DOCTORAL THESIS

‘Navigating between polarities’: An exploration of how gay male therapists’ subject positionings affect their experience of the therapeutic relationship with male clients

Beattie, Michael

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‘NAVIGATING BETWEEN POLARITIES’

An exploration of how gay male therapists’ subject positionings affect their experience of the therapeutic relationship with male clients

By Michael Beattie (BA, BSc)

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Department of Psychology
Roehampton University
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Abstract

This study looked at the intersection of subjectivities with respect to gender, sexuality and professional role for eight gay male therapists and how these positionings affected their experience of working with male clients. Following Hollway & Jefferson’s (2000) Free Association Narrative Interview (FANI) method, each participant was interviewed twice and the data analysed using psychosocial discourse analysis. The primary analysis was analysed again using an approach informed by Foucauldian concepts (Yates & Hiles, 2010). The data gathering and double-analysis approach accessed intrapsychic, interpersonal and wider socio-political fields within which subject positionings are understood to be constructed, performed and negotiated.

All participants struggled to navigate between polar binary positions in gender and sexuality discourses. Three principal subject positions were identified: ‘Pinocchio’, ‘Walks-Between’ and ‘I’m just a bloke’. Those in the ‘Pinocchio’ position appeared more effeminate and, by extension, more obviously gay. They tended to construct their sexual and gender identities as more important and were more likely to express fear and anxiety in talking about all-male dyads. Those in the ‘I’m just a bloke’ position appeared more authentically masculine and tended to see their gender and sexual identities as relatively unproblematic. They were more likely to focus on their professional identity and to express relatively less anxiety about working with men. The ‘Walks-Between’ position attempted to bridge gender and sexuality binaries to create a position that valued homosocial intimacy and vulnerability in the relationship. All but one of the participants suggested that it was important for the work that their sexuality remained hidden from their male clients, although most acknowledged that this was less problematic if their male client was himself gay.
The potential for both polar positions to work against homosocial intimacy in all-male dyads as well as implications for counselling psychology research, training and practice are discussed and suggestions made for future research work.
CHAPTER ONE
NAVIGATING THE THESIS

1.1 Introduction

This research has been undertaken as part of a course requirement for the award of a professional doctorate in counselling psychology. Counselling psychology has been described as ‘a field embedded within a post-modern philosophy’ (Rizq, 2006, p.614), which ‘attempts to bridge the gap between research and practice and conceptualises human activity and meaning relationally’ (Manafi, 2010, p.21).

We are engaged in an endeavour to arrive at a ‘holistic conceptualisation of human beings’ (Manafi, 2010, p.22) not simply as an academic pursuit, part of a project in the human sciences that attempts to arrive at a definition of the human being, but because the field is an inherently practical one. We explore human subjectivity and relatedness because, in our role as counselling psychologists, we work with people who come to us seeking help with their problems in living. This research is part of an effort to add to a knowledge base that might help existing and future counselling psychologists engage more effectively in their work of helping their clients.

Because we are interested in human relationships, counselling psychology research and practice is concerned with how people experience and make sense of the intrapsychic and interpersonal domains. This research question therefore aims to explore how a number of gay male therapists’ intersecting subject positionings are experienced in relationship with male clients.
1.2 The elusive subject

This thesis explores three particular subject positionings around gender, sexuality and professional role. It focuses on the various positions participants adopt around these intersecting identities and how this process affects their experience of the therapeutic relationship with male clients. In doing so I am aware that it is easy for me to imagine that there is such a ‘thing’ as a gay male therapist and I have struggled against the desire to essentialise the subject constructed in my research question.

In engaging with that tension I have found it helpful to hold in mind the analogy of a river system with branching tributaries, which are themselves rivers into which other tributaries flow. In this analogy, the focus of my research is three tributaries about which there is nothing essential except insofar as they contribute to and affect the wider river of identity in a constant dynamic interplay. By extension it is impossible, for example, to meaningfully extract masculinity from homosexuality when discussing it in the context of a particular gay man since the two are coincidentally experienced.

In addition, I am aware that I am also in my own ‘river system’ from which I can never fully escape, no matter how much I may attempt a kind of Husserlian ‘bracketing off’. As such I have approached the research project mindful of the fact that the tributaries I am investigating are ones of which I have my own experience. Indeed, personal experience of holding these subjectivities in mind as I approach the therapeutic encounter has given rise to my interest in and desire to research the subject area.

Whilst acknowledging the impossibility of ever really apprehending the ‘other’, I am heartened by Deutscher’s (2005) assertion that this impossibility should not put me off the attempt:
When, with the best intentions in the world, I nonetheless inevitably fail in my attempt to be open to the other’s difference, that impossibility resides in my attempt, and places me in a different kind of relation with the other in question. It is not that impossibility performs no ‘work’: it mediates me, and contributes to the complexity of my identity. (p. 74)

1.3 Postmodernism and the methodological gaze

In exploring questions of subjectivity and identity and their impacts on the experience of relationship in therapy I am influenced by post-structuralist philosophy. Amongst core influences for this thesis are Derrida’s (1930-2004) notions of deconstruction, an important means of attempting to undermine the polarising nature of much of the discourse on gender and sexuality. In addition, concepts of decentring and the idea of the ‘other’ – something also explored by Lacan (1901-1981) – as well as the impossibility of objectivity since ‘…we never step out of language to touch the thing itself…’ (Deutcher, 2005, p.35).

Indeed, the very idea of subject positionings, adopted over time through embeddedness in discursive fields, is a philosophical stance within a post structuralist discourse. It acknowledges multiple points of view and how ‘the process of analysis is always interpretive, always contingent, always a version of reading from some theoretical, epistemological or ethical standpoint’ (Wetherall, 2001, p.384).

The contingency of human experience is also explored in my methodological approach to the question, which suggests that people are always taking and defending a position when they talk about a particular topic. Moreover, drawing on Lacan and Foucault (1926-1984) I assume that
my participants may not only be reporting on an objective experience of themselves in their conversations with me, but may also be simultaneously creating and altering their identity through that talk.

This is not to take away from the transformative nature of action in the moment, but to draw attention to the fact that sense is also made of the action and its relationship to self – as being syntonic or dystonic with self perception – in the process of its construction in later narrative. Clearly this has wider implications for the work of therapy itself.

1.4 Tempering postmodernism with neopragmatism

I am aware that there can be a tension within the discipline of counselling psychology between academic work such as this research and therapy as it is practised in ‘the real world’. Often it can appear that academic research is so swept up in the relativism of postmodern thought that it loses its relevance for practitioners in the field. As Harvey (1989) suggests, postmodernism can be accused of seeming to ‘swim, even wallow, in the fragmentary and the chaotic currents of change as if that is all there is.’ (p.44)

Polkinghorne writes about the difference between ‘the psychology of the academy and the psychology of practice’ (1992, p.147) and suggests that postmodernism in psychology can be tempered by learning from the psychology of practice. He terms this balancing act between valuing both postmodernism and the body of knowledge generated through clinical experience as ‘neopragmatism’:
Neopragmatism accepts the postmodern conclusion that there can be no coherent predictive body of knowledge based on a transparent access to an independent reality. It does not, however, accept that a postmodern discipline has to be solipsistic and relativistic.’ (Polkinghorne, 1992, p.151)

Instead of simply accepting the polar opposites of naïve realism and relativism, Polkinghorne suggests that psychology should navigate between them and adopt the approach of critical realism. Although my approach to tackling this research question is strongly influenced by postmodernism, it is not so embedded in this philosophical approach that I engage in a nihilistic denial of realism altogether. In this paradigm we are led to judge knowledge not on its ability to accurately describe reality but on ‘whether it functions successfully in guiding human action to fulfil intended purposes’ (Polkinghorne, 1992, p.151). The approach allows us to bring together labour that had previously been divided in modernism between ‘the academy’ (where knowledge was produced) and ‘the field’ (where that knowledge was applied). Instead neopragmatism ‘recognizes that much of practicing knowledge is tacit, dealing with “knowing how”, rather than theoretical and conceptual, dealing with “knowing what”…’ (Polkinghorne, 1992, p.159)

Taking the issue of gender, for example, it becomes possible to both affirm that subjects have a sense of themselves as gendered beings in the world as well as to be able to stand outside that affirmation in a postmodern critique of essential gender. It is therefore hoped that a ‘together-and’ rather than an ‘either-or’ approach will produce counselling psychology knowledge that can act as a heuristic device to help other practitioners as they encounter similar phenomena in the field.
1.5 A word on language

The use of language is clearly of central importance not only to this research project, but also to the practice of counselling psychology as a whole. It has already been identified that we are subject to language as a system of meaning that comes discursively pre-loaded with meaning and through which we participate in the creation of our own and others’ subject positionings. I am aware, both through my own experience of the phenomena under exploration as well as through my work in the field that specific forms of language and co-incident meanings exist in particular around sexualities and gender identities.

For example, words such as ‘homosexual’ and ‘heterosexual’ are part of a medical/psychiatric nosology with its roots in the 19th century study of sexuality as a science and, as such, may be experienced by some as the language of pathology when compared to more contemporary terms such as ‘gay’ and ‘straight’. Indeed, the recent guidelines for working with sexual and gender minority clients issued by the British Psychological Society (British Psychological Society [BPS], 2012) suggest that psychologists make themselves aware of how the language they use in their practice may position them in particular ways with clients.

In this research project I use the words ‘homosexual’ and ‘heterosexual’ and ‘gay’ and ‘straight’ interchangeably. This is in part because I do so in my everyday conversations with colleagues and clients, in part because it is language that is reflected in the literature (and indeed the BPS’s own guidelines) and in part because it has been the language of my participants. Nevertheless, I feel it is important to point out my own positioning with reference to language at the outset and also to admit the possibility of my own unconscious adoption of a particular subject position around sexuality. In using such terms as ‘homosexual’ or ‘homosexuality’ I may be aligning myself with the medico-juridical privilege
1.6 Navigating the thesis

This thesis is laid out in five principle sections. This first chapter has been concerned with situating the research project both in the field of counseling psychology as well as how that situatedness straddles the competing epistemologies of scientific realism and postmodern relativism. Chapter Two briefly explores the extensive literature on the subjectivities of gender, sexuality and professional role identified in the title as well as on the phenomenon of the therapeutic relationship and ends by situating the research question within that literature.

The next chapter puts forward a methodological approach for both gathering and analysing the data. It explores and explains why two methods of analysis are proposed in order to capture aspects of the intrapsychic, interpersonal and wider socio-political discursive fields.

Chapter Four is concerned with the results of this analysis. In the primary analysis we explore how participants negotiate tensions between intersecting subjectivities in both the
intrapsychic and interpersonal domains. The secondary analysis considers the socio-political significance of the subject positionings uncovered in the primary analysis through recourse to the Foucauldian domains of truth, power and ethics.

The final chapter explores the possible meanings of the results of the two analyses, particularly in the context of the literature in which these results are situated. It also considers the limitations of this research and offers suggestions for future work that might continue to contribute to counselling psychology knowledge in this field.
CHAPTER TWO
LITERATURE REVIEW

2.1 Introduction

The subject of this programme of research is the gay male therapist.

The language used to frame the question suggests that participants will have taken up subject positionings with respect to their sexuality (gay), gender (male) and professional role (therapist). I intend to explore how subjects have made sense of themselves with reference to the meanings implicit in all these subject positionings and further, how these positionings influence and are influenced by their subjective experience of therapeutic relationships with male clients.

The focus on discourse as productive of subjectivity has its roots in the philosophy of Michel Foucault who suggested that discourses ‘systematically form the objects of which they speak’ (Foucault, 1972, p.49). Both the genesis of the research question and the analysis of the data it produces are strongly influenced by his theoretical approach to understanding the human person.

Nevertheless, I also recognise that such subjectivities are both intersectional (e.g. Cole, 2009) as well as dynamic and fluid. In other words, subject positionings are influenced between domains – for example subject positionings of class and race will influence subject positionings of gender and sexuality and vice versa – as well as constantly negotiated within relationship. For example, men are unlikely to adopt one single way of being male in childhood and simply
reproduce that subjectivity in all places and at all times henceforth. Instead they are more likely to take a position with respect to dominant discourses and adjust their relationship to those discourses depending on context in which they find themselves. The role of a gay male therapist in a therapeutic relationship with men is just one such context.

This review explores the literature that is relevant to the constructs identified in the research question; specifically, discourses of gender, discourses of sexuality and discourses of the therapist (in particular the therapist as co-creator of a particular kind of relationship). It is recognised that, in tackling each subjectivity separately, I am in danger of essentialising each of them and running counter to the epistemological underpinning of this project, which attempts to avoid taking a reductionist approach. In my view I have no choice but to engage with this tension and attempt to walk in that ‘critical realist’ space that recognises that, in order to study and analyse phenomena, they must, at least temporarily, be reduced in order to be explored.

And this is where the importance of intersectionality comes in. Bilge (2009) explores its relevance in researching masculinities. She suggests that, although ‘all members of society are located within the systems of social relations… from an intersectional perspective, individual accounts need to be analysed as located within simultaneous power relations… without separating different dimensions of social life into discrete or pure strands’ (Bilge, 2009, p.3). Yet, as Bowleg (2008) acknowledges, this is a delicate balancing act since the researcher must make sense of these coincidentally experienced intersections, even when participants may not explicitly reference them. Although this literature review considers three intersecting aspects of identity separately, the data analysis later in the thesis considers the relationships between them and explores how resulting tensions are negotiated. In attempting to illuminate all three fields, it is clear that it will not be possible
to cover them in great depth. Rather, my aim is to introduce the key concepts within each field and the major epistemological and hermeneutic issues that influence their production:

**Gender**

We live in the constant context of a gendered environment. As Betz & Fitzgerald (1993, p.360) observe, human beings cannot escape the ‘gendered nature of experience’. Indeed, the literature on gender is wide and varied, spanning as it does issues of identity politics and philosophy as well as experimental and theoretical psychology and psychotherapy.

**Sexuality**

Similarly, the discursive field of sex and sexuality could warrant a literature review of its own, both in its genealogy, the power structures that produce normative discourses, and how these discourses have changed over time. It is clear also that discourses of gender and sexuality are permeable and their many links make it hard to consider the literature on each in complete isolation. It is also important to explore the historic relationship of the ‘psy’ disciplines to both of these areas and their influence over the production of complex and ‘dirty’ (Hegarty, 2007) regimes of truth.

**Professional role**

The role of the therapist as a kind of professional in the field of human caring is a relatively recent phenomenon and carries with it a number of implicit assumptions about the ‘good’ of professionalisation and the role of the expert. Moreover, it is not possible to speak of the psychological therapies today, no matter one’s theoretical orientation, without speaking of importance of ‘the relationship’ to therapeutic outcome. The mere idea of ‘outcomes’ in the therapy field has led to a broadening of
the professionalisation of the caring professions and a land-grab between competing ideologies as to who ‘owns’ the relationship (House, 2010). The third part of the literature review briefly considers these important dynamics before bringing all three strands together to consider how these discursive fields might intersect in the production of the notional idea of the subject, the ‘gay male therapist’.

Although this literature review focuses on ‘the discursive’ I am aware that Foucault has often been criticised for focusing too heavily on how external discursive fields are productive of subjectivity, almost as if he denies any agency for the subject or the existence of an ‘extra-discursive’ reality. This tension is explored in the Foucauldian analysis described in Chapter Four where it is argued that Foucault did indeed allow for the extra-discursive in his notion of resistance to power relations. In other words, although the subject is, in a very real sense, created in discourse, the relational nature of power, exercised as it is between subjects, allows for resistance and reframing in the intersubjective space. As McWhorter (2003) has identified, Foucault has not been specifically against the extra-discursive, merely dismissive of the existence of a prediscursive or ahistorical subject that somehow exists outside discourse. It is a position that, through its focus on the discursive, actually privileges the relational; as Yates et al. (2010, p.57) point out, ‘... the idea of a subject which has intentional experiences... encapsulated within itself is an absurdity which misconstrues the basic ontological structure of the being that we ourselves are.’

In the context of this discursive environment, I am interested in exploring the ways in which gay male therapists make sense of their therapeutic relationships with their male clients. There is relatively little available literature on this question since most of the research appears to be concerned with considering how therapists – whose sexuality is broadly unquestioned, but assumed to be heterosexual – might work with a particular population for
whom homosexuality is a problem. It is intended that this research change the gaze from a focus on the problem ‘out there’ amongst the client population and instead look ‘in here’ at the particular subjectivity of the gay male therapist.

2.2 Discourses of gender

The focus of this review of the literature on gender and masculinity is heavily informed by feminism and postmodernism and attempts to trouble a determinist-realistic account of gender. Given that most of what follows challenges accepted notions of gender it is perhaps important to start with a realist caveat. Although a postmodern critique of gender does much to question our assumptions about gender identity, it is important to recognise that the vast majority of the population – including those that engage with post structuralist debate – act in the world as if gender were essential. For most of us counselling psychologists that practice outside of specialist gender clinics, our clients will come to us and exist in the world as if their biological sex were synonymous with their gender. This research, and the review of the literature that precedes it, is not intended to suggest that there is no such thing as gender. Instead, troubling the essential nature of gender identity is intended to cast a light on how embedded we are in our assumptions about ourselves and others and to encourage us as practitioners to question how these may be unconsciously affecting the relationships we form with our clients every day.
A postmodern feminist critique

Judith Butler revolutionised the philosophy of gender with the publication of her book ‘Gender Trouble’ in 1990. In it, she draws upon the work of Lacan, Foucault, Irigaray, Wittig, Kristeva and others to advance an argument for the relationships between sex, sexuality, gender and the body and poses the question: ‘What best way to trouble the gender categories that support gender hierarchy and compulsory heterosexuality?’ (Butler, 2006, p.xxx).

One of the most well known aspects of her thesis is the idea that gender is not a noun but is instead a speech act, a performance that takes places within a regulatory frame that has an appeal to normativity by virtue of its own self-legitimization through an historical/genealogical narrative: ‘In this sense gender is always a doing, though not a doing by a subject who might be said to pre-exist the deed’ (Butler, 2006, 34). It is these aspects of power and genealogy that she seeks to deconstruct by ‘troubling’ or questioning our taken for granted assumptions as to the ‘truths’ of gender, sex, sexuality and the body, ‘in particular, I opposed those regimes of truth that stipulated that certain kinds of gendered expressions were found to be false or derivative, and others, true and original’ (Butler, 2006, p.viii).

Butler takes on the idea of binaries in gender discourses – opposing constructs such as male versus female, masculine versus feminine and biological/natural versus socially constructed through culture. She argues that language itself is not somehow pre-discursively outside gender but is instead situated within it. Irigaray (1981) goes further in arguing that language itself is not only gendered but, particularly in the case of the modernist language of science and rationality, clearly masculine.
Moreover, gender is itself not outside other cultural intersections such as ‘class, race, ethnicity, and other axes of power relations that both constitute “identity” and make the singular notion of identity a misnomer’ (Butler, 2006, p.6). This critique therefore calls into question the whole notion of essential gender – in other words, the idea of man or of woman or masculine and feminine existing separately from the social cultural and political discursive fields that they inhabit.

*Challenging a pre-discursive account of gender*

Like Foucault (1998), Butler questions the basis of our understanding of gender by first troubling notions of power and knowledge. She suggests that juridical power creates the subjects that it seeks to regulate and represent whilst at the same time concealing that productive act in order to legitimise its own right to rule. As such, juridical power produces the idea of a pre-discursive subject who exists independently of the power structures that have, in fact, spoken it into being.

Butler (2006) challenges the notion of ‘a non-historical “before” ...[with] persons who freely consent to be governed and, thereby, constitute the legitimacy of the social contract’ (p.4). In doing so she calls into question the notion that discourses of sex and gender have recourse to a ‘prior-to-culture’ truth, a natural basis that is ‘God-given’ and that cannot be questioned.

*Sex and gender*

In exploring gender, Butler uncovers discourses that have sought to split the ‘natural’, biological ‘fact’ of sex from gender, which is understood as socially constructed through...
culture. She questions whether ‘the ostensibly natural facts of sex [are not also] discursively produced by various scientific discourses in the service of other political and social interests’ (Butler, 2006, p.9):

... there is no recourse to a body that has not already been interpreted by cultural meanings; hence, sex could not qualify as a prediscursive anatomical facticity. Indeed, sex, by definition, will be shown to have been gender all along. (Butler, 2006, pp.10-11)

Anne Fausto-Sterling cites sexologists in the 1950s as being responsible for the split between gender (mind) and sex (body), re-invented by feminists in the 1970s. She also questions discrete concepts of genders and sexes versus a more continuous classification system. She argues that feedback constantly changes the brain and the body, and, along similar lines to Butler’s prediscursive argument, suggests that ‘we have to stop thinking of the body as something prior... that is unchanging and that becomes the base on which some sort of cultural framework is built... not only do [bodies] generate behaviors, but they in turn are generated by behaviors’ (Fausto-Sterling, 1999, p.56).

As identified earlier in this review, this position is not to suggest that gender is not ‘real’ for those that live it. Instead it asserts that that subjective reality is constantly being negotiated and constructed in relationship. It is a position that recognises Foucault’s contribution to our understanding of subjectivity as constructed in power relations as well as one that privileges the intersubjective as the space where gender identity, and all other subjectivities, are constantly being negotiated.
Sex, gender and desire

As we will see when exploring discourses of sexuality later in this literature review, there is also a reciprocal relationship between gender, sex and desire in terms of creating what Butler (2006, p.23) terms ‘intelligible persons’. She argues that the gender binary is tightly bound to the notion of heterosexuality where ‘normality’ is demonstrated by desire for a complementary opposite.

Drawing on the work of Wittig (1980) she questions the link between the discursive production of biological sex as the natural basis for heterosexual desire suggesting that, in fact, binary gender and sex and compulsory heterosexuality are mutually productive. To accept the ‘truth’ of the binary nature of gender is also to accept the ‘truth’ of the naturalness of heterosexuality. She suggests that we are so embedded in these discursive structures that to deny them can seem nonsensical.

Moreover, Butler (2006) suggests that the basis of the ‘heterosexualisation of desire’ (p.24) is in the incest taboo. Drawing on the work of Lacan and Irigary (b. 1930) she suggests that ‘the masculine “subject” is a fictive construction produced by the law that prohibits incest’ (Butler, 2006, p.38) between children and the parent of the opposite sex. For Butler it is the masculine edict against incest ‘in the name of the Father’ that ensures that ‘both masculine and feminine positions are thus instituted through prohibitive laws that produce culturally intelligible genders’ (Butler, 2006, p.38).

If there is no recourse to a prediscursive truth about gender, sex and desire, then how is it possible for the human subject to escape the discourses to which they are subject? Butler is hopeful here that troubling, questioning and refusing to take for granted apparently settled ‘truths’ offers a solution. Taking a Derridian deconstructive approach to what appears
essential – sex, gender and desire – ‘holds out the possibility of a disruption of their univocal posturing’ (Butler, 2006, p.44).

Discourses of masculinity

In the context of this question, there are two pervasive discourses that influence the way that men understand and perform their gender, the first of which has been very powerful in defining normative gender identity for men in Western (and, in particular, English speaking) culture over the last two centuries.

Hegemonic masculinity (Connell, 2005) is a culturally rich discourse that suggests that following certain norms will help a man to meet ‘societal expectations for what constitutes masculinity in... public or private life’ (Mahalik et al., 2003b, p.3). Tharinger (2008, p.224) defines it as ‘an idealised form of masculinity by which boys and men can be measured by themselves and by others, to determine the extent of their ’manliness [and is] signified... by the extent to which they can demonstrate power over women and other men’. There are a number of constructs of hegemonic masculinity in the literature, but that developed by Mahalik et al. (2003b) suggests that there are twelve norms: winning, emotional control, risk-taking, violence, dominance, playboy, self-reliance, primacy of work, power over women, disdain for homosexuals, physical toughness and pursuit of status.

Encoded within these norms is an implication that ‘real men’ avoid self-care and avoid seeking help, a phenomenon that has been extensively explored in the literature (Andrews et al., 2001; Courtenay, 2001; Shepherd & Rickard, 2011; Vogel et al., 2011). As Bunton & Crawshaw (2002, p.192) suggest, ‘a key element of hegemonic masculinities is a direct
rejection of bodily maintenance and self-care in order to assert masculinity. To ‘be’ or act like a man is to show lack of concern for care of the self…”

Particularly important for this research is the normative assumption that emotionality itself is binary-gendered along heteronormative lines. As Moon (2008, p.40) asserts ‘...heterosexuality, taken as the bedrock of social and sexual relations, is used to structure and organise the knowledge or understanding of an individual even at the level of emotion, and regardless of the sexuality of that person.’ In this architecture of feelings, not only are men are expected to control emotions as part of the hegemonic masculinity discourses of self-reliance and physical toughness but also, to the extent that feelings are expressed, they too should be gender normative.

The literature would suggest that ‘women generally report more sadness, fear, shame and guilt, whereas men report experiencing and expressing more anger and other hostile emotions’ (Fischer et al., 2004, p.87). Indeed as Cohn et al. (2009) suggest, men can often use anger as a form of emotional regulation, releasing it precisely because it is the only permissible emotion under the policing of hegemonic masculinity.

As identified earlier in the exploration of Butler’s thesis, gender does not exist in isolation from sex and desire. Masculine gender performance in Western culture is therefore also strongly influenced by the discourse of heteronormativity. This is ‘an ideology which presumes the normality and superiority of heterosexuality and which requires any other form of sexual expression to be explained, justified or defended against’ (Beattie & Evans, 2011, p.10).
Already encoded into the hegemonic masculinity discourse through ‘disdain for homosexuals’ (Mahalik et al., 2003b, p.6), heteronormativity is a discourse that produces an ‘unspoken identity... from which deviation is abnormal’ (Weber, 2008, p.44). Corbett (1993, p.352) suggests that ‘the only ‘honourable’ male sexual behaviour consists in being active, in dominating, in penetrating and in thereby exercising one’s authority’. This is a discourse that regulates all men, whether gay or straight and is arguably the source of anti-effeminacy discourse in gay male culture (Taywaditep, 2001). Therefore, ‘from the perspective of gender, homoerotic desire is transgressive. Desire between men is haunted by hegemonic masculinity and the gender relations that govern it. Male same-sex desire is fraught with this dilemma: how do I desire another man without diminishing my sense of myself as male?’ (Frommer, 2002, p.681).

Hegemonic and heteronormative masculinity discourses are inter-related and it is not a simple matter to keep an exploration of the literature on gender and sexuality separate from one another since both concepts require one another’s existence as reference points and discourses of both are permeable. Heteronormativity is part of the discourse of masculinity just as a binary notion of gender is at the heart of a discourse that privileges the ‘normality’ of heterosexuality.

*Gender binaries need for one another*

As Mahalik et al. (2003b) and others have suggested, masculinity is often defined in opposition to femininity – to be authentically male one must not be in any way feminine. This ‘boy code’ (Frosh, Phoenix & Pattman, 2002) informs the way young boys grow up and to fail to live up to it is to be cast to the other end of the binary in what Corbett (1999, p.108) calls ‘girlyboyhood’. Straight acting gay boys who can ‘pass’ therefore have access to
orthodox masculine subject positions that are denied effeminate straight boys. The issue at hand, therefore, is not sexual orientation but rather apparent effeminacy in gender performance, irrespective of sexuality.

Tharinger (2008, p.225) refers to this naming and shaming discourse as ‘a kind of “gender police” to ensure that not too many boys challenge the existing gender order [and] that both heterosexual and homosexual boys who do not conform to the requirements of hegemonic masculinity always have the potential to be subordinated within the social organisation of masculinity’.

Corbett (1993, p.346) suggests that the homosexual male is often constructed as equivalent to the heterosexual female since both are seen as having a ‘passive mode of sexual satisfaction’ and that ‘male homosexuals are thereby removed from the realm of masculinity and recast as counterfeit women’. There is almost a ‘cast out of heaven’ quality as punishment for betraying the masculine gender, something that he suggests has its roots in early psychoanalytic literature. Freud, in describing Leonardo da Vinci’s homosexuality, lays the blame at his mother’s door, ‘... like all unsatisfied mothers, she took her little son in place of her husband, and by the too early maturing of his erotism robbed him of a part of his masculinity’ (Freud, 1910, p.117).

This conflation of ‘eroticism’ with ‘masculinity’ seals the normative construction of a teleological relationship between sex, desire and gender. According to Freud, therefore, not only did his mother rob of him of ‘part of his masculinity’, she left him ‘to play the part of the woman in sexual relations’ (Freud, 1910, p.86 – my own italics).
Interestingly, while the literature on masculinity would suggest that hegemonic masculine discourses ‘need’ the feminine in order to define the masculine, the same would appear to be true in discourses of femininity, particularly those affected by contemporary feminist thought. Butler (2006, p.13) suggests that ‘the universal person and the masculine gender are conflated’ while Irigaray argues that the feminine is always created in contrast to the ‘dominant phallic economy’ (Loewenthal & Snell, 2003, p.131). Drawing on the work of Lacan, she suggests that language is ‘phallogocentric’ and exclusionary, aiming always to exclude the ‘unconstrainable and undesignatable’ (Butler, 2006, p.13) feminine ‘other’. For Irigaray, the binary nature of gender where each constantly has recourse to the other is ‘a masculinist ruse that excludes the feminine altogether’ (Butler, 2006, p.36).

**Masculine gender role stress**

The pressure to conform to these dominant discourses is acknowledged to be stressful for men, a factor that has perhaps contributed to a growing diversity in masculinity discourses in the West in recent years. O’Neil (1981) was among the first to explore the idea that men are conflicted about following masculine norms when pursuit of these norms provides external validation at the cost of betrayal of internally experienced transgressive feelings and desires. So-called Masculine Gender Role Conflict (O’Neil, 1981; O’Neil et al., 1986; O’Neil, 2008) has been linked to depression, anxiety, health-risk, low self-esteem and problems with intimacy (Betz et al., 1993).

**Masculinity or masculinities**

Although discourses of hegemonic masculinity and heteronormativity still circulate widely in Western culture, in particular in schools and male dominated or all male environments like
the prison and the army, there is some evidence from recent research that this ‘macho-man’ stereotype is being eroded by other ways of performing masculine gender identities. As Evans (2010, p.230) points out: ‘Men are not tied exclusively to one spectrum position. Most will express aspects of different positions depending on context, company and age’. Moving away from an idea of fixity and essentialism allows us to understand gender performativity as something fluid and contingent.

Anderson (2012) too has suggested that dominant forms of masculinity are being challenged in contemporary Western culture. His research has looked at the attitudes of white, college educated young men in the United Kingdom and America and has found that so called ‘orthodox masculinity’ is on the retreat. He argues that orthodoxy is gradually being challenged and replaced by ‘inclusive masculinities’ which he describes as ‘an archetype of masculinity that undermines the principles of orthodox (read hegemonic) masculine values, yet one that is also esteemed among male peers’ (Anderson, 2012, p.93). Importantly, however, he points out that more inclusive ways of ‘doing male’ that are less homophobic or misogynist do not necessarily mean a reduction in heterosexism. He argues that heterosexism is a phenomenon independent of homophobia and that a decline in overt antagonism towards gay men need not necessarily mean that heterosexuality is no longer seen by straight men as the dominant and ‘natural’ orientation. It is simply that denigrating other forms of sexual orientation is no longer socially acceptable.
2.3 Discourses of sexuality

The argument goes that a male sexed body necessitates a masculine gender, which is assumed to be homogenously experienced and understood. A male sexed body also necessitates a desire that is heterosexual and oppositional within a binary system of maleness and femaleness, masculinity and femininity and the interplay of desire between the two opposites. What Butler terms ‘institutional heterosexuality’ has elsewhere been referred to as a discourse of ‘heteronormativity’ (Hegarty, 2007).

The entanglement of sex, gender and desire incorporates the normative idea of a binary sexed body and binary gender identity that expresses a desire for the complementary opposite. Conformity to this discourse creates a history – in the Foucauldian sense a ‘genealogy’ – which provides a self-legitimising narrative to which heteronormativity has reference. As Butler observes, ‘the story of origins is thus a strategic tale within a narrative that, by telling a single, authoritative account about an irrecoverable past, makes the constitution of the law appear as a historical inevitability’ (2006, p.48).

**Discursive production of heteronormativity**

A rich and complex knowledge discourse that has supported heteronormativity over time has been the legislative power of the state – though the ways in which states have managed the problem of homosexuality has varied considerably over time (Greenberg & Bystryn, 1982). Despite the de-criminalisation of consensual sexual acts between men in private in England in 1967 (and in Scotland in 1980 and Northern Ireland in 1982), under Section 28 of the Local Government Act, it remained illegal for a teacher to even speak of homosexuality
in the classroom as a ‘pretended family relationship’ in the United Kingdom from 1988 until its full repeal in 2003 (Nixon & Givens, 2007).

The legislative landscape in the United Kingdom, as in many Western countries, has changed in recent years with the repeal of Section 28 (DePalma & Atkinson, 2007; Allan et al., 2008) and the advent of equal rights legislation, including civil partnerships. However, such legislation remains controversial in the West with significant political and moral wrangling over ‘gay marriage’ in the UK and USA, for example, while other parts of the world, such as Iran, reserve the right to execute or surgically alter the gender of men who have sex with men.

The conflation of homosexuality with disease has a similarly long history (Macgillivray, 2008) with the medicalisation of sexual behaviour starting with Krafft-Ebing’s *Psychopathia Sexualis* (1886). White et al., (1999) consider how medical discourses of disease have acted as part of the modernist project which seeks to locate the problem of homosexuality within the individual rather than seeing the social context within which that sexuality is experienced and performed. They argue that this ‘decontextualises... sexuality, lends support to the dominant group, and obscures power dynamics and their consequences’ (White et al., 1999, p. 20).

Those from the ‘psy’ disciplines have also contributed to medical discourses as ‘authorised knowers’, people vested with the power to produce ‘privileged knowledges through which... individual subjects are constituted’ (Saltmarsh, 2007, p. 342). They have contributed to and participated in what Friedman (2002, p.70) terms ‘a continually reverberating negative cycle of negative assumptions about gay/lesbian people’, supporting the discourse of ‘homosexuality-as-disease’ that dominated modernity to the end of the 20th century. Indeed the American Psychiatric Association only declassified homosexuality as a mental illness in
the Diagnostic and Statistical Manual of Mental Disorders in 1973 with the World Health
Organisation, in their International Classification of Diseases, following suit in 1991. Bartlett,
Smith & King (2009) explore the mental health profession’s response to the phenomenon of
homosexuality and suggest that it remains a contentious area – with recent ethical
discussions in the British Association of Counselling and Psychotherapy over so-called
‘conversion therapy’ still hitting the discipline’s headlines in 2012.

Elsewhere the British Psychological Society has recently issued its own guidelines for working
with sexual and gender minority clients and affirmed that “sexual and gender minority
identities and practices are not in themselves indicative of a mental disorder” (British
Psychological Society [BPS], 2012, p.6). As part of this affirmation they explore the
phenomenon of reparative or conversion therapies and explicitly state that to do so “is
fundamentally counter to an ethical or human rights approach to therapy” (BPS, 2012, p.71):

Attempting to change a client’s gender or sexual identities as the goal of
treatment because of the therapist’s religious, personal, or political beliefs
contravenes international professional guidelines and can be damaging to the
client. In the opinion of the authors any Psychologist taking this approach
would be adopting unethical and discriminatory professional practice
unsupported by the body of professional opinion in the field of sexuality and
gender. (BPS, 2012, p.11)

One aspect of heteronormativity is that homosexuality is always positioned as ‘the effect to
be explained’ (Hegarty, 2008). Jack Drescher (2002) explores the ‘Causes and Becauses’ of
homosexuality and finds much of our discipline’s prejudice against non-heterosexuality in
the writings of Freud:
....perverse forms of intercourse... cannot, however, be regarded as harmless... they are ethically objectionable, for they degrade the relationships of love between two human beings from a serious matter to a convenient game, attended by no risk and no spiritual participation. (Freud, 1908, p.200)

Drescher cites the writings of Joseph Wortis, who was in analysis with Freud, and discovers that although Freud acknowledged the ubiquity of the impulse towards homosexuality, he argued it should be sublimated for the benefit of social order:

Normal people have a certain homosexual component and a very strong heterosexual component. The homosexual component should be sublimated as it now is in society... your attitude reminds me of a child who just discovered everybody defecates and who then demands that everybody ought to defecate in public. (Wortis, 1954, pp.99-100)

**Narratives of immaturity**

Drescher uncovers three ‘narratives of homosexuality’ within the psychoanalytic tradition whose effects are still experienced today: narratives of immaturity, narratives of pathology and narratives of normal variance. The classic ‘narratives of immaturity’ see homosexuality as a kind of developmental arrest where young boys fail to negotiate the Oedipal complex and get stuck in the anal/oral phases. In a Foucauldian sense we can see something of the genealogy of this discourse in the ‘biology is destiny’ argument where ‘masculine protest’ against passivity forms the ‘bedrock’ of masculinity (Freud, 1937, p.252). The link between the incest taboo (explored earlier by Butler) and heterosexuality is made once again by Corbett (1993, p.350):

Beginning with Freud, analysts have maintained that it is through identification with the same-sex parent that gender activity and sexuality evolve. The boy identifies with his father’s phallic activity and thereby begins
his struggle to represent the phallus. Activity must be maintained and passivity repudiated. In particular, passive desire for another man is to be denied... The telos of masculine development is succession to the role of the father: the apogee of masculine biology is reproduction. Masculinity rests on the boy’s reproduction of heterosexual fathering. (Corbett, 1993, p.350)

Although there is some suggestion that Freud had a ‘relatively benign acceptance of homosexuality as a condition that could be tolerated and adjusted to’ (BPS, 2012, p.18), like many of his contemporaries, Freud appears to have been disgusted by the various forms of gay male sexual behaviour, which were ‘unintelligible’ (Butler, 2006) to him.

Narratives of pathology

Developing Freud’s ‘biology is destiny’ stance, a key figure in the psychoanalytic ‘narratives of pathology’ was Sandor Rado who argued that homosexuals try to imitate the heterosexual, ‘how else can the crucial fact be explained that in male pairs one male impersonates a female and in female pairs one female impersonates a male?’ (Rado, 1969, p.211)

Rado’s arguments were highly influential in the 1960’s with Bieber et al. (1962) contesting that ‘heterosexuality is the biologic norm and that, unless interfered with, all individuals are heterosexual’ (p.319). Bieber and his group carried on the Freudian immaturity narrative and buttressed the relationship between hegemonic masculinity and heterosexuality by asserting that dominant women create homosexual children and that the ‘best interparental relationships were those where ‘father dominates but does not minimize mother’ (p.158).

As Butler identifies, ‘the binary regulation of sexuality supresses the subversive multiplicity of a sexuality that disrupts heterosexual, reproductive, and medicojuridical hegemonies’
(Butler, 2006, p.26). This is part of what Corbett (1993, p.347) calls the ‘active-passive’ binary which sits alongside the sex and gender binaries and which finds its root in the ‘dominant phallic economy’. Both narratives of immaturity and pathology suggest that there is something inherently wrong that needs to be healed in order to restore the person to the ‘natural’ setting of heterosexuality. The movement away from these to narratives of normal variants was therefore highly significant.

Narratives of normal variants

The ‘narratives of normal variants’ was originally advanced by Richard Isay, one of the first openly gay members of the American psychoanalytic community. He built on the Kinseyan scale (Kinsey et al., 1948) to argue for a continuum understanding of human sexuality where homosexuality is no more unusual than left-handedness. For him it was the treatment that homosexuals received from a heteronormative society that was the problem: ‘homosexuality was innate and the developmental pathways of gay men were influenced not by psychopathology but rather, defensive and prejudicial treatments by the heterosexual majority, including their own fathers’ (Friedman, 2002, p.73).

Isay and his group were influential in changing the American Psychiatric Association’s ‘narrative of pathology’ about homosexuality to the extent that it has become the discourse widely adopted by the medical and ‘psy’ professions in Western economies, influencing all areas of public policy with respect to the treatment of sexual and gender minority individuals.

Finally, it is interesting in the context of this research that the other principal paradigms in the psychological therapies – the person centred, existential and cognitive-behavioural traditions – have relatively little to say about sexuality (or indeed gender). Indeed, a scan of
the indices of three of Carl Rogers’ principal books (Client Centered Therapy, A Way of Being and On Becoming a Person) show not a single reference in any of the books to ‘sex’ or ‘sexuality’. The reasons why this is may be the subject for another research project, but it is interesting to conjecture that perhaps it is because the psychoanalytic tradition was so concerned with sex that later traditions reacted against what they saw as an unhealthy obsession with the sexual.

*The influence of religion*

Medico-juridical discourses have historically been influenced in the West by Judeo-Christian religious discourses and ethics. An appeal to a ‘natural’ order, ordained by God and revealed in the written word of the Bible has influenced Western thought for millennia with the psy-disciplines readily taking up where good and evil left off with normal and abnormal categories of human subjects. ‘To choose someone of the same sex for one's sexual activity is to annul the rich symbolism and meaning, not to mention the goals, of the Creator's sexual design’ (Congregation for the Doctrine of the Faith, 1986, p.7)

Greenberg et al. (1982) take a long view and suggest that ‘the treatment of homosexuality in Christian Europe over the last two millennia has been extremely variable’ (p. 516). They argue that homonegativity has not always been a given for the Church but has instead prevailed at times of threat when social cohesion is seen as paramount and virtue is ascribed to overcoming temptations of the flesh. The dualist split between a virtuous ‘will’ (in an Enlightenment sense ‘rationality’) over an evil ‘flesh’ is as old as Adam and Eve itself and allows the Christian church to split orientation from desire.
**Effects of heteronormative discourses**

We have already seen, above, how pressure to conform to normative ideas of gender can be stressful for men. Gay men, like all men, are subject to the prevailing masculinity discourses and are likely to experience some masculine gender role stress as a result. In addition, their sexual subjectivity is likely to generate a level of minority stress. Meyer (1995) developed the Minority Stress Model to explain and predict minority stress and asserted that ‘gay people, like members of other minority groups, are subjected to chronic stress related to this stigmatisation’ (p.38). Lewis et al. (2003) considered the particular subjectivity of the homosexual person and posited a model of Gay Related Stress that is ‘defined as a state resulting from culturally sanctioned, categorically ascribed inferior status, social prejudice and discrimination, the impact of these environmental forces on psychological well-being and consequent re-adjustment or adaption’ (p.717).

They further suggest that the stress experienced is ‘unique from other minority stress in that... unlike members of other minorities (e.g. ethnic minorities) gay men and lesbians may easily veil their minority status’ (Lewis et al., 2003, p.717). This self-silencing is a key characteristic that can continue to be played out in society as a whole and in the particular space of therapy. Indeed, even those spaces dedicated to the study of psychology and psychological therapies can themselves be places where heteronormativity is bolstered and difference is silenced (Hodges & Pearson, 2008).

Shame and avoidance are widely acknowledged as being a common characteristic of the gay male experience, as Pachankis, Goldfried & Ramrattan (2008) suggest, ‘children and adults who perceive parental disapproval especially of their selves as opposed to their behaviour are more likely to develop views of themselves as bad, shameful or unlovable’ (p.307). Their research on the attachment styles of gay men argues that ‘gay men are particularly likely to
fear interpersonal rejection’ (Pachankis et al., 2008, p.306) because their own experience of parental attachment will have been compromised by the disconnect between their own and their parents’ sexual subjectivities.

In the process of taking up a subject position, Foucault argued that the person internalises some elements of the disciplinary system produced by the dominant discourse (Danaher, Schirato & Webb, 2002). For all men, this can involve internalising some, or all, normative masculinity discourses from their culture, particularly in their adolescence (Frosh et al., 2002). In the case of homosexuality, the homosexual subject is likely therefore to begin to internalise the homophobia to which he is subject. This internalised homophobia can then act as a kind of personal policeman, ensuring that he constantly monitors his behaviour to ensure that he continues to conform to what mainstream society believes to be appropriate behaviour for a man.

The effects of internalised homophobia have been extensively examined in the literature. It has been linked to higher risk of depression, substance abuse and suicide (Dew & Newton, 2005; Weber, 2008) restrictive emotionality and lower psychological wellbeing (Ervin, 2005; Rosser et al., 2008), drug use and risky sexual behaviour (Dew & Chaney, 2005; Shoptaw et al., 2009), alcohol abuse (Amadio, 2006) and overall poorer health (Hamilton & Mahalik, 2009).

Gender role stress, stigma, shame and internalised homophobia can all form part of the gay male subjectivity and it is not surprising, therefore, that research indicates that ‘two to four times as many gay as non gay people seek counselling’ (Betz et al., 1993, p.370). With its emphasis on intimacy and relationality (Clarkson, 2003), therapy can present particular challenges since it is a space where ‘the expression of emotions are experienced by men as highly stressful’ (Betz et al., 1993, p.358). Moreover, ‘since many men defend against
feelings of vulnerability, loss and yearnings for love, tenderness and loving feelings’ (Sherman, 2002, p.652), an all male dyad may be experienced by both participants as particularly challenging.

Moradi et al. (2009), whilst acknowledging the stress of stigmatisation, argue the successful management of such social stigma can in fact build up resilience in sexual minority subjects. Citing research by Brown (1989), Friend (1990) and Morrow (2001) they suggest that ‘valuable information can be garnered about human resilience and strength by studying how sexual minority individuals maintain their health and well-being in a context of pervasive social stigma’ (Moradi et al., 2009, p.9). They argue that a prevailing sense of ‘otherness’ amongst LGBT people ‘may foster freedom from conventional ways of seeing the world and cultivate abilities to challenge conventional assumptions’ (Moradi et al., 2009, p. 9). Vogel et al. (2011) argue for something similar when they suggest that ‘the development of reliance and independence… may allow gay men more freedom in how they interface with certain masculine norms’ (p.377) and therefore offer them more flexibility in their conformity with normative expectations. It is what Corbett (1993, p.350) has termed ‘a differently structured masculinity’.

Despite recent research (e.g. Anderson, 2012 and Evans, 2010) suggesting that hegemonic masculinity, although a recognisable stereotype, is becoming less prized as the normative form of masculine gender performance, it would seem that homosexual stigma remains widespread. Public shock over a highly publicised spate of suicides by gay teenagers in the United States (Cassels, 2010) in September 2010 led to the founding of the ‘It Gets Better’ project (www.itgetsbetter.com), launched by Stonewall in the UK with the support of leading figures in politics, sport and entertainment. At the same time, the recent Equality and Human Rights Commission Triennial review (EHRC, 2010) found that rates of homophobia in
the UK are broadly unchanged since the 1990s and that two-thirds of lesbian, gay and transgender students in the UK had suffered homophobic bullying, with 17% receiving death threats.

In contrast, McCormack (2012) has recently published research undertaken with UK schoolboys, which suggests that homophobic attitudes, widely reported in the literature, are changing and that more open and accepting attitudes of sexual and gender variance may be beginning to be seen amongst male heterosexual youth in Britain:

... a seismic shift [...] has occurred in attitudes toward homosexuality within the informal school cultures at the three sites. I find that heterosexual boys intellectualize and espouse pro-gay attitudes. This is supported by the experiences of openly gay students, as well as by the absence of homophobic language. (p.71)

Although encouraging, it is a small study undertaken in three schools in the south of England and it may not accurately reflect the school experiences of all gay youth in the United Kingdom today. Nevertheless, this data, along with that of Anderson (2012) is indicative of the beginnings of a shift in some segments of youth culture away from the ‘homohysteria’ of the late 20th century and it will be interesting to see how this discourse unfolds and affects those subject to it in the coming years.
2.4 Discourses of therapy and the therapist

*Situating the question within the field of counselling psychology*

Discourses and constructions of therapy and the therapist have changed over time and it is not possible here, given the wide and varied literature in this area, to cover this in any great depth. However, it is important for me to situate myself within counselling psychology in exploring this discursive field:

One perspective that was present at the birth of British counselling psychology and remains a core philosophical, academic, ethical and therapeutic priority for counselling psychology is the understanding of people as ‘relational beings’. While collaborating with people and contexts that draw on a range of perspectives, including the traditional views of people as independent entities, counselling psychology has always recognised that relational perspectives have an enormous contribution to make to understanding people and working towards greater wellbeing. This focus is obvious in terms of relationships between therapist and client, within families and between intimate partners; but it is one that extends to understanding the relationships people have with themselves in terms of identity, self-esteem and the like, and in terms of our wider cultural and socio-political wellbeing. (Milton, 2010, p.xxiv)

Milton’s ‘relational’ definition helps to balance and situate the postmodern underpinnings of this research project. The discipline privileges the relational in the creation of the self as well as in seeing the relationship between therapist and client as a critical factor in bringing about change and healing.

Although I am committed to questioning our taken for granted assumptions about what constitutes gender and sexual identities and to analysing the ways in which dominant discourses are reproduced or resisted, I do not lose sight of why I am engaged in the
research. I do it because I am interested in ‘the relational’ – encompassing, as Milton suggests, intrapsychic, interpersonal and wider socio-political relatedness. This focus on the primacy of human relationships would seem particularly relevant here in my exploration of gender and sexuality but also in the field of therapy itself where professionalism and the gaze of the expert can often act to create a therapist-client binary that obscures the ‘human meeting’ aspect of the work.

The literature on this aspect of counselling psychology practice is considerable and impossible to cover comprehensively here. However, there is significant literature on the relationship and outcomes (e.g.: Luborsky et al, 1975; Norcross, 2002; Norcross, Hedges & Castle, 2002; Norcross, 2011; Wampold, 2001) on different aspects of the relationship in therapy (e.g.: Clarkson, 2003), the importance of ‘the relational’ philosophically (e.g.: Buber, 1970; Crossley, 1996; Frie, 2003; Mitchell, 2003; Sampson, 2008), neuropsychologically (e.g.: Gerhardt, 2004; Schore, 2003a, 2003b) and in each of the principle therapeutic modalities (e.g.: Casement, 2010; Gilbert & Leahy, 2011; Kahn, 1991; Mearns & Cooper, 2005; Rogers, 2003; Safran & Muran, 2003; Yalom, 1980).

A secondary emphasis of the discipline is that it engages with multiple perspectives on meaning-making. In my training I have been encouraged to be wary of any theoretical position that appears to offer a complete solution to understanding either myself or another. As McAteer (2010, p.5) points out, ‘there is no overarching truth to elucidate everything [since] such certainty would inevitably leave some things unexplained, while excluding other legitimate explanations in the process.’ I am further aware that the postmodern position of multiplicity of truths is itself a position and that I should also resist the temptation to find the certainty of an absolute truth in its philosophy.
This emphasis on multiple meanings that come from an intersection of subjectivities in relationship further privileges *praxis* over *techne* (Berger, 2002) and means that psychological distress cannot be understood simply as the problem of a rational bounded self but only a self within relationship (Cushman, 1990, 1995; Gergen, 1985, 1991). In fact to speak of therapy and the therapist, counselling and the counsellor or psychologist and client is to always be speaking of the relationship since paradigmatically and across modalities, therapy always takes place *in relationship*.

*The self-system*

The idea that the self is created, understood and modified in social relationships was one developed by the so-called ‘Chicago School of Thought’, including the work of the social psychologists Charles Cooley (1937, 1964, 1966) and George Herbert Mead (1934, 1952, 1956). Harry Stack Sullivan, who drew on Cooley and Mead in creating his Interpersonal Theory, introduced these ideas into the developing psychoanalytic field. The notion that our identities are formed in relationship has been seen by some as a reaction against the intrapsychic focus of Freud and a precursor to much of British Object Relations thinking as well as Erikson’s Psychosocial Theory and Kohut’s Self Psychology (see Barton Evans, 1996). As Sullivan (1940/1953, p.22) observed ‘... the self may be said to be made up of reflected appraisals of others’. He argued that the ‘self-system’ is a mechanism created to deal with what he called ‘tension of needs’ and ‘tension of anxiety’ set up in the early relationship between the child and caregiver. To grossly oversimplify his thesis in the interests of brevity, Sullivan argued that it is infant’s experience of the mother’s anxiety and the failure of her ability to offer tenderness in response to prohibited behaviour that causes extreme distress that goes beyond ‘bad me’ to ‘not me’. The ‘not me’ is an extreme form of disassociation that is an attempt by the self to avoid the paralysing tension that comes with a failure to be
affirmed in relationship with the caregiver: ‘Sullivan commented throughout his writings that this level of tension is so severe that people will do practically anything they can rather than face a situation with the hint of it’ (Barton Evans, 1996, p.89).

For Sullivan, avoidance of the ‘bad me’ state is the principal goal of the self-system, an aspect of the self that produces protective illusions in order to avoid the crushing pain of social disapproval. Sullivan’s assertion that ‘personality is made manifest in interpersonal situations, and not otherwise’ (Sullivan, 1938, p.132) has a bearing on the aims of this research project in that we might see the subject positions adopted intrapsychically as themselves artefacts of previous ‘reflected appraisals of others’. It is a way of making sense of the connection between the disciplinary, socio-political and interpersonal environments and subsequent subject positions adopted. The fact that he was almost certainly homosexual himself and that he was writing about the importance of the interpersonal in the creation of the self as early as the late 1940s is extraordinary (see Blechnner, 2005 and Wake, 2011).

**Differing constructions of the person and role of therapist**

As we will see later in the thesis, research participants came from a variety of psychotherapeutic backgrounds and trainings with significant variances in their post-training experience from three decades to under five years. As such, they all come to the therapeutic encounter, and indeed the research experience, with differing views on what it means to be a therapist.

Indeed, of course, counselling psychology brings its own assumptions and values to the therapeutic encounter, including the belief that a pluralist approach to training is the most
helpful for practitioners and clients. Despite acknowledging that holding competing epistemologies together can be stressful for trainees (see, for example, Rizq, 2006), the discipline argues that pluralism aims ‘to elucidate, interpret and negotiate between perceptions and world views but not to assume the automatic superiority of any one way of experiencing, feeling, valuing and knowing’ (Division of Counselling Psychology [DoCP], 2008, pp.1-2).

The principal constructions of the therapist from an array of different modalities are the subject of numerous trainings, books, scholarly articles and much debate. All that can be attempted here is the very briefest of summary positions for each in order to throw them into contrast with one another - although, inevitably, much of the subtlety of each of their approaches will be lost in the process.

In work informed by psychoanalytic ideas the therapist is typically fairly abstinent in the relationship and her principle goal is to hold the frame and act as a neutral ground onto which clients may project and within which the transference may be fostered and analysed. Slavoj Žižek (2006) writes about ‘the subject supposed to know’, a construction of the therapist as someone who already knows the innermost secrets of his client. For Žižek, ‘this strange transposition of what I already know in my unconscious onto the figure of the analyst is at the core of the phenomenon of transference in the treatment’ (p.28). Yet there is paradox here too:

... the subject supposed to know... is the hysteric’s ultimate Other, the target of his or her constant provocations. What the hysteric expects from the subject supposed to know is to provide the solution that will resolve the hysterical deadlock, the final answer to ‘Who am I? What do I really want?’ This is the trap that the analyst has to avoid: although, in the course of the treatment, he occupies the place of the one who is supposed to know, his
entire strategy is to undermine this place and to make the patient aware that there is no guarantee for one's desire in the big Other. (Žižek, 2006, p.39)

Existential approaches, by contrast suggest that ‘therapy or counselling is a philosophical investigation... [and] the practitioner therefore functions as a mentor in the art of living...’ (Van Deurzen, 2002, p.25).

Perhaps one of the greatest influences on the way in which we understand the process of therapy has come from humanism and, in particular the work of Carl Rogers in his Client-Centred Therapy (Rogers, 2003). His focus on the need for the therapist to provide conditions in which therapy could take place has influenced and affected all therapeutic modalities since.

Even Cognitive Behavioural Therapy, which has been described by its detractors as ‘Darth Vader’s therapeutic arm’ (Lemma, 2003, p.6), privileges the empathy, positive regard and genuineness of its therapists. Nevertheless, the various schools of CBT are all distinctive for prioritising a collaborative and goal-oriented orientation for the therapist:

Cognitive and behavioural psychotherapists usually strive to shape the therapeutic relationship, from the very first session, according to the idea of collaborative empiricism. This is performed usually through the active search of an explicit agreement on goals and rules of therapeutic work. (Liotti, 2011, p.144)

The wounded healer is another therapeutic archetype that has existed throughout human history, exemplified in the Greek myth of Aesclepius and Chiron as well as in shamanic and eastern mysticism. Shamanic belief explores the idea that wounds to the self have their origin in society and that ‘the disease always carries its own cure and also the cure for your
whole personality’ (Kreinheder, 1980, p.15). This in itself is yet another paradox. I come to a therapist to be healed, but, in fact, it is I who cures me. I am my own medicine:

In the context of polarity, the concept of the wounded healer takes on a powerful meaning for the helping professions. Indeed, the paradox of one who heals and yet remains wounded lies at the heart of the mystery of healing. (Miller & DeWitt, 1999, p.245)

Barnett (2007, p.262) defines wounded healers as ‘those who have usefully explored their own motivations and gained sufficient insight to help others’ and suggests that a sense of woundedness is also considered to be part of what motivates people to enter the healing professions.

This brief review of some of the principal theories and models of understanding and performing the role of therapist suggests differing roles in the relationship. Participants are therefore assumed to have taken a position in relation to these paradigms (and many others not explored here) in the creation of their professional subject positions. There is likely to be a reciprocal relationship between all three domains explored in this review that affects and is affected by their on-going relationships with other men in therapy.

Counselling psychology and positivism

As observed earlier, although counselling psychology has a post structuralist, relational stance, it also engages with ‘traditional views of people as independent entities’ (Milton, 2010, p.xxiv). Part of that engagement means working with more positivist assumptions about counselling and therapy, including the notion of empirically supported treatments (ESTs) and empirically supported relationships (ESRs).
As the state has become more involved in the provision of therapy there has been a growing call to invest behind and offer only those forms of treatment that have a strong empirical basis that proves efficacy (Cohen, 2003). Those who support this move – such as Sue & Sue (2008) – argue for the ‘incorporation of scientific methodology into the here-and-now practice of psychotherapy’ (p.27) and suggest that applying a positivist framework to researching the therapeutic encounter can yield helpful results.

Comparative outcome research such as Cukrowicz et al., (2011) would suggest that a shift to ESTs delivers long-term improvements in patient outcomes. Moreover they argue that evidence suggests that ESTs deliver positive outcomes even when the practitioners implementing them have little or no experience of doing so. The president of the Canadian Psychological Society recently launched a task force on evidence-based practice (Dozois, 2013). He acknowledges the controversy over what constitutes evidence and the problems of operationalizing and manualising different forms of psychological interventions. Nevertheless, he argues that researchers need to become better communicators of science, do more effectiveness trials, more research on mechanisms of change and shift trainings towards evidence-based thinking (e.g. Babione, 2010). He suggests that practitioners need to do more to close the gap between research and practice by systematically measuring treatment progress and sharing clinical knowledge and experience with researchers.

The move towards ESTs and outcome research is clearly affecting counselling psychology more and more and it is incumbent on the field to engage with the tension and paradox between the competing epistemologies of pluralism and scientific realism.
A critique of ‘the expert’

The idea of ‘the subject supposed to know’ evokes the modern notion of ‘the expert’, the ‘authorised knowers’ (Saltmarsh, 2007) who are such a crucial part of late modernity (Giddens, 1991). The relentless march of professionalisation and an audit culture and its effects on the psy disciplines have been extensively critiqued by Richard House and others in the Independent Practitioners Network. He talks of the ‘human caring vocations’ and argues that the professionalisation of therapy is part of its commodification and a move towards making a technology of human caring:

... therapy as commodity – that is, as a positivistic utilitarian enterprise that is formulaically measurable, capturable and definable (without remainder) by sense-data and experience, able to be rationally planned and controllable: in other words a therapeutic technology that becomes a means for controlling and manipulating subjectivity, rather than one that is enabling of human and spiritual development’ (House, 2010, p.8)

This critique of ‘the expert’ is part of a broader poststructuralist discourse that seeks to deconstruct taken for granted assumptions – even assumptions that we, as therapists, somehow know what we’re doing. As Ian Parker suggests, ‘this century has seen a relentless psychologization of society and the proliferation of diagnoses of forms of unhappiness.’ (Parker, 1999, p.104) He argues that the mental health field itself is suffering from some kind of psychopathology, which House (2003) terms ‘Pervasive Labelling Disorder’.

The social constructionist critique calls into question the modernist notion of a self that is ‘construed as a naturally unique and discrete entity, the boundaries of the body enclosing, as if by definition, an inner life of the psyche in which are inscribed the experiences of an individual biography’ (Rose, 1996, p.103). By extension, then, the autonomous, bounded self becomes the site of psychopathology, responsibility for which rests with that individual.
In this context, the development of a professional gaze for psychology can be seen as a ‘technology of the self’, something that ‘permits individuals to effect by their own means or with the help of others a certain number of operations on their own bodies and souls, thoughts, conduct, and way of being, so as to transform themselves in order to attain a certain state of happiness, purity, wisdom, perfection, or immortality’ (Foucault, 1988, p.18).

It can be seen as something outside of the self that can instrumentally be applied, in an agreed form as a technology, to a human encounter in order to transform it.

The transformative effect of therapy is that it can produce a truth about the individual, ‘a process in which certain forms of thinking and acting come to appear to be solutions to the problems and decisions confronting actors in a variety of settings’ (Rose, 1996, p.110). Yet these truths are not arrived at without cost, ‘truth is always entronned by acts of violence. It entails a social process of exclusion in which arguments, evidence, theories and beliefs are thrust to the margins, not allowed to enter the true’ (Rose, 1996, p. 109). These dividing practices involve what Bourdieu would refer to as symbolic violence:

... the violence which is exercised upon a social agent with his or her complicity. In other words, agents are subjected to forms of violence (treated as inferior, denied resources, limited in their social mobility and aspirations), but they do not perceive it that way; rather, their situation seems to them to be the “natural order of things”...’ (Webb, Schirato & Danaher, 2002, p.25)

Clearly these arguments have relevance to how therapists continue to engage with, perform and reflect on their professional identities. The relatively recent creation of a counselling psychologist identity as a unique kind of member of the helping professions is one such example of practitioners engaging with these ideas and critiques in order to define their position.
2.5 Bringing it all together

The gay male therapist

As has been identified earlier in this review, it has been necessary for a while to essentialise aspects of the gay male therapist’s identity categories in order to explore the relevant literature. However, as we reach the end of this review it is equally important to bring these three strands together in the research question. Subjectivities are considered separately, but lived continuously. In the context of this discursive environment, I am interested to explore a particular relationship between gay male therapists and their male clients. Yet at the same time, in imagining ‘the gay male therapist’ I am aware that that is, in itself, a form of essentialising and that I must also beware of the pull towards assuming that there is such a thing as a gay male therapist, rather than many different gay male therapists.

Much has been written from the perspective of therapists and how they might manage the problematic aspects of relating to a homosexual client (e.g. Drescher et al., 2003). However, there is almost no literature available about homosexual therapists or indeed homosexual trainees experience of training in the psychological therapies. This focus ‘out there’ on diversity is reflected by Erica Burman (2008) in her review of a recent text on difference and diversity in counselling:

...interestingly, and not surprisingly perhaps – given the demographic profile of most counselling practitioners – the various differences and diversities addressed in this book are assumed to be attributes of clients rather than therapists. While understandable, this equation of difference with the client is, of course, not insignificant and would have merited comment with the text, especially as it renders the position of the black or working class or gay or elderly or disabled (or all or any combination of these!) therapist very marginal indeed. (pp.125-6)
Although the various psychological therapies aim to work towards ‘a self-reflexive practice which examines its own prejudices, ideology and will to power, which is aware of the ironies and contradictions in its own formation, and which is prepared to challenge them’ (Moodley, 2007, p.15) the lived reality can be somewhat different.

Sherman (2005) is one of the few to explore his own subjectivity as a gay male therapist:

... little has been written about the unique dilemmas homosexual clinicians face when seeing patients of different genders and sexual orientations... often left out is how our very humanness – our backgrounds, personalities, morals, and the personal meanings of our sexual orientation and gender – can confound, torment and even misguide us. (p.2)

One area he explores is the ‘excruciatingly controversial subject of self disclosure’ (Sherman, 2002, p.651). He talks candidly of his own struggles with erotic counter-transferential feelings: ‘as a gay man I can be particularly anxious and guilt ridden when the subject of my desire is a heterosexual man’ (Sherman, 2002, p. 653).

This is slowly changing. Drescher (2007, p.91) argues that ‘whereas once the homosexual other [was] solely an object of an ostensibly heterosexual conversation, gay and lesbian analysts [have] finally emerged as conversing subjects’. It is hoped that this research will add depth and texture to the existing body of literature exploring the therapeutic relationship from the perspective of gay male therapists.

The therapeutic community has been argued to be a more conservative and heteronormative in practice than some of its literature might suggest (Bartlett, Smith & King, 2009; Betz & Fitzgerald, 1993; Hegarty & Pratto, 2001; Hodges & Pearson, 2008; Robertson, 1997). Despite a recent move towards greater openness and transparency around sexuality
in Western society and the introduction of new equality legislation in the UK and across the EU, a gay male therapist subjectivity can still be problematic in the therapeutic dyad. For straight therapists – male or female – their sexual orientation is part of a widely sanctioned cultural assumption implicit in heteronormativity. Furthermore, the idea of a therapeutic dyad where both members are openly gay is a new one. As Frommer (2002, p.677) observes, ‘… in the history of psychoanalysis, analytic dyads in which both members openly identify as gay or lesbian are a relatively recent phenomenon and are often quietly regarded with a degree of scepticism, ambivalence or misunderstanding’.

Robertson (2004, p.163) writing on the 30th anniversary of the repeal of the APA’s classification of homosexuality as a mental illness says that the APA ‘has played a leadership role in the depathologization of homosexuality, which has led to the reassessment of sexual orientation in not only psychology but biology, law sociology, religion, and politics.’ This is arguably a fairly self-congratulatory statement to make given that the ‘psy’ disciplines had been complicit in producing the ‘truth’ of the disordered nature of homosexuality since Freud. She does, however, admit that ‘even today, there are many practitioners and researchers in the field who still see same-sex sexual relations as deviant or an illness requiring treatment’ (Robertson, 2004, p.163).

Indeed, the recent APA ‘Guidelines for psychological practice with lesbian, gay, and bisexual clients’ (American Psychological Association [APA], 2012) acknowledge ‘a revival of interest and activities on the part of political advocacy groups in attempting to re-pathologize homosexuality’ (p.11) and assert in their second guideline that ‘lesbian, gay, and bisexual orientations are not mental illnesses’ (p.13). The fact that this still needs to be asserted nearly forty years after homosexuality’s removal from the psychiatric nosology suggests
both that the field and Western society still have some way to go in accepting the discourse of normal variants for homosexuality.

*Therapy with men*

The principal focus of the research question is how adopting a variety of subject positionings around sexuality, gender and professional role affects gay male therapists experience of working with men. We have seen how all paradigms have embraced the importance of the therapeutic relationship to the encounter and we have also seen that to be traditionally masculine in the West is, in part at least, to avoid both seeking help and intimacy with other men. These competing phenomena arguably create a tension that must be negotiated by both men in the all-male dyad.

Indeed, as Meth et al., (1990, p.152) argue, for many men, ‘psychotherapy is the antithesis of masculinity’. Bedi & Richards (2011, p.381) suggest that ‘the extant literature provides a haphazard description of the desirable course of psychotherapy with men, the majority of which is based on clinical experience and anecdotal commentary rather than research’. Their research found that (straight, white, North American) men value therapy that helps them to make sense of their issues, gives them some sense of responsibility as well as formal respect and that offers practical help. Schaub & Williams (2007) take the ‘gender role conflict’ (GRC) construct explored above and, not unsurprisingly, suggest that men high in GRC have lower expectations about counselling, tend to adopt rigid positions in the relationship and have poorer outcomes.
The research question

In the context of a prevalent orthodox masculine discourse that continues to objectify male same-sex preference as shameful and un-masculine, and in the context of a particular cultural practice where norms of orthodox masculinity may be challenged, this researcher is interested to explore what happens for the gay male therapist in his encounters with other men in the therapeutic dyad.

In doing so from a qualitative perspective there is no a priori hypothesis being addressed. Rather the study is interested to explore therapists experience of the intersubjective space where the multiple subjectivities of the therapist and client intersect. As has already been identified, the majority of the literature on non-heterosexuality explores the phenomenon from the client’s perspective, suggesting that homosexuality is ‘out there’. It is hoped that this study will contribute to counselling psychology knowledge by bringing the gaze ‘in here’ and exploring the well-researched area of the therapeutic relationship from a different perspective. As Sherman (2005, p.2) suggests:

Certainly, all therapists’ subjectivities are shaped by their sexual orientation and sense of gender. However, when the therapist is gay, and his history is replete with issues of secrecy, shame, alienation, difference and internalised homophobia, he inevitably brings a unique way of listening to his patients.

It is both the way in which sexuality and gender shape subjectivities, as well as how a unique way of ‘listening to’ and relating to male clients flows from these subjectivities, that this research project aims to illuminate.
CHAPTER THREE
METHODOLOGY

3.1 Situating the research in ‘the relational’

All models, counselling psychology amongst them, now embrace the central importance of the therapeutic relationship to the therapeutic endeavour. As research within counselling psychology this project is also positioned within what can be broadly termed ‘the relational’. I am aware that the, often casual, use of phrases such as ‘the relational’ and ‘the relationship’ is open to multiple meaning-makings that can be contested. Nevertheless, in the context of this research question, the use of the phrase ‘the relational’ is apposite for various particular reasons.

Firstly, this research is interested in a particular kind of dyadic relationship between two men as understood through the lenses of gender, sexuality and professional role. The relationship is explored from the point of view of one participant within it, a participant who brings his own idiosyncratic subjectivities with respect to these intersections into the dyad. The ‘relational’ is thus considered intrapsychically. In other words, what sense does the participant makes of these subjectivities and his own relationship with them?

This internal experience of self in relation to these constructs is then understood as relating to the internal self-experiences of his male clients – in particular how these are changed by the experience of that contact and relationship. In this way the research attempts to make sense of what happens to these subject positionings when they encounter other selves in the intersubjective space. To the extent that they are altered in that relationship I am also
exploring the idea that our gender, sexuality and sense of self as therapeutic professionals are continuously being contested and created interpersonally. They are not fixed or embedded ‘truths’ that remain untouched by the encounter, but are dynamic self-experiences that are both reliant on and contingent to relationship for their existence.

I also acknowledge myself in the research – something explored in more detail in the section on researcher reflexivity below. The very fact that I am interested in human relationship and am embedded in a field which considers a particular kind of relationship to be healing shows that the relationship between researcher and researched, far from being something to avoid, is of vital importance. In a very real sense, the data that I am generating is created, and can only be understood, in the context of yet another relationship.

Finally, I acknowledge that each of the relationships, whether intrapsychic or interpersonal, are themselves situated with discursive fields that circulate in a wider socio-political context to which we are all subject and with which we have a dynamic and reciprocal relationship – both producing and becoming subject to discursively produced ‘truths’ about gender, sexuality and the discipline of the psychological therapies. I have attempted to show the multiplicity of relational contacts and intersubjective spaces in Fig.1 below.

Fig 1: Dimensions of Intersubjectivity
3.2 Towards a research design

The methodological challenge for this research project has been to find both an approach that is capable of eliciting and analysing intrapsychic, interpersonal and socio-political experiences of self. As Evans (2010, p.84) suggests in his exploration of masculinity in the father-son dyad ‘... there is a continuous loop of creation, feedback and expression which runs across all three fields’. In seeing these three domains as relational fields it is important not only that all three are captured but also that the relationships between them are fully explored. As with the domains of gender, sexuality and professional role there is always an inherent danger in essentialising these constructs. Indeed it would be meaningless to attempt an exploration of identity formation and performance without recourse to all three (Breakwell et al., 2006).

The research design uses Hollway & Jefferson’s (2000) Free Association Narrative Interviewing (FANI) interview method as well as their psychosocial discourse analysis as a primary analysis to uncover intrapsychic and interpersonal themes in the data. This primary analysis is supported by a secondary analysis informed by Foucauldian ideas that aims to explore the socio-political dimension of experience. This particular form of data gathering and the two forms of analysis have been chosen specifically to facilitate exploration of the intrapsychic, interpersonal and socio-political and the dynamic relationships between them.

The psychosocial subject

Hollway et al. (2000, p.14) present the idea of the ‘psycho-social subject [who is] simultaneously psychic and social.’ In order to expose and explore these inner and outer dimensions, they understood their participants as ‘defended subjects’, people who ‘have an
identity investment in [their] positioning in this particular... discourse’ (Hollway et al., 2000, p. 19). Applied to this research question, it is suggested that the ways in which participants understand themselves in terms of gender, sexuality and professional role, will have an effect on the way they experience their relationships with male clients.

Hollway & Jefferson trouble the notion of a completely self-aware research participant who answers truthfully questions clearly posed by the researcher and argue for a change in the way in which ‘social researchers’ carry out their work. They question whether we are ever anything other than unclear and contradictory in our accounts of ourselves and suggest that ‘though it is far from transparent, there is a relationship between people’s ambiguous representations and their experiences’ (Hollway et al., 2000, p.3). In arguing this position, they open up the idea that people cannot be understood separately from their experiences of being in the world and that indeed those experiences of being in the world are mediated by how subjects make sense internally of that external experience.

Furthermore, they argue that ‘the research subject cannot be known except through another subject; in this case, the researcher’ (Hollway et al., 2000, p.4). For Hollway & Jefferson there is a constant interplay between internal and external experiencing with experience in and feedback from the external world informing internal sense of being in the world. To describe the entirety of a research subject who is ‘simultaneously psychic and social’ (Hollway et al., 2000, p.14) they create the designation ‘psychosocial subjects’. This nomenclature maps directly onto the methodological aims of this research that acknowledge the continuous nature of experience and that seek to uncover identity formation and experience through recourse to the intrapsychic, interpersonal and socio-political domains.
The postmodern turn in social research away from the idea that the external world can be accurately perceived through the senses and rationally processed through cognitive mechanisms to one which accepts multiple, contingent meanings suggests that it is impossible to ‘know’ the world directly. Part of the reason for this, as explored above, is that we are in relationship with and constantly being changed by the world that we are attempting to apprehend. Another is that, as Lacan (1901-1981) pointed out, we are ‘subject to language’. In order to think about and represent the world, subjects must use language that is itself never neutral or fixed, it comes pre-loaded within discursively produced power relations. This turn to language or ‘the hermeneutic turn’ (Westerman, 2004) suggests that this research endeavour is more interested in meaning and interpretation – whilst always recognising that any analysis of that position is not a view taken from ‘outside’. I can never be free of my own subject positionings and how they interact with those of my research participants.

This idea that we are subject to language is also embraced by Hollway & Jefferson who see the psychosocial subject as discursively produced. In their research around fear of crime, they see their research subjects as formed through embeddedness in discursive fields around crime. For example ‘being fearful of crime could be explained by being positioned in a fear of crime discourse’ (Hollway et al., 2000, p.15). Individual differences between subjects are understood as resulting from the different ways in which subjects position themselves in that discourse.

Hollway & Jefferson extend the idea of the subjectivity and suggest that not only are subjects positioned in discourse, they are also invested in it. Drawing on Kleinian (1882-1960) ideas of defensive splitting against anxiety, they suggest that psychosocial subjects develop identity investments in their subject positions over time and that they defend these
positions in their talk. The role of anxiety in driving investment in and defence of subject positionings is a strong theme in the data and Hollway & Jefferson’s notion of the psychosocial, discursive and defended subject has helped to facilitate its uncovering in the analysis. Their definition of the subject is worth quoting here in full since it affects a great deal of what is to come later in this research thesis – both in terms of my conceptualisation of my participants, but also in the way in which I interpret the data that I have gathered in my interviews with them:

The concept of an anxious, defended subject is simultaneously psychic and social. It is psychic because it is the product of a unique biography of anxiety-provoking life-events and the manner in which they have been unconsciously defended against. It is social in three ways: first, because such defensive activities affect and are affected by discourses (systems of meaning which are a product of the social world); secondly, because the unconscious defences that we describe are intersubjective processes (that is they affect and are affected by others); and thirdly, because of the real events in the external, social world which are discursively and defensively appropriated. It is this psychosocial conception of the subject which we believe is most compatible with a serious engagement in researching the ‘what’, ‘how’ and ‘who’ issues such as fear of crime and sexuality. (Hollway et al., 2000, p.24)

**FANI and the double interview method**

Following from the construction of research subjects as defended and psychosocial, Hollway & Jefferson consider a means of data collection from these subjects and suggest that open-ended, narrative approaches where participants are encouraged to tell stories is preferable to a question-and-answer method. They suggest that storytelling is important here, not only because it offers the participant a way of being embedded in his own narrative but also because it makes it his responsibility to make his meaning clear in the research dyad. They
privilege narratives as a pervasive form of meaning making, relationship building and communication throughout human history and across cultures.

The specific approach developed by Hollway & Jefferson is known as Free Association Narrative Interviewing (FANI). Although there is a structure to the interview, the idea is to get the participants to free associate in the style of a psychodynamic therapy encounter in order that they are somewhat less likely to produce what they think it is that the researcher is after.

The multiple intersubjectivities illustrated in Figure 1 (earlier) suggest that this process contains a double and a double-double hermeneutic – there is the relationship between the researcher and participants as well as the relationship between the researcher and the participants’ reported relationships with male clients. Moreover, researchers are not removed from the world of their participants. As Westerman (2004, p.124) points out: ‘psychologists are situated agents too, active participants in their cultures... procedures for learning about psychological phenomena are instances of practical involvement in the world... linked to world practices at large.’

Hollway & Jefferson carried out a two-part interview ‘since our theoretical starting-point neither takes respondents’ accounts at face value nor expects them to be able to understand completely their own actions, motivations and feelings’ (Hollway et al., 2000, p.43). The first interview was to allow them to ‘interrogate critically what was said’ and the second, following that interrogation, was ‘as a check in various ways [...] to seek further evidence to test [...] emergent hunches’ (Hollway et al., 2000, p.43).
My own research project also employed a double-interview method to data gathering. This was in part to allow participant reflexivity around the interview question as well as to create some space between the two-part nature of the research question: participant subjectivities and the experience of those subjectivities in the work with men. A full description of the process followed and the rationale for doing so is explored later in this chapter (3.4: Data Collection and 3.5: Data Analysis).

Getting at the socio-political through a Foucauldian lens

The primary psychosocial analysis considers the principal discursive positions adopted with respect to gender and sexuality and how these principle positions intersect with participants’ professional role as therapists. In addition the analysis aims to explore how these positions are made sense of and lived out in the therapeutic space. Differences in the ways in which their principle subject positions influence their discursive production of the therapeutic relationship with male clients as well as the difficult issue of self-disclosure of sexuality are explored.

It is important to make two things clear at the outset. Firstly, the secondary analysis is an analysis of the results of the primary analysis. In other words, the discursive positions uncovered in the primary analysis are considered afresh through a Foucauldian lens. Secondly, this secondary analysis, informed by Foucauldian ideas, is not a ‘full Foucauldian Discourse Analysis’ in that it does not seek to follow one of the systematic processes developed for ‘doing’ a Foucauldian Discourse Analysis (see, for example Arribas-Ayllon & Walkerdine, 2008). Instead, like Graham (2005, pp. 2 & 6) I followed ‘a methodological plan [that sets] about doing a form of post-structural discourse analysis that is informed by and consistent with the work of Michel Foucault [which] requires, not that I dogmatically follow
someone else’s model for doing discourse analysis but that I ground my work in careful
scholarship and engage in a respectful conversation with Foucault.’ This is similar to
Rabinow & Rose’s suggestion that Foucauldian analysis should be approached less as a
structured methodology than a “movement of thought” (Rabinow & Rose, 2003, p.ix).

Yates et al. (2010, p.60) describe Foucault’s ‘overall project [as] an “analysis of ourselves
based upon a “critical ontology of ourselves”…’ They suggest that any discursive analysis
informed by Foucauldian thought should focus on the ‘three domains of this critical
ontology’, which they describe as:

... the domain of truth, through which we are constituted as objects and
subjects of knowledge; that of power, in which we are constituted as subjects
acting on others and acted upon by others; and that of ethics or “individual
conduct”, through which we constitute ourselves as particular types of
subjects. (Yates et al., 2010, p.60)

The secondary analysis follows Yates & Hiles’ approach and considers the three domains of
truth, power and ethics, in particular how knowledge and power intersect in ‘games of truth’
(Foucault, 1992, p.6) in which subjects begin to be constituted and recognise themselves qua
subject:

The word ‘game’ can lead you astray: when I say ‘game’ I mean a set of rules
by which truth is produced. It is not a game in the sense of an amusement; it
is a set of procedures that lead to a certain result, which, on the basis of its
principles and rules of procedure, may be considered valid or invalid, winning
or losing. (Foucault, 2000d, p.297)

The analysis considers principal subject positions in the context of the knowledge and power
discourses in which subjects are positioned and how they come assign meaning to their(actions and to develop practices of the self as a result.
Although I am precluded from undertaking a more thorough analysis by constraints of space, the inclusion of this secondary analysis aims to balance the implicit argument in the primary analysis that subjects are ‘free’ to choose their discursive positions and that these positions are simply chosen to defend against anxiety. The literature on subjectivity and agency is rich and complex and has been debated at some length (e.g. Wetherall, 2008) and it is acknowledged that the use of terms such as ‘subjectivity’ and ‘identity’ interchangeably is arguably problematic. However, this debate is not the focus of this thesis. Suffice it to say that it is hoped that the secondary analysis, through the exploration of wider socio-political discourse, will help to position the subject both as shaped by and ‘thrown’ into discursive fields over which they have no control and as having the capacity for choice within those fields through resistance to power-knowledge nexuses.

3.3 Sampling the phenomenon

Participant identification

The subject of this research question is the gay male therapist. In defining my terms I chose to allow participants to self-identify as ‘gay’, recognising that the word will mean different things for different people. The implication in the research recruitment material was that participants would need to be ‘out’ and, indeed one respondent who was not out, and was so closeted about his sexuality that he would not reveal his name, was discounted from the research process.

Although I use the word ‘therapist’ in the research question, it was intended that this word include the broad church of all those who engage in one-to-one therapeutic work with
clients where a relationship between the two is considered to play an important role in their work together. In part this was to gather a broad spectrum of practitioner voices as well as in recognition that gay men form a minority of practitioners and that it would be unlikely that I would reach my sample size drawing on a pool of counselling psychologists alone.

In my original research application I suggested a sample size of 12, though this was subsequently reduced to 8 on the advice of the University of Roehampton Research Degrees Board.

Recruitment

Participants were recruited via a number of routes. Initially I wrote a recruitment email to the Psychology of Sexualities section of the British Psychological Society. This was followed by an advertisement in the Pink Therapy Newsletter. A colleague at one of my clinical placements who is herself a member of the LGBT sections of the UKCP and BACP circulated my request for participants amongst her network on my behalf. Finally, one participant was recruited through personal contact at a CPD training day.

Copies of the recruitment literature are included in Appendix 1 and the way in which each participant was recruited is noted on the table of participants below.

Participant table

All participants were white, able-bodied and based at a range of locations throughout England. They varied in age (mean age 46) and professional background and all but two described themselves as ‘middle-class’.
<table>
<thead>
<tr>
<th>Pseudonym</th>
<th>Age</th>
<th>Accreditation</th>
<th>Recruitment Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peter</td>
<td>50</td>
<td>Counselling Psychologist (BPS/BACP)</td>
<td>BPS PoS</td>
</tr>
<tr>
<td>Mark</td>
<td>28</td>
<td>Clinical Psychologist (BPS)</td>
<td>BPS PoS</td>
</tr>
<tr>
<td>Andy</td>
<td>27</td>
<td>Counselling Psychologist (BPS)</td>
<td>BPS PoS</td>
</tr>
<tr>
<td>Gareth</td>
<td>52</td>
<td>Counsellor (BACP/UKRCP)</td>
<td>Pink Therapy</td>
</tr>
<tr>
<td>Richard</td>
<td>51</td>
<td>NLP Psychotherapist (UKCP)</td>
<td>UKCP LGBT Section</td>
</tr>
<tr>
<td>Alan</td>
<td>52</td>
<td>Psychotherapist (UKCP)</td>
<td>UKCP LGBT Section</td>
</tr>
<tr>
<td>Jeremy</td>
<td>45</td>
<td>Chartered Psychologist (BABCP)</td>
<td>CPD Day</td>
</tr>
<tr>
<td>Neil</td>
<td>62</td>
<td>TA Therapist (UKAHP)</td>
<td>Pink Therapy</td>
</tr>
</tbody>
</table>

*Mean Age: 46*

**Procedure**

All participants responded to recruitment via email, using the researcher’s university email address. Once contact was established, email correspondence was entered into to arrange a suitable day for an initial interview. Interviews lasted approximately an hour and took place at the participant’s place of work. Informed consent was gained prior to the commencement of the interviews, all of which were audio-recorded. A debrief form was distributed at the end of each session.

Following the first session, the interviews were transcribed and transcripts emailed back to participants for their review. At the same time a date was agreed via email for a second interview – again lasting approximately one hour and taking place at the participant’s place of work. A second debrief form distributed at the end of the second session and all participants were given the option of receiving the transcript of the second interview. All requested and were sent the completed transcript.

Copies of the semi-structured interview schedule and the consent and debrief forms can be found in Appendix 2.
Ethics

Ethical approval was sought and received from Roehampton University on 12\textsuperscript{th} April 2011 (see Appendix 3). The following ethical issues were identified as significant and solutions to the issues identified were proposed:

\textbf{Issue: Participant psychological harm and distress}

It was assumed that qualified therapists would have had considerable experience of being reflexive not only with respect to their own subjectivities, but also in relation to their therapeutic relationships. As such, it was envisaged that the potential for psychological harm or distress as a result of participating in this research would be minimal. Nevertheless, it was acknowledged that the areas that the research asks the participants to explore – in particular gender and sexuality – are complex and intimate and have the potential to evoke strong feelings.

Measures were therefore taken to minimise any possible distress. Firstly, I endeavoured to be transparent as possible in the recruitment process to ensure that participants fully understood what they were agreeing to. Consent and debriefing forms (see Appendix 2) made it clear that participants were free to withdraw at any time during or after the interview or to choose not to answer particular questions raised. Finally, participants were directed towards organisations that may be able to offer support in working through any feelings or issues that arose as a result of participating in the research.
Issue: Participant anonymity

As with all doctoral research, once it has passed a viva, this thesis will available in the university library. In addition, it is possible that all or part of the research may be published in some form in the future in an academic journal article or book. Informed consent forms (see Appendix 2) advised participants of this possibility up front. They were also advised that, for the purpose of research write-up, all participants and any clients mentioned in the interviews would be given pseudonyms and any identifying content anonymised.

Issue: Safety of participant data

All data (original recordings and transcripts) have been securely stored on a separate external drive to a personal computer held at the researcher’s home. When not actively in use, the drive has been stored in a locked drawer. In addition, all transcript documents are password protected. Documents, such as signed consent forms and interview transcripts, have been stored in a locked drawer at the researcher’s home. As with other research data, all forms and transcripts will be held for a minimum of 10 years following any publication upon which they are based.
3.4 Data collection

This research project follows Hollway et al.’s (2000) approach to gathering data – both through the FANI interview method as well as through the use of a two-part interview. At both interviews I used a semi-structured schedule to guide participant discussions (see Appendix 2). The aim was to use the schedule to facilitate a free-associative, story-based account that might reveal ‘significant personal meanings which were not necessarily obvious at the time’ (Hollway et al., 2000, p.39). An example of how this approach worked in practice across both interviews is contained in the full transcript in Appendix 4.

Inspired by Hollway and Jefferson’s double-interview method, I split the two parts of the research question (participant subjectivities and the experience of those subjectivities in the work with men) across two separate interviews. In part this was for practical reasons; it gave participants sufficient time to explore both aspects of the research question without having to cover all the material in a single research interview. But more importantly it offered participants the opportunity to reflect on their first interview before the second. I was aware of the power dynamic between ‘researcher’ and ‘researched’ and wanted, as far as possible, to engage participants as co-creators of research data, rather than as people separate from the research process. Therefore, in addition to sharing Session 1 transcripts prior to Session 2, I made all participants aware of my epistemological stance and methodological approach and encouraged them to question me about it should they so choose.

Interview One

The first interview was structured to allow participants to recount their own narratives as individuals with particular experiences of their own identities with respect to gender,
sexuality and professional role. The emphasis here was on producing data that might evidence how the inter-relationship between subjective experience of the interpersonal and socio-political domains helped to inform the intrapsychic understandings of intersecting subjectivities.

Hollway & Jefferson did not share any of their data with their interviewees; however, in my own project it struck me as important that my participants be as actively involved in the research process as possible. For that reason, following transcription and my own reflection on the data, I offered participants the same opportunity for reflection on their experience of the first interview. All participants were sent the transcript of the first interview and offered a space for reflection on it at the start of our second interview.

**Interview Two**

The second interview was concerned primarily with the second part of the research question – participants’ experiences of working in all male dyads. However, at the start of our second interview, participants were also given some time to reflect on their experience of the first interview and, more importantly, on their experience of reading its subsequent transcript.

By situating the second interview in the light of the first, I encouraged participants to be reflexive about how their narrative in the first interview might relate to their narrative in the second. Rather than using the second interview to test my own emergent hunches as per Hollway et al. (2000), I attempted instead to allow participants’ dyadic experiences with male clients to stand without analysis in the interview. It was only after all the data had been gathered from all of the participants that the process of data analysis was started.

Finally, all participants were offered and sent the transcript of our second session.
3.5 Data analysis

As identified above, a two-stage analysis was undertaken in order to allow for as thorough an exploration of the intrapsychic, interpersonal and socio-political dimensions of the data as possible.

Primary analysis: Psychosocial discourse analysis

The primary analysis of the data was a psychosocial discourse analysis informed by the methodological approach described by Hollway et al. (2000). Research interviews yielded some 16 hours of data that equated to around 200,000 words of transcript in total. In order to make sense of the significant volume of data the following process of analysis was undertaken:

Making sense of the person

In order to make sense of each of the participant narratives the first and second interviews of each participant were read and re-read several times and principal discursive themes were identified. A large wall chart was produced with a separate column for each participant. The principle discursive themes for each participant were identified for both the first and second interviews. This ‘case study wall chart’ formed the basis from which the primary psycho-social discourse analysis could be undertaken.

Identifying cross-participant themes

The first reading of the data identified the principal ways in which individual participants positioned themselves with respect to sexuality, gender and
professional role and the effect those positionings appeared to have on the way in which they experienced all male dyads.

I then used the ‘case study wall chart’ to identify and group together particular subject positionings that appeared prevalent across participants as well as those that stood out as being particular to individuals.

Aggregating themes into final subject positionings

It was interesting to see how the polarities and tensions described in the literature review were not only mirrored in participant accounts but also the process of analysis. Throughout the primary analysis I found myself pulled back and forth between focusing on gender at the expense of sexuality and vice versa. The intersection between sexuality and gender was particularly problematic when attempting to encapsulate diverse participant experiences into aggregated subject positionings. The final structure of the analysis – the third iteration over more than 6 months – aimed to navigate between the polarities of making subject positions ‘all about gender’ or ‘all about sexuality’.

These final subject positions then became the content of the ‘Exploring Subject Positions’ section of the primary analysis.

Relating subject positionings to the work with men

Having identified principal subject positionings and explored how gender performance appeared to be the central organising principle around which these positionings were constellated, I then considered how these positionings appeared to influence the way participants talked about the work.
All second interviews were re-read in the light of the emergent subject positionings and compared to the initial ‘case study wall chart’. Dominant themes were identified in the second interview that appeared to map on to the subject positionings that were the focus of the first. Groups of participants who tended to express similar ways of doing masculinity tended to describe their experience of working with men in similar ways too.

These themes then became the content of the ‘Subject Positionings and the Interpersonal’ section of the primary analysis.

Secondary analysis: A Foucauldian perspective

Although the influence of the socio-political was an aspect of the primary analysis and was understood by participants as part of the way in which they made sense of their intrapsychic and interpersonal experiences, I aimed to make the socio-political the sole focus of the secondary analysis. Constraints of space meant that it was not possible to analyse participant data afresh. Instead, the results of the primary analysis were re-read and explored to uncover discourses within the Foucauldian domains of truth, power and ethics (Yates et al., 2010):

Domain of truth

Discourses through which subjects were constituted as subjects and objects of knowledge

Domain of power

Discourses in which we are constituted as subjects ‘acting on’ and ‘acted upon’ by others
Domain of ethics

Discourses through which we constitute ourselves as particular kinds of objects and assign value and meaning to our conduct.

The results of the analysis uncover how being positioned within particular socio-political discourses affected both participant subject positionings and their experiences of therapy with men. As Yates et al. (2010) observe:

...discourse analysis can provide a specific focus on the consequences of power for people who are its subjects, the “cost” of certain forms of truth they are obliged to recognize in themselves and also their resistances, and their formations of self-relationships... (p.62)

Rationale for choice of approach

A qualitative approach to the collection and analysis of data is suited to the question under consideration since the research seeks to explore the lived experience of gay male therapists without recourse to an a priori hypothesis. It further allows a greater richness of data to be gathered and analysed than would be afforded by quantitative methods. Moreover, qualitative methods are aligned with the postmodern epistemological basis of this research. As Kvale (1992, p.51) points out, ‘in several respects, the knowledge produced in an interview comes close to postmodern conceptions of knowledge as conversational, narrative, linguistic, contextual and interrelational.’

Quantitative methods may be able to quantify the phenomenon I am looking at, but they are not able to suggest to me what that phenomenon might mean. Exploring multiplicity of meaning-makings is part of the foundational ethos of counselling psychology and qualitative methods would therefore seem appropriate for this study.
Both the means of data gathering as well as its analysis as proposed by Hollway et al. (2000) are similar to the process of therapy. Whilst we have a broad goal in mind, the contents both of therapy and this research are free associative, allowing the client/participant narrative to emerge as openly as possible. Moreover, client/participant narrative is filtered through multiple approaches to meaning-making simultaneously by the therapist/researcher in an attempt to make sense of what is being produced.

In terms of my own role in that process, the Hollway & Jefferson methodology allows me to be situated in the data production as a practitioner-researcher, and not to have to completely bracket off my own understanding of others that has been informed by my training and experience in the field.

In this particular methodological approach I am encouraged to take a ‘critical realist’ stance (Hollway et al., 2000, p.3) that is influenced by both Kleinian and object relational thought as well as postmodern ideas of the discursively formed subject. I am aware that there are epistemological tensions between these two positions and am reminded of the similar tensions encountered by counselling psychologists in their work with clients where, as Rizq (2006) suggests, a ‘third thinking space’ is useful in holding competing epistemologies in mind concurrently. As Anderson suggests, refusing to work with competing epistemologies could be argued to be ‘academic fundamentalism’. Instead, he sees his job as a social scientist ‘is to help make sense of the social world, utilizing whatever tools fit’ (2012, p.33). He cites Adams (2008, p.13):

I resolve to intertwine [different methodological approaches] on the same page, in a theoretical melting pot, bridging the gap between the philosophical and the empirical and facilitating a more thorough articulation of the power that congeals in this social location. (Cited in Anderson, 2012, p.34)
A poststructuralist approach to meaning-making has also influenced the research design in terms of the two-stage interview process that attempts both to facilitate the uncovering of the intrapsychic, interpersonal and socio-political, as well as to ensure as democratic and open a stance to the production of counselling psychology knowledge. Research methods are seen as useful tools that assist in getting a job done but, like theoretical understandings of human phenomena, should be held lightly and valued insofar as they assist in producing knowledge that may be helpful for counselling psychologists.

3.6 Reflexivity

Considering the methodological approach chosen, reflexivity about my own stance and positioning with respect to the research is crucial, as is an openness to how that stance affects my own claims to knowledge in carrying out the research. As a gay man who has been subject to the discourses that I describe and who has performed the role of both therapist and client in the therapeutic dyad, I cannot help but come to this research with my own biases. Indeed, it is highly likely that my choice of research topic and question has been driven by my own experience of that subjectivity. As such, part of the attraction of the Free Association Narrative Interviewing method is its recognition of the intersubjective nature of experience and its later reporting in narrative.

To the extent that the question is one that has arisen in me as a result of my own subjective experience of gender, sexuality and myself as a counselling psychologist I cannot help but be in the research. In the same way as in my practice with clients, although I am clearly present but to some extent ‘bracketed off’ in the Husserlian tradition, I cannot ever remove myself
from the experience. In fact to do so would be nonsensical and a doomed attempt to find some kind of purity of scientific ‘objectivity’ in the mistaken belief that it would make my findings more ‘true’.

In order to explore my own position in the relationship as well as, as far as possible, my own biases with respect to the question under consideration I carried out a self-interview. In that interview I considered the same questions that I posed to my participants. The following salient points emerged:

**Sexuality**

A large part of the way in which I understood myself to be gay came from the naming and shaming of that identity in the school playground. I was bullied relentlessly throughout my secondary school career and, although seldom violent, this bullying had a profound effect on my sense of self as ‘other’ and different from most ostensibly straight boys. The conflation of desire and shame has also had an effect in terms of how much I allow my sexuality to be revealed in relationships as an adult. I am ‘out’ in most areas of my life yet there are still some areas where I allow others to assume my heterosexuality.

**Gender**

I am also aware through reflection and previous research (Beattie & Evans, 2011) that my ‘otherness’ as homosexual was linked to a failure to perform masculinity appropriately as a young man. I was brought up in Zimbabwe where an extremely macho male gender performance was required. To be a man meant being straight,
strong, good at sports, not a crybaby, able to hold your drink and able to take a joke.

Indeed, for the first 10 years of my life the country was embroiled in a bitter civil war and many of my friends’ fathers were fighting in the army, something that only served to reinforce very heteronormative ideals of masculine gender performance. A great deal of the bullying I endured was because, as an adolescent, I was heavily involved in music and drama as well as academics at the expense of sport. There was a reciprocal relationship between ever more intense bullying and my growing avoidance of spaces that seemed ‘owned’ by straight boys – in particular the sports field.

Professional role

Like many participants, my route into training and working as a therapist was my own experience of personal therapy. Moreover, I am aware that the principle reason for this personal therapy has been to work on the effects that years of bullying and isolation at school had on my sense of self. I have also been aware of and written about heterosexism experienced in the training environment. I am also aware that my personal experience and research interest in sexuality and gender has informed my choice of training placements and I now work exclusively with gay men and trans people. Although it was not my original intention to specialise in this area I find that openness towards different sexual and gender identities makes it easier for me to work than in earlier placements where I was often frightened that my heterosexual clients might guess my homosexual identity and judge me for it.
Working with men

I am aware that my own clinical experience has been biased towards working with men. In my first training placement I worked with two men and one woman all of whom were straight and with whom I was acutely aware of my differing sexuality. In my second placement I have worked exclusively with gay men where my sexual identity was known to all of my clients. In my third I work with trans clients, the majority of whom are trans women (natal males transitioning to a female gender identity). Themes of shame around orthodox gender performance (male or female) are present in all of the work that I do – whether working with gay men or trans men and women. I am aware of and deliberately work with how my own masculine gender performance intersects with the gender and sexual positionings of my clients. Indeed, I accept that it is being positioned in this kind of clinical work that has given rise to my desire to research how gay male therapist’s gender, sexual and professional identity positionings affect their experience of working with male clients.

Because of the insights briefly alluded to above, it is almost impossible for me not to be present in the research. However, throughout I have attempted to be aware of where my own material intersects strongly with that of my participants – in the same way as I would conducting therapy with a client – and to be aware of what is mine and what is the participant’s.
CHAPTER FOUR
RESULTS

4.1 Introduction

This research project considers the intersection of particular subject positionings as they are experienced in the therapeutic relationship between two men. The double-interview process aims to facilitate the exploration of the different intrapsychic and interpersonal spaces in which subjectivity is experienced and negotiated. In addition, the double analysis aims to explore the data in terms of its productive value in discourse across a variety of internal, interpersonal and socio-political domains.

The primary analysis draws on Hollway et al. (2000) to look at how subject positionings are dynamically modulated in relationship. As we will see in this chapter and explore in the discussion that follows, shame and anxiety over effective masculine gender performance are important factors influencing the adoption of particular subject positionings for these participants. Indeed, as the earlier literature review suggests, shaming is an important part of the ways in which normative masculine gender performance is policed between men.

The prevalence of strong binary discourses of gender and sexuality has affected all participants. They are subject to masculine-feminine and heterosexual-homosexual binaries that act to limit the subject positionings available to them. As such, they must negotiate this tension as they make decisions about what is allowed in and what is kept out of intrapsychic awareness, the relational space and the public arena.
The secondary analysis draws on Foucauldian thought (Yates et al., 2010) to consider the wider socio-political discursive structures that influence the subject positionings available to the participants. Indeed, the socio-political sphere is understood as constitutive of the regulatory mechanisms that influence how intrapsychic and interpersonal experiences of self are both constructed and experienced.

The content of this results chapter is outlined below (Fig 2):

### PRIMARY ANALYSIS
*Psychosocial discourse analysis – Hollway & Jefferson (2000)*

**Interview One: Exploring subject positions**
1. Principal subject positions
   a. The ‘Pinocchio’ position
   b. The ‘Walks-Between’ position
   c. The ‘I’m just a bl**e**k’ position
2. Orthodoxy: The pervasive benchmark
   a. Emotional control
   b. Internalised homophobia
   c. Physicality
   d. Pursuit of status
3. Introducing professional identity
   a. The only boy in the village
   b. Reflexivity and personal and professional identity
   c. The wounded healer and gay male spirituality
   d. Facilitating the work

**Interview Two: Subject positionings and the interpersonal**
1. Dominant themes in therapy with men
   a. The ‘Pinocchio’ experience: Fear dominates
   b. Neil and the parental role
   c. The ‘Walks-Between’ experience: Homosexual maleness and intimacy
   d. The ‘I’m just a bl**e**k’ experience: ‘I’m just a therapist’
2. Talking about sexuality
   a. ‘It’s no place for the gay stuff’
   b. Making therapeutic decisions
   c. Opening the door
   d. ‘I can say what I like’

### SECONDARY ANALYSIS
*Foucauldian discourse analysis – Yates & Hiles (2010)*

1. Domain of truth
2. Domain of power
3. Domain of ethics

*Fig 2: Structure of the results of primary and secondary data analysis*
4.2 Primary analysis

Interview One: Exploring subject positions

Principal subject positions

Analysis of the data uncovered three principal subject positionings with respect to sexuality and gender that went on to affect participants’ understanding of their professional identity as well as their relationships with male clients:

The ‘Pinocchio’ position

Peter, Mark, Jeremy and Neil formed a group who felt that their homosexuality was too overt to be hidden and that their failure to hide their sexuality meant that they were judged by other men to be effeminate and un-masculine:

‘I think with me sitting in the room with someone… it’s obvious I’m gay… I’m under no illusion…’ Mark

As we have seen in the literature review, normative masculine gender performance has historically been bound up with heterosexuality. To be a real man you must avoid intimacy, in particular sexual intimacy, with other men. To be intimate with or to desire other men is seen as a constitutive element of femininity and so homosexuality is conflated with looking like, behaving like or even, in some cultures, being a woman. The important thing here is the looking like and behaving like. Because homosexuality and effeminacy are seen as the same thing in orthodox masculine discourse, men who appear effeminate are automatically seen as homosexual by other men, whether or not they in fact are. And by the dint of their assumed homosexuality are automatically coded as un-masculine.
This so called ‘gender inversion theory’ (e.g. Kite & Deaux, 1987) is a discursive trick that can leave some men feeling that being a ‘real man’ is not a position that is available to them. As the eponymous hero of ‘Pinocchio’ constantly asserts, and fails to prove because of his troublesome nose, ‘But I am a real boy!’

This judgement of failure to perform left Peter feeling that he was lacking in some physical, essential way when comparing himself to heterosexual (and therefore more effectively masculine) men:

‘I do remember in one of my early therapies talking to my therapist who was another gay man and saying that […] there was like an inner core missing inside me because of being gay that… it meant that I couldn’t be a proper man and I remember him saying that he felt the same (laughs) which was quite interesting…” Peter

Peter later goes on to explore the idea that this missing ‘inner core’ is a kind of backbone or ‘macho strength and certainty’ that would allow him to be taken seriously by other men, to be accepted as an equal by them. This sense of exclusion, of not being ‘allowed’ by other men to ‘fit into’ the ranks of the male is echoed by Mark and Jeremy:

‘I certainly remember a time when I would perceive myself as not being a man. I don’t mean that I wanted to be a woman, but I mean it was like I wasn’t allowed to be both… I couldn’t be gay and a man…” Mark

‘It’s been a difficult kind of thing really to find a place when you are growing up… if you’re growing up as gay and closeted, then you so feel that you don’t fit into ‘male’. Or I did…” Jeremy

For Neil, the whole concept of his own masculinity as a gay man was almost impossible to consider. Having felt comfortable talking about and exploring his sexual identity for some time, when asked about his gender identity the whole interview stalled:
'To be honest [long pause]… I haven’t a clue what to say… it’s just too big… it’s almost like I’m being, you know… I’m setting off in what I think is a swimming pool but then when I go out further I realise there’s a huge lake… (There’s no other side?) Yeah… that’s what it feels like…’ Neil

The ‘Walks-Between’ position

Like those men in the ‘Pinocchio’ position, Alan was subject to the shaming taunts in the playground, being called ‘a poof’ for ‘speaking posh’. Nevertheless he was able to claim more masculine capital than those in the ‘Pinocchio’ position; in part by being married with children until coming out in his 30s and in part through access to a differently structured maleness in his identity as an artist.

Alan positioned himself between the two extremes of ‘Pinocchio’ and ‘I’m just a bloke’. He recognised his own struggles with becoming a ‘real man’, while at the same time acknowledging that it was not a unique experience for gay men:

‘… so it’s not just gay men that have an ambivalent feeling around masculinity, I think men… especially from my experience of the work I did in the kind of late 80s and early 90s, that was with almost predominantly straight men… what immediately came up was an ambivalence and an uncertainty about what it is to be a man and how you be a man and all that kind of stuff…’ Alan

By constructing the struggle with orthodox masculine gender performance as a problem for all men, regardless of their sexuality, Alan was able to feel connected to the experience of both polar ‘masculine’ and ‘un-masculine’ positions without taking up either extreme. This idea of ‘navigating between polarities’ was a core part of Alan’s discourse and identity:

‘… that idea in native American culture of the Walks-Between people… in a lot of traditional cultures, homosexual people are the match makers and the go-betweens and
the conflict resolvers and the mediums…. You know how it’s that whole thing about navigating between polarities?” Alan

It would seem that Alan’s experience of the radical left, including the feminist anti-men’s movement in the 1970s and 1980s connected him with many different ways of performing masculinity and that, along with his spiritual beliefs, led to his taking (uniquely amongst the participants) a ‘Walks-Between’ position. By seeing his identity as part of the ‘sacred androgen’ Alan was able to draw on alternative narratives of maleness, including in particular ideas of male sexuality and eroticism:

‘I think there is something about homosexuality, at its best, that allows a manifestation of the erotic that is very relational… and I suppose I then immediately think of Walt Whitman and Edward Carpenter and all that kind of philosophical gayness and that idea of a human relatedness that actually has nothing to do with genital sexuality but it’s to do with a kind of soul sexuality…’ Alan

By occupying this centre space, Alan understood his identity as one that attempted to integrate aspects of the feminine and masculine as well as heterosexuality and homosexuality without setting them up in opposition to one another. His concept of what he termed his ‘homosexual maleness’ was thus about resisting separation and binary polarities:

‘I suppose I’ve had a kind of passion or yearning or a commitment to some struggle towards personal integration since I was a child…’ Alan
The ‘I’m just a bloke’ position

Gareth, Richard and Andy, by contrast, had always appeared to be heterosexual to their peers – either because of their physical appearance or behaviour – so their homosexual identity could more easily be kept hidden and private. By ‘passing’ as straight they found they had access to different positions along the continuum of gender and sexuality. The ‘I’m just a bloke’ position is the relaxed and un-phased position of a man who has not been judged by other men to have failed in orthodox masculine performance. Because gender has not been the site of much shaming or gender policing by other men it is seen as relatively unremarkable.

When Gareth uses the phrase ‘straight acting’ he clearly and explicitly describes the performance required of all men in order for them to be judged ‘extremely masculine’ irrespective of their sexuality:

‘… I’ve always considered myself to be extremely masculine […] I would never describe myself anywhere as ‘straight acting’ but I suppose that’s what, when people describe themselves as ‘straight acting’, it’s people like me they’re thinking about…’ Gareth

For Andy and Richard, just being a bloke is less about acting straight but more about looking straight; having the physical size and shape, and even voice, on which orthodox masculinity would tend to confer ‘real man’ status:

‘… I certainly feel male and, I guess, in how I am and how I look and how I perceive myself to look to other people […] people don’t tend to think I am gay… both in kind of physical appearance and even speaking with me I think, people don’t necessarily jump to that conclusion…’ Andy

‘… they thought they would see a sea of queens everywhere so they were quite shocked that I was there, 6ft 4 or whatever and just being as big as anyone else…’ Richard
Although this group takes a different position from those producing the ‘Pinocchio’ discourse, the binary tension between polarities of sexuality and gender is the same. They acknowledge that not seeming to be gay increases their masculine capital. They play the same game as Peter, Mark, Jeremy and Neil but are just better at getting away with it and are therefore accepted by other men into the ranks of the masculine for as long as they continue to appear heterosexual.

Importantly, however, because they succeed in appearing heterosexual-masculine, this group can afford to see their homosexuality as unimportant. Because it remains hidden it does not disrupt orthodox masculine gender performance as it does for Peter, Mark, Jeremy and Neil and is therefore able to be constructed as unproblematic:

‘…for me, if I say my sexuality has no impact on me at all… it’s just an aspect of my character…’ Gareth

‘… it’s an interesting one because I think part of that image or this belief that other people wouldn’t jump to the conclusion that I was gay maybe… because I think there’s… certainly in working with the majority of clients, sexuality doesn’t come into the work…’ Andy

It is interesting that Andy makes an explicit link between his appearing to be heterosexual and the fact that ‘sexuality doesn’t come into the work’. This is in stark contrast to Peter’s ‘Pinocchio’ position where he sees sexuality as ‘just there all the time’ and particularly immanent and ‘powerful’ when he’s working with men:

‘… but I suppose sexuality is just there all the time really in relationships… and because I’m gay it’s much more powerful when I’m with men […] and sexuality takes you off on all sorts of pathways really in your mind […] and I suppose, as someone who has had to think a lot about my own sexuality, I’m just very aware of it…’ Peter
This apparent ease with their sexual identity does not appear to be a position open to those in the ‘Pinocchio position whose more overt homosexuality prevents them accessing the ‘I’m just a bloke’ position. This sense of being positioned awkwardly outside a group who share an apparently more relaxed identity is expressed by Jeremy when he recalls his schooldays experiences:

‘… an ease with each other… a sense that even the nice ones, the ones who weren’t bullies, had a kind of easy rapport with each other that I didn’t feel I quite shared. I have that sense of otherness and difference…’ Jeremy

Gareth’s position as someone who grew up on a pig farm locates his masculinity in the field of the physical, yet he is also aware that this position is achieved by excluding his sexuality; a sexuality that hides just beneath the surface ready to undermine the ‘big, solid masculine bloke’ that he appears for all the world to be:

‘… but it’s that, whatever else I may be, I am this big, solid masculine bloke that people feel safe with sitting in a therapy room and yet, scratch the surface and what you’ve got under there you would not expect necessarily to be big, solid, safe and reliable…’ Gareth

There is a suggestion here that this ‘I’m just a bloke’ persona hides a less straightforwardly masculine self and demonstrates that any position adopted along the continuum is tenuous because no gay man can be completely sure that he is effective in hiding those aspects of himself that he wishes to keep out of the relationship.
Orthodoxy: The pervasive benchmark

Despite occupying varying positions along the continuum of masculine gender performance, all participants used the paradigm of orthodox masculinity as the benchmark against which they judged themselves.

Failure to live up to the norms meant that those in the ‘Pinocchio’ position felt un-masculine whereas living up to the norms gave those in the ‘I’m just a bloke’ position access to social acceptance as authentically male. Even Alan, in his ‘Walks-Between’ position referenced orthodoxy in order to make sense of himself as navigating between its extreme polarities. Whether implicit or explicit, this reproduction of orthodoxy across the board reinforces the homosocial nature of masculine gender performance: ‘other men watch us, rank us, grant our acceptance into the realm of manhood. Manhood is demonstrated for other men’s approval. It is other men who evaluate the performance’ (Kimmel, 2007, p.78).

Although different ways of being masculine were explored by participants, particularly in the performance of their professional role as therapists, it is interesting to see here how persistent orthodox ways of doing masculinity are.

Emotional control

The idea that ‘real men’ do not show their feelings is a common theme that recurs in the data. This focus on the relationship between masculinity and feelings is perhaps not surprising given that the field in which masculinity is being considered is one that privileges emotional expression. Again, there was evidence that those in the ‘Pinocchio’ position found that they could not have access to orthodox masculine positions because they were
unable or unwilling to keep their emotions under control. Yet they acknowledged that controlling feelings is a defining characteristic of what it means to be authentically masculine:

‘… if you think about the whole idea of masculine and not listening and just being very self centred and being very egotistical and not wanting to connect…’ Mark

This fear of emotion leads some to suggest that (straight) men are happier in talking about subjects that are free from personal feelings or give any hint that they might be vulnerable:

‘Well they [women] talk about feelings… it’s less competitive […] more kind of gossiping and more fun really, whereas having boring conversations with men about cars and engines and football is kind of like “Why on earth would you want to?”…’ Peter

The relationship between femininity (and homosexuality) and emotional attunement is also reproduced by those in the ‘I’m just a bloke’ position. However here, participants tend to agree that controlling feelings, at least in public, is something to be striven for in order to be authentically masculine. Andy gives a very orthodox account of what it is to be ‘girly’ and free with his feelings but suggests that it is something that only a few people are allowed to see:

‘I probably see myself as quite feminine and there’s maybe been two or three people in my life up to now who I feel have seen that… have almost seen how feminine I can be and how I read Heat magazine and, you know, I’ll cry at films and all this kind of stuff…’ Andy

Gareth too sees his masculinity as being about being ‘tough’ and ‘strong’:

‘… there is no doubt in my mind at all that if I wasn’t made of very stern stuff I wouldn’t still be here […] I look back at some of the things that have happened for the last 15-20 years and you think if you weren’t tough, if you weren’t strong, if you weren’t a man…’ Gareth
It is only through being able to be resilient in the face of challenging emotions – which is in itself equated with being ‘a man’ – that Gareth feels that he was able to survive at all.

**Internalised homophobia**

‘... and I do think that a lot of that kind of comes from, you know, those kind of stereotypes of… you know “Backs against the wall!” and “Will he fancy me because he’s gay?” and “He might try and bum me!” – you know what I mean?’ Mark

In some ways a disdain for homosexuals is such a part of orthodox masculinity that it almost goes without saying. Orthodoxy is reproduced through the ‘Pinocchio’ discourse in the sense that participants recognise that their entry into masculinity is predicated on a judgement made by straight men on how gay they seem.

Although none of the participants explicitly disdain themselves or other homosexuals they seem to have internalised some aspects of the homophobic discourse of heteronormativity, using it to police themselves and support the hegemon. This is particularly marked for those occupying the ‘Pinocchio’ position:

‘... because I still notice those same parts of me, that could kind of, you know, start bowing to men...’ Mark

Jeremy recognises that an experienced of being closeted for at least part of your life will leave a legacy of some internalised homophobia:

‘We are naturally guarded… years of conditioning in a homophobic society makes one guarded about one’s sexuality… I don’t think anybody can say they are entirely free of internalised homophobia because no gay man in [names city] is really free to walk
around hand in hand…’ Jeremy

Mark and Peter both recognise the legacy of internalised homophobia and suggest that it will always be part of the gay man’s lived experience

‘So, if you put it [your sexuality] on your website and announce it somehow… is the reaction really likely to be “Well, that’s a private issue, why do you need to talk about it?” But then it kind of made me wonder about “Oh gosh is there some kind of level of internalised homophobia that I haven’t dealt with yet?”’ (laughs) Peter

‘… but I think there is going to be a tiny bit of internalised homophobia inside of me… there’s got to be… no one can ‘therap’ that out of everyone…’ Mark

Andy attempts to get around the difficulty of making homosexuality and masculinity work together by accepting maleness but not its performance as masculinity:

‘I wouldn’t necessarily label myself as masculine… I would label myself as male […] it would feel like there was a purpose behind doing it and I think if I was to say “Well, I’m masculine” [that] there’s something quite false about it…’ Andy

Although proving heterosexuality is difficult because it necessitates proving the negative of ‘not homosexual’, proving masculinity is similarly fraught because it necessitates proving the negative of ‘not feminine’.

Physicality

The three men in the ‘I’m just a bloke’ position were physically imposing – all over 6ft tall and well built. For Andy there is a recognition of how orthodox masculinity operates in gay culture as well as heterosexual culture; that there are degrees of masculinity within it and that he sits within the spectrum of ‘bear’ – a particular kind of gay man that is often seen as
the most masculine within gay culture:

‘I discovered at the point of coming out that I’m also a bear [and] it strangely mirrors kind of the discrimination gay people can feel from the majority of the population […] and you know part of the attraction of bears is that they are ‘men’ compared to gay men who aren’t men and […] well, I guess part of that is being perceived as someone who doesn’t seem gay… there’s something about hair in there as well and having beards and having kind of body hair and all of this stuff…’ Andy

Natural physical strength is seen as constituent of orthodox masculinity. It allows prowess on the sports field and is, in part at least, the means by which the norms of winning, risk-taking, violence, dominance, playboy and power over women are achieved.

Gareth presents his sexuality and gender as unproblematic. As a result he tends to fairly directly reproduce orthodox masculinity and he asserts the value of toughness (particularly in terms of emotional control explored above). Growing up on a pig farm positions him in the dirty, everyday and explicitly un-feminine milieu of ‘pig shit’. For him, this ordinary physicality is what gives him ‘solidity’ and ‘dependability’ that he identifies as quintessentially masculine traits:

‘…as I said to you, I go back and say “I used to shovel pig shit” because I’d never want to be arrogant… but there is a solidity and a dependability about me and there has always has been…’ Gareth

Because of the importance of toughness and physical strength to orthodox masculinity and the rejection of the effete and the feminine characterised by homosexuality, class has often been implicated in effective masculine performativity. The working classes, with their real or fantasised greater physical fitness have sometimes been seen as inherently more masculine than men of the middle or upper classes who do not need to use their bodies in physical toil to earn their living:
‘… but anyway, so I spoke rather well… I kind of enunciated and all of that kind of stuff so that was… in the area I grew up in that meant you were posh and if you were posh you were a poof. I read… well that just wasn’t – in the culture I grew up in it was odd for people to read or to want to – and I liked art…’ Alan

Alan recognises how his way of speaking and interest in non-physical pursuits like art and reading cast him out of orthodox ways of performing masculinity.

_Pursuit of status_

Acquisition of status – described elsewhere as ‘he who has the most toys when he dies wins’ (Brannon, 1976) – is a position from which dominance of women and other men can be achieved within the canon of orthodoxy. For these participants, the pursuit and achievement of status is represented by the position of ‘expert’ implicit in their professional role as therapist. Andy is uncomfortable with this ‘expert’ role that is put upon him and senses that he is less of ‘a real person’ as a result:

‘And I think it doesn’t help always when you’ve got this label of “psychologist” and “doctor”… it kind of adds this extra layer of not being a real person…’ Andy

Richard is the most explicit about endorsing his role as ‘expert’ and sees nothing at all wrong with accepting this position:

‘Yes, that’s true… I am an expert… And why not? I have the right to do it… I have the intellectual capabilities of doing it […] Why wouldn’t I? What would be in it for me to think that I’m not one of the elite?’ Richard

Richard’s access to the ‘I’m just a bloke’ position arguably allows him to reproduce pursuit of status as a normative aspect of masculinity in a relatively unproblematic way. By complete contrast, for Mark, the labels ‘gay’ and ‘expert’ are oxymoronic:
‘… the idea of ‘expert’ never sat very well because I come from a minority… (So again, it’s slightly oxymoronic… but if you were straight you could be an expert?) Definitely! (laughs) (Why? Because gays don’t get to be experts?) Because as gays we are all a bit abnormal aren’t we? So how can we be experts at human nature? When you’re a little bit fucked up yourself? Which is ridiculous! And I know it’s ridiculous!’ Mark

Although Mark recognises that his feeling that you cannot be gay and an expert is ‘ridiculous’ there is still some sense in which his discomfort with the role of expert reproduces the discourse that only heterosexual men who fulfil the requirements of orthodoxy can wield the power of ‘expert’.

Gareth produces orthodoxy through his assertion of how successful he is at his job, a narrative that is at least in part related to the other orthodox norm of pursuit of status. In being successful at his job he is also, perhaps unconsciously, pleasing his parents who so assiduously inculcated a work ethic within him:

‘… I would argue, certainly in terms of what we do here in GP surgeries where we’re working with a 6-8 session model… there will be people out there somewhere that are better than me, but there ain’t many… and I just know that… you know, you sense it. Actually if I was a footballer I would be on 150 grand a week…’ Gareth

**Intersecting professional identity**

So far we have looked the ways that participants make sense of their gender and sexual identities. Often it appears that homosexuality and masculinity are oxymoronic and that to appear homosexual is equivalent to appearing effeminate whilst appearing masculine in an orthodox sense is conflated with appearing heterosexual. The third intersecting subjectivity
explored in the first interview was that of participants’ professional role as therapists. This part of the analysis explores how, in the context of gender and sexuality, subjects made sense of their identities as therapists.

Several interlinking principal positions were uncovered across all participants. Therapy was identified by all as a profession dominated by women in which they all felt to some extent a minority. Psychic pain was experienced making sense of their identities in a heteronormative world, driving reflexivity which itself was a stepping-stone to their professional identity. This suffering over sexual and gender identity illuminated the wounded healer position and its relationship to a distinctive gay male spirituality. Finally, all of them more or less explicitly made reference to their gay maleness in the context of the work and suggested that it was this aspect of their identity more than any other that made the work of therapy possible.

*The only boy in the village*

Most participants recognise their minority status as men in a profession dominated by women. Whether that is in their current professional practice or their training experience:

‘…there is still a sense of a professional loneliness […] maybe it comes from being the only man, from being the only gay man within this service…’ Peter

‘…[my maleness] certainly creates a sense of different-ness in a profession so substantially female and I think therefore that I’m bringing a very different perspective…’ Jeremy

‘I think there were four men started and by the end of the year none of the other three men saw the first year out, so I was the only man left by the end…’ Alan
‘… and I was the only bloke on the course and that was slightly uncomfortable…’
Gareth

‘… on every course I’ve been in the minority…’ Neil

‘Yeah – I was the only one [on my course]…’ Andy

Alan expresses frustration that maleness in his experience is side-lined in a profession that
talks more about more traditionally feminine stereotypes and archetypes of holding,
containing and caring:

‘I suppose my frustration is “cocks don’t get talked about enough!”…’ Alan

Although he acknowledges that there are far more men in NLP than in other therapeutic
modalities, Richard, too, experiences a frustration that men’s issues are ignored:

‘I still want to stand up in conferences and say: “So what are you dong to get more men
in this? You keep talking about diversity, but men is one issue you keep ignoring. Why
is that?”…’ Richard

Jeremy too mourns the loss of an opportunity to explore homosocial intimacy that comes
from being one of very few men on his course:

‘Now I feel rather sad about that… I went through courses with very few men and so
few that I didn’t find anyone that I felt I could bond with particularly… it’s really
regretful… I would have liked to have had more men around… therapy needs more
men!’ Jeremy
**Reflexivity and personal and professional identity**

In the context of their minority status as male therapists, a number of participants suggest that homosexual maleness is facilitative of the relationship because it requires reflexivity for the identity to be claimed and integrated. Andy makes the point that self-exploration is at the heart of being gay and the toleration of difficult feelings that comes with it can make one a better therapist:

> ‘I think having gone through that process of really exploring yourself and coming to a place of happy acceptance… for me there’s part of that process which has helped me develop and helped me learn and understand myself and maybe part of that insight is what can come across positively with clients…’ Andy

For some this need to explore and understand their identity was their route into a personal experience of therapy and from that to an interest in working in the field of psychological therapies:

> ‘…the life that I was planning was completely disrupted because other people couldn’t deal with who I was… and I then had to, you know, reappraise myself […] and ultimately end up… (As therapist?) Yeah…’ Gareth

**The wounded healer and gay male spirituality**

Participants also describe an aspect to homosexual identity that is an experience of having been wounded and being able to use that healed woundedness therapeutically:

> ‘… there was a kind of woundedness in the people at that time that had come out… that I think was real you know… and there’s still an aspect again […] you know of young gay men still being victims and all that kind of stuff…’ Alan
Gareth notices how this woundedness is place from which he can position himself within the archetype of the wounded healer, using it to help others:

‘… and I think that who I am, I think that the experiences that I’ve had […] you learn about huge dollops of emotional pain, you learn an awful lot about yourself […] you know, you’ve had a lot of experiences that you bring into this room.’ Gareth

Alan creates links between other cultural understandings of male homosexuality to the spiritual and the sacred:

‘… and I think it’s true and I think that is specifically because of my homosexual maleness… and I think that comes into what we were talking about the kind of Berdache and the Walks Between… and the kind of Sacred Androgen…’ Alan

As explored earlier, in doing so he constructs an ideal of homosexual maleness that challenges orthodoxy. It is a way of being male that rejects all of the normative ideals of orthodox masculinity and suggests instead that the strength and power of homosexual maleness comes precisely from its difference, its ability to draw on female and male archetypes in order to demonstrate an ethic of care, and to celebrate male spirituality and eroticism.

*Facilitating the work*

All participants asserted that it was their homosexuality that led them to consider training as therapists and many asserted that it is specifically their gay maleness that facilitates the work of therapy. Jeremy draws on the gay man’s experience of having negotiated the difficult task of fostering intimacy between men and suggests that it is this modelling of a way for men to be intimate that is useful in the work:
‘…a disproportionate number [of male therapists] are gay… we’ve dealt with that stuff that men can’t be close. It’s OK to have a therapeutic relationship with another man, it’s OK to be close…’ Jeremy

Gareth expands on this theme and suggests that the legacy of growing up gay and struggling with issues of identity makes gay men more sensitive than straight men. He believes that his homosexual maleness allows him to be a ‘sensitive bloke’ and that this unorthodox masculinity is the reason why he is able to help men ‘to talk about emotional stuff’:

‘… there is a reluctance in blokes to talk about emotional stuff because they do find it very difficult… but […] if you’ve got a bloke who’s a therapist, maybe he’s a bloke who’s a sensitive bloke […] maybe it’s a safe bet to talk about it to a bloke, because he’s going to be a sensitive bloke, you know what I mean?’ Gareth

For Alan, homosexual maleness is not simply facilitative of intimacy between men, it is the foundation of all of the work:

‘… I still have some level of belief that some of the work I do relationally is only possible because of my homosexual maleness…’ Alan

Neil constructs his gay masculinity as a kind of ‘uncertainty’ about gender identity that allows plasticity in the therapeutic relationship that, like Alan, he asserts helps him to work more effectively as a therapist:

‘I think if I reflect back on the uncertainty about my gender identity, it’s been a good thing in terms of my role as a therapist…’ Neil
Interview Two: Subject positionings and the interpersonal

Dominant themes in therapy with men

The first section of this psychosocial analysis considered the intrapsychically experienced intersections of gender, sexual and professional identities. Participants experienced a binary tension between masculinity and homosexuality and drew on orthodox norms of masculinity as a benchmark. They also all made sense of their experience in negotiating that tension with respect to their professional identities as therapists. This second section of the analysis considers the interpersonal dimensions of subject positionings; how we are constantly negotiating what is hidden and revealed in the intersubjective space.

In identifying the dominant themes it appears that participants’ experiences mirrored the sexuality-gender binaries expressed in their subject positionings. In other words, typically those men who felt un-masculine tended to express more anxiety when talking about their male clients. Those for whom masculinity was relatively unproblematic, by contrast, tended to express more normative masculine traits such as restricted emotionality and a focus on their professional identities as therapists.

The ‘Pinocchio’ experience: Fear dominates

The predominant process experience in therapeutic work with men for those in the ‘Pinocchio’ position was fear. From the participant side this was expressed as fear of judgement by other men, in particular that straight men would judge them to be ineffective therapists as a result of their homosexual identity. From the client perspective, participants suggested that male clients, as a group, tended to fear intimacy, vulnerability and emotional expression. Whether taken from the therapist or client position, this fear would seem to be
linked to anxiety over effective orthodox masculine gender performance as explored extensively in the first part of this analysis.

Interestingly, although Peter, Mark and Jeremy all expressed a similar discursive position, Neil was unusual in this group in not mentioning fear at all in our second interview. His outlying discursive position and possible reasons for it are discussed in a section following this analysis.

*Therapists fear: Homosexuality and powerlessness*

In our second interview Peter referenced the work of the pioneering social psychologist Charles Cooley (1864-1929) and his concept of the ‘Looking-Glass Self’ – the notion, particularly appropriate to this research project, that we see ourselves as others see us:

> As we see our face, figure and dress in the glass, and are interested in them because they are ours, and pleased or otherwise with them according as they do or do not answer to what we should like them to be; so in imagination we perceive in another’s mind some thought of our appearance, manners, aims, deeds, character, friends, and so on, and are variously affected by it. (Cooley, 2011, p.126)

This idea is particularly important for Peter since he often feels that he becomes what he imagines straight men think he is when he is working with them:

> ‘I become what I think he thinks I am… and then so then my imagination of what a straight man would think about being with a gay male therapist is how I feel about myself… which is why I don’t talk about it probably’ Peter

His fear is that, if straight male clients knew that he was homosexual, they would judge him negatively, dismiss him and, in a parallel with the ‘in-out’ hegemonic masculine discourse
explored earlier, cast him out from the realm of the masculine. He references one particular heterosexual male client and wonders if he chose to end the work through disgust at discovering that Peter was gay:

‘So my fantasy then was […] he’s realised ‘Oh my God! No wonder this bloke is going on about feelings and getting in touch with your emotions… because he’s some kind of poof!’ … it’s very interesting what it says about how I see myself as an object with a straight male…’ Peter

Peter, in his fantasy, becomes the ‘poof’ he imagines his straight male clients would find him to be if only they knew his secret sexual identity.

Mark similarly is frightened that his heterosexual male clients will find out his sexual identity and use it to threaten him in the room:

‘… I do remember having the sensation of worrying what he would do if he brought my sexuality in the room and questioned it… wanted to know in some way…’ Mark

For Jeremy it is less about fear of having his sexual identity made explicit in the relationship but more that, like Peter, he will be judged as ‘less than’ and, through his un-masculinity, be seen as lacking the power to act effectively as a therapist as a result:

‘… if I’m having to reach out to a straight man, will I be found wanting in some way? […] because there’s such a big gulf between me and your down-the-line straight man…’ Jeremy

Mark’s solution to his fear that heterosexual male clients will threaten him and be aggressive towards him in the relationship is to ‘put on a bit of armour’. Importantly he links this desire to a past history of feeling vulnerable to other men and not having been able to protect himself:
‘I don’t know whether I would be a good therapist if I wasn’t able to put a bit of armour on when I’m working with particular kinds of clients… in this case, men… because that bit inside me […] needs a bit more protecting… I feel I owe it to myself because there was a time I wasn’t able to…’ Mark

Client fear: The threat of homosocial intimacy

Peter, Mark and Jeremy all talk about heterosexual men’s perceived difficulty with vulnerability and emotional expression:

‘… there are a lot of boys here who are terrified of their emotions…’ Peter

‘… they [straight men] just kind of seem a bit frightened of you… they’re a bit unsure of what you might do with them…’ Mark

‘… you can’t really reveal the layers… you can’t just play […] it’s harder in that case to get him to open up…’ Jeremy

In doing so they reference and reproduce orthodox ways of being masculine that are, in some way, central to their own sense of not being appropriately masculine. Jeremy once again makes explicit the link between homosexuality and effeminacy:

‘… I think they [straight men] might have related to another bloke-ish man, but they don’t relate to somebody they perceive as an effeminate man or, perhaps more directly, as a gay man…’ Jeremy

Peter goes on to suggest that this is not a problem simply for straight male clients, but for all male clients socialised in an orthodox discursive environment:

‘… even between gay men who may struggle to have that level of intimacy because of having bought into the whole idea of what a proper man is… and if you are emotional or vulnerable that somehow undermines your masculinity…’ Peter
Mark experienced one particular client as extremely masculine through his dominance and refusal to be vulnerable with another man in the room:

‘And then when I met him he was like about 6ft 5 and built like a brick shithouse…. And was ridiculously angry (laughs) with me… in the room… because obviously he couldn’t show me the sadness, so he was showing me the anger… sitting in the room with him, he couldn’t tell me how sad he felt… Because, I suppose I was another man and because it was a vulnerable position for him to be in…’ Mark

Mark wonders whether fear of (homosocial) intimacy and emotionality cause this client to express the one emotion that orthodoxy permits for men: anger. Moreover, he goes on to explore how this is mirrored in his own behaviour as a therapist, suggesting that, perhaps for different reasons, both he and his client are actually afraid of each other:

‘… he would get a little bit close and would get frightened and pull back… so we were both getting frightened for different reasons I think […] there was lots of kind of homoerotic stuff going on with him in the transference and he feared me penetrating him in some way…’ Mark

As Kimmel (2007: 79) suggests: ‘This, then, is the great secret of American manhood: We are afraid of other men [and moreover] we are ashamed to be afraid.’ If this is true then it is not surprising that, for these men at least, fear, shame and anger is prevalent in all male dyads. Perhaps this is another reason why ‘Pinocchio’ men seem to find that often men are happier for a therapeutic relationship based on a kind of functional work ethic rather than the exploration of feelings:

‘…it doesn’t feel like it flows terribly easily… I feel he wants to fix…you know how men want to look under the engine and fix… “Well there’s this, this and this and it should get better”… And it’s sometimes almost hard to fill the hour…’ Jeremy
However, Peter sees the fact that men can be more emotionally controlled than women as an opportunity:

‘… maybe that’s why I like working with men (laughs) Because so often they’re emotional beginners […] there’s a real sense of release and relief and […] a kind of sense of “Wow, this is all new and maybe it’s OK to let some of my feelings out?” Whereas with women I think it’s more like the advanced classes (laughs)…’ Peter

For those in the ‘Pinocchio’ position, therapy with men involves being aware of and attempting to work with fear and anxiety. Acceptance and acknowledgement of that fear and allowing non-traditional ways of being masculine, including greater emotional expression and vulnerability both in self and in the client, is seen as helping to facilitate effective therapy for this group.

**Neil and the parental role**

Although he is part of the group of participants who adopt the ‘Pinocchio’ position with respect to his gender and sexual identity, Neil is far less concerned with fear over unorthodox masculine gender performance in therapy and he makes no reference at all to heterosexual men’s perceived fear of vulnerability and emotional expression.

On the contrary, in our second interview Neil takes a paternal (or even grandpaternal) position when talking about his work with, typically, younger men. Again and again he makes reference to his position as paternal role model in the relationship

‘… these tend to be men whose relationships have seriously broken down or erupted in violence or something of that kind… and in those situations the transferential pull I’ve felt is to be a dad for them… or at least ‘friend of dad…’ Neil
‘Probably all of them in some way – and I’ve seen quite a number – who definitely come here with a pull which is like “My dad left when I was three and I haven’t a fucking clue how to be a man because I’ve has no proper role model” […] [so] I’m going to step into the shoes of dad for a while… or at least somebody who could perhaps facilitate a dialogue between this client and their dad if their dad was still alive…’ Neil

Neil was the oldest of my participants. At 62, he was some 10 years older than the next oldest participant and in a lifestage Erik Erikson (1902-1994) would have defined as the end of middle adulthood (40-65 years old). He wonders whether the intersection of his identity as a late middle-aged man allows him access to a broadly parental position in his work with men:

‘Again, it’s the age I am, I’m pretty sure… that for some of these younger clients I’m probably more like granddad than dad… which is fair enough… and I think that can be quite positive in that some quite younger clients might have more in common with their own grandparents than with their troubled parents…’ Neil

As a TA therapist Neil is aware of and reflects on the availability of the ‘Parent’ position in human transactions. Although he has no strong desire to have been a parent he is aware of how male clients, in particular, exert a particular force on him in therapy:

‘… if I’m honest it happens more with male clients… and I think it’s something to do, again, with the absence in my own life of proper male role models…’ Neil

Neil’s father died when he was very young and he had a difficult relationship with a mother who smothered and controlled him. He reflects that there is perhaps something about his own inner child that lacked male role models that is able to connect with that part of the client. Moreover, it is possible, as an outlier from the rest of the ‘Pinocchio’ group, that he is closer to the next oldest participant, Alan, in his ‘Walks-Between’ experience. Both of them seem able to allow a greater openness and intimacy than either the ‘Pinocchio’ or ‘I’m just a bloke’ positions appear to allow.
The ‘Walks-Between’ experience: Homosexual maleness and intimacy

Alan’s reflections in the second interview were influenced by his interests in spirituality and a questioning about what homosexual maleness is for or what it can offer society. His central thesis, which he used client vignettes to illustrate, was that it models a way for men to be intimate. In a sense he takes the fear prevalent in the ‘Pinocchio’ experience explored earlier and says that it is precisely his homosexuality that offers a way through the homosocial fear impasse:

‘… I think that’s got to do with that whole thing about being able to allow a level of emotional intimacy […] that, as homosexual men, who deal with the most intimate contact with other men, it’s got to be that we become widened in some way, integrated in some way… that our tolerance becomes broadened in the way that a non-homosexual man can’t…’ Alan

For Alan, the benefit of homosexual maleness is that not only can it model male intimacy and freedom from fear of other men, it can also allow an expression of both the mother and father archetypes in the work:

‘… ideally, when I feel like I’m integrating it [my homosexuality] or when it becomes integrated you get a man with the capacity to embody the mother archetype in the consulting room…’ Alan

This integration and capacity for openness and intimacy is experienced in the body in an almost mystical way:

‘… when I was getting to that point of kind of sinking into a way of being, one of the things that I used to notice was a kind of signifier […] a signal that I was shifting into a zone, as that I would be able to sit and I would be able to feel my testicles rotating in my scrotum…’ Alan
He talks of his experiences in working with male clients and, in particular, running a men’s group for a number of years. Like Neil, Alan too finds that his work with men often invokes a paternal response in him and a connection between his and the client’s ‘inner child’:

‘I think there’s probably something about that I project my ‘boy’ into all of my clients… and then look to meet some of the need that I think I feel I developmentally didn’t get…’ Alan

However, unlike Neil he then links back this ability to connect to his earlier position about homosexual maleness being an opening out into greater homosocial intimacy:

‘… it’s something I do… something around that thing about ‘the boy’… there’s something about the intimacy that I think I’m able… willing and able to go to…’ Alan

The ‘I’m just a bloke’ experience: ‘I’m just a therapist’

Those participants in the ‘I’m just a bloke’ position proved far less likely than those in other positions to talk about their own process when discussing their work with male clients. This was not immediately obvious during the interviews and it was only after some considerable analysis and time spent looking at different ways of representing their data that this common thread started to become evident.

As we have seen earlier, Gareth’s physicality was a central organising principal in his self-experience as a masculine man. In this context it is interesting to see that a great deal of Gareth’s focus in our second session was around physicality and what might broadly be termed ‘the erotic’.
In his first vignette he talks about a ‘young, strikingly attractive African guy’ who was ‘stunningly beautiful’ and who he accidentally encounters at a local gay club. The client then goes on to give him a ‘spontaneous and intended and meant’ hug at the end of the work. In his next vignette he describes ‘a very striking young man [who] turned up in sleeveless vests and ¾ length shorts and would sit and adjust himself’. In his third vignette he says ‘… there was this young man standing outside the counselling centre and I thought “Ooh”, you know “Nice bum!”’ In his final vignette he again references physicality and sexual attractiveness: ‘I mean I’m 6ft 3 and I’m fairly well built… he wasn’t as tall as me but he really was your proverbial barn door… I mean you had the image of him ripping telephone directories for fun!’ Like the first client, Gareth is surprised when, at their last session ‘… he suddenly hugged me […] and it was like being squashed, which doesn’t happen to me very often in a hug…’

His account of being ‘squashed’ by another man points once again to his physical sense of himself as ‘fairly well built’ and masculine, perhaps defending against the possibility of being made small and vulnerable by a larger and more powerful man. Throughout our second interview, Gareth makes reference to his physical size and down to earth nature in relation to its importance and relevance to his work with male clients. For him, it helps to position him as a safe figure ‘I seem to be this big safe place for people’ whose unpretentious style underlines his core orthodox masculine presentation: ‘It’s the pig-shit-shovelling that’s the important bit’.

In common with other ‘I’m just a bloke’ participants, Gareth tends to downplay his own emotional experience in his work with men and suggests that it is his professional identity that is the most important factor:
‘(Do you experience yourself in any way differently when you work with men?)  No, I don’t think so… I always try to… I think I always try to be “the therapist”…’ Gareth

Andy’s position in his work with men is similar to Gareth’s. He tends to avoid talking about his own process in his work with men and spends some considerable time at the start of our interview exploring the intersectionality of emotional expression as a gay man with the constraints of a professional identity as a therapist:

‘I remember at university we talked about crying in session and clients making you cry and I remember saying then, and still now it’s almost like a badge, like “Oh, I’ve never cried in session!”… […] and I’ve been able to hold it all in…’ Andy

He also brings a similarly orthodox understanding of masculine gender performance to his professional work by suggesting that maleness or masculinity in the context of therapy is about ‘robustness’ and being able to ‘handle it’:

‘… and that research tends to back up that […] people look for a female therapist for that nurturing side and people look for the male therapist because they can handle it because there’s robustness to being a man, which means I’ll… I’m not going to sit here and cry about what you tell me (You can take it?) Yeah…’ Andy

Of all those in the ‘I’m just a bloke’ position, Richard was by far the least willing to engage with the research question in terms of discussing his experience of working with male clients. There were two principal themes in our second interview. Firstly, repeated attempts to get me to reframe my research question:

‘… what might be more interesting [would be to] take a random sample of my gay male clients and a random sample of my heterosexual clients and to look at their session tapes…’ Richard
‘I suppose the other thing might be for you to interview some of my male clients and find out what they think…’ Richard

Secondly, much of our second session seemed to be spent arguing for the benefits of his own neurolinguistics model. He talks about a straight male client who he has been seeing ‘for a couple of years now, because he’s divorcing his wife’. When the client calls him and gets ‘very morose on the phone to me’ Richard responds:

‘Yeah and you’ve come to a gay man to get it sorted as well! [...] Let’s pile on the shit, shall we? [...] so I can use that as another means to use my sexuality to [...] exaggerate the whole thing… in neurolinguistics they often call it ‘The Blow Out’...’ Richard

Although ostensibly he is arguing for the benefits of NLP techniques the manner in which he does so could be seen as exemplifying many of the archetypes of orthodox masculine gender performance explored in detail earlier in this analysis. He is clear that his own subjectivities with respect to sexuality and gender – or indeed those of his clients – are completely unimportant. The only thing that matters, he suggests, is whether clients are prepared to engage with the process or not:

‘I can sort these clients into those who want to engage in the process and those who want to fight the process… ‘How does the client want to engage? Whether they’re lesbian, gay, heterosexual, men or women… it doesn’t really bother me. Perhaps it’s more interesting to talk about the kind of careers people come with…’ Richard

Once again, along with arguing for NLP-style process engagement (rather than, for example, exploring unconscious motivations) Richard again attempts to reframe my research by suggesting it would be ‘more interesting to talk about the kind of careers people come with’. His stance is less relational and more work oriented, something that is contained in NLP’s assertion that modelling is most important aspect of the work:
‘It’s about how much we are prepared to go out into the world and be different whilst still knowing who we are…’ Richard

‘… it’s about how flexible you are prepared to be… if, as an authority figure you’re willing… or you’re going to provide a different model…’ Richard

Talking about sexuality

The question of whether to self disclose homosexuality, amongst other personal information, to clients is the subject of its own extensive literature (e.g. Knox & Hill, 2003; Lea et al., 2010) and self-disclosure of sexuality per se is not the focus of this research. Nevertheless, whether therapy is an appropriate place for self-disclosure of sexuality is a ‘live topic’ for gay male therapists in a way that it is not for their heterosexual colleagues:

‘I suppose it’s very difficult because straight people don’t usually go round telling people that they are straight… But do they even think about it? […] If you had two straight people in therapy do they even think about the fact they are straight? Whereas if you had two gay men in therapy […] you have that whole issue with do they know? Do they want to know? Should I tell them? Do I wait for them to ask? And then when I have told them what impact does that have? What do they think about it? All of that is a really important part of the work I think.’ Peter

Peter succinctly describes the host of questions that can occupy the gay male therapist’s mind when working with another (gay) man and this section briefly explores the range of positions that participants in this research took in relation to talking about their sexuality with other men in therapy.
‘It’s no place for the gay stuff’

Principal subject positions do seem to have an affect on therapist self-disclosure of sexuality.

None of those in the ‘Pinocchio’ or ‘Walks Between’ positions would disclose to straight male clients – though some consider disclosing to other gay men (something explored in more detail later in this section):

‘… and one thing that I hadn’t really realised before is that I don’t think I have ever declared my sexuality to straight clients…’ Peter

‘… well, yes… it [sexuality] is pretty hidden though I’m sure lots guess… but, yes, it’s more hidden…’ Jeremy

‘… I’m trying madly to think whether I have ever disclosed my sexuality and I don’t think I have…’ Neil

‘… straight men get very much less of me than gay men would in therapy… they get more “therapist” and less “me”…” Mark

‘… and I’ve never come out to a client… (Never?) Ever… (Deliberately?) Yeah it’s been a conscious decision…’ Alan

Things seem less clearly defined for those in the ‘I’m just a bloke’ position. Gareth aligns himself with those above in not disclosing his sexuality to male clients (though he has disclosed to some female clients):

‘Yeah, I’m trying to think… I don’t think… [pause]… no, there was an occasion but it wasn’t with a bloke… I don’t think I’ve ever outing myself to a male client…’ Gareth

For Andy, disclosure is less of a black and white issue and he acknowledges that he makes a judgement based on his particular experience with each client:

‘… I think it’s been a kind of case-by-case experience and I’ve always been happy […]’
Richard was unique amongst participants in saying that not only was he open about his homosexuality with clients he saw it as his role as a therapist to deliberately and explicitly use it to challenge client homonegativity. His approach to self-disclosure is so markedly different from everyone else’s in this sample that it merits a separate discussion at the end of this section.

Although therapeutic reasons are advanced for non-disclosure and described below, we might imagine that the fact that sexuality has been experienced as a more problematic and shaming subjectivity, particularly for those in the ‘Pinocchio’ position will have contributed to their decision. Their relative inability to hide their sexuality in the presence of straight men who may judge their gender performance can contribute to fear in the relationship as explored above:

‘… if you get that typical straight man sat in a room with you […] my mind initially goes “Oh God! This is just going to be horrendous, because I remember what people like you have done to people like me”…’ Mark

Fear drives the setting up of an archetypal relationship for Mark where both himself and the client become de-personalised and simply become ‘people like you’ and ‘people like me’.

Making therapeutic decisions

Although none of the participants are closeted in their lives outside the therapy room all of them, with the exception of Richard, reflected on the difficulties surrounding self-disclosure of sexuality. While there was some discomfort around being assumed to be heterosexual there was also fear of the negative impacts self-disclosure would have on the work:
‘The assumption then might be that I am straight… which doesn’t feel too good… but how do you avoid that really?’ Peter

These concerns coalesced around three principal positions. The first is that was that self-disclosure would get in the way – discourses of obstruction – and the second was that it would somehow be harming, in particular to heterosexual men – discourses of destruction. Thirdly, participants recognised that having an undisclosed sexuality allowed them to work more effectively with any homoerotic feelings in the room.

_Discourses of obstruction_

Peter experiences his homosexuality as obstructive in the sense that it ‘closes’ and ‘shuts things down’. The obstruction comes not from the homosexuality itself but how that aspect of his identity may ‘prejudice’ his male clients against him:

‘You see I think that actually sometimes disclosing your sexuality closes things down too quickly […] I think that can shut things down in an unhelpful way and it kind of then… the prejudice then determines the quality of the relationship…’ Peter

Peter indirectly suggests that the obstruction in the relationship comes from straight men’s homophobia and ‘prejudice’. Neil too takes the position that revealing homosexuality in the therapeutic relationship with heterosexual men is potentially obstructive. He senses that being open about his sexuality might ‘send the work off on a different path’:

‘… there are times when you can make a disclosure […] including your sexuality, where it definitely isn’t going to help, and I think […] if I had outed myself right at the beginning, I think it would send the work off on a different path from the one I figured, in my judgement, that it needed to go along… ’ Neil
Andy too takes a position that self-disclosure would get in the way by suggesting that the environment in which he works is very heteronormative and, as such, if his sexual identity were spoken it would ‘close it down’ and silence his straight male clients:

‘… if they knew my sexual identity, all clients, you know… if there was kind of a sign on the door… this sense of “You’re seeing a gay male”… I’m sure that would have some impact on some of the… I mean, the amount of prejudice that can exist in the […] environments that I work in… it would close it down… people would think “Well, what am I going to say to him?”’ Andy

Discourses of destruction
A different emphasis on the importance of keeping (homo)sexuality ‘out’ of the consulting room is found in discursive positions that emphasise the threat that a gay male therapist’s homosexuality represents for heterosexual men. In the same way as Allan et al. (2008) found that gay teachers were at times accused of ‘flaunting’ the private matter of their sexuality within the public space of the school, Peter uses the language of surprise to suggest that ‘suddenly’ coming out in the therapeutic relationship might be experienced by male clients as ‘overwhelming’:

‘… my experience is that some clients do want to know and some clients don’t want to know, especially if they’re quite conflicted about sexuality in themselves it can feel a bit overwhelming, I think, or a bit intimidating for it suddenly to be announced…’ Peter

In the same way that contact with homosexuals is seen as a threat to orthodox masculinity, those participants in the ‘Pinocchio’ position often feel that knowledge of their sexuality would frighten heterosexual male clients away:
‘Or somebody out there thinks I’m gay “Oh my God! What can I do to avoid it?” you know, “At all costs that must be avoided” So I think for them to think “But you’re gay!” That would just be like “I’m going!”…’ Peter

‘… they [straight men] just kind of seem a bit frightened of you… they’re a bit unsure of what you might do with them…’ Mark

Jeremy is even more direct in imagining the homophobic disgust with which straight male clients might experience him as a ‘rather flamboyant, gassy man who flaps his hands a lot’ and how this would prevent them from being able to relate to one another:

‘… they, probably, their whole hearts sink a bit when they find it’s a man…. and I can’t help wondering as they then come to notice that it’s this rather flamboyant, gassy man who flaps his hands a lot and gesticulates wildly. Is this somebody they can disclose to? Is somebody they can work with? I kind of feel, somewhere in the therapeutic relationship, that something’s lost because they might have… related to another bloke-ish man… but they don’t relate to somebody they perceive as an effeminate man or, perhaps more directly, as a gay man…’ Jeremy

Once again, homosexuality, effeminacy and failure to be appropriately male in an orthodox way are all conflated and seen as threatening to the therapeutic relationship.

*Working with homoerotic feelings*

Some participants also see overt therapist homosexuality as a threat to the relationship within the context of homoerotic anxiety:

‘I think one of my clinical reasons or decisions for not disclosing is the number of times I will get homoerotic anxiety expressed in the client […] and I think in them moments of anxiety my concern is that if they were aware of my sexuality they wouldn’t go there in the first place…’ Alan
Interestingly, this position implies that homoerotic anxiety can only be effectively worked on in the relationship if the straight male client assumes his male therapist to also be straight.

In a related discourse justifying the exclusion of his sexual identity from the relational space Gareth wonders if his male clients would open up about experiences of same-sex intimacy if they knew their therapist was gay:

‘… sometimes, you know, as I’ve said, they talk about one-off sexual encounters with blokes… and I think “I wonder what they would…would they think differently if they subsequently found out they had actually had that discussion with a gay man?”…’
Gareth

This position is similar to the one explored by Anderson (2008) when he talks about ‘the one time rule of homosexuality’ where, as with racial discourses of whiteness, heterosexual power and privilege is produced through a narrative of absolute purity. Orthodox masculinity is therefore at the risk of being forfeited through just a single same-sex experience.

Opening the door

Although almost all participants express reservations about self-disclosure of homosexuality with straight male clients, there are circumstances when they might consider doing so. They are also far more open to the idea of coming out to female and other gay male clients.

‘I can ‘come out’ a bit more at the end’

Some participants consider a slight softening of their interdict on disclosure by suggesting that, while talking about their sexuality might be obstructive or destructive in their work with men, it is possible to be more open towards the end of the work.
‘And I think I generally do that with people… I will do that as an ending […] I’m not saying I’m dishonest with people… but I think that as an ending approaches you have got to demystify yourself a bit…’ Mark

Jeremy explicitly reproduces the obstructive and destructive discursive positions explored earlier, using language like ‘blighted’ and ‘warped’ and suggests there’s ‘less to lose’ at the end if things go wrong. Yet, implicitly, coming out at the end of therapy also tacitly avoids giving the client the chance to explore its meaning; either its meaning in the relationship or the meaning that he might give to it having been kept out until the end of the work:

‘I think it’s something that’s often worth letting out towards the end more overtly… because there’s less to lose, because there’s less of the therapy to go… and if it turns out to be a blighting influence where suddenly it shifts the relationship in some very fundamental and warped way that you’ve got less to lose by letting it out later on…’ Jeremy

Peter seems to suggest that coming out at the end is a question of allowing the client to form an impression of him in the relationship without immediately judging him on the basis of his sexuality:

‘… I don’t know what box I then get slotted into and I don’t want that to happen… because what I want to happen is for there to be a relationship that builds up… maybe at the end, if they’re interested, it might be interesting for them to know they have worked with a gay male therapist… because then they’ve had the emotional experience of being with me…’ Peter

‘It’s OK if he’s gay’

As we have seen, therapist self-disclosure of homosexuality is problematic for all but one of the participants. This section of the analysis considers a development of a discursive stance that suggests that disclosure of therapist homosexuality to gay male clients is acceptable
because it does not necessarily threaten heterosexual masculinity’s hegemony:

‘I think with gay male clients it can be different and there is an interesting kind of area to look at around disclosure…’  Andy

A number of participants talk about something less overt than explicit coming out and suggest that they make hints that might allow their gay male clients to guess their sexuality:

‘… with gay clients I suppose I try and drop in a few clues, maybe the odd ‘us’ that I am sure they pick up on or sort of after about half way through… but you know in a way it feels mean to make them kind of sweat it out…’  Jeremy

In a similar position to the one where Jeremy argues that it is possible to be more open about his sexuality towards the end of therapy he suggests that dropping hints is something he might do ‘after about half way through’:

‘I probably never actually come out to people, but gradually have drip-drip-drip fed them enough clues that they’ve kind of cottoned on…’  Jeremy

Arguably the way in which Jeremy positions himself with respect to his sexuality in the therapeutic relationship seems to parallel the way in which gay men might have signalled their sexuality to one another during a time at which and in places where homosexuality was proscribed.

Although he has disclosed to some gay male clients Alan is opposed to the idea that it is ‘helpful’ to do so for young gay men coming to terms with their sexuality:

‘… this idea that it was sometimes helpful to come out to gay men or people who were kind of coming to terms with their sexuality […] I just feel it’s intrinsically wrong…’  Alan
Nevertheless, he admits that he too has dropped hints to male clients:

‘… and I suppose what I’m thinking is that, in that group, I would quite deliberately and explicitly make references to gay cultural icons […] anybody with ears to hear would start to think “That’s got to be a gay man”…’ Alan

The idea of communicating through coded language to ‘anybody with ears to hear’ is a way of both denying and asserting homosexuality at the same time and is part of a normative masculine performance. Neil describes the phenomenon succinctly when he says ‘we show ourselves, but we may not tell’:

‘… I may have unwittingly given him all sorts of clues regarding my sexual identity… but only by my acceptance… we show ourselves… but we may not tell… that’s the way I prefer to experience myself in relationship with a client rather than having something written on my forehead…’ Neil

‘I can say what I like’

As identified earlier, Richard was the one participant for whom self-disclosure of sexuality was produced as entirely unproblematic. In direct contrast with his peers he did not say that he had deliberately hidden his homosexual identity, neither did he suggest that it was therapeutically beneficial for his male clients to do so. This may in part be to do with his model of practice. For Richard, as an NLP therapist, the whole therapeutic enterprise is about modelling and offering clients different ways of being in the world:

‘… it’s familiar territory, it’s not something ‘over there’ that needs to be hidden and not talked about… it’s part of who we are […] and I’ve used that, I guess, as part of my sexuality to offer to my clients other ways of being…’ Richard
‘And disclosure […] has to have some kind of mix that is intended to be beneficial for the client and the relationship between the two… And the idea that I would not disclose that and have to listen to lots of very negative talk about gay men, I'm just doing what happens out in the world and the whole point about therapy is to do something different!’ Richard

Although all participants recognise that their sexual and gender identity helps them in their work, Richard is unique in seeing that it is speaking of his homosexual maleness rather than simply being a gay man that is facilitative. He is direct and unapologetic in the way in which he is open about his sexuality with clients:

‘… the stories that come to my mind are the women who say “So, what does your wife think about you having… you know, being alone in the flat with other women?” I go “Well, I have a husband” and they go “Oh! Oh, ok”…’ Richard

Although Richard would suggest that he is being open about his identity and modelling openness to his clients, there is arguably an aggressive element to the way in which he reports it in our interview. If it is true that, as someone in the ‘I’m just a bloke’ position, his homosexuality is not immediately obvious to others, coming out in the rather sarcastic way he outlines could in fact have the effect of shaming his client.

In this light we might interpret his avowed ‘openness’ as a way of using power in the therapeutic relationship to ensure that his own homosexual subjectivity is not able to be used by the client to shame him. This reading of his position is more explicitly referenced in the following quotation:

‘And men talk about it… you know “What’s your girlfriend like… have you got kids?” and I say “You know, we have been trying for years but it hasn’t worked yet” “Well why not?” “Well, he says, you know, we’re doing it wrong” “Oh! Oh!” they go… and sometimes I use that quite explicitly when clients come in who are very power based,
very controlling clients, in their world, so I try and kind of cut through all the rubbish…’ Richard

In direct contrast to the discursive position that suggests that withholding knowledge of homosexual identity allows homoerotic anxiety to be worked on in the relationship, Richard positions his explicit talk of his sexual identity as facilitative of the work:

‘… and lots of my male clients admit to having had gay experiences… some of them feel far more able to talk about the abuse they’ve suffered to another gay man rather then to anybody else… so I will shamefully [sic] use my sexuality when it seems appropriate to provide for the client in that environment…’ Richard

Finally, Richard, in common with some of the literature, is also noticing a different and more inclusive attitude in younger men towards homosexuality. He suggests that his younger male clients are less concerned by the phenomenon of homosexuality, perhaps because it is seen as a common sexual identity that they might encounter in all aspects of life from the schools they learn in, the bars they go to, the places they work in and the films and music that they enjoy. For it to exist within the field of psychological therapies is therefore equally unremarkable and unthreatening:

‘… maybe that’s why straight men come to me? Because I’ve had guys in their 20s, straight men in 20s, where gay men is not the issue… so me as a gay man is neither here or there as far as they are concerned… well, the ones I’ve seen…’ Richard

It seems that, at least in part, Richard see his professional role as therapist in socio-political terms. In order to ensure that homosexual maleness becomes ever more unremarkable within society as a whole he sees it as his role to make it unremarkable within the field of the psychological therapies.
Arguably, however, this stance could be seen as putting the immediate needs of his clients behind either his own or those of a wider gay community political agenda. As Mark points out, it can often be tempting to take on overt or implicit homophobia in the room:

‘… lads are sat in front of you and they’re calling everything ‘gay’ […] you can just feel yourself inside a bit and you think “I would dearly love to just say something… but then you know that isn’t kind of your role… you’re not here to be a political figure, even though it would be nice to be sometimes…” Mark
4.3 SECONDARY ANALYSIS

The Foucauldian lens

The primary analysis uncovered principal subject positions with respect to gender and sexuality and suggested that orthodox ways of doing masculinity remain a reference point for all participants, irrespective of whether they feel able to deliver a convincing performance. Although they all acknowledged the importance of their homosexual masculinity in their work as therapists, it seemed that their principal subject positions had a strong influence on how they reported the experience of all male dyads. For all of them sexuality was problematic not only in the context of normative gender performance but also in terms of how, for all but Richard, its discussion was better left out of the relationship with (heterosexual) men.

This secondary analysis does not consider the data afresh; instead it considers the results of the primary analysis through a Foucauldian lens. It explores how domains of truth, power and ethics might further illuminate the socio-political dimensions of the positions already uncovered. The socio-political arena is important since it is the space in which we discover whether we are ‘in’ or ‘out’, whether we are accepted or excluded. It is the space in which we are watched and judged and in which we watch ourselves. As Foucault (1980, p.116) says ‘there is no need for arms, for physical violence […] just a gaze. An inspecting gaze which each individual under its weight will end interiorising to the point that he is his own overseer […] thus exercising surveillance over, and against himself’.
Domain of truth

Discourses through which we are constituted as subjects and objects of knowledge

Truth is a kind of knowledge that is produced by a speaker who holds a position of power within the discursive field and who therefore maintains an authority to speak. It is not simply ‘knowledge’, it is ‘truth’ because the knowledge is backed up by power and authority. In the context of this research, the question of ‘who is authorized to speak, to whom and with what truth-effects’ (Halperin, 1995, p.13), is linked to the authoritative nature of orthodoxy.

We are thus all situated in socio-political discourse where we are told and come to know the ‘truth’ about ourselves. Those in the ‘I’m just a bloke’ position not only have access to orthodox ways of masculine gender performance through their very physicality, this access also grants them the power, typically held by heterosexual men, to speak authoritatively about what constitutes ‘masculine’. By contrast, those in the ‘Pinocchio’ position (and to some extent the ‘Walks-Between as well) recognise that they have looked to straight men and been denied permission to enter the ranks of the authentically masculine.

Butler (2006) asserted that her work is concerned with questioning ‘regimes of truth’ that suggest some kinds of gendered expressions are true and others false. For all participants – except, perhaps, Alan – it is not possible to be fully gay and fully masculine. In that sense it would seem that all participants, despite the values of homosexual maleness to their professional vocation, accept the ‘truth’, reinforced in the socio-political discourses in which they are embedded, that homosexuality is problematic for authentic masculine gender performance.
**Homosexuality as the object of knowledge**

The idea that homosexuality is constitutive of a particular identity, rather than simply a form of behaviour, is a product of modernity. Foucault (1998, p.43) argues that the advent of, so-called, *Scientia Sexualis* in the late 19th century is the birth date of the homosexual as a particular kind of person. The ‘truth’ of the existence of the homosexual, discovered under the exacting scrutiny of the scientific gaze, guarantees that homosexuality and ‘the homosexual’ become objects of scientific enquiry and analysis. This has the effect of turning the gaze ‘out there’ to the homosexual while ensuring that scientific enquiry is never concerned with ‘in here’, looking at the ‘truth’ of the heterosexual. As Halperin (1995, p.47) contests, ‘heterosexuality itself is never an object of knowledge’. In a sense, even this research could be argued to be heteronormative in that the object of its gaze too is the homosexual and not the heterosexual. Although attitudes to homosexuality have undoubtedly changed in the last 20 years, Halperin, writing in 1995, argues that, because heterosexuality is never problematized, it retains the authority to speak.

He highlights this difference in knowledge discourses around gender and sexuality with reference to a front cover article in Newsweek on June 21st 1993 that posed the question ‘Lesbians: What are the limits of tolerance?’ This cover story was then lampooned by the Bay Times some ten days later, seeking to unmask the heterosexist privilege assumed in the headline by renaming Newsweek ‘Dykeweek’ and asking the question ‘Heterosexuals: What are the limits of tolerance?’:
Although tongue-in-cheek, the Bay Times article highlights the assumed privilege of the heterocentric discourse in the Newsweek article. If a similar strategy were to be taken with this research question, it might be seen as absurd for a gay researcher to ask straight male therapists about what benefits they believe might accrue from concealing their sexuality and how they imagine their male clients might react to the, perhaps shocking, news that they had been in therapy with a heterosexual man. It is certainly difficult to imagine a heterosexual male therapist claiming, as the majority of participants do, that a beneficial therapeutic relationship is more likely to be fostered if their male clients were to assume them to be homosexual.

This example may seem facetious, but the mere fact that it appears so shows how embedded is the discourse that heterosexuality is ‘both an obvious fact that can be universally known without “flaunting itself” and a form of personal life that can remain protectively private without constituting a secret truth’ (Halperin, 1995, p.35). It is heterosexism’s embeddedness in culture that is the link to the second domain in this secondary analysis: the domain of power. As Foucault (1980, p.86) ‘truth is linked in a circular relation with the systems of power which produce and sustain it’.
Domain of power

Discourses in which we are constituted as subjects ‘acting on’ and ‘acted upon’ by others

Power is of central concern in Foucauldian philosophy and analysis. Foucault was interviewed in 1984 and, naturally enough, one of the interviewer’s questions turned to the issue of power:

This brings us back to the problem of what I mean by power. I scarcely use the word power, and if I use it on occasion it is simply as shorthand for the expression I generally use: relations of power [...] I mean that in human relationships [...] power is always present: I mean a relationship in which one person tries to control the conduct of the other. So I am speaking of relations that exist at different levels, in different forms; these power relations are mobile, they can be modified, they are not fixed once and for all. [...] It should also be noted that power relations are possible only insofar as the subjects are free [...] in order for power relations to come into play, there must be at least a certain degree of freedom on both sides. (Foucault, 2000d, pp.291-2)

Power and the therapeutic relationship

This understanding of power clearly has implications for the way in which we understand the therapeutic relationships being described by participants (as well as the research relationship in which the production of narrative accounts takes place), since the imbalance of power between therapist and client is always shifting and being negotiated. We have seen earlier that knowledge and truth are produced in the context of dynamic power relations between individuals and institutions in society. Moreover, it is through power that subjects are produced and so the relationships between power, resistance and subjectivity are pertinent to an analysis of the discursive positions that both reproduce and resist orthodox masculinity.
The central differences between the three principal subject positions seem to rest in the ways in which subjects position their sexuality in relation to their gender identity. Because homosexuality is constructed as a form of weakness by orthodox masculinity there is a sense that its disclosure acts to disempower men both relative to each other and to women over whom orthodox masculine claims dominance.

This creates something of a ‘power sandwich’. Masculinity and professional identity as a therapist are both powerful positions, particularly valued by other men in homosocial relationships. Homosexuality, however, is arguably a weakness in that same relationship. This was made clear in the various positions explored in the second half of the primary analysis. Therapist fears over being perceived as gay and client fears around vulnerability and emotional expressivity for those in the ‘Pinocchio’ position arguably exemplifies the anxiety arising from power imbalances between male homosexual therapist and male heterosexual client.

Particularly where the therapist fears that his homosexuality is evident. The reticence of those in the ‘I’m just a bloke’ position to explore their own process in relation to all male dyads may suggest that the therapist believes he retains greater power if his male clients see him as fully masculine in the orthodox sense. Even Alan’s ‘Walks-Between’ position of integration of the male and female archetypes could be seen as an attempt to neutralise the effects of power relations inherent in orthodox masculine discourse.

*Power and politics*

Foucault (1998, p.105) argues that ‘sexuality must not be thought of as a kind of natural given which power tries to hold in check, or as an obscure domain which knowledge tries gradually to uncover.’ Instead sexuality is both a form and effect of particular discursive and political positions. Whilst all of the participants acknowledge the political dimension of power relations
in the development of subject positionings around sexuality, they are concerned as to whether
the therapeutic space is an appropriate one for resisting heteronormative power relations.

Richard is explicit in naming the ways in which he sees power relations as a ‘live’ issue in
therapy and strategically deploys his sexual identity in the relationship as a way of engaging
with the power dynamics between him and his male clients. Arguably this is similar to the
strategic use of power referred to by Bourdieu (2001) as ‘symbolic subversion’ where gay
men ‘penetrate masculinized terrains while closeted, to raise their worth among men, and
then come out as gay, exposing the fallacy upon which the system is built’ (Anderson, 2012,
p.37). He perhaps believes that the engagement he advocates and demonstrates offers him
the possibility of resisting orthodoxy and altering power relations, thereby re-authorising his
claim to his own subjectivity that orthodoxy had sought to control and delegitimise.

It is the way in which power relations not only underpin the truth claims of particular
knowledge discourses, but also how they work to ‘make individuals subjects’ that is the
focus of the third domain of analysis.

**Domain of ethics**

*Discourses through which we constitute ourselves as particular kinds of objects and assign value and
meaning to our particular conduct*

Ethics describes the agentive outcome of the knowledge-power nexus. The human person is
‘thrown’ into knowledge discourses and power relations and is ‘made subject’ in the process
of being thus situated. How that person makes sense of himself as ‘a self’ and then goes on
to cultivate, produce and refine that self is the concern of the ethical domain of analysis. As
Yates et al., (2010, p.65) argue, the ethical domain is about how ‘aspects of people’s lives
and identities are constituted as objects of concern for their own behaviour or self-reflection’ (for example, the ‘knowledge’ that access to masculine subject positions are only available to those men who appear heterosexual) ‘and the types of action made available for people to act upon their conduct.’

It is of particular interest in the context of these results since they uncover how participants experience the intersection of their gender, sexual and professional identities. In Foucauldian terms their intrapsychic experience is understood as an internalised artefact of the external discourses that have influenced their socialisation and the development of their own discursive positions with respect to those subjectivities.

In a way this research question is itself an ‘ethical’ venture in the Foucauldian sense since it is concerned with exploring homosocial relations within a defined discursive field. Since the therapeutic relationship is itself situated in a society that produces discourses of normative gender performance, the cultural practice of therapy provides an opportunity to both reinforce and resist those discursive structures.

*Ethics and technologies of the self*

In his later writings Foucault became concerned with ‘those forms of understanding that the subject creates about himself’ (Foucault, 2000b, p.177), which he came to describe as ‘technologies of the self’. It is the fact that these technologies are reflexively applied that is of particular interest:

I am more and more interested in the interaction between oneself and others, and in the technologies of individual domination, in the mode of action that an individual exercises upon himself by means of the technologies of the self. (Foucault, 2000c, p.225)
Like the notion of the panopticon, Foucault is interested in how the subject internalises truth games and power relations to reproduce them internally without the need for those power relations or knowledges to be immanent. They are, in a sense, permanently immanent. For Foucault this internalisation is part of the Christian dictum: ‘know thyself’ – an exhortation that replaces the earlier Greco-Roman tradition of ‘taking care’ of the self as the primary goal out of which self-knowledge was previously achieved. The change of focus to an interior self-knowing, famously valorised in the Descartian thinking subject, is related to ‘a secular tradition that sees in external law the basis for morality’ (Foucault, 2000c, p.228). Moreover, from an ethical standpoint, knowledge of self became linked to self-renunciation and ‘a morality of asceticism [that] insists that the self is that which one can reject’ (Foucault, 2000c, p.228). In the context of this research, the idea that one can, or indeed should, reject (parts of) the self is particularly relevant.

Technologies of the self are the principal interest in the domain of ethics; the kind of selves that participants understand themselves to be and, importantly, the reasons that they give to justify the actions that flow from having understood and accepted themselves as particular kinds of selves. The interiorisation of the disciplinary gaze of orthodox masculinity can be seen across the whole of the primary analysis from the adoption of principal subject positions, through the prevalence of orthodoxy as a benchmark of authentic masculinity to the ways in which participants understood themselves as particular kinds of men in a ‘feminine’ profession.

In our initial interviews, when they were encouraged to produce a narrative about their sexual, gender and professional identities, all participants produced discourses that interiorised gendered, sexual and professional subjectivities as productive of particular kinds of selves. In a Foucauldian sense, the emphasis was on discovering, being enlightened by
and telling the truth about the self; as Danaher et al. (2002, p.129) put it: ‘attempts to live the truth, tell the truth and be changed by the truth’. As such, participants tended to tell the story of their sexual identity as something ‘discovered’ internally and then asserted publicly through ‘coming out’. They told the ‘truth’ about themselves so that they could then live out that ‘truth’. In doing so they constructed the ‘truth’ of their stable homosexual identity that then had an impact on their gender and professional identities. It made them both a particular kind of man – as explored earlier in the ‘Pinocchio’, ‘Walks-Between’ and ‘I’m just a bloke’ positions – as well as a particular kind of male therapist.

All but Richard asserted that the intersection of their professional identity as therapists limited their self-disclosure in the relationship. Being a particular kind of gay male – a gay male therapist – altered the positions available to the participants when they were acting in the role of therapist. The ways in which they made sense of their decisions within the therapeutic relationship with men were seen as linked to their principle subject positions. For those in the ‘Pinocchio’ position, fear of homophobic prejudice was foremost, perhaps because of their particular subjective experience of having been shamed for failing to deliver an orthodox masculine gender performance. For those in the ‘I’m just a bloke’ position, homosexuality was seen as irrelevant, perhaps because it was always something that could be kept hidden. Foucault identifies the special nature of sexuality in terms of its interiority and the relationship between self-knowing and ‘telling the truth:

> Unlike other interdictions, sexual interdictions are constantly connected with the obligation to tell the truth about oneself [...] so that sexuality is related in a strange and complex way both to verbal prohibition and to the obligation to tell the truth, of hiding what one does and of deciphering who one is. (Foucault, 2000c, p.223)
Truth telling in the research

This is interesting in the context of this research in that not only does the interview process encourage participants to ‘tell the truth’ about themselves, but also the question is situated in a cultural practice where ‘telling the truth’ about oneself is valorised. Indeed, as we have seen in the first part of this secondary analysis, the socio-political arena is the place in which we are told the ‘truth’ about ourselves. The data suggests that most participants explicitly accept the idea that their sexuality is definitive of identity:

‘That whole thing about it being seen as a central part of your identity as opposed to it just being part of your experience…’ Peter

‘… while I may cling to the gay label with every fibre of my being, masculine is a label that I don’t need, because it’s too confining…’ Mark

‘… it came with a sense of relief and a sense of understanding that this made a lot more sense of my own self and what things were…’ Andy

‘… there is absolutely no question at all that had I been heterosexual I wouldn’t be sitting here now talking to you […] the life that I was planning was completely disrupted because other people couldn’t deal with who I was…’ Gareth

Alan is alone in seeing gayness as a cultural identity distinct from his orientation in the world as homosexual (something arguably more similar to Foucault’s position):

‘I suppose I still, and have always, seen “gayness” as a cultural identity rather than gender or sexuality […] homosexuality is an orientation and gayness is a culturally chosen identity and we only become gay when we come out…’ Andy

Within the context of personal ethics, Foucault challenges this construction of homosexuality produced by participants as constitutive of a fixed identity and suggests instead that homosexuality is a form of opening out into different forms of relationship:
Another thing to distrust is the tendency to relate the question of homosexuality to the problem of “Who am I?” and “What is the secret of my desire?” Perhaps it would be better to ask oneself, “What relationships, through homosexuality, can be established, invented, multiplied, and modulated?” The problem is not to discover in oneself the truth of one’s sex, but, rather, to use one’s sexuality henceforth to arrive at a multiplicity of relationships. (Foucault, 2000a, p.135)

For Foucault, the creation of a homosexual identity is something that the dominant heterosexist discourse produces both in order to define heterosexuality as well as to ensure that heterosexuality is unquestioned. It is an operation of the power-knowledge nexus, supported by technologies of the self that encourage subjective introspection so as to discover the truth about oneself and to then manage that self in accordance with accepted ways of being in the world. One of those accepted ways of being in the world is that the subject position of ‘therapist’ carries with it certain responsibilities.

The fact that all participants, with the exception of Richard, recognise that their personal self (whose sexuality is often ‘out and proud’) as different from their professional self (whose sexual subjectivity is most often kept hidden) is evidence that ‘these technologies are not of their own making, [neither are they] a “natural” or “essential” form of self-relationship’ (Yates et al., 2010, p.71). They are simply different positions taken up with respect to the placeholder of orthodox masculinity, all of which are definitive of personally experienced ‘selves’ around which behaviours are explained, justified and made sense of. As Danaher et al. (2002, p.131) point out, ‘we cannot know the truth about ourselves because there is no truth to know, simply a series of practices that make up the self.’
CHAPTER FIVE
DISCUSSION

5.1 Reflection on the results

The complex intersection of gender, sexual and professional identities considered in this research project, combined with an exploration of how those subject positionings were experienced in the therapeutic relationship with men provided rich data for analysis. A double data analysis aimed to uncover intrapsychic, interpersonal and socio-political dimensions of experience. Two principal domains were presented in the analysis – the domain of identity and the domain of work with men. The domain of identity uncovered three principal subject positionings around the intersection of sexual and gender identity that went on to influence professional identity and how participants reported their experience of working with men. It is perhaps surprising, considering participants are all practicing therapists, that both domains of identity and work were so suffused with gender and sexuality binaries. Given participant experiences of training, personal therapy and ongoing supervision and CPD, it might have been reasonable to expect more resistance talk. Instead, all of the participants with the exception of Alan positioned themselves in typically heteronormative ways. They tended to accept that orthodox masculine gender performance was a signal of masculine authenticity and that relative success or failure in this regard delivered either confidence or anxiety in gender identity. They all, to a greater or lesser extent, reproduced discourses positioning obvious homosexuality (by extension, a kind of femininity) as incompatible with genuine masculinity. The surprisingly normative nature of the data analysis is explored at the end of this section reflecting on the results.
DOMAIN OF IDENTITY

Navigating between polarities

The gender-sexuality nexus

The tensions exemplified in the ‘Pinocchio Discourse’, ‘Walks-Between’ and ‘I’m just a bloke’ positions suggest that participants’ access to subject positionings are at least partly a function of their success in keeping their sexuality private. However, as one begins to explore the relationship between sexual identity and masculinity we see that it is effeminacy, rather than explicit homosexuality, that limits the availability of subject positionings. Indeed, even amongst gay men, effeminacy is stigmatised (Taywaditep, 2001). In other words, the ‘Pinocchio’ position would be the position most available to effeminate heterosexual men by dint of their failure to appear masculine according to other normative standards (see, for example, Mahalik et al.’s (2003b) 12 norms). Just as the ‘I’m just a bloke’ position is available to some participants because of their lack of effeminacy, regardless of their homosexual orientation. It is a tension that Peter eloquently describes as a shared experience for all men:

‘I think there is still a lot of anxiety in men about doing the right version of masculinity in order to be accepted and I think that does tie in hugely to difficulties in coming to accept myself as a gay man because it’s kind of like those two things cancel each other out…’ Peter

For both of these polar positions there seems to be something of a settling for an identity linked to one or other of sexual or gender identities. In other words, for those in the ‘Pinocchio’ position ‘I am not a real man’ (because I am gay) and ‘I am a real man’ (because I do not seem to be gay) for those in the ‘I’m just a bloke’ position. Alan is unique in attempting to navigate between these polar positions in his ‘Walks-Between’ position. He
does so by recourse to different historical cultural identities, spirituality, poetry, mysticism, feminist politics and an assertion of a shared masculine experience, irrespective of gender.

The prevalence of binary splitting in human psychology is perhaps a subject for a thesis on its own, but we might conjecture that splitting is at least in part related to a defence against anxiety. This is particularly persuasive in the light of Hollway et al.’s (2000) thesis that draws from psychoanalytic theory to argue for the role of anxiety in the production of the self. Moreover, more recent neuropsychological theories might suggest that human beings are cognitive misers and black and white thinking with binary splits makes life easier for us than constantly adapting to shades of grey. Intersubjectivity theory (e.g. Crossley, 1996) might also suggest that binaries are a reflection of the subject’s constant experience of the world as ‘me’ and ‘not me’. Whatever the reason for its persistence, for all participants it was this very engagement with and, for some, resistance to gender and sexuality binaries that was their way in to therapy and, for most, the basis of their practice.

It would seem, therefore, that it is what is implicit or explicit in identity that dictates the subject positionings available to participants. Explicit kinds of sexual and gender performances give signals to others who then give feedback to the individual about what sort of person they are. This feedback from others is then internalised and contributes to the building of subjects’ sense of self. This suggests that our relationships with others, both interpersonally and through being situated in a particular culture and society, are crucial to our self-understanding.

This process of identity formation has corollaries in Harry Stack Sullivan’s Interpersonal Theory explored earlier in the literature review. Moreover, the methodological approach to gathering and analysing data attempted to facilitate the uncovering of this dynamic process
and the tensions that exist in individual subjects between individual freedom to choose subject positionings and how strongly these decisions are affected by our embeddedness in culture and socio-political discourses around sexuality, gender and professional role.

The legacy of the closet

The spatial metaphor – that there is a space between individual subjects in which the self is experienced in relationship – is a powerful one, particularly in the context of sexuality. The idea that homosexuality may be ‘closeted’ and that all homosexuals are required to ‘come out’ and reveal their previously hidden sexual identity draws on this spatial analogy and is so prevalent as to almost be taken for granted. Sedgewick (1990) writes about the ‘Epistemology of the Closet’ and considers the relationship between discourses of knowledge and truth and the spatial metaphor of the closet, which, she argues, is a paradoxical space that can neither be fully inhabited nor fully escaped.

As participants in this research attest, to the extent that their sexuality is unspoken in the therapeutic relationship, they can never be totally sure that they have succeeded in keeping their sexuality a secret from their clients. Their male clients may be unaware of their sexuality or they may indeed be aware of it but engaging in a game where they are ‘enjoying the epistemological privilege that [the therapist’s] ignorance of their knowledge affords them’ (Halperin, 1995, p.34). Gay men can never be fully closeted, but then, Sedgewick argues, neither can they be fully ‘out’ since the heteronormative society into which they have disclosed their sexuality will always ‘insist on constructing [their] sexuality as a secret to which they [heterosexuals] have special access, a secret which always gives itself away to their superior and knowing gaze’ (Halperin, 1995, p.35).
Masculinity as the dominant subjectivity

Appropriate masculine gender performance appears to be the driving factor in the adoption of subject positionings and their later experience in the therapeutic relationship with other men. Sexuality and professional role are both seen as subordinate to masculinity in the sense that they can raise or lower masculine capital with other men. Moreover, success in normative gender performance can allow participants to view their gender and sexual identities as relatively unproblematic whereas failure tends to imbue both subjectivities as sites of fear and anxiety.

And with success comes reward. Being able to ‘do’ masculinity confers status on those who achieve it – something that can be particularly important in adolescence as gender and sexual identities are being explored, contested and policed. The promise of inclusion and being ‘one of the boys’ is as powerful a carrot as is the stick of social exclusion and shaming for not living up to orthodox ways of being masculine. As Gayle Rubin (1993, p.15) points out, ‘individuals whose behavior stands high in this hierarchy are rewarded with certified mental health, respectability, legality social and physical mobility, institutional support and material benefits’ while those who take up less traditional ways of being male are often ostracised and denied power.

Is orthodoxy becoming old-fashioned?

Although the participants in this research referenced orthodox ways of being masculine as the benchmark of their own success in gender performance, there is evidence that such rigid and orthodox ways of doing masculinity are being challenged. Mark McCormack (2012) researched homophobic discourse in a range of secondary schools in the south of England and found strong evidence that the ways in which young men are policing gender and sexual
identities is changing. He suggests that it is no longer the case that gay boys are automatically shamed by straight ones and denied power in homosocial relationships.

On the contrary, he suggests that hegemonic stratifications of power, which previously relied on domination and exclusion, are increasingly being seen as out-dated. He argues that boys in his research value charisma, authenticity, emotional support and social fluidity (McCormack, 2012, pp. 100-107). This is an astonishing volte face in masculine gender performance away from the emotional control, dominance and pursuit of status exemplified in Mahalik et al.’s (2003b) 12 norms. Instead of valorising emotional control, boys in his research suggest that they value emotional support from their male friends and see it as important to form friendships with boys across different social groupings in the school. If the phenomena he sees in his research sites are beginning to be replicated elsewhere then it is likely that the ways in which young gay men understand themselves and their relationships with other men – gay or straight – have the opportunity in the future to be less polarised, less binary and more inclusive. And that can only be a good thing for all men.

Professional intersectionality

We have seen, perhaps surprisingly, how predictably participants adopted subject positionings around orthodox masculine gender performance. The literature (e.g. Bedi & Richards, 2011 and Schaub & Williams, 2007) suggests that many male clients can have low expectations about counselling and find it difficult to form a therapeutic alliance. It seems that they do so because ‘the very nature of help-seeking tends to run counter to masculine values such as independence, a need to maintain emotional control, and the drive to
maintain status and power in a relationship’ (Schaub et al, 2007, pp. 40-41). Indeed, Mahalik et al., (2003a) suggest that such men tend to develop restrictive roles along gender normative lines (e.g. ‘Strong-and-Silent’, ‘Tough-guy’ and ‘Homophobic’) in therapy and often evoke hostile or submissive responses from their therapists as a result. It had been hoped that, while this may be true for male clients with strong ‘gender role conflict’ (O’Neil, 2008), male therapists, through their training, experience and intersecting subjectivities as therapists, would have access to more inclusive sexual-gender identity positions. And perhaps that this would be the case even more so for gay male therapists, for whom sexual identity had arguably driven greater reflexivity about normativity.

Despite their recourse to orthodoxy in adopting a principal sexuality-gender subject positioning, many participants did assert that what Alan described as ‘homosexual maleness’ was a particular kind of maleness that resisted the traditional, orthodox ways of being masculine. It disrupted heteronormativity and offered an exemplar for homosocial intimacy that many felt was lacking in the relationships between heterosexual men. All participants are agreed that their homosexual maleness is neither disordered nor a negative force either in their lives or in the therapeutic relationship with men. Most see it at least as neutral if not positive, provided it is not explicitly voiced. They would argue that experience of fostering intimacy in their relationships with men outside the consulting room can make it easier for them to do so in the work. Moreover, the difficult experience of coming out has enhanced their ability to be reflexive and to work effectively from their own woundedness. In the context of the importance of the wounded healer archetype it will be interesting to see how movements towards inclusive masculinities and reduced homophobia change this dynamic for the gay male therapists of the future.
Participants recognised that being a therapist brings with it certain responsibilities. Although they may have felt free to express their sexuality in all other areas of their lives, most participants felt that the therapeutic space, in particular with heterosexual male clients, was not an appropriate domain in which to self-disclose sexuality. Many reasons were given for not self-disclosing to heterosexual men, but most emphasised the responsibilities that the therapist subjectivity imposed: to make client needs and concerns the principal focus in the relationship. The only participant to challenge this position was Richard who saw his role as therapist in more political terms. Drawing from the epistemological framework of his therapeutic modality he argued that one of the main responsibilities of a therapist is to model different ways of being in the world. He would therefore routinely challenge homophobic or heteronormative talk in therapy from any client with a form of vigorous self-disclosure.

**DOMAIN OF WORK WITH MEN**

**Talking about the work**

The relationship between subject positionings and experiences in all male dyads are perhaps the most interesting part of the analysis.

Those in the ‘Pinocchio’ position expressed the most personal distress over failure to perform orthodox masculinity and tended to suggest not only that they were afraid of homophobic prejudice from their straight male clients, but also that these same clients were afraid both of them and their own feelings. By contrast, those in the ‘I’m just a bloke’ position were more likely to reproduce orthodox ways of being masculine. They consistently suggested that their
sexuality was neither here nor there, both in their own lives and in their work with male clients. They were less likely to talk about their own process and more likely to emphasise their professional identity and clients’ desire to engage with the work as being the most important. Alan in his ‘Walks-Between’ position and Neil in his expression of the importance of his parental role in the work were unique in focussing on the importance of modelling a kind of emotional expressiveness and vulnerability in order to foster intimacy with men.

On the surface it may seem that it is a simple fact that those in the ‘Pinocchio’ position were afraid and ashamed and those in the ‘I’m just a bloke’ position were relaxed and unconcerned. That their orthodox gender performance shielded them from the shame that those occupying lower rungs in the masculinity hegemon experienced. It is possible, even likely, that less social rejection for non-normative gender performance will have made shame relatively less of a ‘live’ issue for those in the ‘I’m just a bloke’ position. However, arguably, because they are situated in the same discursive field, they are just as subject to fear and anxiety over the possibility of homophobic rejection by other, ostensibly heterosexual men.

Kimmel (2007, p.78) suggests that ‘masculinity is a homosocial enactment. We test ourselves, perform heroic feats, take enormous risks, all because we want other men to grant us our manhood.’ This suggests that masculinity is ultimately something that is performed to and for other men. Women are only useful as ‘a kind of currency that men use to improve their ranking on the masculine social scale’ (Kimmel, 2007, p.78). In that context, the production of orthodox masculinity by participants in this research can be seen as part of a homosocial enactment. It is an enactment that is produced between men in therapy, as reported by the participants in our interviews, as well as between researcher and researched in the research process itself. As explored in the earlier analysis, Kimmel has suggested that ‘if masculinity is
a homosocial enactment, its overriding emotion is fear’ (Kimmel, 2007, p.78). If it is indeed true, as he argues, that we are afraid of other men then all homosocial engagements – from a lad’s night out on a Friday night to the all-male therapeutic dyad – are potentially fraught with anxiety. Moreover, this will be true for all men, not just for dyads where one of the men is gay.

In this context we might reflect that all men fear, to a greater or lesser extent, expressing what they think will make them seem weak or vulnerable in the eyes of other men – whether they are therapists or clients. As explored in the earlier literature review, research suggests that this fear drives low levels of help-seeking among men who buy into orthodox ways of being masculine (e.g. Shephard & Rickard, 2012, Vogel et al., 2011), particularly working class and non-white men. For Kimmel, the relationship between seeing masculinity as a homosocial enactment and homophobia as its central organising principle is that men are constantly defending against the fear of being unmasked:

Homophobia is the fear that other men will unmask us, emasculate us, reveal to us and the world that we do not measure up, that we are not real men. We are afraid to let other men see that fear. Fear makes us ashamed, because the recognition of fear in ourselves is proof to ourselves that we are not as manly as we pretend, that we are, like the young man in a poem by Yeats, “one that ruffles in a manly pose for all his timid heart.” Our fear is the fear of humiliation. We are ashamed to be afraid. (Kimmel, 2007, p.79)

The legacy of the closet is that gay men realise that life goes easier for them if they keep their homosexuality hidden from heterosexual men. Failure to live up to idealised masculinity can leave men, both gay and straight, subject to judgement by other men and some women. It is this anxiety around rejection, ridicule and the threat of being cast out of masculine society that tends to drive the policing of gender performance for men. The anxiety is such that the yardstick of orthodoxy is internalised and used as a benchmark
against which men may monitor their performance in the absence of explicit external pressure to do so. These socio-political dynamics were made explicit in the secondary analysis that explored how learning the truth about one’s sexual and gender identity is part of a process where an external disciplinary gaze is internalised to ensure the subject becomes his own policeman.

Researchers have written how orthodoxy is reproduced in other fields such as the school (e.g. Frosh et al., 2002) or in sport (e.g. Anderson, 2012) but it is interesting here in this research to see how much it continues to be reproduced within the field of the psychological therapies. Although there is no explicit desire expressed to be seen as masculine in the orthodox sense and although participants do not see orthodox masculinity as something to which men should aspire, most of them define their masculinity with reference to how well they have been able to live up to orthodoxy. As such their discourse reproduces orthodoxy and masculinises them in the process: ‘Men who fail to meet the prescribed or achieved characteristic of whatever that archetype might be nonetheless pledge their allegiance to the dominant form because this association is in itself heterosexualizing and masculinizing’ (Anderson, 2012, p.96).

As Hollway et al. (2000) have argued, research participants can be understood as defended subjects, people who take up positions within discourse in part in order to defend against fear and anxiety. We might then consider that fear acts as a driving force for all men. Fear is on the surface for the ‘Pinocchio’ men but may also be behind the desire to avoid process talk, deny the importance of sexuality and gender in the therapeutic relationship with men and to focus instead on professional identity for the ‘I’m just a bloke’ men. Perhaps the ‘Walks-Between’ position that Alan adopts is the most adaptive since it acknowledges that fear – and the anger that fronts it – is a dominant emotion for all men and the starting point
for accepting a shared identity, regardless of the way in which gender is performed or who you love.

Avoidance and integration

The analysis uncovered dominant themes for each of the three main subject positionings as well as suggesting a fourth for Neil, the outlier of the ‘Pinocchio’ group. These themes have been represented below in a schematic that explores the idea that the two polar opposites of ‘Pinocchio’ and ‘I’m just a bloke’ may, in fact, have more in common with one another than might initially be assumed.

![Figure 4: Balancing ‘Avoidance’ and ‘Integration’](image)

This schematic suggests that although different dynamics might be at play, all participants in the polar extremes of masculine gender performance in this study potentially avoid intimacy in the therapeutic relationship with men. For those in the ‘Pinocchio’ position, fear of apparently more masculine men may lead to a way of being that makes it hard for either to
be vulnerable with each other. A similar avoidance of vulnerability seems evidenced in the ‘I’m just a bloke’ position, though here this would appear to have more to do with a defandedness against being unmasked as un-masculine (and therefore being placed in the lower status ‘Pinocchio’ position) by another man.

In contrast it appears that Alan and Neil have access to a way of being with their male clients that allows for more intimacy, perhaps through the integration of their sexual and gender identities and a willingness to be vulnerable and model emotionality with other men. It may also not just be coincidental that Alan and Neil are the two oldest participants who potentially may have access, though experience, to a more mature position around gender and sexuality. In that sense, the ‘Walks-Between’ position and Neil’s more paternal orientation within his ‘Pinocchio’ position may allow them to use their integrated sexuality in the relationship without explicitly referencing it with the potential of making their male clients feel ‘on the spot’.

**So little resistance**

As identified earlier, it is surprising that the results of this research project appear as normative as they do. There are several dimensions to this normativity:

**Gender and sexuality binaries**

It is remarkable that strongly binary discourses of gender and sexuality pervade the data with participants perceiving their masculinity in traditionally orthodox terms of ‘not feminine’. For all but one of the participants it appears that there are no other options than
to consider themselves and their gender and sexual identities in traditionally binary ways. Other, more nuanced approaches to masculinities that reject orthodoxy and hegemonic stratification of masculinities seemed unimaginable. Similarly, understandings of sexuality follow typically binary, heteronormative trajectories with a direct negative correlation between masculinity and homosexuality being established by all.

This is particularly striking given the nature not only of the participants but the context of the research discussion. In other words, it might have been reasonable to expect more resistance to orthodoxy from men who had trained in the psychological therapies, with an emphasis on reflexivity and resistance to taken for granted assumptions about what constitutes the self. Moreover, the opportunity for resistance talk is arguably greater given the nature of the research question and the fact that they were in conversation with a fellow gay man and a fellow (trainee) therapist.

Reflected in the work
The first part of the research question dealt with subject positionings around gender, sexuality and professional role and the binary nature of the positions uncovered has already been well rehearsed elsewhere in this thesis. However, it may seem to the reader unduly convenient that categories such as ‘I’m just a bloke’ map so neatly onto ‘I’m just a therapist’ and thus I managed to find what I set out to see.

Nevertheless, this really is what the data seemed to me to produce. There really was a surprisingly direct correlation between the ways in which participants positioned themselves with respect to these three intersecting identity categories and the way they conceived, constructed and talked about their work with men. It seems that there was a lack of
reflexivity and problematising of gender and sexual identities for those participants for whom those identities had not been problematised by others. Put another way, if you look and act straight then you need not worry or think too much about the role of your own sexual and gender identities when working with other men.

Avoidance of intimacy

The most notable implications of these research findings, however, are those, explored earlier, that suggest that both binary positions act in different ways to limit homosocial intimacy. In other words, it does not matter which end of the binary spectrum you find yourself on, intimacy between men becomes a problem. Being open to being vulnerable with another man risks the loss of status for those in the ‘I’m just a bloke’ position and re-enactment of shaming and humiliating rejection by those in the ‘Pinocchio’ position. In this context, only the ‘Walks Between’ position offers some hope for homosocial intimacy through a shared experience of being positioned – no matter one’s sexual identity – in a limiting and damaging discourse of orthodox masculinity.
5.2 Implications for counselling psychology

This lack of resistance clearly has implications for counselling psychology research and training as well as for its practice in the field.

Counselling psychology research

If I share nothing else with Foucault, what I do share with him is his problem of how, as a gay man, an academic, and a public intellectual, I can acquire and maintain the authority to speak, to be heard, and to be taken seriously without denying or bracketing my gayness. (Halperin, 1995, p.8)

The problem of who gets to speak authoritatively is a question Halperin highlighted almost 20 years ago. It remains, I believe, a problem that I have had to negotiate in the production of this contribution to counselling psychology knowledge as a gay man, a gay therapist and a gay research practitioner.

My own experience of devising this research question and defending it in research seminars only served to highlight this issue. When the research topic was originally posited, one senior academic asked ‘What is it about you gay people? You’re always going on about sex!’ Staff and students alike – including other gay male trainees – further suggested that the research question would uncover little of interest to the field since the issue at hand was ‘nothing different than the therapeutic relationship between a heterosexual male therapist and a female client’. The reduction of complex intersections of gender and sexual identity and the way in which normative discursive structures shape the self for gay men, particularly through inclusion, exclusion and shaming, to an analogue of male-female gender relations shows a surprising lack of awareness about how different subjectivities are formed and maintained.
This ‘othering’ is also productive of heteronormativity in that it presumes that heterosexual people (and perhaps men in particular) have the right to decide ‘what constitutes authoritative speech about a gay subject’ (Halperin, 1995, p.13). Moreover, it reduces a complex intersection of subjectivities to a them-and-us catch-all of ‘you gay people’, a group identified by their need to ‘go on about sex’. In doing so, a ‘truth’ is produced about gay people – that we’re obsessed by sex – while veiling the way in which the production of that truth shores up power to speak about homosexuals in an authoritative way. Arguably it is the ‘privileged invisibility and ignorance’ that Halperin (1995, p.47) talks of.

Although these opinions were by no means widely held, the fact that heteronormativity had to be unmasked and defended against in the research process demonstrates that homosexuality continues to be the ‘effect to be explained’ – even in psychology departments in 2012. Langdridge (2008, p.28) argues that the response to this should not be ‘happy acceptance… but rather anger, appropriate and justifiable anger, at the endemic heterosexism and homonegativity that still exists in this late modern world.’

Recent research by McCormack (2012) and Anderson (2012) suggest that things are changing and that previously hysterically homophobic attitudes, that they argue reached a peak in the West in the late 1990s, are gradually being replaced by more inclusive discursive positions. McCormack focuses in particular in UK schools but cites research that suggests that this pattern is being repeated across the English speaking world (e.g. Francis et al., 2010; Jackson & Dempster, 2009; Russell et al., 2009). Attitudes forged in the school playground seem also to be becoming evident in higher education. Taulke-Johnson (2008) researched the final year experiences of 6 gay male university students in the UK and suggested that the anti-gay victimisation and harassment that has been reported in the literature was not part of these students’ experience. A decline in overt homophobia – what
Anderson terms ‘homohysteria’ – is also being seen in research from university student experiences in the USA (e.g. Adams, 2011). McCormack argues that this positive evidence is being ignored by gay advocacy groups who continue to insist that homophobia is rife in schools and colleges (e.g. Guasp, 2008). He goes so far as to suggest that ‘it is also worth noting that those who report the most homophobia are often tied to organizations designed to prevent it’ (McCormack, 2012, p. 61). Whatever the ‘truth’ of young men’s experiences in education, there appears to be hope that a combination of changes in socio-political discourses (supported by medico-juridical power as well as increased visibility) is having an effect on gay men’s internal experiences of self. There is hope therefore that, while there may continue to be a kind of thoughtless heterosexism, even in counselling psychology trainings, declining homophobia will allow a different kinds of homosocial relationships – of which the relationship between gay male therapist and his male clients is but one example.

**Counselling psychology training**

An experience of heterosexism in the research process also has implications for counselling psychology trainings in general. My own training experience was that issues of sexuality and gender were covered briefly as part of a single module of ‘Working with Difference’ in the first year of this PsychD in Counselling Psychology. This experience was mirrored by my participants who reported that the impact of therapist and client’s sexual and gender identities on the therapeutic relationship was barely mentioned or considered. This lack of engagement with gender and sexuality would seem particularly important given that, although I started my training as one of three men in a cohort of fourteen, I end it as the only man in a group of ten. Although anecdotal evidence would suggest that more men are starting to train as therapists, this ‘lone-male’ experience was mirrored by almost all of my participants.
These intersecting issues – the prevalence of heterosexism, the lack of training in issues to do with gender and sexuality and the imbalance in the number of men on training courses – all have implications for the discipline and the way in which counselling psychology is taught in training institutes.

Wester & Vogel (2002, p.370) suggest that ‘although 15 years have passed since Eichenfield and Stevens (1987) first introduced the need for psychology training to include discussion of male gender role issues, the profession seems to have made little progress’. Although they were writing some ten years ago it would seem that the same issues are relevant for today’s trainees since their practical solutions are a long way from being implemented:

At a minimum, programs should affirm their support of their male students’ gender role developmental process by providing faculty, staff, and students with current theory and research of men’s issues. Psychologists are also encouraged to examine carefully their own personal attitudes, beliefs, values, and biases regarding men and their gender role. Faculty and staff should make an effort to include a masculine perspective in their work, value the positive aspects of masculinity, discourage the negative aspects of masculinity and assist their students in combating the negative or stereotypical reactions of those around them. (Wester et al., 2002, p.374).

Research by Mellinger & Liu (2006) supports this point and finds:

... a general lack of training and attention in this area in counselling psychology doctoral programs and limited interest among counselling psychology faculty members. Although the majority of counselling psychology faculty members felt that research and training in the psychology of men are important to the field of counselling psychology, very few reported that this training has been integrated into their programs’ (p.202)

Kocarek & Pelling (2003) point out that multicultural advances in knowledge and awareness of LGBT issues in the West have not been matched by advances in training therapists in
specific counselling skills – such as Affirmative Therapy (see, for example, Dillon et al., 2004). Erwin (2006) makes a similar point and suggests not only that therapy trainings tend to exhibit a heteronormative bias, but also that there is often a lack of critical thinking about issues of sexuality and gender amongst students. He suggests a greater exposure to and appreciation of the rich research literature in sexuality and gender would help to expand levels of tolerance. My own training experience explored earlier bears out the lack of interest in issues of masculinity and scant attention paid to LGBT issues in trainings that the literature suggests. For as long as men in general – and gay men in particular – are a tiny minority on counselling psychology and other postgraduate trainings in the psychological therapies, they will continue to struggle to have their voices heard.

**Counselling psychology practice**

This research clearly has implications for counselling psychology research and training but it is particularly pertinent for therapeutic practice. There would seem to be two principle implications that all therapists can take away from this research:

*The call to reflexivity*

Often it has been suggested in this research process that there is nothing special or unique about the gay male therapist’s experience that could not find an analogue in the straight man’s experience of working with women. However, this would seem to invite a kind of un-reflexivity around difference that avoids facing the ways in which different identity positions are played out in the intersubjective space. It also arguably allows what have been termed ‘Sexual Orientation Microaggressions’ (Shelton & Delgado-Romero, 2011) to come into both counselling psychology trainings as well as practice.
Reflexivity around sexuality is important for all practitioners, gay and straight alike, since so much of our ways of relating as adults are influenced by it. Moreover, we live in a society that, though highly sexualised, is not open to the self-revelation and vulnerability that openness about sexuality can suggest:

‘... but the whole issue of sexuality, I think, is potentially quite murky and very self-revealing, you know, so, I guess there’s a kind of reticence in being totally up front about stuff like that and, you know, some of it is kind of unresolved stuff in a way…’ Peter

Importantly, the research challenges all therapists – but perhaps men in particular – to reflect on how they negotiate binaries with respect to their own sexual and gender identities. What impact does this negotiation have on their own sense of themselves as a therapist and how does it intersect with clients own experiences of navigating between the polarities contained in normative discourses of sexuality and gender?

*Homosocial relationships*

The research also speaks to the importance of homosocial relationships – whether they are gay or straight – and, in particular, the all-male therapeutic dyad. By choosing to work as a therapist all men, irrespective of their sexuality, have chosen to resist some of the more stereotypical aspects of normative masculine gender performance – in particular the norm that emotions should be repressed.

There is therefore a great deal here for all male therapists working with men to reflect on in terms of their own process experience. How open are they to working with client anger and restricted emotionality? How aware are they of their own sexuality and the existence of both overt and unconscious homoerotic feelings in themselves and their clients? Moreover,
irrespective of any sexual dimension, reflexivity about the importance of positive homosocial relationships engages with what can be a deep-seated need for many men – to trust, feel connected to and understood by another man.

5.3 Criticisms and limitations

This study contributes to counselling psychology knowledge, particularly through its focus on therapist subject positionings around gender and sexuality, rather than locating these issues in the client. Nevertheless it has limitations.

Epistemological tensions

In the introduction I reflected on the many tensions in this research project, from those inherent to the question – the binaries of gender and sexuality – as well as those present within the discipline of counselling psychology itself. I also wondered about the role of Polkinghorne’s neopragmatism and critical realism that attempts to bridge the binary between scientific realism and post-structural relativism. Again, in the method chapter I revisited the idea of critical realism and the epistemological tensions that exist between the two methodologies employed in my analysis and drew upon Adams (2008) notion of a ‘theoretical melting pot’ into which both Hollway et al. (2000) and Yates et al. (2010) can be mixed.

Nevertheless, I am aware that there are tensions between the epistemological and ontological positions of the two forms of analysis that require further examination and acknowledgement. Hollway et al. (2000) are situated closer to a realist position, which argues that the truth of subject positionings might be able to be apprehended through the
application of empirically validated method whereas Yates et al. (2010) are closer to the post structuralist position that ‘there is no one truth about the subjective experiences of the people we research that is waiting to be unearthed’ (McLaren, 2009, p.2).

Although I assert that navigating between polarities is a constant part of our experience of being in the world, I am aware that this assertion does not, of itself, get me out of the potential problem of mixing post structuralism and critical realism. Instead I would argue that the tensions between the two are ameliorated somewhat by Foucault’s own assertion about how his work might be used:

All my books… are little tool boxes… if people want to open them, to use this sentence or that idea as a screwdriver or spanner to short-circuit, discredit or smash systems of power, including eventually those from which my books have emerged… so much the better! (Foucault, 1975, ‘Interview with Roger Pol Droit’, cited in Patton, 1979, p.115)

This focus on utility rather than methodological purity is also reflected in Yates et al.’s epistemological underpinnings, where they argue that they approach ‘Foucault’s works not as a methodologically prescriptive oeuvre, but as an adaptable set of tools or gadgets’ (2010, p.53). By focusing on using methods as tools to help get at and deconstruct phenomena, I am free to work with the inherent epistemological tension as creatively as possible. In the same way as a therapist must learn to model sitting with ‘not knowing’, I do not seek to resolve or get rid of the tension. Instead I use these different methodologies as means of looking at the same phenomena to illuminate, as far as possible, different ways of interpreting and understanding human experience.
Sampling
Recruitment yielded participants heavily biased towards the polar positions of ‘Pinocchio’ and ‘I’m just a bloke’ with only one therapist occupying a more central position on the spectrum in ‘Walks-Between’. Although every effort was made to attract as broad a sample as possible from BPS, BACP and UKCP memberships, it is possible that a different sampling strategy might have yielded a sample with more men occupying positions towards the centre of the continuum. This clearly has implications for generalizability (explored in more detail, below).

Breadth versus depth
Firstly it has become clear, in attempting to look at gender, sexuality and professional role and how therapist subject positionings affect the experience of the therapeutic relationship with men, that it has not always been possible to explore all of these issues fully. Although a limitation of this study, it offers an opportunity for future research that looks at particular subject positionings in more depth. For example, more work could be done looking specifically at gender positioning in all male dyads or indeed exploring the issue of how sexuality is addressed, discussed, negotiated and performed in relationships with male clients.

Therapist only voice
This research only considers the therapist experience of working with male clients. It might have been interesting – and is certainly an opportunity for future research – to interview a sample of the male clients of gay male therapists to explore the client perspective. Although this project deliberately sought to direct the gaze ‘inside’ the profession of therapy and counselling, it would be interesting to explore what motivates men to choose male
therapists and how prevalent the themes of orthodox masculinity and concerns over homosexuality are for the clients that work with a gay male therapist.

Identity and intersectionality

As has been identified throughout this thesis, this research considers a limited number of intersections of identity, using gender as the central organising principle. The literature on men and masculinity could benefit from expanding the number of identity intersections explored. Some, including age and class were touched on in my own data but there are many others available.

In a related point it is important to point out that although every effort was made to recruit as wide a sample as possible – and indeed participants were recruited from Newcastle to North Wales and Southampton to Northampton – all participants were white, educated and middle class. While a number came from working class backgrounds they were now, by dint of their education and adoption of a professional role as therapist, part of a professional middle-class. In a small study such as this it might not be possible to recruit participants with other ethnic or cultural backgrounds or those with a range of (dis)ability. However, the data would inevitably have been enriched through access to these different voices.

A question of time

Time poses an interesting question. It is clear from the literature review, the research data and my own lived experience that, in the United Kingdom at least, things are changing for gay men. We have moved from homosexual acts being seen as a criminal offence and evidence of psychopathology to the inevitably of equal rights to civil marriage in less than fifty years.
These wider political changes are having an affect on the world of the psychological therapies too. Although a small minority some still claim to be able to ‘cure’ their clients of homosexuality, being gay no longer carries quite the stigma it once did. In the light of rapid changes in society, it would be interesting to carry out longitudinal research in this area to see whether the predictions of McCormack (2012) and Anderson (2012) really are coming true for future generations of counselling psychologists and their clients.

Methodological limitations

The methodological approach to data gathering and analysis aimed to facilitate the exploration and uncovering of intrapsychic, interpersonal and socio-political processes affecting gender, sexual and professional identities as well as the way in which these impacted on the therapeutic relationship with men. Nevertheless, there may be limitations in this approach that affected the data gathered and analysed. It is possible, by selecting three categories of identity around the title of ‘gay male therapist’ and using these as the basis of a structure for the first interview, that participants were encouraged to take a reductive approach. In other words, by asking them to consider each identity in isolation, participants were encouraged to focus on these areas as potential ‘problem sites’, perhaps producing data that confirmed an implicit researcher hypothesis that these were the most important subjectivities to focus on.

Greater attention could have been paid to intersectionality in terms of methodology. Bilge (2009, p.2) suggests that intersectionality ‘helps disassemble the concept of masculinity by examining the ways in which it is produced with and through other vectors of social relations and divisions such as class, ethnicity, race, age, ability and sexual orientation’. She critiques a reductive approach and suggests that ‘the simultaneous workings of... power relations...
and identities cannot be simply added or subtracted’ (Bilge, 2009, p.3). Citing Brah & Phoenix (2004) she suggests that individual subjectivities cannot be produced or analysed discretely using an *a priori* hypothesis that such categories will inevitably influence the data. Instead she argues for an inductive approach that allows themes to emerge. In terms of masculinities, she suggests that following her approach of intersectionality, as a critical methodology ‘that does not prioritize gender, helps unpack hidden processes through which different masculinities are achieved through other social divisions’ (Bilge, 2009, p.17).

**Generalisability**

As with all qualitative studies it is important to be cautious about the generalisability of its findings. The sample size is small and cannot be said to represent the positionings and experiences of all gay male therapists currently practising in the United Kingdom today. Nevertheless, it aims to add to counselling psychology and the literature more generally in giving a voice to the ways in which gender and sexual identities may be experienced by therapists, moving the traditional gaze away from a ‘problem’ that is almost exclusively located in client populations.
5.4 Conclusions

Although there have been significant changes in the last 20-30 years in the ways in which men understand and express their gender and sexual identities, the mean age of participants sampled was over 45. This means that most participants will have spent their childhoods and schooldays in a far more intensively heteronormative environment than exists today. Legislation that criminalised homosexual acts and which failed to recognise same-sex relationships is likely to have given participants the message that their sexual identities (and by extension their gendered selves) were less-than when compared to the heterosexual norm.

As has been argued in the secondary analysis, Foucault suggested that there were limits to the extent to which subjects are able to ‘choose’ their positions. Although he later came to temper his earlier, more extreme, views, there may be truth to his assertion that we are ‘thrown’ into discursive fields and our culture acts to limit the choices available to us. If this is the case then perhaps it is not that surprising after all that all men – irrespective of whether they are therapists or not – engage with the dominant model of gender performance circulating in society and reproduce it through their own subjectivities.

This research has, in part, been about allowing gay male therapists a voice within counselling psychology, a place for their subjective experiences of developing their own gay male identities and reflecting on what those subject positionings might mean for the work of therapy. Across the board, participants welcomed the collaborative approach and were appreciative of the transcripts of our interviews being made available to them, allowing them to reflect on this important area. Most participants, particularly those not in the ‘I’m just a bloke’ position, acknowledged that the issues explored in this research were not much
talked about. Indeed a number of them confessed to never having thought about these issues, at least in such depth, ever before.

‘I hadn’t even thought it through until I was reflecting on this […] and what’s nice about this process is […] it’s almost like it raises more questions than it provides answers…’ Alan

‘I think it just makes me realise again – because I suppose you don’t get that many opportunities really to talk to somebody else who has done a lot of thinking about these kinds of issues […] it’s not that common to have that kind of conversation really…’ Peter

‘I think one of the biggest things that it made me think about was just how significant it is, but how little thought it can get given sometimes in my mind […] it does impact on lots of different things to do with work, it’s just that there isn’t the forum to speak about it with someone else […] if you’re in supervision it’s kind of “Talk about your clients, talk about the process…” … but that kind of issue of power and masculine vs non-masculine and gay… it’s just something that kind of doesn’t get talked about…’ Mark

The fact that many participants acknowledged that they lacked a space to think about or talk about the issues this research raised for them suggests that, as a profession, we should be considering ways in which men can help one another – perhaps in support and contact groups where issues of our maleness and gender identity and its impact on our work can be workshopped and discussed.

The importance of social relationships in the development of the self and, by extension, the importance of the therapeutic relationship as one such opportunity to explore and develop the self has clear implications for the work of counselling psychology. Although we can never really know another person’s consciousness – or indeed have our own fully known by another – acceptance of and empathy for another human being’s ‘otherness’ can not only
help them to integrate what they may have denied but also help us to accept the ‘otherness’ in ourselves.

It has indeed been interesting to see how normative the therapists in this sample were in relation to aspects of their own identity and how these are experienced in the therapeutic relationship with other men. That their positionings were so normative – that more effeminate men fear being shamed by more masculine men and that more masculine men tend to be defended against vulnerability – shows how embedded we can be in assumptions about our gendered and sexual selves.

Furthermore, the results point to the ever-present need to navigate between binary polarities. The research project has had to do this in terms of balancing between realism and relativism and in representing all three subjectivities and all three domains of experience in an even-handed way. For participants (and indeed for myself) there is a constant navigation between gay and straight, masculine and feminine, revealed and hidden, freedom and ‘thrown-ness’, me and not-me, researcher and researched and so on. Navigating between these polarities requires a constant engagement with the tensions that would pull us away from a ‘Walks-Between’ position to either a ‘Pinocchio’ or an ‘I’m just a bloke’ position and the relative safety of a clearly defined self. That this navigation is a constant aspect of participant experience points to the fact that, no matter where we position ourselves on the spectrum and no matter how this changes according to different relationships, wrestling with the tension is a common experience for all.

There is clearly a path between polarities that all men must navigate. All men, regardless of sexuality, experience tension between the need to assert orthodox masculinity and the fear of not being able to. In the context of counselling psychology there is clearly an opportunity
for male therapists to relate to other men in ways that challenge orthodoxy, encourage
intimacy and the integration of affective experiencing. As therapists we have an opportunity
to reflect more effectively on the ways in which our gender and sexual identities intersect
with those of our clients. By accepting the challenge male therapists can aim to offer the
open, accepting and intimate homosocial relationship that many men desire:

‘… it is probably one of the tragedies of being a person I think, but I think probably
more so as being a man – if you buy into the whole kind of stereotype thing of what
men are – that I think so many men are just kind of dying to be connected to someone,
but socially and culturally it’s not made easy for them to do… they have to kind of
develop other things…’ Mark
REFERENCES


APPENDICES

APPENDIX 1: Recruitment Literature
APPENDIX 2: Interview Paperwork
APPENDIX 3: Ethical Approval Forms
APPENDIX 4: Sample Interview Transcript – ‘Mark’
APPENDIX ONE
RECRUITMENT LITERATURE

Recruitment Email

Exploring the relationship between gay male therapists and their male clients

I am a counselling psychologist in training at Roehampton University and am carrying out research looking at how gay male therapists, currently practicing in the UK, experience the therapeutic relationship with their male clients.

The research would comprise two interviews, each of around an hour, at a mutually convenient location. In the first of these interviews we would explore your understanding of your own identity in terms of gender, sexuality and professional role. In the second, which would take place around a month later, we would explore your experience of the therapeutic relationship with your male clients, in particular, how the subjectivities explored in the first interview impact on those experiences.

If you would be interested in taking part, please get in touch. My contact details are as follows:

Michael Beattie
beattiem@roehampton.ac.uk

Many thanks.

Michael Beattie
I AM A RESEARCHER AT ROEHAMPTON UNIVERSITY AND AM INTERESTED IN EXPLORING ASPECTS OF INTERSUBJECTIVITY IN THE THERAPEUTIC RELATIONSHIP.

IN PARTICULAR, I AM INTERESTED IN HOW A GAY MALE THERAPIST’S UNDERSTANDINGS OF HIS OWN GENDER, SEXUALITY AND PROFESSIONAL ROLE INTERSECTS WITH HIS RELATIONSHIPS WITH MALE CLIENTS.

IF YOU WOULD BE INTERESTED IN HELPING ME WITH MY RESEARCH, I AM LOOKING TO INTERVIEW QUALIFIED GAY MALE THERAPISTS OF ANY PROFESSIONAL ORIENTATION.

IF YOU WOULD BE PREPARED TO ATTEND TWO, ONE-HOUR INTERVIEWS TO EXPLORE THESE ISSUES TOGETHER, THEN PLEASE GET IN TOUCH. INTERVIEWS WOULD TAKE PLACE IN A MUTUALLY CONVENIENT LOCATION AND ANY DATA COLLECTED WILL BE CONFIDENTIAL – PSEUDONYMS WILL BE USED IN THE FINAL RESEARCH REPORT.

MANY THANKS.

MICHAEL BEATTIE

beattiem@roehampton.ac.uk
PARTICIPANT CONSENT FORM

An exploration of how gay male therapists’ subject positionings affect their experience of the therapeutic relationship with male clients

In undertaking this research together we will be meeting on two separate occasions. Each interview will last around an hour and will be tape recorded and transcribed for the purposes of research.

At our first meeting we will talk about your understanding and experience of being a gay male therapist. We will explore issues around gender, sexuality and your professional role as a therapist.

I will then send you a transcript of that interview for you to consider and reflect on before meeting for the second time to discuss your experience of the therapeutic relationship with male clients.

Any identifying details of either yourself or your clients will be removed and you will all be given a pseudonym. Extracts from the transcript of our discussion may appear in the final research report and the tapes may be heard by my supervisor and other university officials involved in assessing the research.

Everything you say will be treated with confidentiality. However, if you disclose a risk of serious harm to yourself or others during the course of the interview I may need to take appropriate action in accordance with the ethical guidelines of the British Psychological Society.

If you wish to withdraw from the study, you may do so at any time up to which the report is submitted for assessment in September 2012. You simply need to contact me and your information will be deleted from my files and removed from the research report.

Researcher Contact Details:

Michael Beattie
School of Psychology
Roehampton University
Holybourne Avenue
London
SW15 4JD

beattiem@roehampton.ac.uk
Consent Statement

I agree to take part in this research and I am aware that I am free to withdraw at any point. I understand that the information I provide will be treated in confidence by the investigator within the limits described and that my identity will be protected in the publication of the research report.

Name: ___________________________________________

Signature: ________________________________________

Date: ____________________________________________

Please note

If you have any concerns about any aspect of your participation or any other questions, please raise this with me. If you would like to contact an independent third party, please contact the Project Supervisor or Head of Psychology whose details are below:

**Project Supervisor**
Dr Tony Evans
School of Psychology
Roehampton University
Holybourne Avenue
London
SW15 4JD

*tony.evans@roehampton.ac.uk*
020 8392 3000 ext 4513

**Director of Studies**
Dr Jamie Moran
School of Psychology
Roehampton University
Holybourne Avenue
London
SW15 4JD

*jamie.moran@roehampton.ac.uk*
020 8392 3575
PARTICIPANT DEBRIEF FORM – INTERVIEW ONE

An exploration of how gay male therapists’ subject positionings affect their experience of the therapeutic relationship with male clients

Thank you very much for taking part in the first part of my study and for taking the time to make such a valuable contribution to my research project.

The purpose of my research is to explore how the ways in which gay male therapist understand their gender, sexuality and professional role affect their experience of the therapeutic relationship with male clients.

At this first interview we have discussed the first part of the research – how you see your gender, sexuality and professional role. A transcript of this interview will be sent to you in the coming weeks for you to reflect on before we meet to discuss the second part of the research question – how you experience your therapeutic relationships with male clients.

All of the data gathered in my research will be held securely and anonymously and everything you have said will be treated with confidentiality.

If you wish to withdraw from the study, you may do so at any time up to which the report is submitted for assessment in September 2012. You simply need to contact me and your information will be deleted from my files and removed from the research report.

Researcher Contact Details:

Michael Beattie
School of Psychology
Roehampton University
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London
SW15 4JD

beattiem@roehampton.ac.uk
If you have any concerns about any aspect of your participation or any other questions, please raise this with me. If you would like to contact an independent third party, please contact the Project Supervisor or Director of Studies whose details are below:

**Project Supervisor**

Dr Tony Evans  
School of Psychology  
Roehampton University  
Holybourne Avenue  
London  
SW15 4JD

*toby.evans@roehampton.ac.uk*  
020 8392 3000 ext 4513

**Director of Studies**

Dr Jamie Moran  
School of Psychology  
Roehampton University  
Holybourne Avenue  
London  
SW15 4JD

*jamie.moran@roehampton.ac.uk*  
020 8392 3575

In the event that our interview has raised specific areas of concern and you would like to speak to a therapist for support or to work through the issues, please contact either of the following organisations who specialise in working with gay men:

**Pink Therapy**

Archer Street  
London  
W1D 7AP

020 7434 0367  
info@pinktherapy.com

**Terrence Higgins Trust**

Counselling Services  
314-320 Gray’s Inn Road  
London WC1X 8DP

020 7812 1600  
info@tht.org.uk
PARTICIPANT DEBRIEF FORM – INTERVIEW TWO

An exploration of how gay male therapists’ subject positionings affect their experience of the therapeutic relationship with male clients

Thank you very much for taking part in the second part of my study and for taking the time to make such a valuable contribution to my research project.

The purpose of my research is to explore how the ways in which gay male therapist understand their gender, sexuality and professional role affect their experience of the therapeutic relationship with male clients.

At this second interview, we have discussed the second part of the research question – how you experience your therapeutic relationships with male clients – in the light of reflections on our first interview.

All of the data gathered in my research will be held securely and anonymously and everything you have said will be treated with confidentiality.

If you wish to withdraw from the study, you may do so at any time up to which the report is submitted for assessment in September 2012. You simply need to contact me and your information will be deleted from my files and removed from the research report.

Researcher Contact Details:

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Dr Tony Evans  
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*tony.evans@roehampton.ac.uk*  
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**Director of Studies**
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*jamie.moran@roehampton.ac.uk*  
020 8392 3575

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Archer Street  
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W1D 7AP  

*020 7434 0367*  
*info@pinktherapy.com*

**Terrence Higgins Trust**  
Counselling Services  
314-320 Gray’s Inn Road  
London WC1X 8DP  

*020 7812 1600*  
*info@tht.org.uk*
**Semi-structured interview schedule**

_I intend to introduce the research area with a short briefing before each of the two interviews. Thereafter, there will be a key question to start the interview which, in line with the Free Association Narrative Interview method of Hollway & Jefferson (2000), will be as unstructured as possible. Supplementary questions are supplied here as prompts should they be required._

**Interview One**

The purpose of today’s interview is to explore your own experience of living and working as a gay male therapist. In particular we will be exploring issues to do with gender, sexuality and your professional role as a therapist.

I wonder if we could start by you telling me a little about your understanding of yourself as a gay male therapist?

**Supplementary Questions/Prompts**

- Can you tell me a little about your own journey in terms of how you came to an understanding your sexuality?
- Do you think that your sexuality has influenced how you understand yourself as a man?
- What led you to want to practice as a therapist?
- Do you think that your masculinity affects your practice as a therapist?

**Interview Two**

The purpose of today’s interview is to discuss your experience of therapeutic relationships with your male clients. I know that you have had some time to look at the transcript of our first interview and I wonder if you would be able to draw on any reflections that have arisen as a result while we discuss your work?

Bringing to mind the last two or three men that you have worked with or are working with, what comes up for you?

**Supplementary Questions/Prompts**

- Is there anything in particular that came up for you when you read through the transcript of our last interview?
- How do you experience the therapeutic relationship in all male dyads?
- Do issues of your sexuality ever come up in the work?
- How have you worked with issues of erotic transference and countertransference?

APPENDIX THREE
ETHICAL APPROVAL

**PLEASE CHECK THE RELEVANT BOX**
(NB. double click on the check box and select 'checked')

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<th>EXTERNAL INVESTIGATOR</th>
<th>STUDENT (Other)**</th>
</tr>
</thead>
</table>

If you are a transfer student or conducting collaborative research you may not need to complete this form, please see Section 2.2. of the Guidelines. **If you are on a taught course you do not need to complete this form unless your project is worth more than 50% of your total credits or you have been asked to do so by your supervisor.

**SECTION 1: PERSONAL DETAILS**
Please complete the header with your name and Department

<table>
<thead>
<tr>
<th>Name (lead):</th>
<th>Michael David Beattie</th>
</tr>
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<table>
<thead>
<tr>
<th>Other investigators:</th>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Correspondence address:</th>
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</table>

<table>
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<tr>
<th>Telephone no:</th>
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<tr>
<th>Email: (all correspondence will be sent by email unless otherwise requested)</th>
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**FOR STUDENTS ONLY:**

<table>
<thead>
<tr>
<th>Programme of study:</th>
<th>PsychD Counselling Psychology</th>
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<tr>
<th>Mode of study (full-time/part-time)</th>
<th>Full-time</th>
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<tr>
<th>Director of Studies:</th>
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<tr>
<td>Dr Jamie Moran (DoS)</td>
</tr>
<tr>
<td>Dr Tony Evans (Supervisor)</td>
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</table>

**FOR EXTERNAL INVESTIGATORS ONLY (please see Section 4.5 of the Ethical Guidelines):**

<table>
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<tr>
<th>Name of Academic Assessor:</th>
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**SECTION 2: PROJECT DETAILS**

<table>
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<th>Title of project:</th>
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| An exploration of how gay male therapists’ subject positionings affect their experience of the therapeutic relationship with male clients. |

<table>
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<tr>
<th>(Working Title)</th>
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</table>
| Proposed start date:  
(Please note it can take several months to get approval. The Committee will not approve a retrospective start date) | As Soon As Possible |
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<tbody>
<tr>
<td>Duration:</td>
<td>3 Years</td>
</tr>
</tbody>
</table>

**Purpose of the proposed investigation:**
This section should include the material which outlines the rationale for the project, i.e. why this study needs to be done. This should be done in a way that is both accessible and scholarly, i.e. have proper cited sources.

The ways in which men have understood how to be authentically masculine in contemporary Western culture has been strongly influenced by the concept of ‘hegemonic masculinity’ (Connell, 2005), a discourse that requires men to adhere to a number of norms, amongst which are ‘emotional control’ and ‘disdain for homosexuals’ (Mahalik et al., 2003, p. 6). Although a hegemonic masculine discourse remains prevalent, recent research (Evans, 2010) would suggest that the idea of a single, dominant way of being masculine is gradually being eroded. As such it may no longer be accurate to speak simply of a single ‘masculinity’, but rather of multiple ‘masculinities’.

Masculinity discourses exist within the context of societies that are themselves ‘heteronormative’ (Hegarty, 2007), an ideology which presumes the normality and superiority of heterosexuality and which requires any other form of sexual expression to be explained, justified or defended against.

At the same time, current theories exploring the efficacy of therapeutic work place overwhelming importance on the quality of the relationship between therapist and client – in short ‘the relationship is the therapy’ (Kahn, 1997: 1).

In the context of this discursive environment, the researcher is interested in exploring the ways in which gay male therapists make sense of their therapeutic relationships with their male clients. There is relatively little available literature on this question since most of the research appears to be concerned with considering how therapists – whose sexuality is broadly unquestioned but assumed to be heterosexual – might work with a particular population for whom homosexuality is a problem. It is intended that this research change the gaze from a focus on the problem ‘out there’ amongst the client population and instead look ‘in here’ at the particular subjectivity of the gay male therapist.
The study will attempt to explore how gay male therapists’ own subject positionings, with respect to gender, sexuality and professional role, affect their experience the therapeutic relationship with male clients. In doing so from a quantitative perspective there is no a priori hypothesis being addressed. Rather the study is interested to explore the intersubjective space where the subjectivities of the therapist and client intersect.

It is hoped that the study will contribute to knowledge of counselling psychology by exploring the well-researched area of the therapeutic relationship from a different perspective. In addition, it is hoped that an exploration of a particular kind of all-male relationship will add to knowledge of the psychology of men and masculinities.


Outline of project:
This section should include the details of methodology i.e. what will be done and how.

The researcher proposes to recruit 12 male therapists who self-identify as gay.

The approach to data collection and its later analysis has been informed by the work of Hollway & Jefferson (2000) who researched fear of crime. They developed the concept of the ‘psycho-social subject [who is] simultaneously psychic and social’ (Ibid, p. 14). In other words, gay male therapists will have both an inner (intra-psychic) as well as an outer (socially affected) way of understanding themselves and their relationships.

In order to expose and explore these inner and outer dimensions, the researchers understood their participants as ‘defended subjects’, people who ‘have an identity investment in [their] positioning in this particular... discourse’ (Ibid, p. 19). Participants understandings of themselves in terms of gender (male), sexuality (gay) and role (therapist), may therefore have an effect on the way they experience their relationships with male clients.
Following the methodological approach of Hollway & Jefferson I intend to conduct semi-structured interviews with each of the 12 participants on two separate occasions at a mutually convenient location, each time for approximately an hour. The interviews will be taped and later transcribed for analysis.

In the first interview, participants will be invited to talk about their own subjectivities in terms of gender, sexuality and professional role. The interviews will be transcribed and the transcripts sent to participants for them to read and reflect on before our second interview. In the second interview participants will be invited to talk about their therapeutic relationships with male clients and, drawing on the content of our first interview, reflect on how their own subject positionings might affect those relationships. Both interviews will follow Hollway & Jefferson's Free Association Narrative Interviewing (FANI) which 'recognises that the story told is constructed within the research and interview context rather than being a neutral account of pre-existing reality' (*Ibid*, p.31-2).

It is likely that a pilot interview will need to be conducted in order to develop the semi-structured interview schedule. Dependent upon the quality and content of the interview, the pilot may be included in the final data set.

Participants will be made aware of security and confidentiality procedures via a participant consent form and debrief materials.


**Ethical issues raised by the project:**

It is assumed that qualified therapists will have had considerable experience of being reflexive not only with respect to their own subjectivities, but also in relation to their therapeutic relationships. As such, it is envisaged that the potential for psychological harm or distress as a result of participating in this research will be minimal.

Nevertheless, it is acknowledged that the areas that the research asks the participants to explore – in particular gender and sexuality – are complex and intimate and have the potential to evoke strong feelings.

Measures will therefore be taken to minimise any possible distress. Firstly, the researcher will be as transparent as possible in the recruitment process to ensure that participants fully understand what they are agreeing to. Participants' consent and debriefing forms will make it clear that they are free to withdraw at any time during or after the interview or to choose not to answer particular questions raised.

Participants will also be directed towards organisations that may be able to offer support in working through any feelings or issues that arise as a result of participating in the research.
**SECTION 3: USE OF PARTICIPANTS**

- You should download the Participant Consent Form Template and amend it if necessary
- You should also attach any other information to be given to participants
- You should consider carefully what information you provide to participants, e.g. scope of study, number of participants, duration of study, risks/benefits of the project. It is recommended that the participant has two copies of the consent form so they can retain one for information.
- If images or anything else which might allow the identification of participants is to be publicly accessible (e.g. on the web), further written consent must be secured

Give details of the method of recruitment, and potential benefits to participants if any (include any financial benefits where appropriate).

*Please remember that approval will have to be sought from any organisations where recruitment is carried out or posters placed (e.g. if you recruit in GP’s surgeries you will require NHS approval):*

The researcher proposes to recruit 12 male therapists who self-identify as gay. Initial recruitment will come from snowballing outwards from my own contacts. In addition, in order to widen the potential pool of participants and ensure a diversity of voices amongst those taking part, I propose to recruit participants via outbound emails and posters. Although the researcher has used the word ‘therapist’ in the research question, it is intended that this word include the broad church of all those who engage in 1-2-1 therapeutic work with clients where a relationship between the two is considered to play an important role in their work together. I propose to follow the recruitment process outlined below:

1. **Recruitment Email – See Appendix One**
   With permission of the relevant bodies, I propose to target all qualified male therapists on the BPS Division of Sexualities and Pink Therapy mailing lists.

2. **Recruitment Poster – See Appendix Two**
   With the permission of the relevant bodies, I propose to place a recruitment poster at the Metanoia Institute and Terrence Higgins Trust where I work as a placement counsellor.

3. **Participant Consent Form – See Appendix Three**
   A mutually convenient time and place for interviews with participants and informed consent obtained (via signed consent form, a copy of which will be given to each participant) before starting the taped interview.

4. **Participant Debrief Form – See Appendix Four**
   Following the interview, participants will be given a debrief form, with a slightly different version depending on whether they have attended a first or second interview.

It is intended that the interview process be as open and unstructured as possible – following the Free Association Narrative Interview (FANI) approach developed by Hollway and Jefferson (2000). An indicative interview schedule is contained in Appendix Five.
Will you be using participants who are aged under 18?

YES ☐ NO X

If you have answered Yes please refer to section 4.11 of the Ethics Guidelines and highlight the particular issues raised by working with these participants and how these issues have been addressed.

Details of CRB check?

### SECTION 4: HEALTH AND SAFETY

- You must download and complete the Risk Assessment Form and attach this to your application.
- You should be able to demonstrate that appropriate mechanisms are in place for the research to be carried out safely.
- If necessary the University’s Health, Safety & Environment Manager should be consulted before the application is submitted.

Will any of your project take place outside the UK?

YES ☐ NO X

If you have answered yes please list the countries below and refer to Section 4.2 of the Ethics Guidelines:

Is this a clinical trial or a project which may involve abnormal risk to participants?

YES ☐ NO X

Will ‘human tissue’ samples need to be stored?

YES ☐ NO X

If you have answered Yes please refer to Sections 3.5 and 4.2 of the Ethics Guidelines.
SECTION 5: PUBLICATION OF RESULTS

How will you disseminate your findings? (e.g. publication)

Findings are for a doctorial thesis and, as such, will subsequently be available in the university library. In addition, it is possible that all or part of the research may be published in some form in an academic journal article or book. Informed consent forms (see Appendix Three) advise participants of this possibility up front.

How will you ensure the anonymity of your participants?

(If your participants do not wish to remain anonymous you must obtain their written consent.)

All data (original recordings and transcripts) will be securely stored on a separate external drive to a personal computer held at the researcher’s home. When not actively in use, the drive will be stored in a locked drawer. In addition, all transcript documents will be password protected.

For the purpose of research write-up, all participants and any clients mentioned in the interviews will be given pseudonyms and any identifying content anonymised.

SECTION 6: STORAGE OF DATA

Section 2.7 of Roehampton University Code of Good Research Practice states the following ‘research data must normally be retained intact for a period of at least ten years from the date of any publication which is based upon it. Researchers should be aware that specific professional bodies and research councils may require a longer period of data retention.’

Describe how and where the following data will be stored and how they will be kept secure:

Raw and Processed data:

All data (original recordings and transcripts) will be securely stored on a separate external drive to a personal computer held at the researcher’s home. When not actively in use, the drive will be stored in a locked drawer. In addition, all transcript documents will be password protected.

All research data will be held for a minimum of 10 years following any publication upon which it is based.

Documents containing personal details of any participants:

Documents such as signed consent forms and interview transcripts will be stored in a locked drawer at the researchers home. As with other research data, all forms and transcripts will be held for a minimum of 10 years following any publication upon which it is based.
SECTION 7: EXTERNAL GUIDELINES, APPROVAL & FUNDING

Are there any relevant subject-specific ethics guidelines (e.g. from a professional society)?  **No**

If so how will these inform your research process?

Has/will the project be submitted for approval to the ethics committee of any other organisation, e.g. NHS ethics approval?  (Please see Section 4.3, Ethics Guidelines)  **No**

What is the outcome of this?

Is your project externally funded?

**YES ☐ NO X**

If you have answered yes you must complete a P1 form and submit this to the Bids & Grants Team, RBDO before you complete your ethics application.

Please state the name of the funding organisation/company below and provide any other relevant information:

Has your P1 form been approved?

**YES ☐ NO ☐**

SECTION 8: CHECKLIST

**Project Details**

- Have you completed your personal details? (Section 1)  **Yes X**
- Have you outlined the project and ethical issues? (Section 2)  **Yes X**
- Have you described your project in laymen’s terms and avoided using too much technical jargon?  **Yes X**
- Have you focussed on the ethical issues and practical steps of carrying out the project rather than methodological arguments which are not relevant to this application  **Yes X**
<table>
<thead>
<tr>
<th>Working with Participants</th>
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<tbody>
<tr>
<td>Have you completed details of how you intend to recruit participants and whether they will receive any reimbursement? (Section 3)</td>
</tr>
<tr>
<td>If you are working with under 18s have you addressed the particular ethical issues involved in working with these participants? (Section 3)</td>
</tr>
<tr>
<td>Have you amended the Participant Consent Form (Template) for your project?</td>
</tr>
<tr>
<td>Have you attached to your form any other information that may be needed for participants, e.g. Debriefing Letter, Information Sheet?</td>
</tr>
<tr>
<td>Have you attached to your form any other participant-facing materials, e.g. recruitment posters, questionnaire, interview questions</td>
</tr>
<tr>
<td>If your project involves clinical trial/s, abnormal level of risk or working with animals have you read University Guidelines carefully?</td>
</tr>
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<thead>
<tr>
<th>Health and Safety</th>
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<tbody>
<tr>
<td>If your project takes place outside the UK have you noted on the form where the project will take place and read section 4.2 of the guidelines?</td>
</tr>
<tr>
<td>Have you completed the University risk assessment describing the risks associated with your project and how you will implement control measures to address these?</td>
</tr>
<tr>
<td>If your project involves interviews in a participant’s home or lone-working information have you considered the risks and control measures in the risk assessment? (E.g. advising a colleague/supervisor of the timings of visits, ringing before/after interview and developing a contingency plan if contact is not made)</td>
</tr>
<tr>
<td>If your project involves clinical trial/s, abnormal level of risk, working overseas or working with animals, have you marked this clearly on the form (Section 4) and read sections 3.5 and 4.2 of the guidelines?</td>
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<tr>
<th>Publication of Results</th>
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<tbody>
<tr>
<td>Have you described on the form how you will publish your findings? (Section 5)</td>
</tr>
<tr>
<td>Have you described how you will ensure the anonymity of your participants or asked your participants for explicit consent in your consent form to identify them in your research?</td>
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<tr>
<th>Storage of Data</th>
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<tbody>
<tr>
<td>Are you aware that the University’s Code of Good Research Practice requires you to retain data intact for a period of at least ten years from the date of any publication? (Specific professional bodies and research councils may require a longer period of data retention.)</td>
</tr>
<tr>
<td>Have you described how and where your data will be stored at the University and how this will be kept secure? (Section 6)</td>
</tr>
</tbody>
</table>
## External Guidelines & Funding
Have you noted any relevant subject-specific ethics guidelines (e.g. from a professional society) and considered how these will inform your research? (Section 7)  
Yes □

Have you considered whether you have to apply for ethical approval through another organisation (e.g. NHS)? (Section 7)  
N/A □

Have you provided full details of any external funding and the approval stage of your P1 form? (Section 7)  
N/A □

Have you included a contract or any other formal agreement relating to the project?  
N/A □

## Applicant’s Confirmation
Have you added an electronic signature or typed your name and date in the applicant’s signature box?  
Yes □

If you are a student has your supervisor checked your application form before submission?  
Yes □

Will you email the Ethics Administrator and make sure you attach your Ethics Application Form and all documents, e.g. Participant Consent Form, Risk Assessment Form and any additional information for participants or for other purposes?  
Yes □

## Presentation
Have you completed the form using size 12 black font, using one font (e.g. Arial) throughout the form and removed any large gaps from the application form?  
Yes □

Have you proof-read your application form and attached documents?  
Yes □

## Ethics Approval Process
Do you understand the following?  
Yes □

- the ethics approval process can take several weeks  
- that you must not begin your project or enter into any agreement or contract until you have received email confirmation from the Ethics Administrator that you can begin the project  
- that the Ethics Application Form will be approved by your Department and the Ethics Committee may be asked to advise on problematic cases  
- that you may be asked by the Ethics Administrator to make revisions to your form and you will be given two months to make these revisions from the date of any email sent to you  
Yes □

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**Page 6**
SECTION 9: APPLICANT’S CONFIRMATION

I confirm that the information supplied on this form is correct and confirm that the above checklist has been fully completed.

Applicant’s signature: Michael Beattie

Please use an electronic signature or type your name

Date: 28th March 2011

FOR STUDENTS ONLY: DIRECTOR OF STUDIES SIGNATURE
(Where there is not a Director of Studies this should be completed by the academic supervisor)

The Director of Studies is required to:
• scrutinise the Ethics Application and all participant-facing documentation
• suggest and check any changes which need making before the form is submitted

Please tick the box to confirm that you have approved the application and participant-facing documentation

Signature: Please use an electronic signature or type your name

Print name:

Date:

The Application Form does not need to printed out. This should be sent by email with attachments to the Ethics Administrator:
• Ethics Application Form
• Participant Consent Form
• Risk Assessment Form
• Any other information
  (e.g. contract, advertising material, questionnaires, debriefing letters)

Jan Harrison, Ethics Administrator
Jan.Harrison@roehampton.ac.uk, 0208 392 5785

PLEASE NOTE: YOU MUST NOT BEGIN YOUR PROJECT UNTIL YOUR ETHICS APPLICATION HAS BEEN APPROVED
## Risk Assessment Form

An explanation of how gay male therapists’ subject positioning affect their experience of the therapeutic relationship with male clients

<table>
<thead>
<tr>
<th>Hazard</th>
<th>To Whom</th>
<th>Severity</th>
<th>Likelihood</th>
<th>Risk Rating</th>
<th>Control Risk by</th>
<th>Uncontrolled Risk</th>
<th>Residual Risk</th>
<th>Further Action Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safety when conducting interviews off-site</td>
<td>Researcher</td>
<td>1</td>
<td>1</td>
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<tr>
<td>Emotional Distress</td>
<td>Participant</td>
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<td>1</td>
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<tr>
<td>Misconduct during audio recording</td>
<td>Participant</td>
<td>1</td>
<td>1</td>
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<tr>
<td>Travel to and from interviews</td>
<td>Researcher</td>
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<td>1</td>
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<tr>
<td>Possible hazards in rooms where interviews taking place such as cables on the floor etc.</td>
<td>Participant</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>Check rooms before interview. Remove/cut any hazards where possible.</td>
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<tr>
<td>Participant confidentiality and anonymity</td>
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<td>1</td>
<td>1</td>
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<tr>
<td>Hazards associated with working off-site at another organisation</td>
<td>Researcher</td>
<td>2</td>
<td>1</td>
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### Risk Matrix

<table>
<thead>
<tr>
<th>Severity</th>
<th>Risk Rating</th>
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<tbody>
<tr>
<td>HIGH</td>
<td>3</td>
</tr>
<tr>
<td>MEDIUM</td>
<td>2</td>
</tr>
<tr>
<td>LOW</td>
<td>1</td>
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</tbody>
</table>

### Risk Rating

- **HIGH RISK**: Immediate action required to reduce risk
- **MEDIUM RISK**: Seek to further reduce risk
- **LOW RISK**: No action but continue to monitor
“What was that like?”

kind of family and close friends.”

never quite sure whether it was or it wasn’t to be fair… but I was about 14 at the point when I came out to

I think when I was younger, I came out pretty young as well which could be a good thing or a bad thing I’m never quite sure whether it was or it wasn’t to be fair… but I was about 14 at the point when I came out to kind of family and close friends”

“What was that like?”
“That was a very... there was less drama surrounded by it than I thought that there would be. It had come at the end of kind of a long process of realising very young that I was different and trying to put words on that, which ironically were given to me by kids who bullied me a lot through school and they used words I hadn’t really heard of and then it turns out they were right...

That was strange in an of itself... but I think coming out... I think my intellect – that sounds a bit kind of grand doesn’t it? But I think that my intelligence kind of shielded me from a lot of the negative stuff that probably was going on at the time in terms of I was able to put my case forward to parents and close family and people were saying that it was a phase and something that you would grow out of and I was kind of very clear that actually this didn’t feel like a phase and it was more about me as a person. Like I was saying... that developmental thing... I kind of became my sexuality which, looking back on it now, I think yeah, it was probably helpful at the time, but then when you see people kind of whether it’s on the scene or whether you see people in a professional capacity you see that sometimes people never quite manage to get out of sexuality being the only thing that identifies them as a person”

“Yeah... it’s that kind of relationship with sexuality and identity... that it’s more than just what you do in some ways”

“I guess that I was probably the only... I was certainly the only person that I knew of in the ‘real world’ that was gay, and it was pretty... all the old kind of clichés, of feeling quite isolated and being quite lonely and always wondering whether there would come a day where you would meet other people and other people would kind of share the same sexuality and the same idea of what love could be, the same idea of what a relationship might be.

But I think that... and I often wonder if this happens to all gay men? Probably less so for lesbians but I don’t know that many lesbians to be able to comment... But I think that sexuality as... you get a bit too focused on the ‘sex’ bit (laughs) than the ‘uality’ bit...”

“What do you think the difference is?”

“Because I think that as a gay man - I’m not talking generally... just speaking from my experience... it’s just mirrored by lots of other people, but....”

“Which is the whole kind of problem of saying there is such a thing as a gay man (Yeah, yeah...) because there might actually not be one just a lot of different gay men...”

“There’s this gay man and there could be that gay man... but I think that my experience of the gay scene is that there is a kind of right of passage of basically allowing yourself to be abused – I don’t mean that in the most kind of significant way but you learn very quickly that sex is currency”

“Like being objectified in some way...”

“Yeah... and you learn how to use that very quickly to be able to reduce that sense of isolation and reduce that idea of being alone. And I think that for a long, long time my experience as a young gay man was that sex took precedence over intimacy and I was very good at being able to be intimate with friends but there was never any room in some of the early relationships that I had for that to come into a romantic relationship of some kind”

“Why do you think that was?”

“Because I think that people... the human race – which is a big, grand statement (laughs)... the human race has a need to compartmentalise things and I think that I compartmentalised the kind of physical aspect of being a gay man to, you know, quite anonymous in some ways... where sex was very anonymous and you would see people and you may have some kind of relationship with them but it was a very kind of superficial thing”
“They’re just a shag in a way?”

“A shag and probably a little bit more then a shag as well… like you would know each other’s name and maybe kind of visited each other’s houses but it was very much the physical intimacy was the thing that was ‘king’ if you like. That was the most important bit and if sex hadn’t have been involved in that then the whole thing would have fallen to pieces. It still worries me now not only from my experience and to think actually, God, there were times when I probably wasn’t quite a whole person when I was younger but I see it mirrored in clients and I see it mirrored in other people… in friends… and I see those things still getting acted out (A kind of splitting I suppose?)

Yeah and I think it’s a weird form of splitting because… you know, the whole kind of idea of splitting would be that you split off the bit of yourself that’s unacceptable or the bit of yourself that you can’t integrate into the whole… but I kind of was splitting off this part that actually was the only bit of me… which is really like weird… it’s so…

“The sexuality was the only… or the physical?”

“The physical…”

“The sort of… the embodied experience of sexuality was split off… so in some sense you almost become alien or not at home in your own body”

“Definitely… which is… you know, it amazes me that people have the ability to do that and I wouldn’t say it that it was kind of dissociative… it wasn’t…”

“No… no… but it’s interesting because in a sense the body is the currency of sex… so in a sense the bodies are meeting and having sex with each other (But the mind’s just a…) The person is not there but wants to be there…”

“Yeah… wants to be there but is too frightened to be there and I think that… it’s only as I have got older and a good few years of therapy that I have probably come to a place where you’ve got to kind of have sex with someone’s mind to make it meaningful in any way. And… but I don’t think that that’s something that… it isn’t… it’s not something that is kind of fed or watered or helped to develop in… is it specific to gay people?

I think I had a really rough time, I do… because I see straight friends and I see them develop relationships and sometimes you think ‘That’s a bit dodgy’… but they have had kind of… not a perfect model but they’ve at least had a framework to work within. But I think it goes back to that other thing that when you are coming out as a young gay man sex is what is perpetuated and the gay scene is about sex…

I suppose it’s different maybe if you get into the gay elite… it’s probably a bit different then… and you probably all sit around (Sort of the ‘A Gays’!) Probably sit there drinking, you know, Bolly and having very lovely discussions about literature and music and things but I think that coming from a very working class background and doing the things where you know you go out and get drunk and you have that kind of lifestyle… it’s very rare that you get the opportunity to meet people that may want more then a shag… Maybe it’s just the message I put into the world, I’m not sure… but I think…

“Mmmmm… maybe it’s in-between in some way? That it’s sort of hard to come into a cultural construct and change it… and it seems that so much of what you were talking about earlier in the sense of coming to an understanding of yourself as different and really realising that because you were told you were… So there is some sort of sense of ‘I don’t really feel different but I get told I am different so therefore I internalise that and go Oh, OK, I am different’… and then where am I not different and you feel you want to be the same as everyone in the gay culture in order to find a belonging there or something”

“Mmmmm… partly I suppose… I think it wasn’t that… like I knew I was different I just didn’t have a word for that difference so I think in the end the external gave me the word so it wasn’t that I didn’t feel different… like I knew that I was different, I knew that I didn’t experience things in the same way as other people… like when I was looking at boys and other people wanted to go and play football with them and I was thinking I kind of
want to roll around and stuff... so I knew it was just I didn’t know the word for it, I didn’t know the language for it... and it turns out that the words that some of the bullies and stuff were using... that was the right label, well not the right label... but that what was underneath that was the truth...

And I think that going into the gay scene was an attempt to find similarity, an attempt to find sameness in a world where everyone felt very different... but then even that didn’t fit me... and I feel that I had to sell bits of me during that process to fit in, and then now I kind of think I don’t really want to fit in... I can go there and use it for what it is and use it for a night out and use it for a way to meet people and mingle and have a different kind of social life but yeah... it’s not all that it is cracked up to be...

You kind of scratch the surface and all the glitter falls off... it’s a bit... and it’s sad, I often feel sad especially now working more so with younger people and I feel sad for the kind of 16, 17,18 year old lads that are doing... having that process of trying to find sameness and knowing that the world that they are going into may fuck them up even more... (yeah... yeah...) But what else is there? Especially in a professional capacity you can only provide someone within the confines of what you are allowed to provide and you can’t start telling them ‘Well, protect yourself from this and protect yourself from that’ because actually I’ve come up from the other side, I’ve seen people come up from the other side and maybe that’s just what you have to go through

“Yeah... maybe it’s kind of an experience that you... in a sense... you use the words ‘rite of passage’ almost that there are kind of common trajectories for people who move through and I suppose that’s kind of what I was looking at in the paper that I wrote for the Psychology of Sexualities... it’s about gay adolescence and the idea of coming to some idea of yourself and the process by which you do that and there’s kind of a lot of common threads. I suppose everyone does it and has to work it out... I wonder also that even though there is a sense of coming through and out the other side... what comes out the other side? That there is a legacy of having done that?”

“And that legacy follows definitely I think, it’s... ‘cos I think your sexuality is an idea, you know... you can pull it to parts and sweep it under the carpet and it means nothing if you start being kind of aggressive towards it... but I think it’s useful for people to have an idea that sexualities can be different... it’s not just purely about who you have sex with – it can also be other factors as well... about love and the kinds of relationships that you want and there may be more than one person and all those kind of things... but I think that legacy can... I don’t really know if I want to go into this... but whenever you do things like this you think where do I take myself?

But... I think it certainly takes me back to a past relationship whereby the legacy that you are talking about that I kind of experienced and that probably lots of friends have experienced isn’t the same as other people... because then you get other people who reject the ‘knowing’ if you like and have a relationship with a woman and possibly have a child and then at the age of whatever he was at the time – like his 20s – kind of explodes and can’t do it anymore but then his legacy is very different to mine because he’s actually produced another person, another life into this world during that legacy...

It’s still kind of the ‘hatred’ bit I suppose or the ‘trying to find yourself’ bit is still somewhere common between us but... (And the ‘hatred’ being?) Just the hatred of... (pause) I felt as I got... as I got older I realised just how much of my youth and kind of early 20s that I had spent being full of rage and at the time hadn’t quite labelled it as such... thought that, you know, I didn’t feel angry... and, you know, was kind of quite passive and all the rest of it... but once I got into a relationship where some of that ‘mind fucking’ rather than just ‘body fucking’ happened, I realised how difficult it can be to live the kind of life as a gay man that I would want to live and lots of the subtleties about being in a relationship with another man, and how even in certain contexts you still have to pretend and you still have to... you can’t just get hold of each others hands or kiss each other and it doesn’t matter where you may be... you know, all those kind of subtle bits that I hadn’t kind of really realised before because I had just been having sex with people I suppose...

And it still irritates me to this day - even though that relationship’s ended – it still irritates me to this day that I came out at the age of 14, supposedly knew what it meant to be a gay man – my version of a gay man because it’s going to be different – but as soon as you put me into a relationship... and, you know, it was a loving relationship... but his version of it was, he’d been having a relationship with a woman for God knows
“It’s kind of like a lack of... well, not a lack of... a kind of inability to be spontaneous because there has to be a sort of a thought process in front of it... so it’s like a quick check out: ‘Is this safe?’ Then I’ll do it, but it’s a stage maybe for straight people that is just not thought about. In the same way as maybe sexuality isn’t thought about... it’s just sort is there and it’s not really questioned or it just sort of exists and maybe somehow the spontaneous things that you might do like kiss your partner or hold his hand... you just don’t even really think about”

“It is that policing... (internal policing)... yeah and kind of checking out if it’s alright (which is kind of anxiety provoking) yeah and I guess anxiety provoking to the point where... where you just kind of wish that it wasn’t there because... and that’s where a lot of, you know, that kind of anger came from... these fucking people walk around... (pause)... you know, sometimes people say I get a bit kind of ‘godly’ about it all, you know and say ‘Forgive them for they know not what they do’ but it still irritates me the fact that some people don’t – they just kind of don’t quite get it... and it’s difficult because then you think to yourself, well how could they ever get it... but I do some teaching with... because obviously I have to channel all of that negative stuff somewhere... I teach the trainee psychologists quite a lot on the clinical course around sex and sexuality and I show them the video that Catherine Butler made a while ago – the Homeworld thing... And I love it because it has a lot of those subtle bits in it, you know, the subtleties... and every single time there are people that go ‘I never even realised’ and it’s just... it’s those bits because people very often are more bothered about who I have sex with rather then what it might be like for me to have a relationship or for me to be the person that I am... it’s much more...”

“It’s kind of ‘being in the world’ actually on a day to day basis... Irrespective of whether you’re just having sex with anyone or not... it’s just sort of...”

“Yeah... and it just amazes me that... and I was at a social thing on Friday and there were these people that I knew that were kind of very concerned with ‘Who does your eyebrows?’ ‘How do you do this?’ and so on and so on... and asking lots of questions – it doesn’t particularly bother me – but then someone said ‘Anyone would think that they hadn’t met a gay person before’ and then I said ‘I don’t think it really has anything to do with not meeting a gay person they have just never met me before’ And that didn’t compute in their heads... and this is a person that I have known for a long time and they are not gay but I kind of thought – ‘Why? Even if I’m not kind of flying the flag all the time... everyone else... that’s like the most important label (is flying it for you?) Yeah

“I suppose that’s where the truth of the Dafydd character comes from of ‘The only gay in the village’ That somehow... and that takes it to an opposite extreme... but that somehow you have become the representative and therefore in a way you need to answer questions about it and this sort of idea that it needs to be explained (Yeah - it can’t just be) It can’t just be... And I don’t know if you’ve read any of the Darren Langridge stuff about the idea of coming out and coming to terms with your sexuality is not about turning into a happy homosexual but it’s actually to get really angry”

“Yeah... yeah... and I think that it’s alright to be angry but... because it should have been easier, you know, it really should have... for not just for me but for lots of other people as well – this process shouldn’t be as hard as it is but it always will be until things on a bigger level kind of change.

And then you get people saying things like ‘It would be the same if you were black and if you were Asian’ or whatever and I used to buy that for a while ‘Yeah, I’m just a minority and that’s what I am’ but then because I thought about it and probably, you know, doing the research I just thought about things more and I was like, yeah actually it isn’t... I had no frame of reference anywhere... at least if a child grows up in a black family they can see that there are other people around them that are the same.

Or even if they only have one parent and they are mixed race they see that their identity is somewhere and gay and lesbian, and probably even worse, people that might identify as trans are just like clutching at
straws... and then do become stereotypes because they think that is what they should be”

“Yes, one of my clinical placements is at the Gender Identity Clinic and, yes... the whole kind of... the trans experience is very... there is sort of a desire and I suppose maybe it is a human thing - a desire to make it all very simple and boxed off... kind of like ‘Right! You are one of those. I can deal with you and now I understand’ and in a way we do it to ourselves... it’s easier...”

“It’s much easier to you know... even if it’s kidding yourself, to kid yourself, you know what is going on”

“I think that it’s also the thing that opens up into the second part of the subject positioning idea which is the relationship between gender and sexuality and I think certainly for gay men and gay women as well... there is such a binary about what it’s like to be man and therefore the kind of contradiction that to be gay is not to be... I don’t know what your experience is of masculinity and that sort of sense of yourself as a man?”

“It’s one that I have struggled with... more so... than the kind of sexuality aspect. The whole idea of gender – I think just kind of blows up in your face as soon as you start thinking about it because... (pause) I certainly remember a time when I would perceive myself as not being a man.

I don’t mean that I wanted to be a woman but I mean it was like I wasn’t allowed to be both... I couldn’t be gay and a man, and because of a lot of my social world was made up of women... also to kind of, to infiltrate that world there was a... I had to kind of dissolve... it wasn’t a conscious thing I know it wasn’t... or maybe it was... maybe some bits were, maybe some bits weren’t... but I had to kind of dissolve some of my more male attributed qualities, if you like, I felt...

You know, I often wonder if I hadn’t have had the experiences I had growing up I don’t think I ever would have come into a job like this because I never would have developed the skills necessary to do a job like this (laughs) if I had been surrounded by men all the time (laughs).

It’s very stereotypical I know but there is kind of a bit of truth in that, that spending so much time around women I could be good at talking, I could be good at listening, and I got very good at even if I wouldn’t allow myself to feel certain things (that was for another reason) but I at least understood the idea of feelings and where they might come from”

“It’s interesting that that whole thing is gendered – that to talk, to express yourself and to have feelings is gendered... that’s what, you know, women... in some sense that there are certain feelings that you can have but you are only allowed to have them if you are that gender, or that gender, rather then just being human beings”

“Yeah... and that’s what I mean... as soon as you start thinking about it with any kind of interest it blows up in your face... it’s meaningless. But I think that the way that that’s constructed kind of socially and culturally... I was kind of much more concerned with having those qualities than I was having the qualities that are generally attributed to men because actually all that they were doing to me most of the time was abusing me in some way... or... um... yeah... I didn’t want any part of that”

“So to be ‘man’ was kind of to be abusive and...”

“Yeah and was to be... was to not feel and was to be aggressive and actually and this is the one that kind of just... to be not thinking (To not reflect and be non-reflexive completely) Yeah... just project everything out and to... (laughs) and I think as well... and this isn’t about gender...well I know we are talking about gender but this is about people. This is about the fact that my parents were particular versions of people and actually... the qualities that you would attribute to particular genders you know it didn’t always fit with my parents, you know, but I think... obviously you reject the bits out that you don’t want yourself and I think I probably spent much of my childhood having a ‘projecting battle’ with my dad and, you know, the way that he would project all the shit into me and then I would cry and all that and ‘You take it back!’

But it was more of the fact that like with him as the parent he should have held that and he should have... you know, if he attributes himself as being strong, macho, working down the pit and very kind of a ‘man’s man’ (Is
that what he was like?) Mmmm... and have the bollocks to kind of hold your own stuff and stop giving it to your child... but he didn’t and he still can’t, he can’t do it... it amazes me that you can get so old and not have learned... but, you know... and I think... so I... and I think that that is a lot of people’s experiences from people that I have spoken to... that one parent generally is less accepting of whatever it may be... and it hasn’t always been the dads, you know, sometimes it’s the mum and again that idea of gender goes out the window when you think of characteristics specific to gender but I think... I wouldn’t change what I did but I know that what I did was... it took me longer to become and I’m not even convinced that I am a fully rounded, integrated person right now, but I think I am much more then I ever was, but I think developmentally even the development can take as long as it needs to.

I think it would have been quicker if I hadn’t have had to make certain choices around... you know, I found protection in women... women were very protective... so that afforded me a greater ability to ‘live’ if that makes sense (It made life safer?) It made life safer in lots of ways; it made life safer because there was someone to talk to (Was that your mum?) No, not just my mum, it was extended family but friends as well, female friends at school, college and uni and... it’s that... they made it safer because there was someone there... there was someone willing to understand.

I look back on it now and probably think they were all... well maybe not all of them... were waiting for me to say ‘D’you know what? I’ve changed my mind. I’m not gay. Let’s go and get married’ there were always those kinds of issues there as well and I was always very naive around that stuff and I didn’t kind of see it until it smacked me round the face kind of thing. But... it’s kind of that thing isn’t it where you know something can be of its time, but the time has passed and you’re still doing it, and you need to stop now.

I realised that... you know, (laughs) women weren’t saving me... they were restricting me because I was allowing it... I liked it... (“It allows you to tread water a bit and wait and not change”) and just kind of... it’s a very strange process and I think some people do that and other people don’t... I think other people reject the feminine to the point of becoming über masculine (In the gay world? The big ‘mUSCLE-Mary’ types?) Yeah... and so you know... one of my friends he always amazes me, he never... and I think that is the other thing as well actually... but once I started to develop gay male friends that was when the world got much... got more confusing in one way but also more free in another way because I could see that there were different versions of what I’d created, there were bits that they did that were much better then what I did and vice versa and then you can learn, and you can learn from people that you love and they give you respect and you admire and hopefully vice versa and...

“I suppose it’s the idea that we are in the constant process of becoming, that somehow there’s something that resonates for me in what you say about a ‘becoming’ that is masculine and a ‘becoming’ that is gay and the sense of trying to work out what the ideal is and then trying to live up to it in a way, or as you come to an understanding of yourself as gay – what does that mean and where do I go to learn how to do that properly... like there is a proper way... so if I’m gonna be a man I have to learn how to do it and someone has got to teach me, and if I don’t want to kick a football around... So how would you say you have come to an understanding of your own masculinity through trial and error... through carving out your own idea of it?”

“I would say that I wasn’t masculine to be fair”

“And what does that mean then?”

I think it means that... (pause) while I may cling on to the gay label with every fibre of my being – masculine is a label that I don’t need because it’s too confining, it’s... you know, the whole thing around are you a top, or are you a bottom? Are you a this or a that? (I was thinking of the whole Gaydar ‘straight acting’ kind of...) Yeah, it’s just a load of bullshit! And the thing is, and I can’t sit here and deny to you... well I could but I’m not going to (laughs) because it wouldn’t mean anything for me to lie... but I can’t say that when you think about particular sexual fantasies, the idea of a very masculine man would appeal... but like I know... (What is a very masculine man? Is that somebody who doesn’t care and is very unfeeling and just kind of throws you down (Yeah!) and has his way and (and then leaves) and then fucks off – there is no sense... there’s no making a cup of tea afterwards) Yeah – but to kind of know where that comes from as well and to... you know... that kind of re-enactment and I get that and there have been points in my life where I felt very... no longer the victim after perpetrating a very masculine kind of guy
But you have to know where that comes from then to be able to choose something different... and like I would never ever in a million years want a relationship with my dad... (That archetype?) Yeah – that archetype because [at least not consciously in some way, maybe] I think that like unconsciously I probably would, like I say, in terms of those kind of very contrived sexual fantasies... but to actually have a relationship with another person - which is why I would say that I wouldn’t identity as being masculine because I don’t need it, because like I think that love is just... it’s an amazingly subtle and dramatic thing but at the same time... as soon as you start trying to put boundaries on it or rules on it or... you know if someone looks at me and thinks ‘Oh he is too feminine I don’t want anything to do with him’ Then fine. Fuck off! Because it doesn’t mean anything to me... but I think that it’s also very difficult... if somebody said to me would you have a relationship with someone that was very feminine with someone that wore lots of make up and someone that was screaming then I would say no... but I think there is going to be a tiny bit of internalised homophobia inside of me... there’s got to be... no one can ‘therap’ that out of everyone... but... so there is going to be a bit of that... that kind of my dislike of that... but it’s also because I’ve had relationships with those kinds of people and, d’you know what, if you think about the whole idea of masculine and not listening and just being very self centred and being very egotistical and not wanting to connect... you know, these people that they call feminine are probably one of the most masculine people I have ever met in my life!”

“That’s the interesting thing isn’t it, if you actually drew up a construct, as people have done, of a ‘hegemonic masculinity’ – this idea of masculinity that you kind of... cave man style... in fact if you overlaid that against basically a stereotypical gay man there is actually quite a lot (Yeah!) of misogyny and a desire not to have feelings and hyper competitiveness... living in the body... not doing feelings... those sorts of things... They are actually easy to map... and I wonder then if perhaps because you are a man there are in fact multiply masculinities that you might not buy into the old sort of hegemonic idea of ‘Men are men and woman are nervous!’ and all that sort of thing and you’re a ‘bloke’ but that there might be shades all the way along... that the screaming queen is also masculine in his own way”

“I suppose the only problem with that is, like if you keep the label (Masculine?) Yeah if you keep that, then it just perpetuates itself and I don’t think... that’s what I mean. It’s not a label that I need”

“Mmmm – and in a way you only get two. You get to choose are you either masculine or you are feminine. So it’s that... that maybe that whole kind of binary thing that is just so problematic. If you don’t buy into either of them, what do you do?”

“Yeah... and the idea of queer and stuff... you know I love the sentiment of it and I love the kind of aggressiveness of it (The sort of fucking with gender thing?) Yeah, and I do... and I kind of revel in that, but then I probably wouldn’t identify as queer either. That’s what I mean... I will kind of hold on to gay forever because that’s what I need to make sense of my experience as well as to be able to say to people now ‘I’m gay’ (A sort of crossover between making sense of experience and then integrating that into identity, so something of your experience becomes something of who you are... which maybe is less held onto for masculinity... or more problematic ) Yeah... definitely”

“If you overlay that with therapist which I think is a bit of a ‘power sandwich’ - that you’ve got ‘masculinity’ and you’ve got ‘the expert’ both of which in our culture are very powerful and then you have got ‘gay’ in the middle which has often been constructed, and maybe still is, as weak for men... or having less power and there are also millions of other layers raised like class and all sorts of other things... but I suppose the thing I am looking at here is that. So the idea of the psychologist or the psychotherapist... I suppose I am sort of interviewing anyone who is a qualified psychologist, psychotherapist, someone who basically works with the relationship in some way. You touched on it a little bit... this sort of idea that growing up and having to be reflexive about gender and sexuality and how it has contributed towards a journey that had led you into this sort of field...”

“Yeah... I think... I do, I think very often... I can always remember someone asking... well the first thing was I suppose... I don’t know if this is what you were asking but this is kind of where my mind has gone, the first thing was to do this... to become a qualified psychologist or whatever... is... was very important to me when I was young... very... it was kind of that ‘other’ esteem as opposed to ‘self’ esteem and every bit of my positive stuff around me was wrapped up in certificates and grades and it was only when someone said ‘Do you think
that clinical psychologists can be trained or do you think it’s inherent? I can remember thinking about that for a long time afterwards, and thinking of course it can be taught otherwise people wouldn’t be able to come out the other side and be able to do the job... but the bits that set people apart I’m not sure whether they are taught in that formal way as they suggest.

I think it’s definitely learnt but I think its learnt more through their experiences of being in the world and I think that I often think now, there are some bits of what I do... because not all psychologists work with the relationship you know and some people will chuck skills at people, and chuck homework sheets... and that’s fine, that works for some people but I don’t think that I could do the kind of work that I do if I hadn’t have had the experiences that I’ve had and... ‘penetration’ keeps coming up in my head and I mean it in the sense of – there is a fear of everyone coming for therapy - I think - there is a fear of being penetrated by the person that is going to help you – or trying to help you...

I think that comes up for men much more than it does for women unless they’ve experienced abuse or rape or whatever... then you get it in a slightly different way, but it’s ultimately this fear of someone getting inside, someone getting under your skin and the amount of fucking clients where... male clients and I assume straight... but then there are even gay as well... who reject your attempts to develop a relationship... amazes me... I know that people come to therapy very often and they don’t really know much about it and they think you are going to fix them because you are the expert and you will give them the tools and be the ‘gay messiah’ for them if they are gay or just the ‘messiah’ if they are not.

It’s tough, it’s hard going and kids do it as well and it amazes me because you would think that children would be a bit more receptive to it but even they are conditioned into this... this very western view of things... where to be self contained and self reliant and to not need another person. And then like with the whole ‘expert’ thing... working in an adult psychotherapy service which predominately was either psychodynamic or analytic, it just used to blow my head! Because even within the model... because even though I don’t very often now present as ‘expert’ within that service, that was what was kind of expected... and the amount of time and energy that had to be spent working through some of those issues with these kind of very straight-acting, straight men who were just like frightened of it...

I think with me sitting in the room with someone... it’s obvious I’m gay... I’m under no illusion... for me to sit in a room and to be suggesting to another man that, you know, I think I can probably help you but I can see it’s very difficult to be open or to just let your mind wander or to... and it still baffles me, still... because you do just kind of get a bit of a brick wall... and I’m not saying you can’t do anything with it, you can, but it takes a long, long time... because, I think in their heads they are thinking ‘Well I can’t be open because then he’s going to fuck me or he is going fancy me because he is gay’...”

“Or in some sense control maybe... (Mmmm, definitely) which I wonder if that comes from the idea of ‘expert’ that once I have the evil powers I see into your head and I can fuck you up... then if I let you have power... so I wonder the experience – what your experience of training was – what that kind of dynamic was for you in terms of ‘gender’ and ‘sexuality’ and ‘masculinity’ and ‘psychologist’ and whether that was questioned or how you experienced it”

“I think it was, it was something that... the idea of ‘expert’ never sat very well because... becuse I come from a minority...”

“So again, it’s slightly oxymoronic... but if you were straight could you be an expert?”

“Definitely” (laughs)

“Why? Because gays don’t get to be experts?”

“Because as gays we are all a bit abnormal aren’t we? So how can we be experts at human nature? When you are already a little bit fucked up yourself? Which is ridiculous and I know it is ridiculous!”

“But it affects your sense of yourself as, you know, Dr James Lea”
“Yeah and I think it comes up especially working in a child service as well with talking to parents - I still get anxious about giving parents the message that it’s kind of not them – it’s you. As soon as you do that you’re going to piss people off and that’s fair enough, it’s my job sometimes to piss people off. Probably a lot of the time... but very often the question will get thrown back at you is ‘Well, have you got children? How would you know?’ and even a straight person without children would struggle in that situation maybe to say, ‘Well you know, I haven’t got any children but I know all these things and I am the expert (‘Is that where you go with that?) No... I would say, ‘Oh that’s very true, I don’t know what it’s like to parent a child 24/7. But I actually do know what things are damaging to children even when people don’t mean them to be. And it’s kind of part of my job to point those things out to you. And I don’t need to have children to know that’... so it’s still a cop-out but I think sometimes people hide too much behind the fact that they’ve got children as well, especially in a mental health service for children, because they then think every child should be like their children”

“Well you get to that point maybe that we were talking about before where you don’t question or you question less because you think you know. Which is different from an experience of always having to question or second guess or not necessarily...”

“Just to be able to think about things, the bits the other bits in terms of how my sexuality, gender and this idea of expert would definitely impact is on... some people in this service think I’m a bit of an anarchist and that’s not a label that I would be adverse to...”

“Why do they think that?”

“Because I refuse to accept the idea that ‘Well, we just do it like this, this is how it’s done’ (Token for granted?) Yeah, as if it was given by God himself and people find that very difficult, people know where it comes from and I know where it comes from – it comes from the fact I never want to be fenced in because it felt like there was a long time I was fenced in and I was having an internal rebellion but I didn’t let people see it because I didn’t get angry.

I think it comes up very often kind of with diagnostic meetings to do with, you know, has this person got an emerging personality or has this child got ADHD or if they have got this or have they got the other... and I fight really hard to get these children off that train because... well, the treatments that we have for those things don’t particularly, they’re not magic anyway... and but people don’t like it, and I often think in some ways that I just act out in work what I have always done in life which is think to myself or know something about me or something that I believe in and start off kind of quite quietly and then very quickly force people to acknowledge it or to recognise it in some way... I think now, at 28, and I know that 28’s not dead old, but I feel older in some ways because I think as well it’s very unusual for someone to be qualified this young and I never quite realised that at the time and I often think I probably should have taken a few years out before doing this because... I’ve got lots of responsibility and I don’t know if this has anything to do with sex or gender or whatever but I don’t particularly want all that responsibility...”

“It sounds also to me that what you are describing is an experience of power and of using power for certain things in a way... like defending the child against the serried ranks of adults who want to objectify and make this child a ADHD person and put them in this box and in some sense your own experience of being boxed or of sort of boxing yourself and finding that it has been very unsatisfying makes you - in my fantasy - desire power so that in some sense you can use that anarchistically to sort of subvert and stop people being put into boxes so much. But that the experience of yourself as a powerful person is ambivalent because it comes with responsibility, so you kind of want it but don’t...”

“Yeah... I haven’t quite thought about it like that... but yeah... because I never wanted power in the way that I watched other people achieve power which was by frightening people (bullying?) yeah, I didn’t want it in that way and I did want... and I’m not going to lie... I did want to achieve something... I kind of said before I did A Levels that I was going to do hairdressing and very quickly realised that was a box that probably wasn’t going to fit. No matter how much I thought I would like, kind of, messing about with people’s hair... the vision that I had of myself, and the life that I would lead and I don’t think that I will ever achieve it because I don’t think it’s possible – it’s like you said before, you never get there, you are always trying to do the best that you can and you are always thinking that ‘Oh well, when I get this then everything will be ok’ but it never is and you just kind of keep going and keep going.
But I think I always had a vision of myself as being just being like a good person... as stupid as that sounds – not being cruel, not being malicious with intent... I am not perfect and I am vengeful and I do get ridiculously angry and stuff and I accept those parts of me but... I never wanted to be someone who would be an abuser. I tried the rescuer bit but that’s very tiring... and it doesn’t work... (And the victim bit?) The victim bit is probably the most fun... in my experience anyway, you get a lot of secondary... third, fourth... gains... you get ‘em all! So yes, I probably did want power, and I wanted power because I wasn’t allowed any either when I was younger

“I also wonder if the experience of being gay is an experience of powerlessness to some extent (Definitely!) that sense of bullying... and that you can’t kind of escape and that it’s an experience... that is kind of why I was thinking around this idea of the ‘power sandwich’ and somehow being masculine is suppose to be an experience of being powerful and men are more powerful then women in society, and there is also an experience of power in training and pushing yourself to become... to achieve excellence in a field.... and when I use the word ‘expert’ I know it’s seen negatively but expertise can also be used... as Foucault says, you can’t escape power, power is going to be there anyway... but it’s what you do with it.

I’m also aware of time. My experience of today is that we’ve gone through a lot of things in a very short space of time and we’ve skated across and I could quite happily explore down other little avenues. But I didn’t know if there was anything else you wanted to say?”

“I don’t think so... I am interested in what it threw up in my own mind because it’s not something that you generally talk about to people... I think unless you work in a service – you know I do some voluntary work for the LGF, then I think your sexuality is very... it’s there and you are working for people who... all they want to talk about is sexuality but I think when... my predominant work is in a kind of generic mental health service it isn’t something that crops up... It does intrigue me that suddenly there seems to be lots of people struggling to come out since I have worked here... which kind of... “Also in a way its not ‘not there’ – I know we don’t really have time to go into it a lot now, but I know the BPS is going through their whole kind of working party that is going to say that’s its unethical to disclose your sexuality... they are going to say that (Wow!) It’s just... it makes me angry... I know it’s central to the research that you did... (I can’t believe that!) Because I’m at the at the gender identity clinic, the woman who runs that is involved with Darren Langridge and various other people on the steering committee... so it isn’t something in a way that you can escape...

[talk about what happens next in the research process]
Interview Two

Commentary

“So… obviously, you’ve had a bit of a chance to have a look at what we talked about last time and see it in kind of black and white… (It was bizarre…) Yes… I was going to ask you what it was like…”

“Weird… very weird… I’ve never… I think, obviously being on your side of things and seeing other people’s words typed, it doesn’t have the same effect as your own words… it was like ‘Really, do I speak like that?’ It was quite odd…”

“In terms of the… just the pace and pattern of what you said or the content?”

“I think it was those… there was something, you know, some words that you kind of use quite a lot, like I said like ‘So’… and I kind of knew that… but the content as well I think I was surprised at how my mind kind of gets sparked off… when you ask particular questions sometimes my mind just kind of went somewhere really different with it… (mmm) it was interesting to see it put down (mmm)… but also a little bit odd as well because then when it’s written down it makes it seem more real…

It’s alright kind of having things mulling round in your mind… but to actually see it written down it was like ‘Oh my God! He knows! He knows what I think about that and it’s weird!’”

“Or, in some senses, as you say, when it’s written down, that it becomes fixed, that it becomes ‘OK… that’s you… We’ve got you down on paper now - so that’s you sorted and kind of organised in some way…”

“Yeah, because some of the things… because obviously you can only ever go off on how you feel on that particular day and the way you understand something that particular time… and I think there were some things that I was reading and I was thinking ‘God, it makes me sound like I’m more sure of things that I actually am…”

“Mmmm – well there is a whole school of thought on qualitative research that it’s a load of old bollocks because people just say (laughs)… But then so is everything I suppose - that people come with a ‘spiel’… (Yeah they generally do) And that’s what you get… but I also think it’s interesting from the point of view of doing the more kind of free associative approach to interviewing that you do spark off different things, and different things do kind of come up for different people…”

“Yeah because I think as well as I was reading it I was thinking ‘God! I wonder how he’s going to analyse this! It seems really structureless’… but, you know, obviously…”

“Yeah… I suppose for me it is semi-structured… so in the sense that I see… like a frame in terms of talking about sexuality or in terms of talking about gender or in terms of talking about professional role… but I wonder if there was anything that particularly came up for you on those things I mean apart from the sense of the strangeness of it, in some ways, but whether it made you kind of reflect on what you thought about yourself to do with sexuality and gender?”

“I think… I think one of the biggest things that it made me think about was just how… how significant it is… but how… how little thought it can get given sometimes in my mind and… ‘cos I was really trying… ‘cos I felt… I felt that I’d given you less for the end bit which is actually what you are most interested in… umm… and was thinking much more about that after reading what I’d said and thinking that… that it does impact on… on lots of different things to do with work it’s just that there isn’t the forum… to kind of just speak about it with someone else… there isn’t the same, you know… if you’re in supervision its kind of ‘Talk about your clients, talk about the process’… but that kind of issue of power and masculine versus non masculine and gay it doesn’t... it’s just something that kind of doesn’t get talked about… unless you’re working in a sexuality service of some kind… I think for them it’s much more on the table (mmm) It’s much more readily discussed…”

“I suppose it’s the sort of implicit/explicit… but yes… I suppose when I was originally looking at the
research... my research... the title was the same in terms of ‘How do gay male therapists experience working with men?’ but in a way it was going to be sit down and let’s ask gay male therapists about their experience of working with men... and in some sense I think by splitting it into two... umm... two interviews... one that explores what it’s like to be this ‘thing’ and then, in a way, what today’s about is what is it like to be this ‘thing’, this mixture of subjectivities in a relationship, in a therapeutic relationship, with another man... umm... and, in a way, I wonder whether we get something a bit richer for the reflexive bit that we get at the front end...”

“I think it’s something... because it made me think... it comes up less in a service like this, because, obviously, the majority of the... of the clients are children... but it certainly took me back to the majority of adult work in the past whereby there has and probably will always be a slight... when... when I used to be on placements and obviously your supervisor would kind of give you, you know, a list of people to pick from... I would always be much more inclined to pick women than men... and... but I would pick men if they were anxious or if they were low in mood... if they were presenting as more aggressive then I would usually kind of shy away from them...”

“What do you think that was about?”

“Because I think it was... I think it was about... at the particular time... I was very... I would find it very uncomfortable being in a room with a man that was angry... and had a certain amount of knowledge and understanding that I wouldn’t be the best person to be able to work with that... and... and then I think, inadvertently, I picked someone that, on paper, he presented as sad, for want of a better word, and (Sad rather than angry?) Sad rather than angry... and it was... it seemed a lot to do with missed opportunities... you know... paradise lost and that kind of stuff...

And then when I met him he was like about 6ft 5 and built like a brick shithouse... And was ridiculously angry (laughs) with me... in the room... because obviously he couldn’t show me the sadness, so he was showing me the anger... (Who had assessed him? Had a woman assessed him?) No, my supervisor had assessed him and... and thought that... my supervisor knew... it was when I was on a psychodynamic placement... it had cropped up time and time again that this anger issue had come up and because it was only a year-long placement he had kind of... he had picked this particular person for me to...

“So there was something about the sadness that couldn’t be expressed... but anger could be... for him?”

“Yeah, the sadness could be expressed on paper... but sitting in a room with him, he couldn’t tell me how sad he felt or (Because?) Because, I suppose I was another man and... and because it was a vulnerable position for him to be in... He actually couldn’t share it with anyone so it may have been less... less about my sex than I... than I first thought...

But that relationship then he managed to... I don’t know whether he managed to control the relationship... but I gave some of my power to him and I... and I always remember being in a session with him and sitting there and just kind of getting the image of gambling in my mind and shared this with him and said ‘It feels a little like, you know, we’re playing poker or something. And I just wonder whether that kind of means anything to you?’

And... and... he got quite pissed off with me. Because I think what he took from it was that I was insinuating that he was playing, that he was kind of not doing this properly... umm... and I suppose there was an element of that that I was trying to get across to him... but it was more about the kind of poker face thing... not being real and keeping your stuff very close to your chest - and it didn’t have the desired effect it just made him more kind of steely and more poker like... umm... but it took me a very long time to get to a place... because I feared... and I do remember having the sensation of worrying what he would do if he brought my sexuality in the room and kind of questioned it... and wanted to know in some way...”

“So, were you feeling quite defensive about it?”

“So I just used to kind of dance... and every so often would kind of give him a bit of a... thing to think about and then other times would kind of retreat a little bit... and it was just the process of... not... there was the countertransference... there was my stuff going on... but this was kind of how he related to people generally
anyway... would kind of get a little bit close and would get frightened and pull back... so we were both getting frightened for different reasons I think... but we were both mirroring what the other was doing.”

“Yes... because I suppose, in that sense, it's interesting, certainly for this research how you experienced yourself... what sort of... and it sounds like there were... there was some fear from you... that seems to be around power in some way or that he could be quite powerful or that he could...?”

“He was quite powerful he was (Part of his physical presence?)... His physical presence was very (Intimidating?)... yeah and he would umm... I liked it when sometimes he would kind of show me the child bit of him, I was much more able to accept that bit umm... but the... where I used to do therapy, my office was in the same bit that I saw people... not like here where it’s kind of all separate... and I would always have kind of a bottle of water on the desk, even though I wasn’t drinking it, it was kind of like... ‘There’s the breast, it’ll be alright’ umm... and he used to want to drink it... and he used to kind of pick it up and say like ‘Can I have a drink?’ and I can just remember feeling so completely impotent to do anything and he never drank it... he never drank it... but he would play with the idea of drinking my water and when I told my supervisor, my supervisor was like ‘This is just ridiculous! What are you doing?!’... but it was so difficult to name that because... because I got very stuck in... in some of my patterns of relating to men that present as him... as he did... which was, you know, very kind of masculine, but very big... and quite... that mutated anger and the aggression kind of underneath... which was just to kind of give... give stuff... just to appease... just to, you know, yeah exactly... and be and not be passive... because I was very active... but to be very kind of submissive (So it was ‘pacifying the god’ type of thing...?)

Mmm... (the angry god) umm... and it was only as like... as therapy progressed and the whole water incident was kind of brought into the room where... and you see I still think that this isn’t the most helpful idea... the metaphor... well not even the metaphor... but even the language isn’t very nice... but there came a point where he broke... and once he broke I could do it then...

Once I saw him get rid of the aggression, get rid of his size... get rid of... obviously he didn’t shrink but you know what I mean, that kind of metaphorical thing... (Or he wasn’t using his size defensively, he just was that size?) Yeah it was just a fact rather than (a weapon?)... umm... and it was only after that point that I could... that I could help him... because before then I was frightened of him more then anything... and I always remember there was... because obviously the seats weren’t arranged like this it was more the ‘ten-to-two’ thing and there was a plant in between us... and he would very often comment that the plant was kind of in his way, he couldn’t see me... I used to love that plant (laughs) I think I used to move it just before he came in the room (laughs) (As a shield!) I used to move it slightly forward on the table... umm... (You may be bigger but I have a plant!) Yeah (laughs) Look what I’ve got! An accessory... (laughs)"

“Which does make it a bit like a poker again... like I’ll take your size and I’ll raise you a plant (Yeah) What have you got?”

“Yeah... and he had a backpack, and a coat... he stayed with me a long, long time afterwards... he never turned up for the final session... he never came for the ending... which surprised me... (How many sessions did you have with him?) It was over a year so it would have been maybe 40... something like that... umm... and I always... I always regretted... it was one of the best lessons that I ever learnt I think... but I always regretted that I hadn’t managed to get hold of myself sooner... because I think I could have done more for him... because once he’d shown some of the other parts of himself... there was lots of... there was lots of kind of homoerotic stuff going on with him in the transference and he feared me penetrating him in some way...”

“Yes, it’s something that you spoke about last time? That sense of what happens when men (When you get into someone...) When you get into someone... and when men are together... maybe it happens when men are together anyway? But perhaps more sort of explicitly in therapy because there’s no one else there... and it’s very intimate...”

“Yeah, I think it happens on so many different levels and I see it... I see it now with kind of... with fathers or, you know, carers or whatever... there is always... because I still notice those same parts of me, that could kind of, you know, start bowing to men... but I very often... I ignore them more now than I ever did before
but there is still that umm…"

“So you clock them but don’t do them kind of thing… or when you say you ignore them?”

“I think I clock them…sometimes chose to do them but more often than not choose not to kind of get involved in it because… just as you develop, I suppose, you realise that you are not providing a service if you are just frightened of people… umm… and this is a really silly thing to say, but I always remember and it was in this room, one of the fathers of a particular child who was in hospital after doing… taking quite a big overdose was… came in because he wanted to speak to me and he was very angry with me because I had left her at the hospital and he was a Roman solidier in Chester – you know one of the actors that take people on tours and stuff (ok) – and I can remember having this very strange reaction of sitting in this room… I was sat where you’re sat and this man, dressed as a Roman, (Literally still in…?) Literally still in costume, kind of legs spread… with like a small skirt on and I can just remember thinking, this is the most bizarre thing because you’ve got an archetype of a man… whatever that may be (Soldier!) sat in front of me and I am kind of saying ‘You know I understand that you’re upset and all the rest of it - but there’s only so much I can do and actually you need to take responsibility for caring for your child… I’m not her father’

And I can remember at one point thinking, you know, ‘I hope that sword doesn’t reach!’ you know… but it was quite a significant thing for me because I remember afterwards thinking ‘Well, you did it, you’ve just done it. Its fine, you can do it with other people’

“So to be able to challenge appropriately kind of thing?”

“Challenge and challenge for the right reasons… not get caught in that… Because I see other people and I’ve known… maybe not therapists, more social workers… where they’ve, working in therapeutic settings and have been gay and can get stuck in the other thing whereby they meet that aggression with aggression… and working with, you know, in forensic settings as I did in the past… meeting… they’re feeling frightened but they’re not doing what I would do… they’re kind of meeting it with kind of the front of being really challenging and kind of… and that is as unhelpful as…”

“Perhaps it is back to that poker game… which is raising the stakes?”

“Mmmm…. and I think that it’s… it does whether… I think whether you like it or not… whether I like it or not… you can’t… you can’t always forget where you came from and you can’t always inoculate yourself against sometimes getting stuck in those unhelpful ways of being when you’re with a particular kind of person that represents something from your past (mmm) And sometimes you’re not going to be quite as slick as others and you might fall into it - but I would like to think that now I do it much less than I used to…”

“Well I wonder if, you know, if we bring ourselves to therapy rather than… (I think you have to) Rather than some kind of well… an adapted version of yourself that’s been moulded into ‘therapist’…?”

“I think sometimes you might do that as well (mmm) I think sometimes there are particular… (You can put the hat on) I think sometimes there are particular situations… because I think… the other thing that it made me think of was… umm… how I don’t know… you see sometimes my brain… I don’t know whether it completely relates but it also made me think of like you said the hat thing putting something on or putting a particular piece of clothing on or putting this watch on - which somehow symbolises therapy to me - because I don’t wear a watch out of work… umm… that when you’re going through some shit in your own life like when something bad happened, you know, someone’s sick, someone’s died, relationship’s end… you know, bad things happen… and, in those situations, I’m much less likely to be able to spot things and I’m much more likely to kind of run with old patterns and… and I think… I think that’s kind of an interesting thing - because I don’t think people talk about… I think people talk about it sometimes… but I don’t think its something that you read… you don’t read about it in the literature that much… you read about it in books (mmm) but people don’t really focus on actually how do you be a therapist when your own life is falling apart…?

Do you just not go to work because that kind of doesn’t very often happen… because we’re all far too human than we think we are… and I think that there’s probably a couple of clients… lads here of probably
17... where when there was something happening in my life – probably at the beginning of this year - I was much... I was pretty crap as a therapist to those two more than I was to women... more than I was to girls because, with them it felt much harder to be able to keep this particular... it is... I suppose it is a version of me... it is a bit of a moulded version of me, whereby you’re trying not to react to the fact that you know, like someone’s sat in front of you... kids are sat in front of you... lads are sat in front of you... and they’re calling everything ‘gay’... you know, everything’s ‘gay’... this is ‘gay’ and then they said this to me and that was ‘gay’... and you are kind of sat there and you just like... you can just feel yourself inside a bit and you think ‘I would really love to just say something’... but then you know that that isn’t kind of your role... necessarily... you’re not here to be a political figure... even though it would be nice to be sometimes and umm... just some of that stuff as well... it made me think about how difficult it can be to do that when you’re not really feeling that great yourself...”

“Yes your own ego is not very strong (mmm) but, yes... it’s kind of an interesting thing that in some senses... there’s more armour plating that kind of needs to be on if you are getting into this with a man... or with a young lad or whatever... than with a woman or a young girl... that is somehow... seems to be qualitatively different in some way?”

“It does and it makes me think that I’m bloody... you see because now I’m noticing the urge to ask you what other people have said but I won’t! But I think, maybe I am just a really crap therapist I don’t know but... I am not sure... I’m not actually sure I’ll ever come to a place in my life generally... but I think it terms of work life... it would be... I don’t know whether I would be a very good therapist if I wasn’t able to put a bit of that armour on when I’m working with particular kinds of clients... in this case, men... because that bit inside me that still probably is... you know, that maybe I haven’t been able to fix yet or whatever it’s still... it needs a bit more... it needs a bit more protecting and I feel I owe it to myself to be able to do that because there was a time when I wasn’t able to... because I was too young or I didn’t understand and I think they kind of get a decent experience out of me...”

“Well I wonder if it’s possible to have a... umm... to be aware of something and then curious about it rather then to feel that it’s kind of good or bad... that to say... well, you know, it’s interesting that that’s what happens when... rather than it to feel like that somehow it means that you are a worse therapist, or that one set of clients get better therapy than others or just that it’s different perhaps?”

“Yeah... (pause)... I suppose the... (pause) because in some ways... working with gay men -who are also men - and gay... umm...(pause) there are... (pause) there are similar dynamics going on - but maybe different... different words or different terms for them... I don’t know... because I think that... I don’t know... I was going to say something really flippant then about when you’ve got two penises in the room, something happens... (yeah) something changes... but then, in a relationship... a non-therapeutic relationship... it’s kind of alright... but in a therapy relationship, there’s someone coming to you for help - which isn’t a very masculine thing anyway, to go and seek help - but so, you’re having someone who is generally coming begrudgingly to get help - whether gay or straight - and then you... you begin to try and develop some kind of relationship with them that hopefully you can then use...

And I think with straight men - for me personally - some of those little dynamics about being a little, you know, bowing and passive and all those kind of things - but then with gay men... I think that they very often project onto me... because even without me telling them, you know, they very often... you know... I don’t think anyone has actually ever asked me... but it’s that kind of unspoken thing - the other way of knowing that the person you are sat with kind of shares their sexuality with you - and they project this... you know, that I’m kind of the perfect gay man... I’ve got a husband and kids and a massive house... you know, I’ve got kind of the perfect... straight version of a gay life which is what most people aspire to... and I think that then that sets up another dynamic whereby I’ve wanted to kind of shatter that... (pause) but when I’ve attempted to do it with some people it’s come across as far too clumsy... I don’t think it’s been very graceful - the way I have tried to do it...

Because it brings something up in me, it brings up a... I want to reject that as well because, ‘Actually a lot of the things that you’re talking about I kind of... I remember that or went by that little signpost or I haven’t quite got to that one yet, or...’ Do you know what I mean? (You share a landscape?) Yeah... and it’s a landscape that... (pause) that is... there’s lots of quicksand in it that I think you could both kind of... (swoop)
together... which is a bit both get sucked in together (So it's quite dangerous?)

I think it can be because I think... because there’s... you know, some... what some... some gay men need... and I don't know whether straight man need it in the same way but... like I’m actually thinking now that like I don’t know whether a straight man would want to go and see another straight man for therapy... you know... if they had a choice... I think women would usually pick women, very often – they kind of seem to want the same as gay men... I think at some point in their life it’s important to get a match and some kind of sameness... I don’t know whether straight men... Maybe they would rather go and see a woman...?

D’you know I don’t know whether they would want that... that sameness... whereas I think the... the whole thing about the quicksand is that the sameness can get fused - if you’re not aware of what’s going on... (It gets mixed up?) Yeah and that’s why you might kind of get sucked in together, because... you know I’ve seen people through the years use their sexuality as a short cut and I think, you know, it is a short cut and disclosing your sexuality is a short cut and it’s a viable and valid shortcut... if you have thought about it and it seems like the right thing to do... but, I guess... that sameness with a gay man can be as dangerous as the difference with a straight man... the way you perceive it.”

“I wonder if... it ties back with me, as you said, right at the beginning of this, kind of, section of what you’re talking about, which is 'What do you do about two penises in the room?' and I know it’s a kind of a flippant comment, but it’s ultimately at the heart of what you’re kind of talking about... you know... ‘Do they fuse in some way do they?’ Or do you try and not have one? And let them have the penis and you don’t have one? I’m not quite sure where I’m going with this... but it sounds... it feels like... it’s kind of something around... that at some kind of level underneath there’s a problem that there are two penises in the room and someone’s got to either give theirs up (mmm) or they’ve got to start having sex in some way which seems to be around the sort of quicksand that you sort of lose yourself into... A different way of relating because it’s fine to have two penises if you are in a gay relationship but if you’re not... then what?”

“Yeah definitely... it is... yeah... and I think that... (pause) you just made me think of... of another kind of situation where there was... ummm... I think you’re spot on with the penis... I do... I think you’re spot on with the... there are times when I have had to come across as if I ain’t got one and there other times where I’ve had to come across as if it’s massive, it’s huge! (laughs)... umm... but you’re reminding me of a client that just hated being gay and... and he would use... he would use what was said in the sessions as a way to try and umm... not ’come out’ - because he had come out - but he would use it as a way to try and buffer some of the shit that he would get in his outside life from his family... so he would go to his mother and say ‘Well, James said blah, blah, blah’ and then he would come back and tell me this, and this happened over a few weeks and I was... it just made me feel a bit uncomfortable...

I can remember thinking like, you know, he’s just using my words rather than... using my words in his own mind and then putting them... translating them into something that’s his... and then that image of the whole penis... I was like ‘You need my penis...’ he needs my penis to be able to kind of put... and, you know, I know it’s very analytic, but...”

“But quite sort of yes... to wield it... (To shield him...) Or wield it, in some way, because it sounds sort of almost that he could attack his mother... (Poke her...) Poke his mother! (laughs)... It’s a whole kind of Freudian delight! But, umm... that somehow, yes, that he could penetrate his mother to some extent in terms of ‘get at’ her with what you’d said, but he couldn’t... he wasn’t powerful enough with his own...”

“Yeah... so I think, with him, you know... it was the kind of... I don’t know... the gay superego he was using it... and, you know, fair enough, you know... it’s kind of fine to do that... if it helped, then that’s alright... I just think it was interesting that that was kind of where it went... umm... but then a straight man would never do that... or maybe they would but you would never kind of think about it in the same way... because I don’t think I’ve ever... they just kind of seem a bit frightened of you... they’re just a bit unsure of what you might do with them... and then I think that that... like I know we kind of talked about it last time, you know, like how... like the abuser and abusee thing... about... (pause) there is some kind of enactment that happens whereby, if you get that typical person - typical straight man sat in a room with you - and they’re seeking something from you...and I suppose where my mind initially goes is, you know... ‘Oh God! This is like... this is just going to be horrendous, because I remember what people like you have done to people like me...’ And
then... and then that role gets kind of... it gets switched somehow... whereby I think some of my experiences have been that they've then put me in the abuser place and I'm like 'I can't have this, this is not what happens here!' (Yeah) Because I've always been the victim with people like you... and I suppose it's being able to work through that with someone or try and work through that... but it's power again... it's about...”

“Yes it also seems that you... yes, the power dynamic is kind of important but also I'm struck by you using words like 'people like you' and 'people like me'... so that something in a way starts to happen where that person becomes a representative of something and you become a representative of something... you're not James and they're not, you know, 'Fred'... (No) they become 'people like you'”

“Mmmm... yeah... they do... (pause)... It's really interesting that I speak so generically about this issue... (pause) and are so many other things... so many other things press me in other ways... it's much more about the details than the specifics... but I do think that there is... there is definitely something to be worked on...”

“It's kind of interesting, in that way... and also whether, in some ways, that the relationship of... and the sort of repetition of what I'm researching being kind of enacted someway here... that this becomes a bit like therapy... that it's sort of like research but... it's also research into therapy, between therapists that behave therapeutically in some ways... for example when you didn't speak a few minutes ago I didn't come in, I was just waiting for you to reflect... and then I was thinking... well, I'm not your therapist... so... but then, at some level, maybe there are other things that happen because it's two men in a room and it's exactly what I'm researching into... so in some senses it's just sort of... it's all tied up”

“Yeah... it has to be... most definitely... because I think that... as I... as I was kind of replaying scenarios in my mind of past clients, I was thinking... I'm doing exactly the same to you... doing exactly the same thing to you (In what sense?) Projecting a very idealised version of you (mmm) and thinking... and the way that the clients... gay clients have done that with me in the past and thinking 'Oh shit!' but then doing exactly the same to you... thinking, you know 'He just swoops in and swoops out, and has a really lovely life'... it's very... yeah... and which makes me think it's something much bigger then therapy... it's just about...”

“So that there is something that goes on where it's, sort of, umm... it does become, again, 'people like me' and 'people like you'... so people like me sweep in and sweep out and have a lovely life in some way (laughs)... yeah... which might be around the kind of area of masculinity that's about either competitiveness or maybe it just happens... maybe people do it? Maybe there isn't... yeah, I think... I don't know...”

“Because I seem to remember feeling... (pause) I don't know, like 'on the other side' of being... because I suppose my research was... the process of it was quite similar to this... but it was just that I was sat in your... I've said that too many times now you're going to think I have a real problem with you sitting there (laughs) (I can be on the sofa its fine!) But kind of being... you know, kind of having to travel... and sometimes... you know it was going to peoples homes (mmm) And I used to kind of feel that I was kind of the 'swooper'... and you kind of go in and you get someone's perspective of things and you would have a very lovely time with them and then you would go... umm... but I also had the... my experience was that I was like this bumbling student and I was just like 'Oh my God! I don't know what I am doing!' and 'They're going to think I'm this, that and the other'... and that was all about... a version of masculinity, I suppose... because whilst I wasn't talking to them about their experiences of doing therapy with men, it was about being able to disclose to men...”

“Which is an aspect of... and it certainly seems to be... seems to be an aspect of this research as well... which is: 'To what extent do you disclose or kind of para-disclose by behaving in certain ways or dropping certain things in?'”

“Yeah, and I think it just... that's the other thing actually, as well... actually thinking about disclosure... straight men get very much less of me than gay men would in therapy... (So they get more of the kind of edited version of you?) They get more (They get more?) More therapist (More therapist, less gay?) Yeah... less me (Less you) Less me... (And what's the difference between you and a therapist?)

Because I think that... umm... (sighs) it's a really difficult question... umm...(pause) 'me as therapist' is... umm... me as a therapist is less messy, I think... umm... messy in the way that I would... I don't know how to
it was just my experience of those men who were more open to this with past supervisors that were male... and this issue has kind of cropped up in some way and we've thought about it together... and I think that they're probably often very similar... or maybe less... maybe it was just my experience of those men who were more open to thinking about this kind of stuff and even
though they didn’t identify as gay they were very open to those ideas of kind of homoerotic transference and how that can be experienced and what male clients may react to them… like… so...

“So less defended around playing with ideas of homoerotic transference/counter-transference between straight men that it’s not something… simply a phenomena that it is for gay…”

Yeah… no, definitely… because it’s that whole thing of, you know, the unconscious is sexless… so… so it’s not anything…”

“Well, yes… or that, yes… and that somehow… almost this idea that it’s pure, that somehow sex is… it’s part of that discourse that sex is somehow ‘dirty’ (Yeah) And messes things up and son on… rather than being…so we kind of get rid of it… But you talked a little bit with that client… the sort of ‘brick shitshouse client’ that there had been something that I’ve got avoided in terms of umm… working with erotic transference/counter-transference… is that something that’s kind of come up for you in working with men or that you’ve experienced working before?”

“Yeah, because it think there have been times where… (pause) God! It’s really difficult to know what to say because I keep thinking of the BPS… umm… HPC (HPC)… because I think that there have been times, there have been certainly particular clients where… you know, it’s that whole unsaid thing about ‘Do you find a client attractive?’ And I think that as soon as that comes up… you are much less likely to start thinking about erotic transference and counter-transference with the client… I’m not saying you don’t do it with your supervisor, because you do… you need to kind of know what’s going on (mmm) and where, you know… is it yours, is it theirs, is it something between you… but I think that’s… that definitely changes things, it makes it much less… I don’t know whether I’ve ever named it with a client… I’ve named it with women clients (laughs) (But not)… but I’ve not named it with… (With men?) With men… No… (But you’ve experienced it?) Yeah… and I think I’ve experienced it, yeah…

“Explicitly experienced it, in the sense… or sort of being aware afterwards ‘I’m sure that was probably… that was what was going on’… or sort of thought ‘This is what’s going on, but I don’t want to go there’…”

“I think I’ve known ‘This is going on and I’m not going there’ when it’s been from the client…”

“So the client has been erotically… there’s been some…?”

“Yeah, some kind of… asking you out for a drink or, you know… umm… asking you where you go… asking you, you know… those kind of questions that, you know… you just kind of cringe when someone asks you… well not cringe, but you just think ‘God! What am I supposed to say!?… umm… (And what do you say?)’ ‘It’s very interesting that you should ask...’ (laughs) (You can have that back...)!... umm… yeah… yeah it’s definitely been… you know…”

“More with gay men than with straight men or perhaps made more explicit…?”

“I don’t think it has ever happened with straight men… I don’t think that…”

“Though you seemed to suggest that there was, perhaps… something with this early placement client…”

“Yeah… but I think that that was… that was one of those instances where I think it was more after it had begun occurring that I became a bit more aware of it… I think with him it was… because I used to… I used to kind of think… I used to think, you know, I wonder what he’s like ‘I wonder what he’s like in a relationship…?’ with… you know, because he had a fiancé and I kept thinking ‘I wonder what he’s like with her?’ and ‘I wonder whether he kind of mirrors that here…?’ And there were elements that he did and I think that, once he showed the more softer sides to him… obviously because I had kind of been stonewalling his aggression for probably 6 months… (laughs)… when he showed that, that was very attractive and I found that very attractive… and I think that he then reciprocated that by finding my softness much more attractive… more ‘real’- maybe not ‘soft’… no it was soft…(Gentleness?) I spoke much more gently with him… I wasn’t stiff… I wasn’t kind of tense anymore… I could be in the room with him much more… and… and I think that once… once some of that intimacy developed, he was able to… he was able to
“So you couldn’t contain him... or he didn’t want you to contain him... or he didn’t want you to...”

“No... because I think he was much more concerned with containing me... because I was frightening to him and he was frightening to me... so I think he contained me with his anger... and it was only after kind of being able to kind of square him out of it after some time that he then actually let me contain and hold his... just his distress... it was just... it was ridiculous and I don’t mean ridiculous in that pejorative sense... I just mean it was ridiculous how long he’d spent - just kind of being this version of himself whereby he couldn’t kind of really connect with people... everything was much too frightening for him... and I think that that was why I think it was too difficult to kind of attend the last session he just couldn’t do that end of it... which was... it was a few years ago now so it’s kind of alright and I can remember at the time being very just like ‘Oh, you bastard!’... I can’t believe, like... you know, you’ve probably been the person that has taught me the most and I never got a chance to be able to tell you that...and I think that that was the... and that’s all my stuff...all about me... but I kind of wondered whether he would have liked that message anyway...”

“But, in a sense, it’s you in a relationship? Which is the whole sort of thing of like, well ’Do you not bring yourself and be therapist?’ in which case you don’t talk about well, actually, that it had any affect on you... or...”

“And I think I generally do that with people... I will do that as an ending... I will give people those kind of real bits... if you like... the real experiences rather than... and I don’t mean that it’s about... I’m not saying I’m dishonest with people... but I think that as an ending approaches you have got to demystify yourself a bit... you’ve got to be able to get rid of the kind of veil and say ’Alright, you know, we’ve been together. We’ve sat in this room together for a year. This is how it was for me. How it was for you?’ In a real way... rather than... rather than... not quite so real...

Because the real me, you know, wouldn’t be a very good therapist... you know, I swear all the time... (Because therapists don’t swear!) Therapists do swear! I swear! (laughs) But what I mean is... the version of me that kind of walks out this building... because I think it very often... the other thing that I think crops up... and with men and women... but I think I’ve found it... I’ve found it kind of slightly more powerful with men - regardless of sexuality - was the question of ’Well I don’t know anything about you?’ and ’You just kind of... we just talk about me all the time and we never talk about you and you don’t know... I don’t anything... I don’t know where you live... I don’t know all these different things’ and I think that I’m very... you know, with some people I suppose I’ve given them certain bits depending on what they’ve asked... but then there’s always that kind of... I always feel like a little bit of like... a little bit of pain in the heart when they say stuff like that... because I think, like ’Who do you think is sat here?’ You know, ’I know that you don’t know where I live or where I went to school or where I’m from or all these different things. But it is me that sits in this room with you and it is me that tries to make sense... tries to understand... that feels for you... that feels for me...’. And it always pains me that people... And I know what its like... I’ve sat the other side and gone ’I don’t know fucking know anything about you... you’re doing my fucking head in... why don’t you tell me like... something... just give me something... give me a bit of something!’ But then when you’re on the other side and you’re the therapist and you have this like really grand idea of... you know, it is me but they don’t see it as you... they... do you know what I...?”

“Yeah and I wonder whether it ties in to also what you were saying earlier about whether you bring yourself or whether you bring the therapist and at what point does the therapist kind of... in, you know... using that language, in a way, sort of move aside and allow you to be there... but also whether what the client says - in terms of saying I don’t know anything about you – is, in fact, they’re saying ’I want... I miss not being with you or I’m going to miss not being with you or (mmm) its strange to be in a relationship with you because I want to be close to you...’ or... and it’s a way of sort of saying that...?”

“Yeah, yeah it does... those sorts of things... it is me... (I am here) Yeah (And I’ve been here all along...) Yeah and it’s a particular version of me... and then you give them...you give them, you know, the very honest...
So there is something unsatisfying, I suppose, ultimately…

“Yeah it’s like trying to give them, like, orange juice and what they want is champagne… it’s just… it doesn’t quite meet it… and I think that that happens with men as well… where even in moments… even if it’s very small moments… they want to know another, they want to know you as ‘the other’… and I often think that that is… is probably one of the tragedies of being a person but I think probably more so as being a man - if you buy into the whole kind of stereotype thing of what men are - that I think so many men are just kind of dying to be connected to someone but socially and culturally they just… it’s not… it’s not made easy for them to do… they have to kind of develop other things…”

Well it’s interesting because, I think that, for me, when I was looking at the transcript of what we talked about last time and sort of thinking of master themes and all those kinds of delightful things… but it felt to me that there were stories of isolation and separateness… you talk about being separate and you talk about connection and there was a lot of talk about your own anger… and then there’s sort of anger with this client that needs to be defended against… and so it seems that there are kind of very parallel themes that sort of come up about closeness… and you talked about, you know, ‘fucking with the mind’ as it were - but in the sense of intimacy rather than, you know, fucking somebody up… (laughs)… but that experience of being… that it is in fact… you are able to be very intimate with somebody - perhaps more intimate with somebody - when there’s some kind of connection, mind connection and experience of closeness and intimacy… and how problematic that is for men…”

“Yeah definitely and I think that… you know the… that thing about…umm… because it was only after I read… I re-read that and I was like ‘Some people talk about mind fucking like it’s a bad thing. I hope he doesn’t think that I mean it as a bad thing!’ Because I… (Like ‘fuck you up’ kind of thing rather than…) Yeah because I’ve kind of been (laughs)… stuff to do with children being looked after and some of the people talk about ‘mind fucking’ and ‘brain fucking’ as if, you know, you fuck the child up… and I really don’t mean that… but I think that, you know, that thing, like about… from the last interview as well and the… the development and the use of the body and all that kind of stuff and then, you know, sometimes actually,… the therapeutic work that I’ve done with men has been more intimate than, in that way… in that sense, more of an emotional connection than some past relationships that I’ve had… and… which is bizarre!

But it’s because obviously you’re not allowed to fuck them… so… physically… (laughs) So this is what you’ve got to work with… and I just… it is… it’s just… it’s a fact that… that I think for me and I wonder for other people - even if it’s not for the other people that you’ve interviewed… umm… I wonder whether their experiences have been that… you know, you start off by using the body as a way to connect to other men, because maybe your experiences prior to that have been about being isolated or separated or segregated or whatever it’s been…”

“Othered?”

“Yeah - and then you learn to use the body as a way of being able to connect… but then that’s only ever a certain level of connection and that then if you’re the kind of person that then goes to try and be a therapist or a psychologist that then… you kind of have that old script and you can’t quite get rid of it… you can make it smaller and you can kind of make it small font and all the rest of it… (Put it in another room?) Yeah, but you can’t get rid of it… so I think that then when you’re presented with a man… and you’re… obviously you want to help them, it’s not about… it’s not about… fancying them or meeting them for sex or anything like that, it’s about helping them in a psychological way… but then you’ve got to really try hard then to be able to… to connect in this way… because they don’t really teach you how to do that when you’re training… they don’t think that you might come with this particular issue or this particular experience and they actually don’t really teach you how to connect with people, generally… I don’t think…”

“Perhaps they teach you the more ‘therapist’ part… but there’s something… it feels very powerful what you’ve just said which is that this sort of sense that there’s a part of you that has to be in a way almost strangled and sort of… (mmm) or kind of made as small as possible, or kind of, you know, locked away
somewhere or split off... but it’s the kind of relational part... but because it’s experienced in some ways as shameful, that it kind of gets left outside the room (Yeah) So your ability to relate or your ability to be intimately relating in some ways is sort of cut off and then you’re presented with an opportunity or a way of being with somebody where to be able to be intimate with them and hold it is what you need to be able to do to do therapy and it’s a sort of... it’s a very odd state of affairs in some ways... one gets... which I think is what you were saying when you said... when I asked you that question and then it was kind of ‘Mmmmm... But sometimes I’m myself and sometimes I’m therapist’ and I said ‘What’s the difference?’ and maybe it’s that... maybe there’s sort of a part of you that gets left outside and other things... which is the messy bit (Yeah) And if it’s let in the room then you can be messy...”

“Mmmmm... because I think that the whole... I don’t know... like you have to... not that you have to... but I suppose gay men generally... you’re much more palatable if you leave your sex at the door... you know, you leave... you are sexless, in a sense...”

“So you leave your penis outside... which is one way of talking about it... in some sense you don’t have (You don’t have any potency... you are a vessel...) And not threatening... and so, perhaps, more female? I mean, certainly again in analytic terms you are ‘the container’ or this sort of more womb (laughs) A womb with a view! (Yeah, a womb with a view!) I shared one with you... or a womb with the pot plant!? (laughs)...”

“Yeah... (pause) it’s so interesting”

“I’m also aware that I sort of... I don’t want to take up vast quantities of your time... you’ve got other things... but in the last kind of part of things, in the last 5-10 minutes... or whether there’s an opportunity for you to... (laughs) To say anything else that has come up... and also in a way to end... to end... umm... the sort of the session and the research in some ways... because it does feel... and I can reflect on this... as the researcher... researcher/therapist... that it is also this person who kind of comes in and does stuff and then leaves... that there is a relationship which occurs when you sort of meet twice and then you sort of think ‘Well, OK. I wont see you again. And that’s the end of that!’ And maybe to sort of talk a little bit about the ending... so that’s kind of held in some way...”

“I think it’s been... I was amazed just how much it stayed on my mind... I think that was something that... that kind of cropped up and I think that there was... I don’t know I felt quite excited about today... I thought it would be nice to kind of... to think about it again and think about it with you... rather than, you know... (mimm) Rather than a kind of think about it (In my mind?) Yeah... I can think about it with another person... um... and I’ve always... I so often have these kind of experiences whereby... because I am a little bit... kind of... (pause) I suppose I’m a bit slutty with what I share with people... I kind of feel very ‘open’ when I think about things and that’s why sometimes... I get that kind of thing... and I’m like ‘Someone from the HPC is going to phone the police!’ Umm... but that’s kind of me and then always afterwards I kind of think ‘Oh God! Why did I say that? And people will think this...’ And I know that is just so normal... but I think as well - for the research to mean something (Yes!) Even if the rest of your kind of your research population are, like, saying something completely different at least you can say ‘Well, this one fucked up person said this...’ (laughs)

“Well, I remember somebody in my training once saying that there are two types of people in the world: there are those who are fucked up and there are those who are fucked up and know it (Yeah) And its better to know it... you know... but, yes I mean it feels to me, as you say, there’s this sort of... the messy part of you... or what you experience as perhaps messy... you said ‘slutty’ or sort of somehow... in the messiness it’s slightly less boundaried, less buttoned up, less neat and tidy and ‘Miss Jean Brodie’ kind of thing... And so, yeah... so, therefore if you bring that part of yourself then maybe it’s a more real experience than you coming with a party political broadcast... of clinical psychology...”

“Yeah... because I remember... I remember interviewing someone that was very... you know very prim and they worked very much in a particular kind of setting which was very boundaried and, you know... and I can just remember reading the interview afterwards and just going ‘I don’t know how the fuck I’m going to use that because there’s nothing in it... there’s nothing real... it’s all hiding and you would never have imaged that someone like that would have said that they would do it... but I wonder if they were trying to push themselves... but couldn’t quite get it up when they had to in the interview... but so, I wanted... and I
wanted the opportunity of seeing... and I wanted to see whether it made sense to you as well - because sometimes... like I said it’s not something that you talk to people about very often (No)... And I wanted to see whether another person could kind of go ‘OK, yeah...’ You know... ‘That kind of made sense and this kind of made sense ‘Because after I read that I was thinking ‘That didn’t really make very much sense, James’ but, you know...”

“But then I think that this is the... the whole kind of philosophical purpose of the research which is to say there is no such thing as knowledge (Sense?) There’s no such thing as sense... nothing makes sense... umm... in the sense of intersubjectivity that I experience you through the lens that is me and you experience it the same way and therefore all of your client kind of anecdotes or vignettes are going to be through you... and they are aspects of ‘the relationship’ that happened between you... and how you experienced it and not necessarily how they experienced it... and so all of these things, I suppose, is what I’m kind of trying to sort of at least unpack a little bit that, what we discussed in interview one frames how you experience... because it’s a part of the... or sort of an attempt at least to see that there is a lens or acknowledge that there is a lens through which you kind of experience (And that those things are related...) And therefore it’s kind of just looking... there isn’t... that’s interesting... rather than this is what gay people.... phoning up the HPC (laughs)... but that there is a kind of... there is no such thing as ‘a gay male therapist’... there are individuals who experience... but then maybe there are things that they experience in common which is interesting...”

“I suppose I am kind of wondering whether I’m allowed to ask but... have you found kind of common bits between what people have said or (Yes) Yeah... so even though there are... (And great differences)... Yeah... so even though there are difference there’s some commonalities between what people experience...?”

“Because people have come at this from all sorts of different angles... they’re all sorts of different ages... um... and different experiences and different life experiences that then, when they come, those things collide with the other person’s life experience and something happens... in the same way that you talk about this placement guy that it’s your life experience and his left experience... the unique kind of collision of those two that creates what happened... (pause) And I suppose the other thing is, if you wanted to, I could send you a transcript of this, it’s not obviously necessary for my research... but I’m going to be transcribing it anyway (Yeah) so if you would like to...”

“It was very interesting to read the last one so I am sure it will be equally interesting to read this one! (laughs)”

“Yes, I’m going to kind of, umm... it might take a little longer... because now that I’ve got all of my eight participants... so that there’s quite a lot of transcription to go through... but, yes, I wanted to say thank you very much, as well... (You’re welcome... thank you...) It’s also quite a brave thing to do, I think, in some ways... and I’ve been surprised at how difficult it’s been in some senses to get participants... I would have thought that would be... people would be happy... or therapists would be happy... but not so much (laughs)... so thank you... (Well, that’s kind of part of doing it isn’t it?) And also, yes, I mean, it ties into your research and I’m sure that that’s going to be... issues of disclosure are part of the whole thing... so you may find yourself... your research quoted in my research (laughs)...”

“Wow... because until the very last part of today it didn’t pop into my mind...”

“No... and it hasn’t been what we’ve been sort of talked about very much... but for other people maybe it is a much more sort of tortuous thing...”

“You should have done my research! No... I don’t mean to take that off you! But it is... you’re right... people do find it very difficult to talk about this stuff... which is why I knew that I would be a decent person for you to talk to in that sense because... but then obviously sometimes I... I fear that I share too much and then I imagine seeing a quote or something and thinking ‘I said that!’... but...”

“It will be anonymised...”

“But I’ll know my words! (laughs)...”
“Well, if you fancy sort of searching out my thesis in 18 months time... then, yes...”

“Are you going to... are you going to split it... is it a PhD or is it a doctorate?”

“It’s a PsychD”

“OK”

“So it’s about 40,000 words... so it’s quite small...”

“It’s the same size as mine...”

“Well... it’s big but it’s quite small compared to a PhD...”

“So, you’re splitting it up... with kind of like a Lit Review...?”

“Yeah, so there’s a Literature Review, Methodology, Results, Discussion... ”

“If you ever get a condensed version...”

“So it’s not 40,000 words? Yeah...”

“Yeah... it would be really nice to read it, to kind of read the...”

“I probably will do something around that... I also realise – you’ve just reminded me – that I even have ‘Debrief Form – 2nd interview’...”

“Wow, thank you...”

“Thank you...”