

The Couples Conference 2016

Attachment and Differentiation in Gay Relationships



Rick Miller, LICSW
www.rickmiller.biz
rick@rickmiller.biz

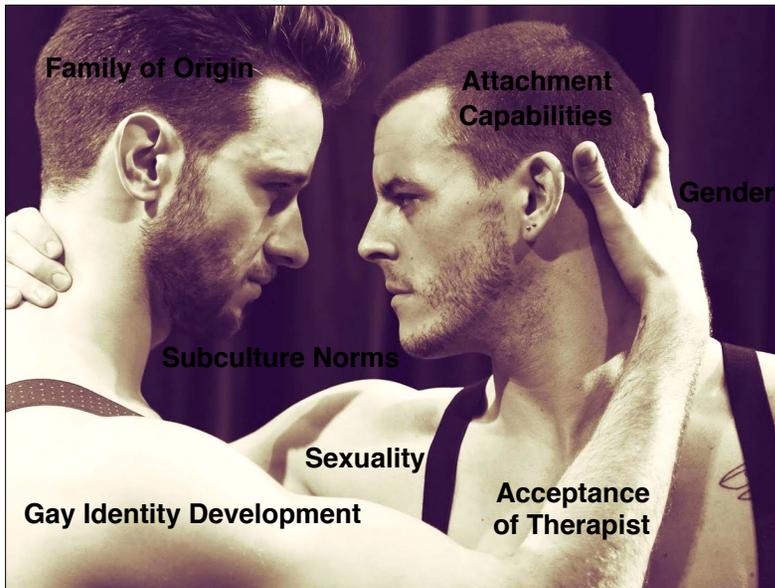




Attachment Bonds

Proximity to an attachment figure tames fear and offers an antidote to feelings of helplessness and meaninglessness.

— Sue Johnson, *Attachment Theory: A Guide for Couple Therapy*, 2003



Treatment Protocols

There are no known empirically validated treatment protocols for gay male couples. Clinicians must take couple protocols and that are heteronormative and adapt them accordingly.

— Gottman, Levenson, Gross, 2003



Masculinity and Vulnerability

Regardless of which modalities you choose to utilize, the most significant intervention with a male couple is to help elicit vulnerabilities and increase expressive communication within the couple.

– Rick Miller, LICSW



LGBT-Competent Providers

- Few participants had existing procedures (9%) or policies (4%) to identify LGBT-competent physicians.
- Sixteen percent of participants reported having comprehensive LGBT-competency training
- 52% reported having no training
- Conclusions: There exist both need and interest to develop procedures, policies, and programs to train physicians to become LGBT-competent.

Finding the Perfect Doctor: Identifying Lesbian, Gay, Bisexual, and Transgender-Competent Physicians
American Journal of Public Health, June 2015

Attitudes of Providers

Objectives:

Researchers examined providers' implicit and explicit attitudes toward lesbian and gay people by provider gender, sexual identity, and race/ethnicity.

Results:

Among heterosexual providers, implicit preferences always favored heterosexual people over lesbian and gay people.



– *Health Care Providers' Implicit and Explicit Attitudes Toward Lesbian Women and Gay Men*
Sabin, Riskind, and Nosek. American Journal of Public Health, 9/2015.

For the Therapist who is Not Gay

As you begin to work with your gay couples, think about these questions:

- Do you understand them?
- Do you appreciate the unique history that gay men have experienced?
- Can you do this without judgement?
- Can you warmly empathize with your gay clients and convey this verbally and nonverbally?

– Rick Miller, LICSW



Historical Context

- Dominant definitions of relationships have historically not included sexual and gender minorities.
- Heterosexism and Homophobia has had a significant impact on the development of couple and family therapy and techniques.
- Heterosexism perpetuates the belief that heterosexuality is superior while denigrating others.

– LGBTQ Couple and Family Therapy, History and Future Directions
Giammattei and Green, 2012



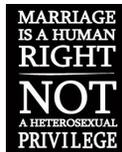
“Well meaning clinicians who endorse homophobic or heterosexist beliefs can get caught in the web of heteronormativity because it is a system of privilege that is often invisible to those that hold it.”

– Oswald, Blume and Marks
Decentering Heteronormativity: A Model for Family Studies, 2005



This results in “micro-aggressions” – brief verbal, behavioral and environmental indignities, whether intentional or unintentional, that communicate hostile, derogatory or negative slights against LGBT individuals, couples and families.

– D.W. Sue, *Micro-aggressions in Everyday Life: Race, Gender and Sexual Orientation*, 2010



Your Posture

- Your gift is that you can provide a warm, accepting tone, and show them how much you respect them.
- Your patients will trust you, respect you, and be willing to let their guard down.
- It is unnecessary to go overboard re-assuring your patients you are comfortable, just SHOW them you are.
- Be Yourself!

– Rick Miller, LICSW



Non-Gay Therapist

Advantages of a non-gay male therapist:

- Modeling communication from a non gay male perspective is healing. (From a female therapist, or a heterosexual male therapist)
- Less competition than with a gay male therapist
- Indirect healing can occur as a result of having a non-gay therapist – who accepts and loves each individual, compensating for earlier rejections



– Rick Miller, LICSW

The Self of the Therapist

Bring in your:

- authentic self
- true personality
- humor
- informality
- belief systems that are the least biased

This creates a wonderful match!



– Rick Miller, LICSW

The Therapeutic Match

The most successful interventions in couples work is when the therapist can exhibit acceptance, ability to discuss all matters openly, and the therapists presence validates a secure attachment in the couples relationship.

– Rick Miller, LICSW



The Ties That Bind

Males learn to keep their emotional experiences private from others due to having been shamed and therefore overvalue emotional autonomy.

- The ties that bind male couples are not all that binding. Partners are continuously testing whether their attachment is sufficiently strong and secure to endure over the long haul.
- The therapist needs to address presenting issues in a way that validates their relationship but also helps the men make their attachment bond more secure.

– Gil Tunnell, *Gay Male Couple Therapy-An Attachment Based Model, 2011*

Early Attachment

Gay men develop early attachment injuries that interfere with forming intimate relationships. They feared being shamed yet again by another man.

— Gil Tunnell, *Gay Male Couple Therapy-An Attachment Based Model, 2011*



Gay Identity Development

Starting at age 4 or 5 they felt they were different from their peers:

- More sensitive
- Cried more easily
- Enjoyed aesthetic interests such as nature art and music
- Less aggressive
- Often not interested in sports
- Made fun of by other kids for being different

— Isay - *Being Homosexual*



Adolescence

By this stage:

- The gay adolescent has injured self-esteem
- Is rejected by other boys
- Often is made fun of by peers
- Labels himself as different based on society's biases
- He believes his sexuality is disgusting

Isay cont'd



Fathers

- Fathers often were distant and lacked attachment to their gay sons.
- Often fathers were detached or hostile as they sensed their son being different, and couldn't accept this.
- Sometimes gay boys were secluded, and based on differences between the fathers expectations, they withdrew from their child.
- Fathers favored other male siblings who were more conventionally masculine and may not have been conscious of this.

— *Isay, cont'd*



Shame - The Hallmark of Gay Existence

Shame stems from internalizing the painful history of growing up gay and hiding oneself. Buying into cultural stereotypes within the gay male community as well as expectations of the heterosexual community only reinforces the feeling of not measuring up.

– Rick Miller, LICSW



Avoidant Attachments

Gay men may have avoidant attachments due to being shamed while growing up.

Gay men develop early attachment injuries that interfere with forming intimate relationships and feared being shamed, yet again, by another man.

On one hand: Yearning to bare darkest core feelings with someone and be accepted as lovable, and on the other hand, a fear of whether another man can be trusted.



– *Gay Male Couple Therapy-An Attachment Based Model*,
Gil Tunnell

Intimacy

Intimacy with another man can provoke a man to feel less masculine, whereas distance may render him lonely and depressed.

– Johnson and Keren, 1996 - *Creating and Maintaining Boundaries in Male Couples. The Double Bind*



Testing the Bond

The ties that bind male couples are not all that binding. Partners are continuously testing whether their attachment is sufficiently strong and secure to endure over the long haul.

– Gil Tunnell

The therapist needs to address presenting issues in a way that validates their relationship but also helps the men make their attachment bond more secure.

– Rick Miller, LICSW



Gay Men are Men

- The tendency to avoid or diminish painful material is common.
- Dissociation from our bodies is natural based on personal histories.
- How has he learned to communicate with others in feelings terms?
- Is he able to express deep internal vulnerabilities?
- Has he learned how to sit with another person while they are feeling fragile?
- Can he do this without offering instant solutions?



– Rick Miller, LICSW

Attachment-Based Couples Therapy



Presenting for Treatment

Couples present for treatment during crises periods:

- Caught in inflexible roles occurring in their lives together.
- Males couples have unique difficulties in closeness/distance regulation, in allowing dependent bonds to form, and in maintaining emotional connections over time.
- Early socialization experiences lead gay males to overdevelop their separateness – “defensive overvaluing of personal autonomy.”

– *Couple Therapy With Gay Men*
David Greenan, Gil Tunnell, 2003



Attachment Bonds

Attachment bonds are the fundamental building blocks in dyadic intimate relationships that allow both individuals to fulfill their inborn needs for both connections and autonomy.

Bowlby



The Ties That Bind

Healthy intimate relationships include proximity maintenance, separation protest, secure base, and safe haven.

How do independent men learn how to navigate this?

– Gil Tunnell, *Gay Male Couple Therapy-An Attachment Based Model, 2011*



Goals of Treatment

Male couples can be helped to deepen their emotional bonds and clarify their relational ambiguity.

– Tunnell

This is essentially the task of couples therapy with most gay men.



A Secure Bond

Childhood attachment styles are stable over a lifetime unless they have in vivo emotional experiences. Each adult serves as an attachment figure to the other.

– Gil Tunnell, *Gay Male Couple Therapy and Attachment-based Model, 2011*



A Secure Bond

Tips for promoting a secure bond:

- Address the need for comfort
- Encourage safe emotional engagement
- Promote “check ins” to increase responsiveness between the couple

– Rick Miller, LICSW



Attachment Bonds

Attachment bonds require shared emotional experiences.
(Insecure attachment can be the underlying problem).

Couples in therapy often seek a more secure attachment:

- empathy
- listening
- touching
- dyadic resonance
- a sense of being seen by the other

Solomon, M
Emotion in Romantic Partners: Intimacy Found, Intimacy Lost, Intimacy Reclaimed, 2009

Goals of Treatment

Transform Challenge to a Solution.

Getting a man to stay in the ring long enough to air differences,
understand the others perspective and negotiate a joint solution.

–Tunnell



Goals of Treatment

Attachment bonds require shared emotional experiences.

Insecure attachment can be the underlying problem. Couples
in therapy often seek a more secure attachment, empathy,
listening, touching dyadic resonance and a sense of being seen
by others.

– Solomon, 2009



Autonomy

Autonomy does not cause a problem for gay men with
secure attachments.

Patterson et al. Constraints of Innovation –
Commitment and Stability Among Same-sex Couples, 1999



A Protective Bubble

Some couples do not have enough of a protective bubble from the rest of the outside world:

- Work with couples to emphasize the importance of this. Have their own private sacred place that they create time to nurture.
- Getting caught in the excitement of the gay community can dilute the potential for intimacy between partners in a relationship.
- Tease this out with your couples. Often there is the assumption that this norm is okay.

– Rick Miller, LICSW



Mutual Friends

Mutual friends are investments in the couples identity. Couples experiencing greater social support are more likely to stay together.

Patterson et al. Constraints of Innovation – Commitment and Stability Among Same-sex Couples, 1999

The gay male community isn't always validating to relationships.



Interventions

With gay couples, interventions focusing on processes that interfere with their ability to repair negative interactions will help them maintain stability.

– Gottman, Levenson and Gross

Hence EFT, AEDP, and attachment-oriented work is key.



AEDP Therapy

AEDP- Accelerated Experiential Dynamic Psychotherapy, builds attachment into the patient-therapist relationship to enable the patient to uncover warded off emotions.

Gil Tunnell, Gay Male Couple Therapy and Attachment-based Model, 2011

AEDP Therapy

The AEDP Therapist

1) Explicitly Expresses:

- Affirmation
- Empathy
- Compassion

2) Creates Safety and provides emotional empathic support.

Gil Tunnell, Gay Male Couple Therapy and Attachment-based Model, 2011

AEDP Therapy

3) Accesses Core Affects:

- Despair
- Fear
- Anger
- Joy
- Pleasure
- Shame

Gil Tunnell, Gay Male Couple Therapy and Attachment-based Model, 2011

AEDP Therapy

Treatment Goal is for couples to be more securely attached:

- Emotionally engaged
- Less defensive
- Reduced anxiety in emotional expression

Gil Tunnell, Gay Male Couple Therapy and Attachment-based Model, 2011

Relational Meta-Processing

Relational meta-processing is crucial to build attachment.
(Patient realizes he can experience deep emotional safety, and have positive feelings of connection, closeness and attachment).

Help partners experience deep emotion together:

- Create a boundary around the couple
- Affirm couple and help partners affirm each other.
- Track non-verbal communication between the couple.
- Help couple explore what emotions are triggered by the argument.
- Delve beneath the surface, engage partners in dyadic regulation of affect.
- "Drop down" to a feeling state to sidestep defenses and minimize anxiety.
- Therapist serves as "surrogate" attachment figure before partners do.

Gil Tunnell, Gay Male Couple Therapy and Attachment-based Model, 2011

Regulate Closeness/Distance

Educate:

- Ebb and flow of closeness and distance is normal
- Most cannot sustain close connection all the time

Individuals vary in what they can tolerate

View closeness and distance equally

Distancer and pursuer- Distancer wants space, the pursuer is anxious.

– Gil Tunnell, *Gay Male Couple Therapy and Attachment-based Model*, 2011

Secure Attachment

- The de-escalation of negative cycles that maintain attachment insecurity and block safe emotional engagement and responsiveness.
- The shaping of new cycles of responsiveness and accessibility.
- The consolidation of gains and the integration of the process of change.

– Johnson, EFT, *The Creation of Secure Attachment: The EFT Model in Practice*, 2013

Secure Attachment

Core Interventions in EFT:

- Reflecting Emotional Experience
- Validation
- Evocative Responding
- Heightening
- Empathic Interpretation
- Tracking, Reflecting, and Replaying Interactions
- Reframing in the Context of the Cycle and Attachment Processes
- Restructuring and Shaping Interactions

– Johnson, EFT, *The Creation of Secure Attachment: The EFT Model in Practice*, 2013

Challenging and Resistance

Challenging (from a partner) leads to increased resistance and defensiveness rather than breakthrough moments of change. Tap into patient's biologically-based strivings to expand, grow and be transformed.

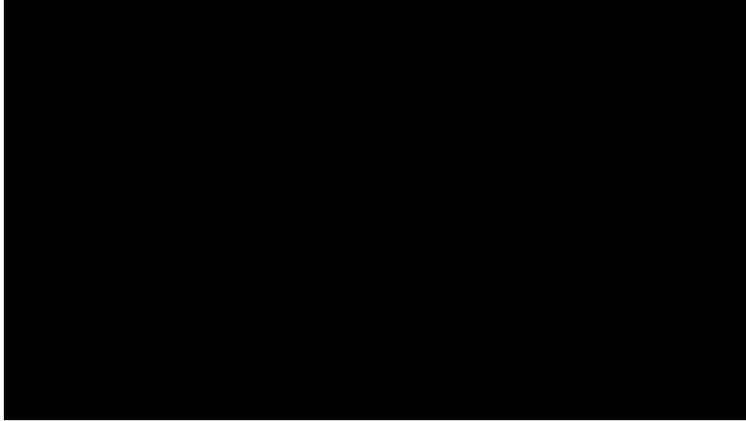
Goal of therapist - encourage emotional interdependency and develop a more secure attachment.



Diane Fosha, *Transformation Recognition of Self by Self and Effective Action*, 2008

Secure Attachment

Securely attached people in general are more able to access and acknowledge their distress in an open congruent way that elicits responsiveness.



The Urban Gay Male Myth: Pressure as a Gay Male

- Gay men have told themselves that they can, and are, living the gay fantasy.
- “Scene” refers to one predominantly white, upper-middle class segment of urban gay life that has significant cultural influence on much of the gay population.

– Michelangelo Signorile - *Life Outside*, 1997



The Gay Male World

- Within the urban, gay male world, men of all ages describe aspects of their lives with words like rigid, trapped, stifled, suffocating, oppressive, confining and pressured.

– M. Signorile, 1997

- A pressure that many gay men feel compelled to live by, consciously or unconsciously.

- Sexual norms are not questioned.

– Rick Miller, LICSW



Gay Male Sexual Norms: The Dance Alone or Together

Complications Regarding Sex

Gay male sexuality is more complicated than realized:

- Sexual behavior had previously been defined as bad, gross, or even evil
- Sensory experiences within the body have been stifled
- The gay male community is sexually free compared to the general population, without questioning what is healthy or less healthy for himself

– Rick Miller, LICSW



Gay Male Sexual Norms: My Premise

In a subculture of sexual freedom, gay men accept sexual norms without necessarily assessing what is right or healthy for them.

— Rick Miller, LICSW



Sexual Intelligence

Developing sexual intelligence is knowing what your conditions for good sex are. This includes, yourself, your environment, and your partner.

- Know your conditions for good sex.
- Know your body as it is.
- Know how sex actually feels in your body.
- Redefine sexy.
- Communicate for great outcomes.

Sex-Common Myths

- Sex should be easy because we are two men and like the same thing.
- Gay men don't struggle with erection issues
- All gay men have anal sex
- One is the top and one is the bottom



Open Relationships

Open relationships or relationships that are non-monogamous can be common in the gay male community.

This model is easily accepted without people assessing whether it suits their relational needs or whether their relationship has the strength to sustain this.

Many couples switch to an open relationship during problematic times.



What Open Looks Like

- Agreement made about what the rules will consist of
- The primary couple relationship comes first
- Sex is ongoing between partners
- Rules are adhered to
- The open relationship stems from mutual desire and emotional stability rather than a crises that is not being tended to.



TEN TIPS FOR NAVIGATING AN OPEN RELATIONSHIP

– Rick Miller, LICSW

1. *Your relationship comes first.*
Agree to make your intimate and sexual relationship the priority.
2. *Communication is essential.*
Talk to each other to negotiate your terms and to ascertain if your relationship is solid enough to be opened up. Periodically revisit how this is working and be honest with yourself, as well as each other about this.
3. *Remember the truths about long-term intimacy.*
Expect that sexual experiences in a long-term relationship are different in nature from a hook up. Keep in mind comparisons are dangerous.

Ten Tips, Cont'd

4. *Decide how much to share.*
Agree whether outside activities will be discussed with each other, or kept quiet. Sharing these details with your partner can be hot if you are both secure enough to handle this.
5. *Your bed is sacred.*
Maintain your intimate space as a couple and decide with clarity about where it is okay to be sexual with others; such as away from home, out of town, or going out alone. Respecting these agreements will make this challenge easier.
6. *How many times are allowed?*

Ten Tips, Cont'd

7. *Strangers or Friends?*
Is it acceptable to hook up with friends who either partner may know, or strangers only? Set a boundary and stick to it.
8. *Trial period, nothing is written in stone.*
Try this out for an agreed upon period of time and see how it goes. Many couples often decide to discontinue this. If you need help, don't forget to consult with your friends or a therapist.
9. *Adhere to safe sex guidelines*
outside of your intimate relationship, and get tested for STD's and HIV on a regular basis. If you slip, get tested out of respect to your partner and yourself.

Ten Tips, Cont'd

10. *The bumpy road.*

Having an open relationship is difficult. Partners who can tolerate some confusion or jealousy are more apt to handle this, but it is still challenging.



Gay Marriage

- What it poses
- What it means
- How it feels
- Why some want to get married
- Why some don't

– Rick Miller, LICSW



From Couple to Thruple

A couple may decide to open their relationship to a third party after many years together while having had an open relationship.

Common Issues:

- Is there couple avoidance or is the relationship secure?
- Sexual Issues
- Who has the stronger bond?
- Jealousy
- How to come out to others
- Who to come out to, and not to come out to
- Varying dyads
- Do they make a big enough mattress?!
- *It is not easier than being a couple!*

– Rick Miller, LICSW



In Conclusion

Treatment Goals:

The Double Win: Gaining Connection while Respecting Autonomy.

Both parties respect and value the others core self, while simultaneously sustaining a secure, respectful emotional connection.



— Rick Miller, LICSW

rickmiller

Author:

www.rickmiller.biz
rick@rickmiller.biz

Blog:

Psychology Today-Unwrapped:
Mind-BodyWisdom and the Modern
Gay Man

Facebook:

Rick Miller Psychotherapy+

