant boys is, how and where do they fit in?

The problem is this. Research by Heilbrun (Emory University, Atlanta, GA) and others indicates that males who do not conform to stereotypically male roles will not succeed in developing ego identity, that is, they will not have a stable sense of who they are, what they are to do, or how to interact with other people. Clearly, discordant boys do not conform, yet they can attain all the strengths mentioned above — they can attain ego identity. The boys apparently change in identity from cross gender (cross dressing, etc.) to more "straight" appearing behavior, and to a gay sexual preference. This raises the question of whether such a change comes from within, as a pre-set type of development, or as a type of adaptation to the social norm. If they are adapting, then, we are forced to accept Heilbrun's theory that conformity to the social norm is the only way to succeed. If we accept the pre-set development theory, or homosexual gender identity/role theory, then there are other possibilities to consider. There are questions like how early do gay people begin to act out their gay identity? Is the gay personality a mix of male and female behavior different from the straight personality? Are gay people in fact stronger persons for enduring well enough in their own development to be healthy despite all that the straight world throws at us? What are the other components of gay personality? The most problematic aspect of all seems to be that doing research with children is almost always precluded if it has to do with being gay. Discordant gender identity/role children may be the only type of pre-gay kids we see because fearful parents will let us see no other.

Clearly, to begin considering research in terms of a gay gender identity/role development is one way of finding out about ourselves. Until fairly recently, research on childhood sexuality was taboo — kids were not people. However, evidence is found that kids do as a whole "rehearse" sexual acts as children that they will perform as adults. (Money, 1972) Are discordant boys also rehearsing their adult sexual roles, and if so, how? With time and the effort of people in the profession like John Money and Tony Russo, and others, progress will be made in finding out who we are. Hopefully, the psychology profession will begin to recognize and encourage our own unique development as gay people.

TUES. - SUN. 5:30-10 P.M. CLOSED MONDAYS

**AMARANTH** 134 HAMPSHIRE ST. CAMBRIDGE, MASS. CHILDREN WELCOME

THE WOMEN'S RESTAURANT 354-8371

**THE GAY GUY'S GUIDE**

**SO. STATION 423-4340**

1 - DIRECT FROM NEW YORK - "JAILHOUSE LOVER" and "HIS MASTER'S TOUCH" (X)

2 Jack Wrangler in: "SEA CADETTE" (X)

**Boston's Best All Male Show!**

**art 1** X-RATED

204 TREMONT ST. BOSTON 482-4661

"A TASTE OF BEEFCAKE" and "CREME DE BANANA"