

The Experience of Coming Out for Lesbians
Sexually Abused in Childhood
Chapter 1: Introduction

Background

Lesbian women frequently feel the need to keep significant parts of their daily lives hidden in, what is referred to as, ‘the closet’ (Kus, 1985). The cornerstone of sexual abuse is also secrecy (Davies & Frawley, 1994) and silence (Herman, 1992) maintained by the perpetrators, their victims, and society as a whole (Summit, 1988). Awareness of childhood sexual abuse (CSA), and its lasting effects on adult survivors is currently in the forefront of societal and mental health concerns. Although most lesbian women were not sexually abused as children (Hershberger & D’Augelli, 2000), the focus of this study is on lesbian women who were.

Prior to the mid-1970s, there was scant data to be found on the incidence of sexual abuse in the United States (Davies & Frawley, 1994). The women’s and feminist movements of the 1960s and 1970s helped bring about public awareness of violence directed at women and children (Brownmiller, 1975; Courtois, 1988; Herman, 1992; Westerlund, 1992). This provided the impetus for researchers in public and private spheres (National Center on Child Abuse and Neglect, 1978) to begin to reexamine issues of child sexual abuse. In fact, feminist writers, and feminism must be credited with alerting the American public to the epidemic child sexual abuse problem (Finkelhor, 1984). Russell’s (1983) epidemiological study on violence against women and children was among the first of many to be conducted, concerning the incidence and prevalence of child sexual abuse (Draucker, 2000). An increase in “excellent empirical studies” (Davies & Frawley, 1994, p. 14) suggested incidence rates of childhood sexual abuse of all American women to be above 30% (Russell, 1986; Wyatt, 1985). Most importantly, once the need for more research became clear, scientific studies of the problem, as well as public revelations of survivors, ensued (Draucker, 2000).

In 1999, at least 88,000 children were sexually abused in the United States, and this figure is probably underestimated because most abuse is not reported (Ménard & Ruback, 2003). It is estimated that one fifth to nearly one half of all female children were sexually abused before the age of 18 (Blume, 1990; Brzuzy, Ault, & Segal, 1997; DiLillo, 2001; Morrow & Smith, 1995). The incidence of childhood sexual abuse reported by lesbian women is in the same range as the general population (Hershberger & D’Augelli, 2000). In their survey of 1,925 lesbian women in 50 states, Bradford, Ryan, and Rothblum (1997) found that the rate of childhood sexual abuse is about 21%, “quite similar to that among the general female population” (p. 243). In 1987, Loulan reported that of 1,566 lesbians, 38% had experienced childhood sexual abuse before the age of 18, either from a family member or a stranger. The varied ranges of prevalence and incidence of abuse are likely the result of how child sexual abuse is defined in a particular study (Courtois, 1988; Griffith, 1995; Herman, 1992), and is discussed in greater detail in Chapter 2. With rare exceptions, however, researchers agree that a history of abuse can be a source of trauma with considerable immediate, and long-term repercussions (Finkelhor, Hotaling, Lewis, & Smith, 1989; Futa, Nash, Hansen, & Garbin, 2003).

The lifestyle of women who are lesbian involves living with the stigma of homosexuality (Blume, 1990), because much of the public in the United States still regards homosexual behavior as wrong and unnatural (Yang, 1997). The process of recognizing and accepting one’s lesbian attraction and behavior is difficult (Sophie, 1987) because the pervasiveness of

homoprejudicial attitudes in our society (Garofalo, Wolf, Kessel, Palfrey, & DuRant, 1998; Shidlo, 1994) creates discourses that tell us homosexuality is unnatural, evil, and unhealthy (Hillier & Harrison, 2004). The term homoprejudice is used to represent heterosexuals' outlook toward (a) homosexual behavior, (b) people who identify as homosexual, and (c) gay and lesbian communities (Herek, 2000a). Prejudice against homosexuality is also unconsciously harbored by gays and lesbians themselves (Moss, 2002), and is termed internalized homophobia (Perez, DeBord, & Bieschke, 2000; Shidlo, 1994). "Internalized homophobia makes consideration of lesbian identity for oneself extremely threatening to the individual's self esteem" (Sophie, 1987, p. 54), and is the cause of much anguish (Moss, 2002). It is not the fear of consequences that keeps one's feelings secreted (Herek, 1989), rather, it is the invisibility of homoprejudice (Whitman, Cormier, & Boyd, 2000), combined with the "heterosexual assumption" (Ponse, 1978) that does so. The heterosexual assumption is the idea that, unless established otherwise, all individuals in an interaction are presumed to be heterosexual (Whitman et al.).

Lesbian identity formation is a fluid, dynamic (Golden, 1987), life-long process (Kitzinger & Wilkinson, 1995) that is significantly affected by the internalized norms and values of society (Sophie, 1987), and is also known as the coming out process (Rosario, Schrimshaw, & Hunter, 2004). Models of homosexual identity development consider internalization of homophobia, as a normative developmental event (Kahn, 1991; Loulan, 1987; Shidlo, 1994; Sophie, 1987) that is experienced by almost all lesbians and gay men (Kus, 1985; Shidlo, 1994). A developed sense of self as gay or lesbian requires congruence (Cass, 1979) or integration of one's private and public identity (Wells & Hansen, 2003), that is, between self-perception and how one believes others view him or her (Cass, 1984). But internalization of myriad cognitive distortions (Shidlo, 1994) about one's sexual orientation may also be generalized to include the entire self (Gonsiorek, 1995).

Qualitative inquiry was the unifying element that tied the seemingly disparate subjects of lesbianism, childhood sexual abuse, internalized homophobia and homoprejudice to one another. According to McLeod (2001), qualitative research develops an understanding of the world that is "complex, layered, and can be viewed from different perspectives" (p. 2). Each lesbian woman selected to participate in this study, conveyed perceptions about her sexual abuse, coming out as a lesbian, and living with homoprejudice. Within these complex layers, common to all participants, I attempted to interpret and make sense of the phenomena, while respecting and recognizing the meanings that each participant brought to the interview, as Hycner (1985) recommended.

Statement of the Problem

The problem of the study began to emerge with the presentation of the preliminary considerations concerning lesbian identity development, issues of internalized homophobia, effects of homoprejudice, and childhood sexual abuse. The effects of childhood sexual abuse on one's sexual identity can be difficult to deal with, particularly when society continues to stigmatize lesbian women. As a result, many of these women choose to closet issues regarding both their sexuality, as well as their abuse. The problem for me was to perceive and delineate what it feels like to be a lesbian woman, who was sexually abused as a child. A further problem was that the scarcity of research on lesbian women who were sexually abused as children, directly impacts negatively on the resources that mental health practitioners can obtain in order to effectively work with these women.

Purpose of the Study

The purpose of the study was to identify and describe lesbian women's perspectives about the ways they experienced childhood sexual abuse, coming out as lesbian women, and their perceptions of how particular experiences of coming out, and CSA might interrelate. There was some evidence to suggest that the interactivity between childhood sexual abuse and internalized homophobia not only occurs, but also can be observed and scrutinized. For example, Westerlund's (1992) study on women's sexuality after childhood sexual abuse, found that almost half of the lesbian respondents reported that they felt they had a "more difficult time coming out as lesbians because of the "double stigmatization" of incest and lesbianism" (p. 64). Herman (2000) also noted that the two lesbians in her study believed that as they mastered their childhood incest traumas, they "...achieved a healthier and more rewarding personal life than would otherwise have been possible" (p. 104).

Significance of the Study

This study contributed to the existing small body of knowledge regarding lesbians who were sexually abused as children. In particular, there was a gap in the literature to the extent that there were no studies, heretofore, that investigated how experiences of childhood sexual abuse might inform, affect, or interact with the normative coming out process. The process of coming out is characterized by the individual's experience of internalized homophobia that manifests through a variety of symptoms. During the 1980s and 1990s, the focus of research in the area of childhood sexual abuse was on investigating subsequent clinical symptomatology (Mullen, Martin, Anderson, Romans, & Herbison, 1996). According to Neumann, Housekamp, Pollock, and Briere (1996), a general weakness of the literature was that researchers did not routinely examine other factors that might alter the abuse-symptom relationship. In fact, they reported that preliminary data suggested sexual orientation "might moderate [sic] abuse-symptom relationships, and they are worthy of intensive investigation" (Neumann et al., p. 13). The literature search by Neumann et al. rendered little in terms of quantitative or qualitative studies looking specifically at the effects of childhood sexual abuse on lesbianism. Much has been written, however, on the effects of childhood sexual abuse on the social and psychological development of heterosexual women (Finkelhor, 1984; J. Hall, 1999). The literature on lesbian studies focuses primarily on issues of sexual orientation (Davis & Petretic-Jackson, 2000; Westerlund, 1992), prevalence and frequency of childhood sexual abuse (Bradford et al., 1997; Tomeo, Templer, Anderson, & Kotler, 2001; Westerlund, 1992), alcohol and drug abuse (J. M. Hall, 1998, 1999), personality characteristics (Griffith, 1995), and self-esteem (Guyer, 2000).

Because qualitative analysis is a process of discovery (Creswell, 1998; McLeod, 2001), it was anticipated that this investigation of childhood sexual abuse and coming out experienced by lesbian women would reveal possible areas for future inquiry. For mental health counselors, this study can help to increase awareness of lesbian identity development issues, as well as childhood sexual abuse-related problems. It also affords counselors a personal view of the experiences of coming out and childhood sexual abuse, as each participant perceived them.

Research Questions

This study was guided by the following research questions:

1. How are experiences of childhood sexual abuse perceived by selected lesbian women?
2. How are coming out experiences perceived by lesbians who survived childhood sexual abuse?
3. Do lesbian women perceive any relationship between their experiences of coming out and childhood sexual abuse?

Assumptions of the Study

The assumptions in this study guided the hermeneutic-phenomenological approach used in this inquiry. Briefly, the approach is a process of knowing, using a practical method that is grounded by the following assumptions

1. The ontological assumption, that is, the definition of the nature of reality (Creswell, 1998): people exist within multiple levels of meaning; they do their utmost to make sense of their experiences; they are influenced by their cultural and historical contexts; they use language to construct their realities (McLeod, 2001; Morgan & Drury, 2003).

2. The epistemological assumption: that knowing or learning is a constructive process that takes place in cultural, historical, and political contexts (Rossman & Rallis, 2003). It is also assumed that knowing is achieved by reducing the distance between the researcher and that being researched (McLeod, 2001). Put differently, knowers of truth are directly involved in what is known, and are therefore, part of the epistemological context (Ceci, Limacher, & McLeod, 2002).

3. The axiological assumption: that the nature of this study is value-laden with regard to information provided by the participants (Charmaz & Mitchell, 1997; Creswell, 1998), as well as my own values and biases. This implies that issues of value and power, and of ethics and politics, for example, are inherent in questions of what we know, how we come to know it, and ultimately, what we choose to believe as truths (Ceci et al., 2002).

4. The rhetorical assumption: that literary forms, such as metaphor, and the first-person, “I” (Creswell, 1998), were used to look for hidden meaning embedded in the words of the research participants (Maggs-Rapport, 2001).

5. The methodological assumption (Creswell, 1998; McLeod, 2001): I used inductive, as well as deductive analysis in order to know and understand the phenomena that were under investigation. *Emic*, or inductive categories expressed by the participants were distinct from the *etic*, or researcher-assigned categories. Hence, the methods that were used in collecting and analyzing *empirical materials* were congruent with the methodological assumption. The term empirical material is sometimes the preferred terminology used in place of what are traditionally described as data (Denzin & Lincoln, 2000a).

Limitations of the Study

This study was limited to participants who not only lived the particular experiences being investigated, but also were able to articulate those experiences. The qualitative approach to this study necessitated having a limited number of selected participants, in part, because the tasks of interviewing, transcribing, and analyzing are very time intensive; also, I continually reflected on and interacted with the materials generated from these tasks with the objective of deepening understanding, as suggested by Pyett (2003). Wainwright (1997) pointed out that people involved in in-depth interviews might have insights “that would not otherwise be available to the researcher, and it is the quality of the insight that is important, rather than the number of respondents that share it” (p. 11). Hall (2003) suggested that the absence of randomness and the restricted number of participants limit the generalizability of the results generated by this type of research. However, the purpose of a qualitative study is focused on understanding, and not predicting (Janesick, 2000). The content of the interviews were limited to participants’ retrospective memories, visions, and points of view that may have changed over time, or memories that were irretrievable for a time. A related aspect to this limitation is the possibility that a participant would fill in gaps of memory with “conscious or unconscious confabulations” (Hycner, 1985, p. 296). That being said, Enns, McNeilly, and Gilbert (1995) noted that the

reconstruction of major life events is generally accurate, and reflects a person's current self-image.

The literature on hermeneutic-phenomenological philosophy, the epistemological paradigm that this study employed, was limited to the extent that I wished to succinctly present a perception of what constitutes knowing or learning. The inclusion of such a discussion, however limited, also served to provide the rationale for the decisions I made relating to the methodology applied to this study, as some researchers recommended (Gergen, 2001; Lincoln & Guba, 2000; Lowes & Prowse, 2001; McLeod, 2001).

Additionally, because one focus of this study was the impact of childhood sexual abuse on adult women, the review of literature on childhood sexual abuse was limited to those studies that examined long-term effects solely on women (including lesbian women) survivors. The review of the literature on both gay and lesbian identity theory initially focused on Cass' (1979) interactive model because it "revolutionized our understanding of sexual minority persons" (Degges-White & Rice, 2000, p. 318), is derived from clinical and empirical data (Kahn, 1991; Wells & Hansen, 2003), and is theoretically based on interpersonal congruency theory (Perez et al., 2000). The remainder of the studies on identity theory that were reviewed in this study was mostly limited to models of lesbian identity development. The discussion of homophobia was limited to its impact on internalized homophobia, but its inclusion served to increase the readers' vision of how pervasive homophobia is in Western society.

According to Arksey and Knight (1999), interviews, analysis of empirical materials, and conclusions are limited by the values and biases of the participants and the researcher. The information that was obtained about the participants was limited to interviews, questionnaires, and in some cases, post-interview discussions. Although employing the hermeneutic circle, that is, the continual movement between the parts and the whole, requires as much contextual background as possible, limitations of time delineated the parameters of this particular requirement. The resulting interview transcriptions represented aspects of life that were recreated by two individuals – researcher and participant – who met one another, and subsequently formed a relationship. The quality of the empirical material was also limited by the abilities of the participant to remember, articulate, and reflect on her experiences. Since the primary tool used in the analysis of empirical materials was myself (the researcher), it follows that interpretation of empirical material was limited by my understanding, as McLeod (2001) suggested, of the "emotional and interpersonal worlds, and cultural-historical situation of the person(s) who generated the text" (p. 27).

Definition of terms

The following definitions are presented to provide clarity and understanding of terms used in this study. However, the meanings that a participant attached to these terms may have differed according to her individual experience. The characterization of the terms childhood sexual abuse, lesbian identity, internalized homophobia, and homophobia are each explicated and expanded on in the review of literature in this study.

Childhood Sexual Abuse.

Researchers and clinicians' definitions of childhood sexual abuse vary widely, depending on the types of activities, circumstances, and ages of the abuse victims (Davis & Petretic-Jackson, 2000); the nature of the impact of the abuse is also unique in each individual (Futa et al., 2003). Finkelhor (1984) suggested that the definition of child sexual abuse formulated by the National Center on Child Abuse and Neglect (NCCAN, 1978) provides a broad interpretation that is consistent with most research and legal definitions.

Contacts or interactions between a child and an adult when the child is being used for the sexual stimulation of the perpetrator or another person. Sexual abuse may also be committed by a person under the age of 18 when that person is significantly older than the victim or when the perpetrator is in a position of power or control over another child. (p. 2)

Coming out.

The definition of coming out ranges from an outward expression of one's sexual identity to the developmental process in which homophilic attractions become incorporated into an individual's identity (Carrion & Lock, 1997). Questions of to whom, when, and how to disclose sexual orientation continually occur throughout a lifetime, and these decisions sometimes reflect the extent to which one's sexual orientation is integrated into other aspects of the identity (Degges-White et al., 2000). More often, however, disclosure of one's sexual identity to others pivots on a variety of other factors, especially the individual's social and family experiences (Carrion & Lock).

Healing from CSA.

Many survivors feel that resolving issues of childhood sexual abuse is a lifelong process, and that healing occurs when the abuse experience is integrated into the individual's identity (Draucker, 2000). Courtois' (1988) underlying philosophy of healing is that "the survivor must acknowledge the victimization and its reality, must understand it in the context of both the family and the larger culture, and must allow and experience the feelings associated with the trauma" (p. xvi). During the gradual progression of the recovery process, the survivor must be able to psychologically separate her present life from her past (Courtois, 1988), feel reliably safe, and be capable of maintaining ordinary social connections (Herman, 1992).

Homonegativism, heterosexism, and homoprejudice.

In the late 1960s, the term homophobia was coined (Herek, 2000a) and eventually became the metaphorical umbrella under which all negative homosexual responses were grouped (Logan, 1996; Roderick, McCammon, Long, & Alfred, 1998), including both physical and verbal harassment (Logan, 1996). Researchers proposed the term *homonegativism*, which broadened the concept of anti-homosexual behavior, but did not become widely used (Logan, 1996). In the early 1970s, the term *heterosexism* began to be used, and infers "an ideological system that casts homosexuality as inferior to heterosexuality" (Herek, 2000a, p. 19). In 1996, Logan asserted that a more accurate descriptor for this phenomenon is the term *homoprejudice*, suggesting that homosexuals are victims of discrimination and prejudice on a "large, cultural scale" (Logan, 1996, p. 38). The term *homoprejudice* as it was used in this study, characterized the contextualization of prejudice in society and its structures. This includes the individual's widening circles of family, friends, community, and local, state, and federal institutions.

Internalized homophobia.

This study used the term *internalized homophobia* to mean "a contextualization of prejudice within the individual" (Williamson, 2000, p. 98), or a cognitive acceptance of negative attitudes and assumptions about homosexuality (Sophie, 1987). Internalized homophobia is a developmental phenomenon occurring, in varying degrees, in all gay, lesbian, and bisexual individuals, that manifests itself in a variety of ways including isolation, deception, and disapproval of homosexuality. It should be emphasized that not all gay men, lesbians, and bisexuals internalize homophobia to the point of dysfunction (Edwards, 1996); resiliency of an individual to cope with stress relies on such things as social support, self-esteem, interpersonal

skills, coping strategies, and so forth (McCubbin, Thompson, Thompson, Elver, & McCubbin, 1998).

Lesbian identity.

The term lesbian identity is a broad and somewhat ambiguous concept (Brown, 1995; Calhoun, 2000), because it is, for the most part, self-ascribed. Nevertheless, this study applied Brown's (1995) definition primarily because it provided a way for "others" to organize their thinking about essences of lesbianism. Brown (1995) defined lesbian identity as a female who has "primary sexual, affectional, and relational ties to women" (p.4), and maintains this identity over a period of time, and across situations. It may not be tied to overt behavior, and the factors that comprise the identity may appear and reappear as circumstances in the woman's life shift (Brown, 1995). But lesbian identity is also sometimes narrowly defined by others (Brown, 1995; Kitzinger, 1995), and often "in terms of the orientation of sexual desire and activity" (Calhoun, 2000, p. 18). To do so may ascribe to an individual, an identity she herself does not recognize.

On the down low (D. L.).

Historically, on the down low was commonly understood in the African-American community as a covert activity; however, in the past two decades it was used frequently to refer to men who have sex with men, but who do not identify themselves as gay or bisexual (Boykin, 2005). The term is gaining popularity, in the LGBT community, and is used to describe a male or female of any race who engages in same-sex activities, but does not wish for it to be publicly known.

Participant.

Some researchers think of research participants as collaborators in the research (Moch & Gates, 2000), rather than merely those people who are interviewed. The word *participant* reflects the sense of active involvement, as well as the quality of the relationship that occurs in an in-depth interview (Seidman, 1998). The concept of participatory research is often associated with social transformation and has roots in human rights activism (Kemmis & McTaggart, 2000).

Posttraumatic stress disorder (PTSD).

The aftereffects of severe and chronic trauma, such as childhood sexual abuse, have enormous influence on the cognitive, emotional, and behavioral aspects of its survivors (Davies & Frawley, 1994). According to Courtois (1988), posttraumatic stress disorder is the manifestation of a cluster of symptoms associated with traumatic events, defined as a mental disorder in the *Diagnostic and Statistical Manual of Mental Disorders-DSM-IV* (American Psychiatric Association, 1994); in children, the aftereffects can be long-lasting, even when therapy is immediately introduced. Sexual abuse perpetuated with regularity, over a number of years, and by a person within the family setting, defines the adult survivor's inner organization, as well as her view of the world (Davies & Frawley, 1994).

Self-injury.

Self-injury refers to behavior that involves intentionally inflicting pain to one's own body, without suicidal intentions (Alexander & Clare, 2004). Various names for self-injury include self-mutilation, self-harm, and self-inflicted violence. Linehan (1993) suggested that the term *parasuicide* be used, particularly in place of such terms as *suicidal gestures*, or *manipulative suicide attempts*. The term is parasuicide is preferred for two reasons: (a) it precludes the notion that the behavior is done in order to communicate to others, or to actually commit suicide, when, in fact, it may be used as a mechanism to regulate emotion, and (b) it is less derogatory. Alexander and Clare (2004) also argued that self-injury "can be understood as a

coping response that arises within a social context characterized by abuse, invalidation, and the experience of being regarded as different or in some way unacceptable” (p. 70).

Sexual identity.

The dichotomy between essentialists and social constructionists has dominated the debate in theoretical and research literature in the area of sexual identity (Mosher, 2001). On one side of the etiological argument, essentialists base their theory in a biological model, depicting homosexuality as a fundamental way of being, determined either before birth, or in early childhood (Kitzinger & Wilkinson, 1995). Fueled by the effort to account for diversity and fluidity of sexual identity, social constructionists offer alternative explanations, based on post-modern approaches to human development that are grounded in individual contextual considerations.

In this study, participants were free to define their sexual identities, as they perceived them, and as they wished to characterize them. I am of the opinion that an integration of both essentialist and constructionist theories comprise the dynamic and fluid concepts of sexuality that all human beings express, albeit at individual, varied positions on the dialectical continuum.

Survivors of CSA.

According to Leonard and Follette (2003), women with histories of abuse generally prefer the term survivor to victim, although there are women who identify their feelings more strongly with the term victim (Loulan, 1987). The label *survivor* is an affirmation of the intense and terrible experiences of the past, as well as the accomplishments the individual has achieved despite her past (Loulan, 1987). The posttraumatic stress disorder (PTSD) literature commonly uses the term survivor, and many of the sequelae of CSA are conceived of as fitting within the rubric of PTSD (Leonard & Follette, 2003). There are, however, other authors of literature (Phillips & Daniluk, 2004) that suggest *survivor identity* is a concept that remains closely associated with the abuse event, and over time becomes unrepresentative of the woman’s evolved sense of self.

Summary of Chapter 1

This chapter began with a brief account of how childhood sexual abuse was approached in the past, by researchers and mental health practitioners. It also introduced the concepts of coming out, lesbian identity formation, homophobia, internalized homophobia, and qualitative research. The focus of the discussion was centered on two inextricable ideas germane to this study: (a) Being a lesbian woman, and surviving childhood sexual abuse, are distinct experiences, that when combined, often bestow a double secret upon an individual. (b) The pervasive presence of homophobia in American society, its resultant forms of internalized homophobia, combined with weak societal responses and attitudes towards child sexual abuse, are the likely sources of this dual closet.

The statement of the problem, the purpose, and significance of the study followed the initial discussion. The lifelong process of forming a lesbian identity is significantly affected by the internalized norms and values of society. Reckoning lesbian identity formation, including its characteristic issues of coming out and internalized homophobia, with the lasting effects of childhood sexual abuse was one problem of this study. The other was that research in this area is limited, a fact that directly impacts practicing counselors in their ability to work effectively with this population. The problem of the study led to its purpose: to identify and describe lesbian women’s perspectives about the ways they experienced their (a) childhood sexual abuse, (b) the process of coming out, and (c) their perceptions of how both these phenomena might interact. The threefold significance of the present study was that it added to the existing small body of

knowledge regarding lesbians who were sexually abused as children, revealed areas for future inquiry, and promoted interest in this topic.

Three research questions were enumerated, as were the five assumptions that guided the hermeneutic-phenomenological approach used in this inquiry. Limitations of the study were presented next, and included discussions pertaining to the participants, hermeneutic-phenomenology, and the review of literature. The final section of this chapter presented the definitions of uncommon terms used in the study.

Chapter 2: Review of Literature

The purpose of the study was to identify and describe lesbian women's perspectives about the ways they experienced childhood sexual abuse, the coming out process, and their perceptions of how these experiences might interact. To examine these phenomena, I incorporated what was learned in the literature review into the methodology, as well as the analysis of the empirical materials, as suggested by Meloy (2002). A review of the literature was not only intended to provide the bedrock for the ensuing research, but in this phenomenological study, also helped contextualize the lives of the participants within the specific phenomena that were examined. To that end, the review of literature also helped me to understand or interpret the phenomena by transforming them from something strange, into something familiar. And in doing so, the dialogue between the researched and myself enriched the quality of the inquiry, as Garko (1999) proposed.

In this chapter the five topics that were reviewed are (a) homosexual identity development theory, (b) effects of internalized homophobia on lesbians and gay men, (c) the way homophobia is reflected in societal attitudes, behavior, and public policy, (d) the long-term effects of childhood sexual abuse, and (e) hermeneutic-phenomenology, and its relevance to this study. The philosophical discussion on hermeneutic-phenomenology was by no means exhaustive, but rather, as McLeod (2001) recommended, was intended to serve as a foundation on which the five, previously discussed theoretical assumptions were based. It also provided a rationale for the suggested methods (Gergen, 2001; Van Manen, 1990) that this study employed.

Lesbian Identity Formation (LIF)

In lesbians, the formation of sexual identity, also known as the coming out process (Rosario et al., 2004), is a distinct and challenging process that has no counterpart in the lives of heterosexuals (Bradford et al., 1997; Floyd & Stein, 2002), and is carried out in the context of compulsory societal heterosexuality (Konik & Stewart, 2004). LIF is that part of the coming out process where women become aware of their homophilic feelings, question their heterosexual status, and engage in same-sex sexual activities (Rosario et al., 2004). To better understand, as well as to contextualize the experience of being lesbian, an examination of literature regarding this phenomenon was presented in this section. Cass' (1979) theory of homosexual identity formation was presented first; Cass' theoretical model laid the foundation for subsequent theories, which were also reviewed. Additionally, the most recently published sexual identity theories were examined; they account for the diversity of identity development, and stress the individual and environmental differences in the lives of gays, lesbians, and bisexuals.

A majority of LIF theorists view the realization of a lesbian identity as a developmental process (Bringaze & White, 2001; Corrigan & Matthews, 2003; Floyd & Stein, 2002) that is characterized by increasing acceptance of sexual identity (Rosario et al., 2004). The process can take several years, and the individual may, in fact, never achieve a positive, integrated identity (Coleman, 1985). The first distinctive feature is that lesbian identity usually emerges from an individual who presumed she was heterosexual, thereby marking the process as one of change. Second, LIF is marked by the secretive and personal manner that lesbians adopt in the way they begin to recognize their homoerotic feelings (Rowen & Malcolm, 2002).

McCarn and Fassinger (1996) suggested that Cass' (1979) homosexual identity formation (HIF) model has been the most widely used, and has formed the foundation of many subsequent models. Cass' model, intended for both lesbians and gay men, theorized that the problem of HIF is in achieving congruence among an individual's perception of her own behavior, attitudes of others, and self-identity (Eliason, 1996). Cass proposed that the HIF process develops over six

stages, before which individuals assume themselves to be heterosexual (Levine, 1997). The stages are

1. *Identity confusion.* Everyone sees herself or himself as heterosexual by default. Sorting out confused feelings can lead to either rejection or acceptance of same-sex feelings. Individuals who are comfortable with their same-sex feelings and seek out further information move on to the next stage, where a rewriting of one's life script takes place.
2. *Identity comparison.* The individual examines her own behavior with regard to prior assumptions about homosexuality, as well as the feedback from nongay others.
3. *Identity tolerance.* Individuals become more certain of their feelings and begin to tolerate their new identity, and seek out other gay people.
4. *Identity acceptance.* This stage reflects an increasing sense of normalcy with this identity, and is often marked by selective disclosure to family and friends.
5. *Identity pride.* A sense of loyalty and pride in lesbian or gay culture develops. In order to achieve congruence, the individual may split the world into homosexual and heterosexual, often rejecting the values of the latter.
6. *Identity synthesis.* The individual achieves congruence, fully accepting a homosexual identity. Gayness becomes one aspect of the persona (albeit a significant aspect), rather than an overriding, and separate identity.

Cass (1984) carried out a validity study of the six-stage model, using a 210-item questionnaire she developed. The study found that participants' identifications with the stage descriptions were consistent with their assigned stages. While this linear model was generally viewed as breaking new ground in the field of HIF (Eliason, 1996; Levine, 1997; Radonsky & Borders, 1995), a major problem of the instrument Cass developed was the lack of definitive boundaries between the stages (Degges-White et al., 2000). McCarn and Fassinger (1996) criticized the need for "exceptional political awareness and identity disclosure required in the final stage of the model" (p. 510), as well as the lack of discussion of contextual differences.

Sophie (1985/86) developed the first model of lesbian identity that differed from previous research. She found lesbians may have their first sexual experience earlier than gay men, and negative identity did not necessarily precede positive identity (Sophie, 1987). She also suggested that the social and political environment had changed since the first HIF models were developed. Radonsky and Borders (1995), and Sophie (1987) found differences in the kind and amount of strategies used at different stages of LIF (Whitman et al., 2000). For example, in the early stages of LIF, women used stigma evasion strategies to manage a negative identity, whereas in later stages, most of the women disclosed their lesbianism to others. Whitman et al. posited that a pattern of disclosure exists as a function of identity development.

Chapman and Brannock's (1987) LIF model proposed that a woman's sexual identity exists prior to awareness (Eliason, 1996). This means that the woman feels connected and attracted before she senses incongruence between her feelings and societal norms (Bringaze & White, 2001). Chapman and Brannock found support for a five-stage model of LIF closely resembling the sequencing of Cass' (1979) model, according to Levine (1997).

Degges-White et al. (2000) developed a structured interview protocol based on Cass' (1979) model. Two research questions they posed challenged the validity of the model. First, they wanted to investigate if the theory remained relevant for lesbians, in light of social changes that occurred over more than two decades. Second, they wanted to discern whether LIF follows a predictable linear progression, or is unique to each individual. The results of the study indicated

that LIF is a multi-stage process, and that there is some validity to several of the stages in Cass' model. The discrepancies they found, however, were that participants did not necessarily move through the stages sequentially, nor did they all experience every stage. The authors also found that stages one and four seem to be universal aspects of LIF, however evolution through those stages is more "complex and less linear than Cass originally proposed" (p. 326).

Stage models of LIF do little to account for the fluidity in women's sexual development and identity (Swann & Anastas, 2003). Also, according to Eliason (1996), stage model theories of LIF tend to examine only discrete aspects of identity rather than the integrated identities of individuals. Eliason proposed four cycles in the process of LIF that integrate the cognitive, social, and historical contexts of a person's identity. The cycles are labeled preidentity, emerging identities, experiences and recognition of oppression, and reevaluation/evolution of identities. Movement through the cycles is continual and nonlinear, implying the complexity, interactivity, and evolving nature of identity formation. "The model assumes that identity formation is a lifelong process and that modifications in self-identity to accommodate the changing social and historical environment are a sign of psychological health" (p. 18).

While it is helpful to be aware of the general progression of HIF theorized by existing models, McCarn and Fassinger (1996) suggested they tended to "ignore the critical difference between personal and reference group components of identity, a distinction that is central to conceptualizations of identity found in general theories of development of the self" (p. 509). McCarn and Fassinger introduced an LIF model that was derived from female identity development, and racial and ethnic identity development. Although linear, the four-phase model has two parallel branches: individual sexual identity formation, and group membership identity formation. Parallel branches represent the differences between the development processes of the individual and the group. The authors preferred using the term *phases* to *stages* because of the flexibility that is implied in the term (Bringaze & White, 2001), and actually conceived the LIF process as continual and circular. This model does not assume disclosure behaviors as evidence of late-phase achievement (McCarn & Fassinger, 1996).

Swann and Anastas (2003) tested the LIF model developed by McCarn and Fassinger (1996) using adolescent and young adult lesbians in their sample of 205 females. They reasoned that conducting such a study could uncover new and important information. They assumed that peer approval in adolescents is vital, and that other support networks have not yet developed; thus assessing individual sexual identity and group lesbian identity in this age group makes sense. The Lesbian Identity Questionnaire (LIQ) developed by Fassinger and McCarn (1997), is a 40-item measure, and utilizes a Likert scale that identifies current beliefs and feelings about one's sexual identity. There are four phases within each of the two branches: awareness, exploration, deepening/commitment, and internalization/synthesis. The authors found that ideas reflected in earlier stage models, such as inability to see oneself as other than heterosexual, were validated. However, they strongly suggested that an LIF model that accounts for diversity of how a lesbian defines herself would be more suited to today's realities.

In another study using Troiden's (1988) stage model, Floyd and Stein (2002) examined variations in coming out experiences within a sample of gay, lesbian, and bisexual youths and young adults. The authors identified patterns of coming out within the sample. The variables were the timing of four milestone events: (a) first acknowledgement of homoerotic feelings, (b) first same-gender sexual activity, (c) first disclosure to someone, and (d) first disclosure to a parent. They included Cass' (1979) fifth stage of identity pride as a variable, and also examined how the variables were associated with contextual factors and personal well-being. The

participants, 72 adolescents and young adults, ages 17-27, were interviewed and then administered a questionnaire. The findings showed that diversity occurs in the sequence and placement of milestone events, and that supportive social networks may promote comfort with sexual orientation. Those participants who were disconnected from the LGB network reported the lowest levels of comfort with their homosexuality. The authors concluded that their findings drew attention to the importance of examining both individual differences and lifelong patterns of development, based on the experiences and other personal qualities of the individual.

Diamond and Savin-Williams (2000) also emphasized the variability and fluidity of female same-sex desire, however their model continues over the lifespan of individuals. Their goal in offering observations of diverse developmental paths of LIF was not to replace any single model, but to call attention to the “conditions and processes that *produce* multiple developmental trajectories” (p. 298). In a review of two on-going studies conducted by the authors, they found “sexual-minority” women were not exclusively attracted to the same sex. In fact, two-thirds of the lesbian women in one study reported experiencing some attractions to men at varying points in their lifespan. This finding runs contrary to the stage model notion of a one-time discovery of sexual identity. The authors found the phenomenon of *sexual fluidity* can also be observed among heterosexual females who are curious and act upon their same-sex attractions, also at various points over the lifespan. The conclusion Diamond and Savin-Williams reached is that the quality, timing, and interpretation of same-sex responses are multiply determined, thus shifting the paradigm from classifying individuals into types of sexual identities, to one that describes a wide range of behaviors, affections, and desires.

Carrion and Lock (1997) also developed a model that incorporates the fluid and dynamic nature of sexuality. Their eight-stage model explains the movement from internal discoveries to external disclosures. The last stage of this model is unique in that it accounts for the dynamic nature of identity in society, thus obliging us to view identity formation as a lifelong task.

Parks (1999) employed the concepts of social and historical context to examine lesbian identity development across three generations. Her research presented findings of a qualitative, life-history interview study that examined LIF over the course of the lives of 31 participants. The age groups were 45 and over, 30-44, and under 30 years old. Parks concluded that although the data revealed a progression similar to that found in previous research (Cass, 1979; Troiden, 1988), the variety of social, historical, familial, and individual circumstances affected the sequence, timing, and outcome of developmental milestones.

Summary.

Beginning in the late 1970s, homosexual identity formation theories postulated a stage process by which particular developmental tasks are achieved by the individual, allowing them to form a positive gay or lesbian identity. Explorations that were particularly unique to lesbians did not appear in journals for another five years. These subsequent models recharacterized the identity formation processes as an emergent, life-long, interactive process that is affected by both individual beliefs, values, and desires, as well as individual families, cultures, and society. The LIF process involves shedding endemic heterosexual attitudes and prejudices (internalized homophobia) and replacing them with homophilic ones. Because of the profound impact that internalized homophobia has on homosexual identity formation, the following section is dedicated to the review of the literature on that topic.

Internalized Homophobia

The literature on internalized homophobia, particularly with regard to how it affects gay and lesbian individuals, is the focus of this section. In an effort to contextualize further the

individuals who participated in this study, the studies that were reviewed highlighted the consequences that internalized homophobia has on the individual's self-esteem, psychosocial functioning, and positive sexual identity formation.

According to Rowen and Malcolm (2002), psychological research indicates that the process of forming a homosexual identity may result in lasting negative psychological states, including internalized homophobia. Internalized homophobia is the development of disapproving self-conceptions resulting from societal attitudes about homosexuality (Coleman, 1985). These negative attitudes, myths, and misconceptions become internalized in early childhood. As an adolescent begins to recognize same-sex feelings and attractions, internal conflicts arise and may cause anxiety, depression, identity confusion, self-loathing, or substance abuse (Caitlin, Futterman & Stine, 1998; Cohen & Savin-Williams, 1996). Shidlo (1994) summarized why the concept of internalized homophobia is so vital to contextualizing the lives of lesbians and gay men. First, internalized homophobia is a developmental event that occurs in all homosexuals, to varying degrees. Second, it is a primary cause of psychological distress in gay men and lesbians. Third, an important goal in therapy with lesbians and gay men is reduction of internalized homophobia, and can be considered an "important measure of success" (p. 176). Finally, internalized homophobia can highlight and organize unique factors in areas of development, counseling, and prevention of psychological distress in individuals, for which other social and psychological constructs cannot account.

According to Hillier and Harrison (2004), hegemonic discourses around gender and sexuality, and supported by state and church, either endorse (heterosexual) or censure (homosexual) gender behaviors. The authors examined autobiographical stories and questionnaires of 748 same-sex attracted young people. The texts were coded and analyzed with a focus on the participants' struggle with discourses about sexuality. Four dominant themes emerged from the analysis: (a) Psychology, health and ill-health, (b) Christianity, good and evil, (c) Heterosexuality is natural – anything else is unnatural, and (d) A phase versus the real thing. One of the unexpected results of the study was that 60% felt "great" or "pretty good" about their feelings and only 10% felt "pretty bad" or "really bad" about their sexual feelings. Given the dominant negative beliefs about homosexuality, together with the verbal and physical abuse that they sustained, it was surprising that a majority of the young people were able to reframe their discourse to construct a strong positive sense of self. Believing that those who hold homonegative opinions are uninformed, or that sexual feelings are normal, because they feel normal, were the strategies they used to successfully create positive self-identities.

Szymanski and Chung (2003) reported that internalized homophobia in lesbians can manifest itself through isolation, deception, moral and religious disapproval of homosexuality, negative attitudes about other lesbians, and fear of children being raised in a lesbian household. The authors developed and validated a scale to measure internalized homophobia in lesbians using a rational/theoretical approach (Szymanski & Chung, 2001). The items in the scale were used to measure the following: (a) connections with the lesbian community, (b) public identification as a lesbian, (c) personal feelings about being a lesbian, (d) moral and religious attitudes towards lesbianism, and (e) attitudes towards other lesbians. The findings of the study support the reliability and validity of the scale in assessing internalized homophobia in lesbian women. The authors found that higher levels of internalized homophobia were significantly correlated with lower self-esteem and greater loneliness.

In 2003, Szymanski and Chung discussed the rationale for studying internalized homophobia in lesbians apart from gay men. The authors argued that there are unique factors

affecting LIF, including “female gender role socialization, repression of female sexual desire, experience of sexism in women’s lives, and influences of the feminist movement” (p. 116). In an examination of the existing literature on internalized homophobia in lesbians, three areas of focus were examined: (1) assessment instruments, (2) correlates of internalized homophobia, and (3) stress derived from minority status perceptions.

In their review of published scales used to assess internalized homophobia in lesbians, Szymanski and Chung (2003) found only six published studies that had more than one question on the assessment of internalized homophobia. They suggested that the instruments used in these six studies lacked theoretical support, reliability, and validity; they also focused on gay men, and homophobia, rather than internalized homophobia. The authors found the literature showed positive correlations between increased internalized homophobia and certain aspects of psychosocial functioning. Among these were sex-role attitudes, conflicts concerning personal LIF issues, lack of connection to the LGB community, depression, loneliness, and use of alcohol. Recent literature supports the notion that internalized homophobia is a component of minority stress. DiPlacido (1998) defined minority stressors as both *external* (daily hassles and negative events), and *internal* (internalized homophobia, closeting, and decreased affect). Szymanski and Chung (2003) also suggested self-identification as a feminist, and involvement in feminist activities, may play a vital role in mitigating internalized homophobia.

Alexander and Clare (2004) examined the experience and meaning of self-injury for 16 women who identified themselves as lesbian or bisexual. Studies that focused on self-injurious behaviors in the LGB community suggested to the authors that the rates of these behaviors continue to be high, particularly among younger members of these groups. They conducted semi-structured interviews with 14 lesbian and 2 bisexual women; participants were asked about perceptions of their self-injury, as well as the process by which they came to their lesbian and bisexual identities. The results of the study focused on six major themes: bad experiences, invisibility and invalidation, feeling different, just doing it, it helps me cope, and moving on. Although childhood sexual abuse was mentioned as part of some participants’ histories, no detailed statistics were available as to the actual number who had those experiences. In their discussion, the authors recognized that self-injurious behavior should be placed in a wider social context, but also strongly suggested that the participants’ sexual identity was the cause of feeling different, and those feelings then triggered self-injurious behaviors. “They were marked out from an early age as failing to conform to society’s gender expectations, and experienced disapproval, hostility and bullying as a result” (p. 81). Self-injury was the mechanism these women adopted in order to cope with feelings resulting from internalized homophobia, such as, self-loathing, not fitting in, and low self-esteem. Cabaj (2000) described the way these feelings are processed and become unconscious. Feelings of being different and unaccepted lead to the use of denial and dissociation in order to cope with affect and behavior related to one’s homosexuality. Bobbe (2002) emphasized that the dynamics of unconscious shame continually “negate the lesbian child’s experience of herself through dissociation of emotion, and often through self-abuse in the form of addiction” (p. 219).

Radonsky and Borders (1995) suggested a significant association between levels of internalized homophobia and the disclosure of lesbian identity to others. The authors investigated the role self-disclosure has on homosexual identity development, in particular, to whom and in what order a lesbian woman comes out; the authors also investigated how internalized homophobia influences a lesbian’s behavior, and how her coming out behavior is related to her level of sexual identity development. The authors found that after lesbians came out to

themselves and other lesbians, there was no particular pattern to the order. They did find that respondents with higher levels of homophobia came out to fewer groups of people, and that women at later stages of identity development had come out to more groups of people.

Whitman et al. (2000) reported that the stigmatized nature of lesbianism and societal homophobia require a lesbian woman to constantly mediate her self-image with how she externally perceives her same-sex preference. But as negative attitudes decrease and neutralize, choices that are relevant to forming a gay or lesbian identity increase (Sophie, 1987). In fact, society, at present, is more supportive of a woman's exploration of lifestyles, and, as a result, coming out may be easier than it has been in the past (Radonsky & Borders, 1995).

Wells and Hansen (2003) surveyed 317 self-identified lesbians in order to explore the relationship between internalized shame, and LIF and attachment styles. According to the authors, internalized shame had not been previously examined in an exclusively lesbian sample. It has been theorized, "the more congruent the woman is in her lesbian identity, the less internalized shame she will report" (p. 95). The three main goals of the research were to (a) describe levels of internalized shame, as well as attachment style scores; (b) explore the relationship between shame and LIF; and (c) examine the association between shame and attachment styles. The participants ranged in age from 21 to 81 years old, most had college degrees, and many had completed graduate school. The Self-Identity Questionnaire (SIQ), a measure derived from Cass (1984), was used to determine participants' identity stage. The Internalized Shame Scale (ISS) was administered to assess internalized shame, and shame-based identity concepts. The Relationships Styles Questionnaire (RSQ) asks participants to describe how they feel in their adult romantic relationships (secure, fearful, preoccupied, and dismissive).

As predicted, the majority of participants were scored at Cass' stage 6, *synthesis*, indicating a high level of lesbian identity integration. However, these skewed test results might reflect the idea that those who volunteer for such research are firm in their lesbian identities. Although their LIF scores were high, they also reported higher levels of internalized shame than a comparable nonclinical sample; and from this the authors concluded that internalized shame continually affects individuals' feelings of self-esteem. The results of the survey demonstrated a positive association between lesbian identity integration and self-worth. They also indicated correlations between internalized shame and secure, fearful, and preoccupied attachment styles, and that attachment style was insignificant relative to the stage of lesbian identity. The high scores of dismissive styles of attachment led the authors to conclude that this sample of women place higher value on independence and self-reliance, rather than on close relationships. The authors further suggested that a dismissing attachment style is a coping strategy that can be used to (a) facilitate individuals to disengage from those that devalue them, or (b) facilitate the ability to cope with lifelong losses associated with family, cultural stigma, and civil rights.

Summary.

The authors of the literature reviewed in this subsection suggested that internalized homophobia is a developmental phenomenon occurring, in varying degrees, in all gay, lesbian, and bisexual individuals, and that manifests in a variety of ways including isolation, deception, and disapproval of homosexuality. Ensuing internal conflicts arise between the conscious, negative perceptions of other homosexuals, and the feelings and desires of the unconscious self. Some lesbian and bisexual women use self-injurious behaviors to cope with their internalized feelings of self-loathing, feeling different, and low self-esteem. The literature reviewed also indicated that as levels of internalized homophobia diminish, certain aspects of psychosocial functioning improve. Lesbian identity integration and internalized shame is correlated to

attachment styles of lesbian women. Because cultural discrimination and stigmatization also profoundly affect homosexual identity formation, the next section contains a review of the literature on homophobia.

Homophobia

In contrast to internalized homophobia, a condition in which lesbian, gay, and bisexual individuals themselves have negative thoughts about homosexual behaviors, homophobia refers to heterosexuals' negative attitudes towards homosexual behavior, including crimes against LGB individuals and communities. The term homophobia also encompasses the notion that all gay men and lesbians grow up in a society that views homosexuality as basically wrong (Ossana, 2000), and these cultural biases pervade societal customs and institutions (Herek, 1995). This section reviewed the literature substantiating the existence of homophobia, and provided research showing how it is reflected in societal attitudes, behavior, and public policy.

Despite advances in the social, legal, and political arenas that have been initiated to improve the quality of life of LGB individuals, gay-related discrimination and oppression still exist (Corrigan & Matthews, 2003; Harper & Schneider, 2003). Examples of this discrimination takes various forms including hostility and violence, lack of legal protection from discrimination in housing, employment, and services; the *don't ask – don't tell* policy of the military; and the near absence of legal recognition of committed same-sex relationships (Herek, 1995, 2000b; Logan, 1996; Ossana, 2000). The 6-3 decision handed down on June 25, 2003 by the Supreme Court of the United States, reversed course from a ruling 17 years ago which allowed States to punish homosexuals for, what such laws historically called, deviant sex (Greenhouse, 2003). Per contra, lawmakers in only 26 states have repealed their sodomy laws (Delcour, 2003).

Homophobia in heterosexual individuals is reflected in feelings of personal disgust towards individual homosexuals, homosexual behavior, and communities of gay, lesbian and bisexual people (Herek, 2000a). Virulent homophobia in one's immediate environment is linked with the experience of anxiety and fear (Fassinger, 2000) in gay, lesbian, and bisexual individuals. In fact, empirical and theoretical research of antigay hate crimes suggested that victims are at risk for more intense and longer-term psychological distress than gay and lesbian victims of nonhomophobic crimes (Herek, Cogan, & Gillis, 2002), such as robberies and muggings. Herek et al. (2002) interviewed 450, sexual minority adults, between the ages of 19 and 73. They reported being victimized and harassed not only by strangers, but neighbors, schoolmates, coworkers, and relatives; harassment and victimization occurred in schools, the workplace, and in and around their homes. D'Augelli and Grossman (2001) investigated victimization of 416 lesbians, gays, and bisexual individuals, 60 years or older. The authors found older LGBs to have experienced significant antigay hate crimes, and the earlier the individuals disclosed to others, the more victimization they remembered. An earlier study conducted by Dean, Wu, and Martin (1992) compared two cohorts, six years apart, and found that the younger group experienced eight times more victimization than their older counterparts. Dean et al. suggested that age has a protective effect on antigay crimes, with regard to victimization. D'Augelli and Grossman (2001) also found that hate crimes based on sexual orientation has significant effects on victims' mental health.

Schope and Eliason (2004) examined whether homophobia among heterosexual men and women was triggered by gender role characteristics, or by the knowledge that someone was homosexual. 204 students at a university in the Midwest responded to a four-part questionnaire. Half the respondents answered questions pertaining to vignettes about a gay male and lesbian woman who displayed appropriate gender role behaviors; the other half received questionnaires

where both the gay male and lesbian used gender-inappropriate behaviors (i.e., “effeminate” male and “butch” woman). The authors found limited support for the idea that male heterosexuals do not discriminate according to gender roles. Gay men were not acceptable to a majority of male respondents, but were more accepting of lesbian women. Heterosexual females were found to be relatively comfortable with gay men, but showed less comfort with lesbian women, in particular the “butch” stereotype. The authors found support for the argument that heterosexual females react to behaviors and characteristics, and not, as male heterosexuals do, to the label “homosexual.”

According to Yang (1997), moral condemnation of homosexuality decreased in the 1990s, and opposition to antigay attitudes about homosexuals increased, but sexual prejudice remained widespread in the United States. Yang compiled data from searches of survey archives of 20 different research organizations. He found opinion changes to be issue specific, that is, opinions about one area of public policy were not necessarily reflected in others. In the following 12 issue areas, the trends over more than two decades were

1. *The acceptability or morality of homosexual behavior.* Disapproval rates were stable for two decades, and in the 1990s began to drop. The public agreed that it is possible for a homosexual to be a good Christian, Jew, or Catholic. However in the areas of morality, majority disapproval remained at the same levels.
2. *The legality of homosexual behavior.* Public opinion remained fairly stable and evenly divided. Roughly two-thirds of the public believed that sexual relations between consenting adults should be left to the individual.
3. *The causes of homosexuality.* This opinion was evenly divided between those who think homosexuality is a choice, and those who believe it to be innate. The percentage of people who believed the latter doubled.
4. *Familiarity with self-identified lesbians and gays.* There had been a clear increase of this variable over time.
5. *Appraisal of the relative social location of lesbians and gays.* A majority of the public believed that homosexuals have too much or the right amount of power, while, at the same time, majorities believed gay people face a great deal or fair amount of discrimination.
6. *Affective responses to homosexuality.* Around 1996, positive feelings about homosexuals had increased. In 1985, half the respondents said they did not feel uncomfortable when around gays or lesbians, and over two-thirds said they would have difficulty accepting their own gay or lesbian child.
7. *Opinion on the holding of specific (nonmilitary) jobs.* There was a liberalizing trend in support for allowing homosexuals to be hired as elementary and high school, and college teachers.
8. *Civil rights protections and civil liberties.* Yang reported that there was the most positive dramatic change in public opinion on this issue, particularly as it applied to job and housing rights, but not to broader civil rights protections.
9. *Marriage and adoption rights.* Public opinion was opposed (more than two to one) to gay marriage and adoption, with disapproval rates consistently high.
10. *Gays in the military.* Since the late 1970s, approval rates have risen, but shifted downward between 1992 and 1993. Polls indicated that the public did not approve of President Clinton’s advocacy to allow homosexuals to serve openly.

11. *AIDS and homosexuality.*

In the late 1980s, a majority believed that the government would spend more money on AIDS research if nongay people were infected. A quarter of the respondents strongly or somewhat agreed that AIDS is a punishment given to homosexuals from God. A stable 90% majority did not believe a friend or associate could infect them.

12. *AIDS and homosexuality.*

The population was divided on the notion that fear of AIDS caused unfair discrimination against homosexuals. A stable majority agreed that AIDS created more antigay bigotry, and later data confirmed not much or no sympathy for people who contracted AIDS during homosexual activity.

Jones and Sullivan (2002) recommended that education could be the best way to address homonegative attitudes and behaviors. Guindon, Green, and Hanna (2003) suggested that introducing intolerance and psychopathology (IPD) as a newly defined category of mental disorder, would bring a twofold benefit—first to those at the receiving end of this behavior, and second to those who suffer with associated symptoms of IPD, which are low-self esteem, existential anxiety, lack of empathy, and personal trauma, or any combination of the four.

Summary.

Individual and group expressions of homosexual related discrimination and oppression (homoprejudice) remain extant in American society, despite advances in certain social, political, and legal arenas. Antigay hate crimes increase the intensity of long-term psychological distress, including anxiety and fear in gay, lesbian, and bisexual individuals. Recent research showed that heterosexual males not only discriminate against males who display gender-inappropriate behavior, but also against gay males who display gender-appropriate behavior. The public has generally moved towards a liberalization of attitudes with regard to homosexuality, with varying rates. The section that follows not only comprised discussions of CSA, such as background, definitions, and its long-term effects, but also on what the literature has thus far indicated regarding CSA and sexual orientation.

Childhood Sexual Abuse

Contextualizing the lives of the participants in this study is enhanced further by a review of the literature on CSA, because it is a phenomenon that has been experienced by each participant in this study. Lesbian identity formation, and coping with the affects of childhood sexual abuse are discrete issues as they are presently represented in the literature. There is, however, some evidence to suggest, "... an interplay and probable additive effect of these two factors in the development of psychological problems" (Mondimore, 2000, p. 150). Together with internalized homophobia, they all profoundly impact an individual's mental and physical well being, particularly with regard to their sexuality (Griffith, 1995). This section begins with a historical background of the evolution of CSA research. A brief discussion of treatment issues and therapies was included because every participant in this study discussed her experience of CSA with a mental health provider. The literature on the long-term effects of childhood sexual abuse was presented, followed by an examination of research on the impact of trauma on memory. Finally, studies that examine the effects of CSA on various aspects of psychosocial functioning in lesbian women were reviewed.

Background.

Historically, the phenomenon of childhood sexual abuse was refuted by many members of the health profession, and by society, in general (Draucker, 2000). In fact, before the late 1970s, CSA was regarded as a rare occurrence (Putnam, 2003). In Europe, during the late

nineteenth century, several attempts to raise public awareness of this and other child abuse practices were either denied or, worse, ignored (Summit, 1988). At the end of that century, Freud developed his seduction theory, proposing that sexual contact between fathers and daughters accounted for the hysterical symptoms exhibited by his female patients (Angelides, 2004; Courtois, 1988; Davies & Frawley, 1994; Herman, 1992; Herman, 2000). But Freud's theory caused uproar in Victorian Viennese society (Courtois, 1988), and eventually Freud repudiated the seduction theory (Alpert, Brown, & Courtois, 1998). Denial that respectable family men could also be sexual aggressors (Herman, 2000) may, as Draucker (2000) suggested, have been rooted in the Victorians' need to protect the patriarchal family structure. In place of his seduction theory, Freud formulated the Oedipal complex as a basis to assert that female patients' reports of sexual contact with their fathers were, in fact, incestuous wishes they themselves harbored (Angelides, 2004; Courtois, 1988; Draucker, 2000; Herman, 1992). Herman (2000) reported that for decades following Freud's repudiation of seduction theory, mental health professionals and the public remained silent and continued to deny the prevalence of child sexual abuse.

Indeed, this denial was not challenged until the mid-twentieth century when Kinsey, Pomeroy, Martin, and Gebhard (1953) published their groundbreaking survey on the sexual behavior of Americans that offered statistical witness to the existence of child sexual abuse. Kinsey and his colleagues, however, minimized the importance of their findings (Alpert, Brown, & Courtois, 1998; Herman, 2000; Reisman, 1998), suggesting that sexual contact between adults and children were a normal occurrence and was, therefore, not particularly damaging (Alpert et al.; Reisman, 1998). In fact, Kinsey's study claimed that probing into allegations of sexual abuse was far more disturbing to the child than the actual sexual contact (Angelides, 2004; Reisman, 1998).

In the mid-1970s, the child protection lobby, and the feminist movements provided the impetus for researchers to begin to reexamine issues of child sexual abuse (Angelides, 2004; National Center on Child Abuse and Neglect, 1978). Finkelhor (1984) credited American feminist writers with alerting society to the child sexual abuse problem. Russell's (1983) seminal study on violence against women and children was among the first of many to be conducted, concerning the incidence and prevalence of child sexual abuse (Draucker, 2000). Once the need for more research became apparent, further scientific studies concerning various aspects of childhood sexual abuse followed. In order to create a cogent body of knowledge relating to CSA, researchers and mental health professionals have had to define the meaning of childhood sexual abuse, define the manner in which perpetrators are to be identified, examine the patterns of abuse, understand its long-term sequelae, and identify treatment options.

Defining CSA.

Definitions of CSA vary according to the type of sexual activity, the survivor's age, and the criteria used to define the abuse (Loeb et al., 2003). It is a "complex life experience, not a diagnosis or a disorder" (Putnam, 2003, p. 269). Generally, the concept of child sexual abuse refers to coerced sexual interaction between an individual in a position of power, and a child who is unable to give informed consent to sexual involvement (Chew, 1998). Courtois (1988) noted there can be a wide range of behavior, from "the relatively mild to the tortuous, from a one-time occurrence to chronic behavior occurring several times a day over many years, and from involvement of one perpetrator to several, both within and outside of the family" (p. 11). Sexual activities covered by the definition, include intercourse, attempted intercourse, oral-genital contact, fondling of genitals, exhibitionism, and exposing children to sexual activity (Putnam,

2003). The thread that is common to all of these behaviors is that the child is involved in the sexual activity for the fulfillment of the adult's needs.

Perpetrators, and patterns of childhood sexual abuse.

According to Herman (2000), research on perpetrators of abuse has not moved ahead, possibly because offenders continue to elude detection, and they do not generally volunteer to participate in studies. The majority of perpetrators are males who are known to their victims, and have an established relationship that entails an element of power and trust (Wilshaw, 1999); however, female offenders may be more common than previous surveys suggested (Barnett, Miller-Perrin, & Perrin, 1997). Denov (2003) maintained that scant recognition of abuse by females in research literature might be due, in part, to the traditional roles, or sexual scripts, that depict women as being either sexually passive or incapable of committing such acts. Denov analyzed and compared 15 studies and statistical reports in order to explore whether female sex offenders are a rare occurrence, or rather, an under-recognized phenomenon. The author organized the studies into two main categories: case report and self-report studies. Each of those two groups was subdivided into the population focus of each study: (a) perpetrators, (b) male victims, and (c) female victims. The author concluded that self-report studies indicated that female sex offenders might be more prevalent than statistics demonstrate. However, the sexual scripts that prevail in our culture represent females as warm, nurturing, non-aggressive, and nonsexual beings. These subjective truths have an influence on criminal law, victim reporting practices, and attitudes of child protection and mental health professionals (Denov, 2003).

Herman (2000) suggested that creating a psychological profile that might identify abusers is difficult because they appear normal, and psychiatric evaluations generally fail to uncover signs of mental illness. What seems to be a universal trait among the offenders is "their obsessive involvement in sexual fantasy and their compulsive behavior, which I and many other observers have compared to an addiction" (Herman, 2000, p. 230). Despite the dearth of empirical evidence, it is reasonable to conclude that abusers are often caregiving figures (Wilshaw, 1999), and can be found among friends or acquaintances, fathers or other parental figures, and other members of the family (Russell, 1983).

Patterns of abuse are fairly predictable, often take place concurrently with other shame-based family dynamics (Courtois, 1988), and occur across generations (Putnam, 2003). The pattern of abuse formulated by Sgroi, Blick, and Porter (1982) clearly delineated the progression and dynamics of sexual abuse into five distinct stages: (a) the engagement phase; (b) the sexual interaction phase; (c) the secrecy phase; (d) the disclosure phase; and at times (e) a suppression phase which may then be followed by disclosure.

Treatment issues and therapy.

Several basic issues are involved in treating survivors of childhood sexual abuse. First, each survivor's experience is unique in terms of her abuse history, the nature of the experience, and available social support and coping strategies (Courtois & Watts, 1982), and for that reason, treatment programs need to be modified to fit the particular needs of the individual (Courtois, 1988). The rediscovery of feelings, and acquiring skills to attach names to them are basic tasks in recovery (Blume, 1990). Schachter, Radomsky, Stalker, and Teram (2004) highlighted the importance for a woman to feel safe, honored, and respected while in the therapeutic setting. Second, therapists need to be aware of their own personal reactions to a survivor's possible self-abusive or other-abusive behavior that is displayed during therapy (Barnett et al., 1997; Courtois, 1988). Draucker (2000) recommended supervision or professional consultation, even for seasoned professionals, because of the intense emotional experience of the survivor. Third, and

perhaps most important is that counselors should be adequately prepared in their knowledge and skills to work with survivors. Winkelspecht and Singg (1998) reported that of 41 clinicians surveyed, none of those who had been in practice for more than 15 years, and only half of those who were beginning therapists, had received training in treating survivors of sexual abuse. Alpert et al. (1998) strongly recommend that mental health professionals, particularly those who are treating clients with memories of abuse, to become familiar with “memory research both to bolster their understanding of human memory processes and to enhance their therapeutic technique” (p. 942). Moreover, Davies and Frawley (1994) emphasized the therapist’s need to validate and confirm the patient’s belief, or risk the reenactment of parental denial.

There are a number of treatment modalities for adult survivors that were discussed in the clinical literature. They are: individual counseling, family or group therapy, couples counseling, as well as combination therapies, such as individual and group therapy (Barnett et al., 1997; Davis & Petretic-Jackson, 2000). There are a number of common goals in treatment (Courtois, 1988; Jehu, Gazan, & Klassen, 1985) regardless of the therapeutic approach (Barnett et al., 1997). They include: (a) accepting and acknowledging the abuse (Courtois, 1988); (b) retelling the story (Chew, 1998; Herman, 1982; J. M. Hall, 1998; Schachter et al., 2004); (c) reducing thoughts and feelings of isolation and stigma (Jehu et al., 1985); (d) recognizing, expressing, and labeling feelings (Chew, 1998; Courtois, 1988); (e) restructuring cognitive distortions (Courtois, 1988; Draucker, 2000; Jehu et al. 1985). It should be noted that children who disclose sexual abuse shortly after victimization (1 month or less) sometimes show a lower prevalence of posttraumatic stress symptoms and major depressive episodes when they are older, than those who delay disclosure (Ruggiero et al., 2004).

According to Courtois (1988), Draucker (2000), and “many other authors” (Davis & Petretic-Jackson, 2000, p. 322), establishment of a therapeutic alliance holds special potential in terms of the goals of treatment, because trust is a salient issue for the survivor. It also models a healthy, non-exploitative relationship.

Long-term effects of childhood sexual abuse.

There was abundant evidence indicating that children who have experienced sexual abuse are at risk for developing physiological and psychological problems (Lange et al., 1999) that continue into adulthood (Andrés-Hyman, Cott, & Gold, 2004; Banyard, Williams & Siegel, 2001; Neumann et al., 1996). Symptoms reported in the literature that are associated with abuse include dissociation (Goodman et al., 2003), anxiety, sexual dysfunction, anger, substance abuse, revictimization, self-mutilation, suicidality, low self-esteem and self-concept impairment, guilt, helplessness, depression, posttraumatic stress responses, sleep and concentration problems, obsessions and compulsions, and somatization (Davis & Petretic-Jackson, 2000).

According to Alpert et al. (1998), there is a considerable body of research that documents CSA as a risk factor for relatively severe and long-lasting effects, including diagnosable mental conditions. The authors categorized the sequelae into: systems of posttraumatic stress, emotional effects, self-perception, physical effects, sexual effects, interpersonal relating and functioning, and social effects and functioning. The areas in which posttraumatic adaptations can be observed or measured are emotional, cognitive, motivational, neuro-physiological, and coping. The survivor may respond to the abuse in one or more of these areas “continuously, periodically, or in delayed fashion, across the lifespan” (Alpert et al., p. 949).

Posttraumatic stress disorder (PTSD) includes numbing and detachment, startle response, and sleep disturbance, as well as dissociative features and mechanisms. However, according to Alpert et al. (1998), the diagnosis of PTSD does not encompass some of the major

symptoms found in adult survivors who were chronically abused during key developmental years. Included among *emotional effects* are suicidal tendencies, anxiety, depression, emotional detachment and confusion (Courtois, 1988; Herman, 2000). The *self-perceptions* of survivors are largely negative and include shame, self-blame, low self-esteem, as well as a tendency to self-injury (Briere & Runtz, 1993). The *physical effects* are caused by direct and indirect injuries and are associated with disorders of the immune, digestive, reproductive, respiratory, and central nervous systems (Courtois, 1988). The *sexual effects* that emerge in adolescents or early adulthood may include confusion about sexual orientation, sexuality, sexual identity, and symptoms such as sex addiction or aversion to sex mixed with guilt and shame around these issues (Andrés-Hyman et al., 2004; Courtois, 1988; Westerlund, 1992.) *Interpersonal relating and functioning effects* include mistrust of others, an inclination to isolate and difficulty in forming healthy adult attachments, and a tendency to be revictimized. The literature also points to other problems such as difficulties with parenting, as well as a failure to separate from their families in order to realize the developmental task of achieving adult autonomy. Alpert et al. (1998) found that the literature on *social effects and functioning* varied from isolation, to rebellion, to compulsive social interaction. The authors included in this category cognitive deficits, behavioral problems, addictions and compulsions, eating disorders, and career choice and occupational functioning.

The varied and disparate categories of the aftereffects of trauma suggested that aside from the consequences of symptoms, child sexual abuse also informed personal meanings or constructions of reality that guided the development of patterns of feeling, thinking, and behavior (Morrow & Smith, 1995) of adult survivors. Putnam (2003) proposed three categories of outcomes of childhood sexual abuse: (a) psychiatric disorders, (b) dysfunctional behaviors, and (c) neurobiological dysregulation. Futa et al. (2003) noted that the intermediate and long-term consequences of abuse “uniquely manifest themselves in each individual” (p. 227), because of a variety of factors including gender of the survivor, the type, severity, and duration of abuse, and family reaction to the abuse. Compared to women without CSA histories, survivors face more problems with interpersonal relationships (Jonzon & Lindblad, 2004), more high-risk sexual behavior, as well as an increased risk of adult victimization (Loeb et al. 2003). Moreover, although victims of CSA would substantially benefit from social support, survivors seem to have great difficulties in both seeking and receiving this type of assistance (Jonzon & Lindblad).

The effect of childhood sexual abuse on sexual functioning is an area that has received some attention in the empirical literature, although the findings are equivocal (Davis & Petretic-Jackson, 2000; Leonard & Follette, 2003). The disparity in the findings may be accounted for by a lack of standardized, agreed upon definitions for child abuse, sexual function, and sexual dysfunction. Another factor that might account for discrepancies in findings was the problem of measurement. Often, “self-report questionnaires are used to assess dependent variables such as sexual functioning and sexual satisfaction” (Leonard & Follette, 2003, p. 356). Another problem arises when the researcher finds it necessary to identify quantifiable behaviors, but in doing so, limits a broad understanding of the complexity of sexual functioning. For example, reporting the frequency of intercourse does not reveal thoughts or feelings about intercourse. In commenting about research in the area of sexual functioning, Westerlund (1992) noted that while sexual problems of survivors have been categorized and catalogued, information and statistics gleaned, “the subjective experience underlying the difficulties and dysfunctions” (p. 22) has been largely ignored.

A study that focused on the subjective experiences of CSA survivors is one by Painter and Howell (1999). The researchers suggested that long-term childhood sexual abuse affects women's experiences and attitudes related to sex. Their phenomenological study was based on interviews of women survivors of childhood sexual abuse. The study was done in order to gain the perspective of CSA survivors about how the experience of rage is expressed through their sexuality. The sample of seven heterosexual women ranged in age from 18 to 46, were all sexually abused by men, although two of the participants had also been abused by women. According to their results, one of the themes to emerge was that rage is connected to sexual abuse.

Other studies of the long-term effects of CSA have pointed to problems with interpersonal and family functioning (Alpert, et al., 1998; Banyard et al., 2001; DiLillo, 2001; Jonzon & Lindblad, 2004; Rumstein-McKean & Hunsley, 2001; Tremblay, Hébert, & Piché, 1999). The range and severity of reported symptoms displayed considerable variability (Briere & Runtz, 1993), and the research tended to indicate that mediating factors, such as physical abuse, and family-of-origin characteristics (Kamsner & McCabe, 2001) could affect that variability. But according to DiLillo (2001), there has been “a failure to consider the role of family of origin functioning and other relevant “third variables” in determining long-term interpersonal difficulties” (p. 555). Even in studies that included family and social variables, it was difficult to determine whether these variables were risk factors for abuse, a result of abuse, or correlates of abuse history (Barnett et al., 1997).

Remembering the abuse.

Adult survivors of childhood sexual trauma often present to therapists with varying degrees of confidence in their own memories (Davies & Frawley, 1994). The impact of the trauma on memory should always be appraised within the context of other prospectively critical variables (Alexander et al., 2005), such as duration of abuse, and age of the child. Blume (1990) found that as much as half of all incest survivors have no memory of the abuse, where they utilize amnesia or “blocking” as a psychic mechanism to avoid facing memories or feelings. It should be considered that children often experience sexual trauma during a period in their lives when they have limited emotional and physical skills, and are developing “basic trust” notions of predictability and order (Erikson, 1963). Children must rely on their caretakers for protection and guidance; nonetheless, these significant others—both the betrayers and the abusers—create a world where there is no safety, and where the “self is experienced as hopelessly inept and worthless” (Davies & Frawley, p. 114).

Alpert et al. (1998) examined the literature on trauma, child sexual abuse, and memory, in order to provide possible explanations for the display of symptoms, as well as various types of memory loss and recovery. The authors suggested that children's reactions differ from those found in traumatized adults, in certain respects. In particular, trauma inflicted by caretakers may be especially harmful, and may lead to the child's inability to regulate emotions, cause developmental and relational difficulties, and be associated with memory impairment. Among the areas of literature the authors examined were dissociation and its role in the defense against trauma, and memory in adults reporting a history of CSA. There are a number of characteristics of child sexual abuse that make it unique as a traumatic stressor, in addition to its occurring during “basic trust” periods of development. (a) The abuse is often repeated, especially in cases of incest. (b) The child must create some psychological defense to protect herself, but those life-saving adaptations can later cause severe pathological symptoms and distress. (c) The abuse, which generally lasts about 4 years, is nearly impossible to escape from, and leaves the child

with a sense of dread and fear. Dissociation, a mechanism used by severe trauma survivors, can be used to explain the survivors' inability to access memories of the trauma, and then subsequently to retrieve them. The literature reviewed by the authors suggested a strong relationship between exposure to trauma and dissociative symptoms, such as detachment, alterations of perceptions and memories, to the extent that the formation of such pathologies can be anticipated in large portions of people who are so exposed. A 1994 study conducted by van der Kolk et al. (as cited in Alpert et al., 1998), comparing ordinary and traumatic memories found that: (a) chronic trauma occurring at the beginning of life, rather than later-occurring trauma, was significantly associated with partial or total amnesia, and (b) the memory process of traumatic events is different than the memory process associated with non-traumatic events. Findings in a later study conducted by Andrews et al. (2000) were consistent with theories proposed by Alpert et al., and van der Kolk et al. Some new preliminary research indicated that children display greater dissociative abilities than do adults, (Alpert et al., 1998), and additional studies linked neurobiological dysfunction and neuroanatomical abnormalities to CSA, but as yet, such a relationship has not yet been firmly established (Putnam, 2003).

Alpert et al. (1998) concluded that empirical data supports "clinical observations of memory fragmentation, amnesia, and hyperamnesia following child sexual abuse" (p. 974). Both memory and recall are reconstructive processes, that is, the nature of the processes can be observed by some memory retention, or substantial or total memory loss. The presence of certain variables, such as early age onset, repetition, use of force, conditions of secrecy, insufficient social or emotional support, and family dysfunction can add to the development of amnesia.

Andrews et al. (2000) investigated both the timing and triggers associated with memory recovery of traumatic events. They found the length of time in therapy before the first memory occurred was between 1 week and 11 years, but with 80% emerging within one year; the time taken to recover the memories was unrelated to the degree of memory loss. The length of time of memory recall for participants who were CSA victims was significantly longer than for non-CSA trauma. The authors reported that recovered memories came in the form of specific episodes and fragments, rather than autobiographical facts and that the occurrence of fragmented memory recall is significant in reported cases of CSA.

Sexual orientation and childhood sexual abuse.

There are a number of studies that have attempted to correlate sexual orientation with childhood sexual abuse, but a causal connection requires assessing sexual orientation before the abuse occurs (Davis & Petretic-Jackson, 2000). Some researchers caution against assuming that lesbianism is a result of failed heterosexuality (Westerlund, 1992), and Blume (1990) even suggested that the act of searching for an etiology itself could be indicative of a negative bias towards homosexuality. In a recent meta-analysis of published research on the effects of child sexual abuse done by Paolucci, Genuis, and Violato (2001), sexual orientation was not included among the examined variables.

Hall and Lloyd (1993) suggested lesbian survivors of CSA might have a "hidden sexuality, a double secret, and that this burden could potentially increase the pressure on an individual..." (p. 67). Studies by Herman (2000) and Westerlund (1992) examined relationships between lesbian sexual orientation and incest, that is, sexual abuse perpetrated by a family member. Results of these studies could not be generalized to the lesbian population who reported sexual abuse perpetrated by those outside the family. A qualitative methodology was used to conduct both studies and both were based on stories the women shared with the researchers. Westerlund (1992) found almost half of the lesbian respondents in her study maintained that their

lesbian identity formation (LIF) was impeded by the double stigma of incest and lesbianism. Herman (2000) reported that the two lesbians in her study believed that mastery of their CSA traumas allowed them to achieve a healthy and rewarding life.

J. Hall (1999) interviewed eight lesbian women who were abused between the ages of 8 and 15 years, by male perpetrators. The study examined the sexual relationship experiences of these women to determine sexual dissatisfaction or dysfunction, difficulties in sexual relationships, difficulties with intimacy, and the relationship between their past abuse and adult sexual relationships. The author used a phenomenologically based methodology to examine the real-life experiences of lesbian survivors. Content analysis revealed a number of themes: (a) inability to acknowledge and express one's sexual needs, (b) fear that initiating sexual encounters equates replicating the abuse, (c) difficulty in differentiating sex, intimacy, and love, (d) dissociation, flashbacks, triggers, and images (e) lesbian relationships allowing a sense of normalcy, freedom, and satisfaction, (f) sexual abuse by other lesbians, (g) the double secret of being lesbian and a CSA survivor, (h) couple issues where both partners sustained abuse (i) aversion to touch, and (j) depression. The author found the theme "double secret" to be one that the women in the study highlighted as an issue that had been encountered. On the whole, however, by the time they participated in the study, they felt they had resolved this problem and were able to separate their CSA issues from sexual identity concerns.

J. M. Hall's (1999) qualitative, feminist study focused on lesbians' experiences of growing up with sexual abuse in families that have multiple problems. She conducted 20 in-depth interviews with respondents who self-identified as lesbian, as having an alcohol problem, as being drug and alcohol free for one year, and as a childhood sexual abuse survivor. The research questions addressed two areas. First, how did these women interpret their experiences? And second, what differences and similarities, both in and among the narratives, pivoted on issues of sexual orientation, gender, and race? All the women in the study reported heavy alcohol use and almost all reported polydrug use. All respondents included "genital contact, long duration, intrafamilial and/or multiple perpetrators" (p. 10) as descriptors of their sexual abuse. The author found six themes as a result of her analysis: (a) loss of childhood, (b) questioning the intensity and perpetration of abuse, (c) lesbian and CSA connectedness, (d) gender blurring, (e) cultural void, and (f) being targeted for abuse.

In the third narrative theme, "lesbian and CSA connectedness", J. M. Hall (1999) found that some of the participants believed that many lesbians were also CSA survivors. They also entertained the idea that there might be a connection between CSA and being lesbian, but were not sure what the connection was. Most participants had the notion that their CSA histories made them initially question whether or not they were "true lesbians." But, most rejected a direct causal connection between CSA and lesbian orientation. They did, however, express great concern that others, gay and nongay, would conclude that their childhood sexual abuse caused their sexual orientation. Many participants felt they did not belong in the lesbian community and felt threatened in interpersonal relations with other lesbians, thus reinforcing their doubts of being true lesbians.

Griffith (1995) examined the effects of CSA on adult heterosexual and lesbian women, some of whom had sexual abuse histories, and others who did not. The author measured responses using three different instruments: (a) a biographic questionnaire, (b) The Incest Survivor's Aftereffects Checklist (Blume, 1990), and (c) The Minnesota Multiphasic Personality Inventory-2 (MMPI-2). The author combined the areas of sexual orientation and sexual abuse to compare lesbian and heterosexual CSA survivors, and lesbian and heterosexual women who had

no histories of sexual abuse. The study provided evidence that regardless of sexual orientation, personality characteristics and reported symptoms are more similar in women with a history of CSA, than in those women with no history of abuse.

Summary.

The literature reviewed on the evolution of CSA research was described briefly, as were perpetrators, patterns, treatment issues, and therapies. Most perpetrators are male, but abuse by females may be under-reported because prevailing sexual scripts in our culture represent females as warm, nurturing, nonaggressive, and nonsexual beings that have an influence on criminal law, victim reporting practices, and attitudes of child protection and mental health professionals. Abundant evidence suggested that survivors of childhood sexual abuse often suffer associated long-term psychological and physiological problems. Among the symptoms reported in the literature were dissociation, anger, alcohol and substance abuse, low self-esteem, depression, and difficulties with interpersonal relationships. Survivors often display high-risk sexual behavior, and may encounter sexual dysfunction. There have been few studies examining the effect of CSA on sexual functioning in lesbian survivors, but presently there is some evidence to suggest that lesbian survivors of CSA harbor thoughts of a “double secret.”

Thus far, the literature on the four topics (LIF, internalized homophobia, homophobia, and CSA) that helped me to contextualize the lives of the women selected to participate in this study, have been reviewed. The final piece of the literature review that follows, not only described the philosophical foundation in this study, but also illustrated how hermeneutic-phenomenology was utilized to accomplish the task at hand.

Hermeneutic-Phenomenological Approach

In order to be successful in answering questions about the meaning of what others are doing and saying, and then transform that understanding into public knowledge, there must be more than mere competency in the practical techniques of conducting and analyzing interviews (McLeod, 2001; Schwandt, 2000). According to Koch (1995) researchers must contextualize phenomenological investigations to the particular philosophical tradition that informs their methods, at the outset of the research (Koch, 1995; Schwandt, 2000; Wimpenny, 2000). In this type of study, I employed the hermeneutic-phenomenological tradition as part of its interconnected trail of inquiry (Guba & Lincoln, 1994; McLeod, 2001). The trail in this study began with the underlying ontological and epistemological assumptions, and led to its methodological assumptions (McLeod, 2001). Ensuring consistency, between the process of inquiry used in this study and its underlying methodological assumptions (Guba & Lincoln, 1994), was accomplished by “an appreciation of the philosophical issues implicit” (McLeod, p. 56) in the research. Therefore, in pursuit of the “best research practice” (Maggs-Rapport, 2001, p. 3), this section focused not only on the philosophical underpinning for this study, but also articulated the way hermeneutic-phenomenology was employed in determining the overall approach, research questions, interviews, and analysis of this study.

The development of hermeneutic-phenomenology.

Phenomenology is a practical philosophy, a basic tool of qualitative research (McLeod, 2001), that attempts to get to the truth of a subject matter by describing phenomena, as they are evident in the consciousness of the experiencer (Moran, 2000). Edmund Husserl (1859-1938) has been cited as the modern-day pioneer of phenomenology (Creswell, 1998; LeVasseur, 2003; Moustakas, 1994). Husserl’s conception of phenomenology was that of both a method and a movement (Moran, 2000). He contended that the philosopher’s task is to contemplate *essences* or underlying meanings of experience (Moran, 2000), and that the essence of an object could be

arrived at by systematically viewing that object from varied perspectives. Husserl noted that consciousness is always consciousness of something (Gubrium & Holstein, 2000), or as Creswell (1998) explained, consciousness must be intended or directed at some object. Husserl argued that the relationship “between perception and its objects is not passive” (Gubrium & Holstein, p. 488), but intentional (Moustakas, 1994). *Intentionality* includes the awareness of the internal experience of being conscious about the “object of consciousness” (Moustakas, 1994, p. 28).

Husserl also recognized that there are aspects of the object of consciousness that are not directly grasped, but nevertheless remain in the *horizon* of the object (Moran, 2000). He introduced the term *phenomenological reduction* for his method of reflecting on the meanings the mind employs when it contemplates an object (Creswell, 1998). Phenomenological reduction involves *bracketing existence* or *epoché* (Moran, 2000), which means setting aside what you already know about the object of intention. What is already known (McLeod, 2001) comprises the “psychological, cultural, religious, and scientific assumptions” (Moran, p. 146) of the object of intention. Husserl labeled the interpretive framework or lens (McLeod, 2001) through which the world is understood as the *natural attitude* (Moran, 2000). In Gadamerian terms, it is also known as the *horizon* (Maggs-Rapport, 2001; McLeod, 2001; Moran, 2000). In Husserl’s view, if the natural attitude is left unbracketed, it “will inevitably distort our more theoretical consideration of consciousness [the object of intent] itself” (Moran, 2000, p. 145).

Martin Heidegger (1889-1976), a student and colleague of Husserl (Moran, 2000), counter-argued that the very thing that phenomenologists bracket-off, that is, the natural attitude (Gubrium & Holstein, 2000), is itself, “the most important focus of the inquiry” (McLeod, 2001, p. 59). In fact, Schutz (1964) argued that the inclusion of the natural attitude not only safeguards subjectivity, but sufficiently ensures against the researcher creating a fictionalized lived experience. Heidegger subsequently fused Husserl’s descriptive phenomenology with hermeneutics to create the hybrid discipline known as hermeneutic-phenomenology (McLeod, 2001; Moran, 2000). He became committed to understanding and interpreting phenomena (McLeod, 2001), rejecting the Husserlian contention that phenomenology is devoted to describing things as they are presented to consciousness (Maggs-Rapport, 2001).

Before Heidegger studied and taught philosophy, he was in a Catholic seminary (McLeod, 2001), and while there, became familiar with hermeneutic principles, used to interpret scriptural texts (Moran, 2000). In his book *Being and Time* (as cited in Moran, 2000), Heidegger brought hermeneutics from a theory of interpretation to a theory of understanding human existence (Maggs-Rapport, 2001; Moran, 2000), thus creating the notion that *all understanding is hermeneutic* (Maggs-Rapport, 2001). Understanding is, itself, the way we experience the world, as well as the “kind of people we are in the world” (Schwandt, 2000, p. 196).

Hans-Georg Gadamer (1900-2002) built on Heidegger’s notion of hermeneutics (Moran, 2000) and examined how language reveals understanding of *being* (Maggs-Rapport, 2001), thus taking Heidegger’s ideas a step further. Gadamer asserts, “that which can be understood is language” (Moran, 2000, p. 282), and that language depends on conversation (Hoy, 1982) and dialogue (Schwandt, 2000), which are the keys to finding meaning and truth (Moran, 2000). Although Gadamer did not prescribe a particular methodology for conducting research, philosophical hermeneutics does affirm the position of the researcher in the *hermeneutic circle* (Koch & Harrington, 1998). In the hermeneutic circle, sense and meaning making of the world advances by questioning prior knowledge, thus expanding into new horizons of meaning (Levasseur, 2003). Genuine dialogue (Moran, 2000) mutually transforms each other’s ideas (Love, 1994), and reshapes the participants’ frames of reference (Smith, 2000), or horizons. This

transformation of initial positions is known as the *fusion of horizons* (McLeod, 2001; Moran, 2000), or consensus of meanings (McLeod, 2001). The fusion of horizons is a continual, circular process (Maggs-Rapport, 2001), and although we expand our horizons of meaning, we merely reach another stage of presumption (Levasseur, 2003). For example, in this study, I used my preunderstanding of lesbian identity development as the starting point for developing the interview protocol. Yet each subsequent interview provided opportunities for fresh experiences and the possibility of new horizons of meaning of being lesbian. Within the circular process, the transcriptions were examined concurrently with emerging interpretation, always within the horizon of the participant's story and context. Between interview sessions, I continued to reflect on the parts to the whole, and the whole to the parts, in an overlapping, nonlinear movement.

According to Love (1994), the concept of the hermeneutic circle is the mutual transformation of ideas that occurs between two people in conversation, or a reader reading a text. There is circularity inherent in understanding (Hoy, 1982); we ask questions on topics about which we have presumptions, and so to an extent, we predetermine what we will discover (Moran, 2000). The circle, however, is not closed (Moran, 2000) "or 'vicious' as in cases of circular reasoning" (Moran, p. 237). It is, rather, a moving back and forth of consciousness (McLeod, 2001), passing between horizons (Hoy, 1982), both meeting our expectations of what we already know, while allowing us to ask more questions, and thus, advance our understanding (Moran, 2000). Gergen (1988) used the metaphor of a dance to describe the continual, related, and reasoned movement of the exchange of dialogue. Before discussing specific ways hermeneutic-phenomenology was employed in this study, some notions about the relationship between philosophy and method need to be summarized, and the meaning of some of the terms used in the preceding discussion solidified.

McLeod (2001) insisted that philosophical phenomenology, as understood by Husserl, was intended to reflect personal experience and might not appropriately be transferred into all areas of research. Likewise, the application, solely, of hermeneutic principles might leave us with interpretation, but without context (Gergen, 1988). Heidegger appropriated ideas from both philosophical traditions, and combined them to open new ways of making sense of the everyday world (McLeod, 2001). When we ask a question about any aspect of experience, we make assumptions about that experience through what we already know about it. For example, in asking the question "What is the experience of living with migraine headaches?" one might assume that the experience is not usual; or that those who do not have them could not imagine its effect on performing daily routines. It is necessary to examine these preunderstandings (horizons) of the experience and set them aside from the object of inquiry, in this instance, migraine headaches. Setting aside assumptions about the object allows the essence of the object to reveal itself. But there are meanings hidden in the words and metaphors used to describe, define, and illustrate the lived experience of migraine headaches. The speaker might say, hypothetically, "When my migraine begins, I feel as though I am being pulled into a dark, abysmal, and evil space"; but the questioner may, for example, interpret the metaphor of being pulled, as helplessness, darkness as fright, and so forth. Thus, not only is the essence of migraines described, but also what had been previously hidden in the phenomenon is newly revealed, and now waits in the hermeneutic circle to be reflected upon.

The relationship of hermeneutic-phenomenology to this study.

The topic of inquiry in this study concerned the experience of internalized homophobia by lesbians who were sexually abused as children. Hermeneutic-phenomenology, with its focus on meaning creation and understanding 'everydayness' (Moran, 2000), is well suited to issues

that focus on “social construction of sexual categories and identities” (Gamson, 2000, p. 348). This section articulated the way hermeneutic-phenomenology was employed in determining and executing the overall approach, research questions, interviews, and analysis of this study; it presented examples of specific activities that, according to Van Manen (1990), attest to the theoretical assertion that all human experience is contextually situated.

The overall approach or design of the study was a complex, iterative process, whose critical starting point centered on questions of what I wanted to know. Janesick (2000) used metaphors of choreography to promote her vision of the iterative process of shaping qualitative research design. The back and forth movement between the researcher’s experience, the literature, research questions, interview questions, and other methodological elements embody the dynamics of the hermeneutic circle (Huberman & Miles, 1994).

Following the suggestion of Hill, Thompson, & Nutt-Williams (1997), this study was not initiated with preconceived hypotheses, but rather, designed to discover ideas and notions about the phenomena under investigation. Both Gadamer and Heidegger were not concerned with truth as correctness (Moran, 2002), that is, the idea of being able to measure “truth against falsity” (p. 284). Their concerns, similar to those in this study, lay in assigning value and respect to the essence (in phenomenological terms) of understanding everyday lifeworld experiences (McLeod, 2001). How then, can the essence of a phenomenon be revealed to me, as researcher, and indeed, how did I work towards unfolding new understandings of specific human experiences?

Attempting to gain some insight into a human experience is the central assertion of hermeneutic-phenomenological research (Robertson-Malt, 1999). As Holtorf (1999) suggested, hermeneutics is an attempt to clarify the contexts in which understanding takes place. Among these contexts are the preunderstandings and prejudices of the interpreter. The meaning of an object can be understood through interpretation, perforce filtered through the preconceptions of the interpreter. Thus, understanding is not merely a *reproductive* process, but is a very *productive* process that remains in flux throughout the interpretive cycle (Holtorf). According to Pascoe (1996), Gadamer believed that meaning and understanding are interconnected elements; preunderstanding must exist before the researcher can enter into the horizon of meaning. This is the foundation of the hermeneutic circle, without which, according to Gadamer (1989), the meaning of text cannot emerge. Meaning is achieved through a process of “moving dialectically between a background of shared meaning (the whole) and a more finite focused experience within it (the part)” (Pascoe, 1996, Pre-understanding section, ¶ 5).

The pursuit for resolving the problem of how to incorporate this dialectical process into the research methodology could not be found directly in Gadamer, who, according to Van Manen (1990), stated that the “method of phenomenology and hermeneutics is that there is no method!” (p. 30). Instead, a number of varied, inductive methods have been offered by scholars (Finlay, 2002), which maintain the philosophical premise of returning to the “things themselves” (Robertson-Malt, 1999, p. 292).

Van Manen (1990) suggested that hermeneutic-phenomenological research might be perceived as a dynamic interchange among six activities, but emphasized that they not be viewed as a recipe containing procedural steps for conducting research. In this study, the interplay among these activities provided a structure for collecting and analyzing data while still allowing for independence and enterprise in the way I related to the data. The activities were

1. *Turning to the nature of the lived experience.* The essences of the experiences of the participants were found in their everyday world; they were embedded in the language

of the narratives transcribed from the interviews. Accordingly, I related the research findings back to the everyday lifeworld of the participant.

2. *Investigating the lived experience rather than conceptualizing it.* Rather than theorizing about what it is like to be a lesbian who was sexually abused as a child, I sought to understand the experience from those who lived it and considered it an intimate part of their identity.
3. *Reflecting on the essential themes that characterize the experience.* In order to uncover the essential themes of the participant's experience, a semi-structured interview was used. The questions were open ended but based on an interview guide created from a critical review of the research questions. Although the range of the interview was defined by the objectives of the research and questions asked, its purpose was to examine the subjective experience of the phenomena under investigation. The interview process also reflected the concept of the hermeneutic circle, insofar as what I previously knew was inherent in each question, and their open-ended character entreated participant response. It should also be emphasized that in textual analysis, identified themes are relative to the researcher's context of engagement with the transcripts, and as such, should be seen as one of any number of ways to understand the experiences.
4. *Describing the experience through writing, reading, and rewriting.* The interviews that were transcribed became the texts that were analyzed with the purpose of understanding the different meanings that the experience had for each participant. The transcripts were read many times over, notes were kept, and profiles and their corresponding analyses were written.
5. *Maintaining a strong and focused connection to the phenomenon.* This activity, which drew upon the concept of the hermeneutic circle, was vital to all phases of the research, but was especially crucial during textual analysis. I separated essential themes from nonessential ones by repeatedly holding part of the text against the overall context of the story and asking: Does this interpretation make sense in both this particular section of the text, as well as in the whole text? Can this be interpreted in a different way in order to convey meanings more faithfully and fairly?
6. *Balancing the research context by considering parts and wholes.* I found it challenging to strike a balance during the reflexive analysis. Rossman and Rallis (2003) suggested that the researcher be immersed in the participant's *emic* perspective, and by so doing, distinctions between those perceptions and her own, or *etic* perceptions become more pronounced. The problem arises, according to Finlay (2002), in finding an ample balance between purposeful analysis, and self-indulgent, personal analysis. The way in which I minimized the impact of this conundrum was by sustaining a primary focus on the transcriptions involved, and returning to my self only for the purpose of increasing awareness and insight, as Finlay suggested.

Research questions that are asked in phenomenological studies relate to "understanding the nature of everyday existence" (McLeod, 2001, p. 60). According to McLeod, this understanding is a central element of Heidegger's ideas that are applicable to counseling research. I used reflexive analysis in the preliminary stage of formulating the research questions, and also in an effort to clarify the impact of my perspective; this involved investigating both the literature and the lived world. I examined my personal experience of counseling lesbians who were sexually abused as children, my general involvement and support for the LGB community,

as well as my need to know. As Finlay (2002) suggested, “only by bringing our implicit frameworks into relief do we stand a chance of becoming relatively independent of them” (p. 537). Gadamer (as cited in Kincheloe & McLaren, 2000) also proposed that the researcher’s frame of reference influences the questions, and that in turn informs the “nature of interpretation itself” (p. 288).

Phenomenological interviewing is concerned with providing an important description of conscious experience (Moustakas, 1994), and uncovering knowledge related to specific phenomena; in this study they are related to childhood sexual abuse and coming out. The phenomenological interview may be seen as a social encounter in which knowledge is constructed (Holstein & Gubrium, 2003), and in which the interviewer not only informs the dialogue, but is also affected by the dialogue (Sorrell & Redmond, 1995). As the only interviewer, I was inextricably involved with the participants in the process of co-constructing data, which was articulated through my actions of reflecting, clarifying, requesting descriptions and examples during the interviews. Reflexivity was an essential process during the data collection stage, particularly because the quality of the data fundamentally depended on the interview relationship.

Hermeneutic-phenomenological analysis can be characterized as an attempt to relate to understanding human experience (Walters, 1995). In qualitative research, transcribed empirical materials collected in the interviews are composed of accounts of experience and events as constructed by the participants (McLeod, 2001), and subsequently identified and characterized within the philosophical framework used by the researcher (Lowes & Prowse, 2001). In this study, the epistemological assumption is that we construct our reality within the social, cultural, and biological contexts of our lives. An additional assumption is that we use language to report on the nature of world as we see it, as well as to understand and interpret the meanings of others. Interpretation of the empirical materials in this study rested on the foundation of hermeneutic-phenomenology. As Love (1994) recommended, interpreting empirical material in this study, involved an internal dialogue within the hermeneutic circle, using metaphors, explanatory principles, and prior knowledge to understand what was read or heard in an interview. Meaning that ultimately emerged from the text was by my active engagement, including interacting with interviewees, questioning data, drawing upon their own experiences, and following up hunches that I deemed worthy of investigation. The ultimate goal of this study was to achieve inter-subjective reciprocal understanding between the participants and myself, thus realizing a fusion of horizons, or consensus over meaning.

Summary.

The review of the literature on hermeneutic-phenomenology: (a) defined what “understanding or knowing” means, and articulated claims of “how we understand or know”; (b) provided the frame of reference for interpretation of empirical materials; and (c) articulated the relationship between myself, as researcher, and the researched, specifically in the way data was collected and analyzed. The section also contained a description of six activities that linked hermeneutic-phenomenology to the methodology of this study. They were: (a) turning to the nature of the lived experience; (b) investigating the lived experience rather than conceptualizing it; (c) reflecting on the essential themes that characterize the experience; (d) describing the experience through writing, reading, and rewriting; (e) maintaining a strong and focused connection to the phenomenon; and (f) balancing the research context by considering parts and wholes. The application of hermeneutic-phenomenology to this research, including the overall approach and analysis, relied upon my knowledge, values, beliefs, and so forth. The interpretive

framework in this study is one that required reflection on such elements as metaphors, prior knowledge, and literature, to reveal multiple meanings of such things as identity, coming out, and internalized homophobia. I employed the concept of the hermeneutic circle in the reflective process to advance sense and meaning making of the world. Thus, an ethic of closeness between the participant and myself became an inherent, inextricable component of hermeneutic-phenomenology.

Summary of Chapter 2

Each topic in the literature review, *homosexual identity formation, internalized homophobia, homoprejudice, childhood sexual abuse, and hermeneutic-phenomenology*, attempted to accomplish its particular goal, that is to humanize and contextualize the lives of the women who participated in this study. Perhaps more importantly, the sum total of the topics created the methodological framework and rationale that made it possible to examine the phenomena relevant to answering the research questions posed in this study.

The process by which individuals come to identify themselves as homosexual is fairly consistent from one person to the next. The milestones described in the developmental models that were reviewed, not only demonstrated this progression, but also aided in understanding the experience of becoming gay men or lesbians. The studies on internalized homophobia illustrated the impact this phenomenon has on the way in which individuals relate to their sexual orientation. And although the public has moved, with varying rates, towards a liberalization of attitudes with regard to homosexuality, the presence of homoprejudice in Western society certainly makes it more difficult for gay men and lesbians to work through their own antigay biases. Finally, there is some evidence that a history of CSA makes homosexual identity development more difficult, because both raise identity questions that may pose severe threats to feelings of self-worth. Lesbian survivors of childhood sexual abuse may experience depression and anxiety that derive from “confusion about sexual roles, the meaning of sexuality, and the relationship between sexuality and love” (Mondimore, 2000, p. 151).

Lesbian survivors of CSA must sometimes plot their course to a healthy identity through a landscape of disgrace, concealment, distrust of adults, and isolation from peers. The goal of this study was to capture the complexities of the specific experiences of childhood sexual abuse and coming out, as perceived by the participants, and to uncover hidden and implicit meanings of these aspects of their everyday world. Hermeneutic-phenomenology with its focus on meaning creation, and understanding everyday experiences was well suited for such an inquiry. The inherent circular dialogue between the researcher and the collected empirical materials, as well as the goal to “see oneself in others, to understand self through understanding others” (McLeod, 2001, p. 156), allowed me to come as close as possible to what the participant *really* experienced. If that end was accomplished, then this study gives voice to lesbian survivors of CSA, and makes contributions to our understanding of when, how much, and in what ways counseling can be of help to those who seek it.

Chapter 3: Methodology

The purpose of this study was to identify and describe lesbian women's perspectives about the ways they experienced their childhood sexual abuse, and coming out process, and their perceptions of how these experiences might interact. The decisions made by me, with regard to participant selection, ways to collect empirical materials, ways of analyzing data, and selecting the format to present findings, were, in part, determined by the importance of achieving coherence between the practical methods employed, and the underlying epistemological and ontological assumptions, as qualitative researchers such as Lincoln and Guba, (2000), Lowes and Prowse (2001), and McLeod (2001) have recommended.

The chapter was divided into five sections:

(1) *Research design* provided the rationale for choosing the research design used in this study.

(2) *Research Participants* contains the description and definition of the selected women, and also includes information about the number of participants, how they were selected, from where they were recruited, and the setting, length, and time frame of the interviews.

(3) *Collecting Empirical Materials* comprises discussions on (a) how the empirical material was collected, along with a matrix showing how the research questions related to specific questions in the interview guide (Appendix A), (b) the researcher's experience – why and how it was included in the study, and (c) the role of ethics in conducting sensitive research.

(4) *Analysis of empirical materials* contains explanations of how the collected data were analyzed and presented. It begins with recording and transcription procedures, and continues with the methods for data reduction, analysis, and interpretation.

(5) *QSR NVivo*, discussed in the final section, is a qualitative software program, which was used as an aid in organizing, storing, retrieving, and analyzing the empirical materials.

Research Design

The study was grounded in a hermeneutic-phenomenological framework, the aim of which was to uncover hidden meanings embedded in the participant's words. According to Maggs-Rapport (2001), the approach the researcher chooses should be in keeping with the research questions. More simply put, if the research questions posed, are focused on an inquiry about perceptions of experience, then a method should be used that can probe experience. The research questions in this study were

1. How are experiences of childhood sexual abuse perceived by selected lesbian women?
2. How are coming out experiences perceived by lesbians who survived childhood sexual abuse?
3. Do lesbian women perceive any relationship between their experiences of coming out and childhood sexual abuse?

I considered a qualitative approach an appropriate method to employ in this study for the following reasons

1. In order to answer the research questions posed in this study, it was essential that the complexities of the experiences and perceptions of each individual be adequately captured (Westerlund, 1992). The idea of situated or contextual knowledge, which implies that knowers, as well as their circumstances, are part of what is known (Ceci et al., 2002), lent support to a qualitative strategy. Qualitative methods permit the researcher to enter an individual's reality, for the purpose of exploring perceptions, experiences, and attitudes (Arksey & Knight, 1999; Harvey-Jordan & Long, 2001). Brzuzy et al. (1997)

noted that qualitative methods help researchers gain insight into people's lives, provide environmental perspectives to those lives, and can illuminate changes that may have occurred over time.

2. This study did not offer hypotheses, as do quantitative inquiries, but rather, sought to discover perceptions about phenomena, through dialectic between my understandings and those of the participant, as Finlay (2002) proposed; quantitative strategies generally rely on the epistemological assumption that knowledge is independent of the knower, and in qualitative research, knowledge is an integral part of the knower. A qualitative approach is a useful method to use to make discoveries about individuals' perceptions, because it focuses on individuals' experiences and can provide the researcher with detailed descriptions of unexamined phenomena (Appleton, 1995).

3. The topic of this study, the experience of coming out in lesbian women who were sexually abused as children, is newly emerging as an area of investigation. One of the characteristics of a qualitative approach is that researchers are not bound to a particular investigative course and can remain open to discovering relationships, concepts, and ideas that they may not have been considered prior to collection of empirical materials (Appleton, 1995; Hill et al., 1997). According to LeVasseur (2003), phenomena that are not well understood and that are central to the lived experience of human beings are appropriate for phenomenological research. Furthermore, evidence of phenomena is consistently and coherently found in the narratives and texts of qualitative studies (Williamson, 2000).

Research Participants

Definition.

Ten lesbian women participated in this study; they had histories of childhood sexual abuse, and had discussed their abuse with mental health professionals. Because the topic of childhood sexual abuse may have been stressful for some women to talk about, only participants who previously discussed their abuse in a mental health setting were selected to participate. This particular requirement achieved several goals: (a) It enabled the participant to better articulate her experiences (Beer, 1997); (b) It allowed the participant to become more familiar with various aspects of childhood sexual abuse, such as awareness of trauma symptoms, ability to name coping strategies, and recognize family dynamics (Herman, 1992), and; (c) It increased the participant's "capacity for self-observation and...tolerance for inner conflict" (Herman, 1992, p. 205). In their mental health settings, the participants had been in either individual or groups, or both (e.g., psychoeducational/ psychotherapy/skills), but the duration, as well as the approach of therapy was not relevant selection criteria for this study.

The technique of purposeful selection was used to select participants for this study (Seidman, 1998). Arksey and Knight (1999) recommended using this type of selection process as an appropriate technique to generate a contained, yet effective number of individuals. Participants were recruited via professional contacts, snowballing, advertisements placed in *The Washington Blade*, *The New York Blade*, *Go Magazine*, and a weekly web based newsletter (girliegirlvents@aol.com) that posts cultural, political, commercial, and academic events relating to lesbian, bisexual, and transsexual concerns.

Number of Participants.

The decision to select the quantity of 10 participants was arrived at for the following reasons: (a) In order to gain an in-depth, phenomenological understanding of each participant, at least 8, but not more than 15 participants are usually included in qualitative studies (Hill et al.,

1997). (b) Small groups may not provide the researcher with sufficient variability, but large groups not only involve unrealistic time frames to examine each individual, but also do not add valuable data (Hill et al.). In an attempt to craft a balance between these two choices, Hall and Stevens (1991) suggested the researcher make every effort to ensure that individuals stringently meet the study's criteria. Seidman (1998) proposed two criteria that can help the researcher decide if she has interviewed enough participants. The first criterion is sufficiency, that is, the number of participants should reflect enough variety so that others, outside the selected individuals, might be able to connect to the experiences of those women who were actually interviewed. The second criterion is the saturation of information, the point at which the researcher begins to hear the same information being reported, or as Charmaz (2000) suggested, when new data fits into already established themes and categories. Seidman (1998) described *enough* in this way:

“Enough” is an interactive reflection of every step of the interview process and different for each study and each researcher. The criteria of sufficiency and saturation are useful, but practical exigencies of time, money, and other resources also play a role, especially in doctoral research. (p. 48)

It is, nevertheless, possible for qualitative researchers to make decisions ahead of time, about the range, as well as the number of people they would like to interview (Seidman, 1998). As Denzin and Lincoln (2000b) suggested, concentrating on the analysis of a small body of empirical materials can be justified by the belief that no individual is just an individual. There is some universal aspect each person bears that enables the researcher to “generalize subjectively ... to their own experiences” (Denzin & Lincoln, 2000b, p. 370).

Settings.

In this study, choosing where the interviews were conducted was an essential element in collecting empirical materials. Qualitative interviews are shared experiences (Corbin & Morse, 2003) between the interviewer and respondent; they are human interactions that are influenced by ambient factors, such as the physical location of the interview (Arksey & Knight, 1999; Beer, 1997; Fontana & Frey, 2000). The essence of trust and intimacy in an interview can facilitate the creation of valuable information, and to that end, each interview took place in a space that was agreeable to us both, and in which we both thought we would feel emotionally safe, and physically comfortable. The places were quiet, free from distractions, and conducive to producing quality audiotapes. My notes regarding the setting, as well as my reactions and impressions of each interview were accessed and included in the profile analyses.

Collecting Empirical Materials

The interview.

According to Warren et al. (2003), the existing literature defined the qualitative interview in three ways, (a) a speech event, (b) a social interaction between researcher and participant, and (c) a feminist encounter between peers. Each of these represents a different arrangement of conversation, as well as varying social situations. In this study, the interview was defined as a social interaction with its focus on questioning and listening (by the interviewer), and responding (by the interviewee). It was the main method of data collection in this study, and I served as the instrument through which the empirical materials were collected (Sorrell & Redmond, 1995). The interviews lasted about 1 hour and 30 minutes to 2 hours. Open-ended questions directed the attention of the participant to questions and issues they may not have previously considered. Some researchers (Arksey & Knight, 1999; Seidman, 1998) contended that open-ended questions might enable the researcher to access participants' perceptions, feelings, and the meanings that

they make of their experiences. They also provide a venue where the researcher can examine and clarify participants' responses, so that she might further enrich and illuminate their expressions (Wimpenny, 2000).

According to Reinharz and Chase (2003), "interpreting any particular woman's silence or speech is a complex task that requires a strong understanding of her social location, including her place within her community and society, the cultural constraints and resources shaping her everyday life, and her particular circumstances" (p. 77). The interviewees' descriptions about their biography (e.g., age, siblings, employment) were usually offered during the course of the interview. However, after the interview formally came to a close, I asked if it would be permissible to make additional contact if I needed more information. The participants gladly acceded to the request. Table 5 (p. 355) shows some biographic information about the participants.

Interview guide.

In this study, I used an interview guide (Appendix A) as a frame of reference while conducting the interview to function as a reminder to ask about certain issues. Although the process of the interview was semi-structured, drawing on an interview guide helped me to keep the phenomenon I was investigating in focus. The tension between maintaining a frame of reference, and attempting to obtain descriptions of lived experiences is deemed essential by many phenomenological researchers (Ring & Danielson, 1997).

According to Anfara, Brown, and Mangione (2002), conducting qualitative inquiry behooves the researcher to disclose all aspects of the research process, so that methodological rigor can be assessed. Their contention was that analytic openness can potentially verify qualitative research, insofar as what the researcher claims to have observed, has actually occurred. One area for monitoring the research trail involves assuring that the interview protocol addressed the research questions (Hill et al., 1997); interview questions should be formulated according to what needs to be known. Anfara et al. proposed creating a matrix to cross-reference interview questions with research questions. Table 1 presents the research questions in this study that served as the foundation on which the interview questions were subsequently formulated.

Table 1
Research Questions in Relation to Interview Questions

Research question	Interview question
How are experiences of childhood sexual abuse perceived by selected lesbian women?	Q1, Q2, Q3, Q4, Q5
How are coming out experiences perceived by lesbians who survived childhood sexual abuse?	Q6, Q7, Q8, Q9, Q10, Q11
Do lesbian women perceive any relationship between their experiences of coming out and childhood sexual abuse?	Q12, Q13, Q14, Q15, Q16

Researcher experience.

In a qualitative study, the researcher's experience is not merely tangential to the research (Moch & Gates, 2000), but is an integral part of the research equation (Grafanaki, 1996). According to Lowes & Prowse (2001), the researcher's background, and prior conceptions and knowledge concerning the phenomena, influence the entire research process, including responses

to participants, and data analysis. Because I not only shaped the research process, but was also affected by it, the interactional component of the interviews were documented and acknowledged as part of the research endeavor. I questioned, mused, and speculated on the interview process; these personal reactions and thoughts were often the springboard to the analysis and as such, were included in the written text of the profile analyses of the participants. In fact, the researcher's thoughts, feelings, and intuitions were critical elements in all aspects of the analysis. According to Moustakas (1994), the researcher's experience, thinking, intuiting, reflecting, and judging, are held to be the primary evidence of scientific investigation.

Ethics in sensitive areas of research.

According to Johnson and Clarke (2003), any research topic, depending on its substance, can be potentially sensitive, however, there are some areas where the research process may be disturbing to both the researcher and the participant (Lee & Renzetti, 1993). For example, the emotional content, such as the suffering caused by sexual abuse is a real life experience with which the researcher can identify. Much of the literature that has been written about sensitive research, perhaps justifiably so, focuses on the participants' needs, rather than the researchers' (Johnson & Clarke, 2003). One concern regarding the participants is that they might feel obliged to consent to the interview, even to the extent that they feel exploited; another issue is that the process can be challenging to the participants' adapted coping strategies (Johnson & Plant, 1996). Throughout the interview process, I remained aware that this kind of study imparted both costs and benefits to those who participated in it.

In accordance with the rules regulating research involving human subjects, I obtained approval from the Institutional Review Board for Research Involving Human Subjects (IRB). Interviewees were provided with information about the purpose of the study, what their participation entailed (Appendix B), and a short narrative about me. This included specifics on how their participation might have personally affected them, their rights as a participant, and the measures that were taken to maintain confidentiality, as J. Hall (1999) recommended. They were also required to sign a consent form (Appendix C) confirming their satisfaction with the information they received about the study, their rights as a participant, and verification of their wish to take part in the study, and have the interviews recorded.

I was aware of the ethical considerations with regard to conducting research outlined by The American Counseling Association (1995), and of the problems that sometimes arise where sensitive issues are involved (Platzer & James, 1997). For example, the research process may stir up "difficult and unwanted" (Etherington, 2000, p. 262) thoughts and feelings, which may then be interpreted as doing harm (Bergen, 1993), a distinct contradiction to the ethical principle of *beneficence* (Etherington, 2000).

In their review of the literature on interviews with sensitive topics, Corbin and Morse (2003) found no research to indicate this type of interview caused long-term harm, or that the participants required referral for follow-up counseling. No matter how rare the potential is for such an occurrence (Corbin & Morse, 2003), the feelings of discomfort that an interview may invoke, as well as any lasting effect, cannot always be predicted. I remained attentive to the affective responses of the participants, and used, on more than one occasion, the technique of validating the participant's thoughts and feelings, as suggested by Arksey and Knight (1999). If, at any time during the interview, I, or the participant had concluded that a referral to a counselor was prudent, the consideration to do so would have been discussed. Although such a situation never occurred during the interviews, in such a case, the first recommendation would have been for the participant to talk to her present or previous therapist. The participants were also provided

with permission, as well as a means of contacting me after the interview, as suggested by Brzuzy et al. (1997).

Analysis of Empirical Materials

“The purpose of analysis is to bring meaning, structure, and order to data” (Anfara et al. 2002, p. 31). In order to analyze the empirical materials, I carried out the following procedures:

1. *Recording and transcribing*: After the interview was recorded, a transcript was prepared that recreated the verbal and non-verbal material of the interview. For a comprehensive description, see the Recording and transcribing section below.
2. *Data reduction*: I read and re-read the text, and bracketed off passages that were of relevance to the study. The purpose of bracketing was to reduce and shape the material into categories that were analyzed and interpreted (Huberman & Miles, 1994). For a comprehensive description, see the Data reduction section below.
3. *Display of data analysis*: In this procedure, I assembled the information into forms that eventually permitted the drawing of conclusions. I created profiles of the participants and identified and analyzed thematic connections. I used the software QSR NVivo to help manage the data with regard to classifying, sorting, filing, searching, and connecting the categories. For a comprehensive description, see the Data analysis section below.
4. *Interpreting the material*: In this process, I analyzed what I learned from doing the interviews, transcribing and studying the transcripts, bracketing and marking the text, creating and analyzing profiles, and organizing themes and categories. For a comprehensive description, see the Interpreting the material section below.

The following sections describe in detail, each of the procedures that were listed above.

Recording and transcribing.

Each interview session was audiotaped verbatim with the consent of the participants. According to Hycner (1985), an obvious, but important step in interpreting empirical material is to tape the interaction and transcribe the tape. I personally transcribed the tapes in order to “get to know the interviews better” (Seidman, 1998, p. 98), and to further ensure confidentiality, as proposed by Arksey and Knight (1999). It was an opportunity for me to pick up on nuances, hesitations, pauses, emphases, and other ways that individuals have of creating meaning in their language, as suggested by Etherington (2000). Transcripts included as much of the dynamics of the narrative as possible, including pauses and emphases, as well non-verbal cues, such as gestures, eye movements, and body posture as suggested by some researchers (Arksey & Knight, 1999; McLeod, 2001).

Data reduction.

The words, sentences, paragraphs, and pages from the text generated by the interviews were marked and analyzed with respect to the issues that were most relevant to the questions of this study, namely, the meaning and experience of coming out in the lives of lesbian women who were sexually abused. The transcribed interviews, participants’ poetry, my notes and records of thinking all became part of the universe of the empirical materials that were examined inductively, as well as deductively. The data were reduced by categorizing, finding themes, clustering, and writing and interpreting profiles, all of which were linked to the growing body of data, and that became available for further selection and condensation. I approached the empirical material with an open attitude, and observed from the text that which ultimately emerged as important and of interest.

Display of data analysis.

After the materials were marked and reduced to the issues concerned in this study, they were, as Huberman and Miles (1994) suggested, “shared or displayed” (p. 429) in three ways: *individual profiles*, *analysis of individual profiles*, and *themes*. According to Seidman (1998), creating profiles or vignettes of a participant’s experience is an effective way to share interview data in a way that reflects the individual’s consciousness. I crafted profiles using, for the most part, the participant’s own words. In discussing the rationale for creating profiles, Seidman (1998) related the following

What others can learn from reading a profile of a participant is as diverse as the participants we interview, the profiles we craft and organize, and the readers who read them. I have found crafting profiles, however, to be a way to find and display coherence in the constitutive events of a participant’s experience, to share the coherence the participant has expressed, and to link the individual’s experience to the social and organizational context within which he or she operates. (p. 103)

The second way I presented the data was through individual profile analyses; they revealed the researcher-researched relationship, as well as the critical consciousness involved in my own process. I used Ryan and Bernard’s (2000) suggestion to make and analyze thematic connections as the third way to present the interview data. I organized excerpts from the transcripts into *indigenous* categories, that is, the essential personal meanings expressed by the participants themselves. I looked for connecting threads and patterns across the cases, in order to find categories. Categories were combined, connected, and renamed, and ultimately six themes across the cases were identified.

Excerpts from the interviews, profiles, and profile analyses were the richest sources for the inducement of themes in this study. Both the literature review, as well as my own experiences with the subject matter, were additional stores of empirical material from which I was able to draw.

Interpreting the material.

Interpreting the material addressed the question of what I learned from doing the interviews, reducing the data, creating and analyzing profiles, and organizing the categories. It involved attaching meaning and significance to the analysis, and provided explanations for descriptive patterns. I modified Moustakas’ (1994) technique in order to present the results, outcomes, and implications of the analysis to the reader. The actions that I took were as follows

1. Discussed the way in which profile and theme analyses addressed the research questions;
2. Returned to the literature review in order to distinguish her findings from prior research;
3. Outlined ideas for future research projects;
4. Related the study to both personal and professional outcomes;
5. Related the research in terms of social implications.

NVivo - Computer Aided Qualitative Analysis Program

I used NVivo, a qualitative data analysis program, to help with data storage, data handling, in the reflexive process of identifying emerging themes. This particular software package was selected because of the strength of its hierarchical indexing system (Morison & Moir, 1998), as well as the fitness of its use for handling rich text (Richards, 1999). It provided me with the tools to search, mark, link, and reorganize the data, as well as represent and store the researcher’s ideas and reflections, as Weitzman (2000) maintained it would. In inductive

analysis, NVivo helped me to note patterns, compare and contrast categories, explore relationships between variables, and find concepts that characterized related findings. The ultimate goal in utilizing NVivo was to have the capability of accessing on-line, all the evolving documents; the various analytic processes (e.g., searches, categories, linking) at any given stage; and the results. It was used to maintain a whole that consists of varied, complex, and developing parts that needed to be accessible for synthesis.

Summary of Chapter 3

This chapter presented a detailed overview of the methodology used in this study. A qualitative approach was chosen to address the research questions asked in this study, and fit appropriately with the study's ontological, axiological, and epistemological assumptions. The number of participants, selection and recruitment procedures, as well as the settings of the interviews, all reflected careful adherence to cited, qualitative, procedural methods.

My experience and background was an integral part of the research equation; my prior conceptions and knowledge concerning the phenomena influenced the entire research process. I kept notes to document my reactions and responses to various aspects of the research process, and they were part of the accessible data.

The process of conducting research about topics that are personal may stir up difficult and unwanted thoughts and feelings, both in the participant, and the researcher. The participants were made aware of the costs and benefits of the research, in accordance with IRB regulations; they received information about the researcher, purpose of the study, and what their participation entailed, and signed consent forms to that effect.

Analysis of the empirical material included recording and transcribing the interview, data reduction, data display, and interpreting the data. A qualitative computing program, QSR NVivo, was used in this study to manage the data, for example in storing, retrieving, and searching.