NOTICE: This material may be protected by Groups for the Wives of Gay and Bisexual Men

ONE EFFECT of the Gay Liberation Movement has been to reshape attitudes toward homosexuality.¹ As a result, some people have been able to explore homosexual desires they previously denied. Some of these individuals have decided that they truly are homosexual and have set out to explore this lifestyle. Many were married before realizing they were homosexual. Others decided that they were bisexual and wished to pursue homosexual relationships while still maintaining a heterosexual, marital relationship.

A number of studies have shown that a substantial minority of individuals who consider themselves gay has been or currently is married.2 Nonetheless, Bell and Weinberg caution that "The actual incidence of heterosexual marriage among homosexual men and women is, of course, impossible to determine because investigators' samples are probably not representative and presently married homosexuals are probably less likely to participate in such surveys."3 It should not be assumed that homosexual men purposely deceive their wives when they marry. At the time of the marriage, they may not be consciously aware of their sexual orientation, or they may not be willing to accept their orientation even if aware of it. Many marry before their coming out (that is, openly declaring their homosexuality or bisexuality) or before an internal acceptance of their homoexual desires. Also, there are women who knowingly marry openly homosexual men. or women married to men who acknowledge their homosexual desires but do not act on them. However, the authors see these two situations as different phenomena, possibly problematic also, but significanty different from the focus of the current Hudy.

Little professional attention has been fiven to the relatively widespread situation of women who are married to homosexual from The professional literature has focused finest exclusively on helping the homosexui husband through the coming out protext. There has been minimal concern for

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Groups for wives of gay and bisexual men were found to be an effective therapeutic intervention for the problems that arise when a husband makes a disclosure to his wife that he is interested in pursuing homosexual relationships. The groups helped wives resolve the issues of the marriage and to make positive changes in their lives.

the psychological stress experienced by the heterosexual wife.⁵

The problems of the heterosexual wife only recently have come to the attention of the public, in the form of magazine articles, books, and movies (for example, *Making Love*), rather than in the professional literature.⁶ Scott Berg, the author of *Making Love*, wrote the story after six of his married friends come out. He stated, "This is *the* issue of the Eighties...."⁷

This study reports on the role of seven therapy groups in supporting wives of husbands who had disclosed their homosexual or bisexual activities. The women (a total of 50) in the study live in the San Francisco Bay area, which has large homosexual and bisexual populations. Because the gay community in this area is highly organized, there is much support for those coming out. Gay-oriented services, therefore, are more accessible than most other places in the United States.

The announcement of the formation of groups was published in both the general and homosexual press. Gay therapists and

agencies were particularly interested and helpful in starting the groups. They recognized that heterosexual spouses of their clients often were in need of help, but frequently rejected their help due to a perceived bias toward the gay or bisexual spouse. It took more than a year to collect enough individuals to form the first group. One man attended on one occasion, otherwise all participants were women. The problems in forming the group were due to the difficulty in locating and informing prospective members, rather than to a lack of interest. Although there is no referral or support network for these women other than gay agencies, many resist taking the referral from a gay agency or from their husband. Their own perception of being different led them to shun traditional divorce and marital counseling services.

CLINICAL DESCRIPTION

The participants ranged in age from the late 20s through the 50s. Almost all were white and middle class; most (80 percent) had some college education and some (20 percent) had graduate training.8 The majority (60 percent) had been married 10 years or more, and most (70 percent) had children. Less than 6 percent suspected their husband's sexual preference before marriage, which is common.9 When they did, they believed the marital contract implied that their husbands would give up their homosexual affairs. Some (35 percent) women were in the process of separating, but many were still trying to maintain the marriage or create an alternative marital relationship. The decision to end the marriage was usually the wife's, but the decision to separate was usually the husband's.

Clinically, the women showed no major psychopathology; their anxiety and depression appeared appropriate to the stresses they were experiencing. None was abusing alcohol or drugs. Many (65 percent) participated concurrently in individual psychotherapy, but still believed their unique needs were not being met. Some (20 percent) had

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been separated for several years, but were acutely still mourning the loss of the marital relationship. Some (20 percent) clung to the belief their husband would "come to his senses," abandon his new lifestyle, and return to their traditional marriage.10 No common personality traits were detected that would have made them more susceptible to choosing a spouse with a dysphoric sexual orientation. These observations contrast those of Hatterer, who studied the wives of men in treatment to eradicate their homosexual interests.11 She found that these women displayed a number of personality disturbances. While the authors observed some of the phenomena that Hatterer reported, they were not as distinct nor to the degree that she portrays them. Many of the observations were interpreted as a reaction to the stress of the husband's coming out, rather than to predisposing factors (that is, the wives questioned their ability ever to compete in the heterosexual social environment because of the "tragic" mistake they made in the present marriage). Gochros similarly concluded that these women were reacting to the stress of the crisis and did not identify any common personality traits shared by them.12 Additionally, in this study and Gochros' study, these women returned to a high level of functioning after the crisis had been dealt with. If these women were character disordered, short-term group or individual psychotherapy would not have made a significant difference.

GROUP ISSUES

Anger

The group leaders expected significant anger toward homosexuals in general and their husbands in specific. Initially, anger toward either rarely was observed. The most common presentation in the early group sessions was depression and a rather flattened affect or tearfulness. However, the group process appeared to mobilize the anger of the wives toward their husbands and the eventual working through of these previously denied feelings. The anger was directed at the husband for unilaterally altering the marital contract and not, amazingly, for infidelity.

The leaders had not intended to mobilize the anger and were surprised by the depth and strength of it. As leaders became more adept at running the groups, they were able to anticipate and minimize the display of angry feelings. As a result, the anger displayed by group members became less intense and of shorter duration. Additionally, leaders were able to assure members that feelings of anger were part of the therapeutic process and by continuing in the group they would be able to work through these feelings. Those who remained in the group reported that this was true for them.

Hurt

The women also verbalized intense feelings of hurt, which became a pervasive theme of the group and an obstacle to decision making. As group members gained support from each other, they were able to take constructive action in their lives. There was a tendency in the group to become obsessed with hurt feelings, which led to frustration and dissatisfaction. The leaders validated their hurt feelings, yet encouraged and supported positive change.

Betrayal

Whenever a husband leaves his wife for another, betrayal is an expected feeling. There are social models on how a wife is expected to react when her husband leaves for another woman. When he leaves or just becomes sexually involved with another man, the model does not fit. The wife's initial reaction is often that the whole marriage must have been a lie and invalid from its inception, because the husband's "true" interests must "always" have been homosexually directed. Some of the women (10 percent, plus another 10 percent that voiced some feeling of betraval) believed their husbands were selfish in choosing homosexuality and were unfair for depriving them of a "satisfying" marriage.

Homophobia

None of the women reported strong opinions concerning homosexuality before their husband's revelation. Afterwards, they expressed ambivalence. While they tried to maintain a liberal and understanding attitude, negative feelings surfaced when the topic was probed. The group leaders provided factual information dispelling many of the myths about homosexuality. Gradually, the women developed more tolerant attitudes toward homosexuals and homosexuality. However, many expressed fears that they might unwittingly become involved with another gay or bisexual man in the future. Additionally, there was evidence of feelings that gay or bisexual men were superior in many respects to heterosexuals and that the women would be dissappointed with dating heterosexuals.

Children

Concerns for the impact of the father's revelation to children were expressed often. Despite these worries, little time was spent during the group sessions on the topic. Many of the children were old enough to un-

derstand, had they been told of their fathers sexual orientation. The wives observed the the children were handling the matter be ter than expected, not unlike children of other troubled marriages, and that the child-father relationship was not signifi cantly altered by the revelation. The group members reported that the children were accepting of the father's new sexual life. style, and in some cases had met the father's homosexual partner and even spent weekends with both of them. The children who were reported as having the most difficulty were those who, at the father's request, were not told. Not one wife wanted to keep her husband's homosexual orien. tation secret from their children, and the wife did so only at her husband's request.

Sexuality

Most (60 percent) of the group members considered their previous marital sex life adequate in terms of quality and frequency, until their husbands disclosed their sexual preference. At this time, coitus completely stopped or was drastically curtailed. The women quite accurately felt sexually rejected. Universally, the wife felt undesirable, unfeminine, and lacking in confidence. In her subsequent dating she tended to be fearful, because she felt she had been fooled so completely for so long. In those instances where the husband and wife were still trying to re-establish their relationship, resumption of the sexual relationship to previous levels of frequency was a major issue.

Acquired Immune Deficiency Syndrome (AIDS) is an issue that has been evolving since these groups have been offered. It is only more recently that the threat to the wife has been clearly substantiated. The women often have not even thought of this as a potential problem, and the leaders must take responsibility to bring up the topic. The leaders shared information, such as "safe sex" guidelines, but emphasized that there were no easy answers, and it was yet another uncertainty with which they must live.

The full impact of AIDS has not been felt in these groups, and probably will not until a group member or husband actually contracts the syndrome. The husband's use or nonuse of safe sex techniques in his sexual activities with both his wife and other partners was an important issue. Referral to appropriate community resources for AIDS might have been useful, but wives rarely did this without group support (remember, they had ambiguous feelings toward homosexuals and homophile organizations). Some husbands may act irresponsibly after they come out, in what appears

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to be a second adolescence. A well-informed wife can assist her husband in making his homosexual explorations safe, as well as increase communication between the two of them. In the end it is an individual decision whether or not to continue coitus.

Need to Meet Peers

Although many of the women already were in individual therapy, they joined the group to reassure themselves that they were not alone or unusual. The group confirmed the fact that they were not "freaks." A remark often heard was, "I just had to know I wasn't the only one." Most of the women (90 percent) reported surprise to find that other women in this situation were attractive, intelligent, and articulate.

Support

The members often used the group as a place to ask advice for problems that recently emerged and to experiment and develop possible solutions. The coming out process can be traumatic and disorienting for the husband. A once-rational and supportive partner can appear to deteriorate before the wife's eyes, making even day-to-day communications difficult, not to mention the complexities of a divorce settlement. Additionally, agreements made were often not adhered to or renegotiated so many times that they had become meaningless. The members used the group for support during this process and for brainstorming ways of responding to their husband's changing expectations.

Superwomen

The authors adopted the term "superwoman" to describe the extraordinary effort the wives made to cope with their situations. After the initial shock, they tended to be nurturing and supportive of their husbands. They saw this as his crisis and supported him. They were willing to be their husbands' confidante, and to keep their sexual preference secret or to support them in dealing with family or friends if they decided to come out. Wives saw their duty as following their husbands' wishes, even if this excluded them from the support of family or close friends. Wives tended to tolerate their husbands' nights out and even an ongoing gay relationship.

Generally, the father informed the children of his sexual preference, but it was the wife who maintained the ongoing dialog with the children. While the husband might worry that his wife might stir up the children's hostile feelings, her usual reaction was to downplay his behavior and attempt to preserve the father-child relationship. She was the "diplomat," shuttling between husband and child often at her own emotional expense.

Even after the marriage had failed, the wife generally continued her efforts to maintain a harmonious relationship with her husband, only to find that it was impossible to have the emotional relationship she desired. The assumption of the superwoman role was so pervasive that it continued even after the relationship had ended. In this way, these women clearly are different from other divorcing women who display either anger or noninvolvement.

The adoption of the superwoman role suggested that the wife believed she was somehow responsible for her husband's homosexual crisis. While she intellectually recognized that his homosexual desires emanated from within him and were not something she produced, her emotional response indicated that she believed if she somehow was a better wife or mother, this would never have happened to them.

It was evident that both husband and wife unconsciously conspired to perpetuate her superwoman role. The wife was permitted to appear strong and was supported in not confronting her negative feelings. In trying to maintain some type of relationship she avoided the fear of complete rejection. This in turn relieved much of the husband's guilt and provided him with an ally, while he adjusted to the stresses of a new sexual orientation and lifestyle.

THE GROUP PROCESS

The group process followed the "situationaltransition" groups described by Schwartz.¹³ These groups meet regularly and are oriented around a shared event, with professional leaders. Factual information, support, and sharing of feelings with peers are provided. The leadership style is informal, active, and supportive, with minimal use of interpretations of resistance, group dynamics, or unconscious motivation. This style of group has been used in similar situations where sex and relationships have been an issue—for example, rape, incest, and battering.¹⁴

In the beginning sessions it appeared that the wife was concerned primarily with her husband's dilemma. She clearly was acting out the superwoman role. While facilitating her husband's adjustment, she was subordinating her own hurts and concerns. The group was continually reminded that its purpose was to help the group members, not aid the husbands by proxy. Their response was similar to the alcoholic's wife, whose life is being adversely affected by her husband's conduct; she finds his conduct disturbing yet unconsciously facilitates it. In the initial sessions, there was immediate cohesion. For all the groups, the participants were reluctant to end the first group session and were observed still talking to each other in the parking lot 15 minutes after the session ended. In the second session, they began to share feelings of loss and rejection. The recurrent themes were the pain in separating physically and emotionally from a husband for whom positive feelings still existed and the frustration in being rejected for something over which they had no control.

In the following sessions, the women dealt with their sexual feelings. As stated before, most had considered their marital and sexual relationship to be adequate. Fears that they might repeat the same "mistake" in a new relationship were rampant. Feelings of being misfits and inappropriate in their choice of a partner were recurrent. While recognizing their own needs for sexual reaffirmation, most were reluctant and fearful of new involvement.

By the sixth session the women began to express their anger. At this point, a few women dropped out of the group. In followup contacts with these women, they reported that they were not ready to deal with such strong negative feelings. The remaining group members admitted that the discussion of anger was upsetting, but reported that facing it was helpful. The leaders were able to reduce the number of women dropping the group by focusing the group on what they could do about the situation, rather than allowing general displays of anger. As the women confronted their anger, they began to give up the superwoman role. They focused on their own feelings and needs. They admitted that the discussion of their children's feelings was a cover-up for their own reactions, because their children appeared to be coping with their father's disclosure. The group members supplied support for feelings of hurt and anger, which allowed other issues to be addressed. One member described the supportive aspect of the group as "a cradle for the wounded."

Toward the final group sessions, most of the women felt that their primary identity no longer was the "wife of a gay." Some pursued their careers with increased motivation. Others signed up for advanced education. Several had begun dating.

The wives who chose to remain married appeared better able to handle the uncertainties of their marital status. They were cognizant that their husband might eventually leave, but believed that the group had prepared them for that possibility. Several women (35 percent) who initially believed that they wanted to make the marriage

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work, realized that they or their husband was unwilling to make the necessary changes in the relationship. In other cases (30 percent), the wives renewed their efforts to redefine an appropriate marriage contract. The decisions appeared well thought out and were not impulsive, and no ultimatums were given nor regrets expressed.

LEADER'S ROLE

The main role of the two group leaders was to direct the group members' thinking to their own needs. The leaders stressed that the group members need not be tied to an insoluble marital situation, that they had to learn to function as their own agents. The leaders supported individual decisions either to stay or leave the marriage. The women were discouraged from playing the role of victim or blaming the husband. The leaders pointed out how the women had adopted the superwoman role, thus denying their own feelings. They were strongly encouraged to think in terms of their own needs.

Leaders also challenged the women to develop personal life goals that were separate from their husband's. Feelings of personal failure and presentation of negative stereotypes of straight men (for example, they are unfeeling and tend to be detached) were strongly challenged. Discussion of stereotypes of gay and straight men helped to develop more realistic attitudes toward men generally. The presence of a heterosexual male as one of the leaders who could accept and respond to the mixed feelings that women expressed about men was extremely valuable. It is crucial for the male leader to be heterosexual, because of the extreme ambivalence and distrust the women held toward homosexuals and bisexuals. Roleplaying techniques were used to improve social and communications skills generally and with their husbands specifically.

The leaders sought to provide a supportive climate that acknowledged the wives' pain and feelings of failure, but they also pointed out the wives strengths and many positive attributes. The marital failure was not blaimed on either husband or wife. The leaders remained in the background, functioning primarily as facilitators.

Sex education was an important aspect of the group process. Despite the high educational level and years of married life of the group members, they held many of the common misconceptions concerning sexuality and homosexuality. Meaningful sex information was introduced into the treatment format as a natural occurrence. In particular, factual materials was presented to counter the homophobic thinking most group members exhibited in the initial sessions. When assumptions were presented as facts, the leaders would confront the material and present scientific data to resolve misconceptions.

RECOMMENDATIONS AND GENERALIZATIONS FOR PRACTICE

The experiences of the authors with these groups led to several recommendations, which follow.

1. Do not be discouraged by the difficulty in forming a group. Although the group leaders appeared and were heard on several television and radio shows and advertisements were run in newspapers and magazines, the authors had difficulty finding women for the groups. Nevertheless, once the groups formed, the participants told stories of meeting many women in the same situation who were not "brave" enough to call for an intake appointment.

2. Because of the distances some women traveled (more than 60 miles was not unusual) to attend meetings, it was difficult to have weekly meetings. Our groups met either biweekly or monthly. We believe that more intensive groups would be more helpful and effective.

3. Do not presuppose that any of the marriages is doomed. We could not predict with any accuracy which relationships would survive. The high level of motivation to keep the marriages together was quite surprising considering the emotional costs involved. We experimented with groups for wives separating versus groups for wives trying to stay together. In the end, we concluded that the mixed groups were the best and the issues surprisingly similar.

4. The easiest mistake a clinician can make is to be duped into trying to treat the husband by proxy. The wife will latch onto any statement from the leaders or other wives that the husband will be able to give up his homosexual behavior. Clear messages that this will not happen must be given.

5. Because the wives expressed acute reactions to homosexuals or to bisexuals, the leaders should be heterosexual and comfortable with their sexuality and with all sexual orientations. Any homophobia on the leader's part probably will be disasterous for the group. The presence of a male as one of the leaders was invaluable in many ways, and groups with either allfemale or all-male leaders probably will be more problematic. At least one of the leaders should be well-versed in sexuality, because sex education is an important aspect of the group process. The leaders must stay updated with new information concerning AIDS and especially the risk it poses for women.

SUMMARY

When a husband discloses to his wife that he is interested in pursuing homoscxuat relationships, the marriage changes.¹⁰ Although many wives hope that this will be just a phase, usually this is not the case. Some marriages end as a result of the revelation or subsequent acts. Other couples choose to remain together, but must find ways to integrate the husband's sexual desires into the marriage and to restructure a viable relationship. It should be noted that some women are able to handle the sequelae of her husband's announcement of interest in homosexual contacts without the problems previously described.

The authors were unable to recognize any common personality patterns among the women; however, several common needs were observed among the women. They had a great need to meet peers and see that others are similarly affected to realize that they are not alone. They had a need to develop constructive models of responding to the situation that the peer group offers. They had a need to talk about, obtain information on, and understand homosexuality, which the group leaders were able to fulfill. To make appropriate decisions for themselves, the women must be in touch with their own needs and not suppress or deny them, as they did before joining the group.

The group appeared to help women resolve the issues of the marriage and make positive changes in their lives. Gochros's and our own experiences suggest that groups for wives of gay and bisexual men are an effective therapeutic intervention for the problems engendered by the husband's coming out experience.¹⁶

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Notes and References

1. For the purposes of this study, the terms *gay* and *homosexual* are used interchangeably. Additionally, there are not homosexuals or bisexuals per se, only individuals with a preference for same-sex sexual expression or a preference for some combination of same-sex and opposite-sex sexual expression, whether or not they act on these desires.

2. Unfortunately, comparable statistics are unavailable for individuals who consider themselves bisexual. Assuming that 10 percent of the United States population is gay identified, that 20 percent is married, and that there are 75,000,000 adult men in the United States, we can conclude that 1,500,000 women are or have been married to a homosexual man. A. Kinsey, W. Pomeroy, and C. Martin (Sexual Behavior in the Human Male [Philadelphia: W.B. Saunders, 1948]), reported 10.6 percent of their gay-identified sample was ever married. M. Saghir and E. Robins (Male and Female Homosexuality: A Comprehensive Investigation [Baltimore: Williams and Wilkins, 1973]), reported 18 percent of their gay-identified sample was ever married. P. Gebhard and A. Johnson (The Kinsey Data: Marginal Tabulations of the 1938-1963 Interviews Conducted by the Institute for Sex Research [Philadelphia: W.B. Saunders, 1979]), reported 26.2 percent of their gay-identified sample was ever married. J. Spada (The Spada Report [New York: Signet Books, 1979]), reported 17 percent of his gay-identified sample was ever married. A. Bell and M. Weinberg (Homosexualities: A Study of Diversity Among Men and Women [Simon and Schuster, New York, 1978]), reported 20 percent of their gay-identified sample was ever married.

3. Bell and Weinberg, p. 160.

4. See H. Laurence Ross, "Odd Couples, Homosexuals and Heterosexuals," Sexual Behavior, 2, pp. 42-49; and M. Ross, "Heterosexual Marriage of Homosexual Males: Some Associated Factors," Journal of Sex and Marital Therapy, 5(2), pp. 142-151.

5. See F. W. Bozzet, "Heterogeneous Couples in Heterosexual Marriage: Gay Men and Straight Women," Journal of Marital and Family Therapy, 8(1), pp. 81–89; and D. Clark, Loving Someone Gay (New York: New American Library, 1977).

6. See G. Kessler and R. Dahl, "I Thought Knew My Husband," Cosmopolitan, 187, pp. 232, 234, 236, 240, 242, and 246; K. McCoy, "When the Man You Love is Gay," Glamour, 81(11), pp. 198-202; and K. Olson, "My Husband's Other Love Was a Man." Woman's Day, 47 (October 25, 1983), pp 33-36; L. Basse, An Uncertain Memory (New York: William Morrow, 1982); B. Kohn and A. Matusow, Barry and Alice: A Portrait of a Bisexual Marriage (Englewood Cliffa, N.J.: Prentice-Hall, 1980); and B. Maddox, Married and Gay (New York: Harcourt Brace Jovanovich, 1982).

7. Cited in Esquire, October 1981, p. 102. 8. Data were not taken in a systematic fashion in the present study. The percentagen reported are approximations from case notes, which did not always contain all Information reported. Therefore, the numbers provided should be viewed as educated guesses rather than as hard data. 9, F. W. Bozzett, J. D. Latham, and G. White, "Coping with Homosexual Expres-

sion in Heterosexual Marriages: Five Case Studies," Journal of Sex and Marital Therapy, 4(3), pp. 198-212.

10. The leaders never supported the hope that the husband would abandon his homosexual desires or behavior. It rarely happened in our clinical experience, and it has not been helpful for these women, who would rather wait for their husbands to change than make the changes themselves.

11. M. Hatterer, "Problems of Women Married to Homosexual Men," American Journal of Psychiatry, 131(3), 1974, pp. 275-278.

12. J. Gochros, When Husbands Come Out of the Closet: A Study of the Consequences for Their Wives, unpublished doctoral dissertation, University of Denver, 1982

13. See M. Schwartz, "Situation/Transition Groups: A Conceptualization and

Review," American Journal of Orthopsychiatry, 45 (1975), pp. 744-755.

14. B. Rounsaville, N. Lifton, and M. Beiber, "The Natural History of a Psychotherapy Group for Battered Women," Psychiatry, 42 (1979), pp. 63-78; L. Cryer and L. Beutler, "Group Therapy: An Alternative Approach for Rape Victims," Journal of Sex and Marital Therapy, 6 (1980), pp. 40-46; and J. Herman and E. Schatzow, "Time-Limited Group Therapy for Women with a History of Incest," International Journal of Group Psychotherapy, 34(4) (October 1984), pp. 605-615.

15. Of interest, the revelation often occurred during a "holiday" period (for example, Christmas, Thanksgiving, and the 4th of July).

16. Gochros, When Husbands Come Out of the Closet.

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