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Despite social work's commitment to diversity and social justice, anti-oppressive practice in relation to sexuality is afforded little attention in key texts. In comparison to other social divisions, there appears to be little theoretical analysis of lesbian, gay and bisexual (LGB) oppression and few practice models. Drawing on Thompson's work, a framework for understanding the processes and structures which maintain sexuality oppression is proposed. This analysis identifies the legal, social and political inequalities in the everyday lives of LGB people. The paper examines how heterosexism can help to theorise LGB oppression and aims to translate the term into its 'full richness' by using three conceptual domains: normalising heterosexuality, compulsory heterosexuality and intersections with other oppressions. (i) The family is a key site in which heterosexuality is normalised. Children and family social workers are likely to encounter a range of beliefs in which LGB families are constituted as inferior: children lack appropriate gender role models, children will grow up gay, children of same-sex parents are bullied and gay men are a threat to children. (ii) The compulsory status of heterosexuality has depended on the erasure of LGB existence: sexuality issues are not addressed in the academic or practice curriculum; LGB people are represented as 'just the same' as heterosexuals (services which meet their needs and circumstances are not considered); and LGB service users remain invisible to social workers. (iii) Heterosexism intersects with racism, sexism and disabilism in processes which include othering, treating everybody the same and invisibilisation. This paper offers a theoretical foundation for heterosexism on which emancipatory practice with LGB people can be developed.

Keywords: Lesbian, Gay and Bisexual People; Anti-Oppressive Theory; Emancipatory Practice

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Sexuality is under-theorised in social work and in the sociological literature more generally. Despite the profession's longstanding commitment to social justice, anti-oppressive practice (AOP) in relation to sexuality is afforded little attention in key social work texts (for exceptions see Logan *et al.*, 1996; Cosis Brown, 1998; Bayliss, 2000; Langley, 2001). More than a decade ago, Trotter & Gilchrist (1996) revealed that social workers, practice teachers and students were reluctant to see sexuality as central to anti-oppressive practice agendas and work with LGB people was overwhelmingly ignored in practice assessment reports. It appears that the situation has little changed, leading one writer to assert that AOP with LGB people is a 'more difficult form of emancipatory practice to develop' (Thompson, 2003, p. 110). To address these shortcomings, Logan (2001) argues that social work students need knowledge of theories of oppression, disadvantage and discrimination in relation to sexuality. In comparison to race, gender, disability and age (e.g. Dalrymple & Burke, 1995; Dominelli, 2002), there appears to be no theoretical framework or model for working with lesbian, gay and bisexual (LGB) people (Hardman, 1997). In addition, there is an assumption that LGB people do not experience oppression. In this first section of the paper, I use Thompson's definition (2003) as a starting point for understanding how oppression is perpetuated in the everyday lives of LGB people:

Oppression is defined as inhuman or degrading treatment of individuals or groups ... Oppression often involves disregarding the rights of an individual or group and is thus a denial of citizenship. (Thompson, 2003, pp. 10–11)

Throughout the literature, LGB people have been described as 'partial citizens' (Richardson, 1998, p. 88); as 'moral, social and political aliens' with 'second-class citizenship status' (Seidman, 2005, pp. 225–245). In his analysis of the theoretical foundations of oppression, Thompson provides a framework which encompasses all social divisions (2003, p. 11). By adapting this model, I identify the ways in which LGB people have been constructed as partial citizens:

- *Civil and legal*—until the early twenty-first century, rather than offering protection, the law was itself discriminatory towards LGB people. A range of legislation existed which denied LGB people equal treatment with heterosexuals, including the age of consent, lack of recognition for same-sex relationships and lack of protection in employment. Although much of this legislation is now repealed, there is as yet no statutory framework to protect LGB people and the provision of rights to different groups is unequal. As Seidman argues, a civil rights agenda cannot stand alone: 'Legal equality easily coexists with social inequality' (2005, p. 236).
- *Social*—Thompson defines the 'social' as the extent to which a person is integrated into society and enjoys its 'esteem, rewards, privileges and opportunities' (2003, p. 11). Social equality means access on the same basis as heterosexuals to welfare, including social work; however, there are few services that are tailored to meet their needs as LGB people. Recently, the government introduced proposals to prohibit discrimination on the grounds of sexual orientation in goods, facilities and services (Women's Equality Unit, 2006). In the consultation document, most of the examples neglect LGB people as social citizens and instead identify them as consumers of goods and services, such as hotel accommodation.

- *Political*—access to the political process is often seen as the ability to exercise power and to have one's concerns represented. Lesbian, gay and bisexual people have the right to vote; moreover, across the political spectrum, a number of MPs have come out, including some government ministers, as gay men and one lesbian. But the organisational infrastructure, in the form of units, committees and policy officers, which were set up during the 1980s, has since disappeared (Carabine & Monro, 2004) and there are few avenues through which LGB people can influence political decision-making. Participatory democracy has been a lynchpin of the New Labour project for democratic renewal and the model has been adopted to assist in the process of devolution in Scotland, Northern Ireland, the Welsh Assembly and the Greater London Authority. In Northern Ireland, the Department of Agriculture and Rural Development found that there was no group to represent the concerns of LGB people in relation to the impact of rural development policies (Donaghy, 2004). Similarly, in Wales, the process to increase the participation of marginalised groups at first omitted LGB people (Fevre, 2005).
- *Moral*—morality is a key site of LGB oppression. LGB people have been seen as a threat to marriage and family values; a threat to religious institutions and to seduce children into homosexuality. Logan argues that 'contamination and corruption theories of homosexuality are particularly inflammatory for those working in the child care field' (2001, p. 563). Although most child sexual abuse is perpetrated by heterosexual men, male heterosexuality is not similarly inscribed with paedophilia.
- *Psychological*—being a lesbian or gay man was considered to be a mental disorder until it was removed from the American Psychological Association's *Diagnostic and Statistical Manual* (DSM II) in 1973. They were said to be less stable psychologically than heterosexuals. These beliefs shape assumptions that same-sex relationships are more transitory than heterosexual relationships and influence assessments about, for example, LGB people's suitability as carers for children.

This approach to understanding LGB oppression enables parallels with other forms of oppression and allows new understandings of systemic disadvantage in LGB people's lives. The subsequent discussion aims to draw upon this model and provide illustrations of the ways in which these legal, social and political processes impact upon social work practice with LGB people. But first I wish to examine why the current term used to describe LGB discrimination—homophobia—does not offer an adequate theory of oppression.

Current Understandings of Sexuality Oppression

Homophobia has been commonly used to refer to discrimination and oppression against LGB people since Weinberg's (1972) first use of the term in the early 1970s. It is widely acknowledged to refer to the fear, hostility and violence perpetrated against non-heterosexuals. Homophobia has also come to denote institutional hostility, most notably enshrined in legislation, such as that pertaining to the age of consent and section 28 of the (now repealed) 1988 Local Government Act. The term has been successful in 'locating the "problem" of homosexuality, not in homosexual people, but in heterosexuals who were intolerant of lesbians and gay men' (Herek, 2004, p. 8).

But it is less helpful in describing the system which privileges heterosexuality as institution and practice. Because of its origins in individual psychologies and its links to concepts such as xenophobia, homophobia fails to offer a theoretical analysis of LGB oppression (see Fish, 2006). Heterosexism was first coined at approximately the same time as homophobia in the early 1970s (Herek, 2004). While homophobia effectively communicated anti-gay hostility, by contrast, the term heterosexism is poorly understood. In an effort to broaden appeal for its use, heterosexism is often used as if it described:

some simple, factual, concrete reality ... (The term) is used in ways that is reductionist and shorthand and (it has) been difficult to translate back to (its) full richness. (Cosis Brown, 1998, p. 4)

In the social work literature, heterosexism has been characterised as subtle and as of lesser severity than homophobia (Brownlee *et al.*, 2005). Examples typically used to illustrate heterosexism include referral, assessment and review forms which fail to acknowledge the possibility that a service user might be non-heterosexual. But assessment forms are only the product of wider values and beliefs which privilege heterosexuality. This recognition does not impart understanding of the ways that LGB social care needs may differ from heterosexuals' needs nor of how discourses may shape the perceptions of social workers. Heterosexism then, often appears to be mundane (Peel, 2001), that is, commonplace and trivial. In the following section, I argue that while heterosexism is indeed ubiquitous, it is not inconsequential.

Developing Understandings of Heterosexism

Although there is an emerging research interest in heterosexism, especially in the psychological literature, it has received relatively little attention in social work. Sue Wise developed a definition for social work:

Heterosexism reflects the dominance of a worldview in which heterosexuality is used as the standard against which all people are measured; everyone is assumed to be *naturally* heterosexual unless proven otherwise, and anyone not fitting into this pattern is considered to be abnormal, morally corrupt and inferior. The assumption of heterosexuality and its superiority is perpetuated through its institutionalization within laws, media, religions and language, which either actively discriminate against non-heterosexuals or else render them invisible through silence. Just as the concepts of racism and sexism have helped us to understand the oppression of black people and women, so the concept of heterosexism has assisted us in theorizing lesbian and gay oppression. (Wise, 2001, p. 154, emphasis in original)

I have chosen to distil this definition into three conceptual domains.

1. Heterosexism is a belief system that values heterosexuality as inherently normal and superior to homosexuality (normalising heterosexuality).
2. Heterosexism is based on the assumption that everyone is, or should be, heterosexual (compulsory heterosexuality).

3. Heterosexism intersects with other forms of oppression such as sexism, racism and disabilism (intersecting oppression).

In the following sections of the paper, I use these three concepts to reveal how they impact on LGB people's access to social care services. The intention is to develop theory to provide a rationale for social work practice with LGB people.

Normalising Heterosexuality

The belief system which values heterosexuality as superior to homosexuality operates in two ways: it privileges heterosexuality by defining it as the appropriate sexuality (Carabine, 1998) and deems homosexuality inferior. This hierarchical relationship positions homosexuality as immoral, deviant and dangerous and heterosexuality as inherently moral, virtuous and safe. As an illustrative example, the family is a key site in which heterosexuality is maintained and where gender difference is constructed. Heterosexuality is seen to offer a superior family form. By contrast, same-sex relationships are seen as a choice against 'normal' family life. When social workers make decisions about the parenting capacity of LGB people or their potential as carers, they draw upon widely held beliefs (examined in the first part of this paper) of LGB inferiority. For example, in one study, social work students were found to hold consistently negative attitudes towards same-sex couples wanting to become parents. Students perceived lesbian and gay couples as less emotionally stable, as having poor potential to be parents and students believed they would not be able to provide a loving home for a child. The students were less likely to award custody of a child to a same-sex couple than to a heterosexual couple (Crawford & Solliday, 1996). While there is evidence that these attitudes are changing (Camilleri & Ryan, 2006), the following four sections explore some of the taken for granted assumptions that social workers are likely to encounter when considering the suitability of lesbians and gay men to care for children.

(i) Children of Same-Sex Couples Lack Appropriate Gender Role Models

The traditional, heterosexual model of a nuclear family is pervasive in Western culture, with a male breadwinner as head of the household and a 'wife' and 'mother' as carer of their (usually two, opposite sex) children whom they socialise into appropriate gender roles. In such an idealised model, the division of labour—both within and outside the home—is prescribed according to a specific gender pattern: women are responsible for childcare and housework and men for the family income. Such assumptions are shared by adoption panels, where lesbians have been asked which partner would stay at home and gay men have been asked whether they were able to do the laundry (Hicks, 2000). Even when it is clear that most families in the UK no longer conform to this pattern, 'regulatory heterosexuality' still insists on a balanced gender presence (Hicks, 2000). As Hicks argues, 'traditional fostering and adoption practices (...) favour heterosexual couples as being naturally able to provide children with "role models" of gendered heterosexuality' (2000, p. 160).

Two issues have pre-occupied social workers: the appropriate gender development of the child and the availability of appropriate gender role models in LGB family support networks. First, it is assumed that children brought up by two men (or two women) fail to develop appropriate gender roles and behaviour and fail to develop socially and emotionally. The fear is that girls brought up by lesbians will be tomboyish; boys brought up by gay men will be effeminate. Second, lesbians and gay men are believed to be unable to provide appropriate role modelling for children because of disturbances in their own sexual identity (i.e. lesbians are thought to be masculine and gay men feminine). Lesbians are also believed to be anti-men and to communicate their presumed antipathy to their children. Influenced by these beliefs, social workers sometimes try to assess their attitudes to men. Fostering and adoption social workers routinely ask lesbian and gay applicants whether their social and family networks include members of the opposite sex. When asked how they will manage the lack of appropriate role models in their children's lives, lesbian and gay parents engage in a strategy that Clarke (2001) has described as highlighting compensations for deficits in which they emphasise the efforts they make to include men (or women) in their child's life.

(ii) Children of Same-Sex Parents Will Grow Up Gay

When social work students were asked about their attitudes to homosexuality, the most frequent disagreement was with the statement: 'I would not be too upset if I learned that my son was homosexual' (Newman *et al.*, 2002, p. 280). Newman's students (it seems) would be very upset to learn that their sons were homosexual: a son's gay sexuality is often a source of disappointment and regret to heterosexual parents. Having a gay son is seen to be less desirable than having a heterosexual son. Furthermore, there are assumptions that same-sex parents are more likely to have children who will grow up gay. If social work students believe that a lesbian or gay child is less desirable than a heterosexual child, they may be less likely to place a child with a same-sex couple if they also believe that it is more likely that their child would grow up gay.

(iii) Children of Same-Sex Parents are Bullied

While children are bullied in schools for a number of reasons, the children of lesbians, gay men and bisexuals may encounter bullying because of their parent's sexual identity. Most research has focused upon bullying where children themselves are LGB and there has been little attention to the coping strategies and support mechanisms for children whose parents are gay. Some argue that LGB parents are aware of the likelihood that their child may be bullied at school and are well equipped to help them because of their own experiences. But other research suggests that this may be dependent upon LGB parents' own attitudes to their sexual identity. Some parents are fearful of coming out to their children: children whose mothers were closeted perceived greater stigma in having a lesbian mother (Gershon *et al.*, 1999).

Some social workers may decide against approving a same-sex couple for fostering or adoption, rather than consider what support should be available for same-sex families whose children are bullied. The cause of these potential problems, however, is heterosexism, not LGB parents or their children.

(iv) Gay Men Are a Sexual Threat to Children

Parenthood is so intrinsically associated with motherhood that there is an assumption that gay men can only have suspect motives for wanting children in their lives. Gay men's sexuality is considered unrestrained and out of control and they are seen as corrupting and a threat to children. Prejudicial beliefs include that gay men will not control their children, they will not impart conventional morality about what is right and wrong, they will fail to protect children and leave them vulnerable to other adults and peers. It is also assumed that they do not sustain long term monogamous relationships and so would be unable to provide a stable environment in which to bring up children (Barrett & Tasker, 2002). These beliefs are permeated by cultural and structural heterosexism which defines gay men as psychologically and morally flawed.

Children and family social workers may draw upon discourses of normalising heterosexuality which characterise LGB families as implicitly deficient. These examples aim to illustrate how heterosexist beliefs may shape social workers' perceptions about what constitutes an appropriate family in which to bring up a child.

Compulsory Heterosexuality

In its simplest form, heterosexism rests on the assumption that everyone is heterosexual. This analysis implies a neutral process which obscures the compulsory nature of heterosexuality. By contrast, Adrienne Rich argued that 'heterosexuality has had to be imposed, managed, organized, propagandized and maintained by force' (1983, p. 191). As an institution, heterosexuality has been maintained by the erasure of LGB people from public life, the absence of scholarship about LGB issues and the assumption that LGB people are 'just the same' as heterosexuals. Compulsory heterosexuality has been imposed through the closet and the invisibility of homosexual identities has been regulated through legislation. Although some argue that the closet has disappeared and that increasing numbers of people lead public LGB lives, the obligation to remain invisible continues to shape LGB people's decisions about coming out in their access to public services (Seidman *et al.*, 1999). Many LGB service users do not come out to social care providers. [This is unsurprising in the light of one study's findings that only a third of social care staff is open about their sexuality (Manthorpe & Price, 2005).] Although strategies to facilitate disclosure form an important mechanism for supporting LGB people to come out, visibility alone does not guarantee access to appropriate services or better

treatment. Instead, 'being out' often produces its own set of difficulties which are similarly problematic (see Jeyasingham, 2008).

Heterosexuality is imposed by the absence of LGB scholarship. Despite increased public debate about LGB civil rights, Camilleri & Ryan (2006) found that the inclusion of the topic of sexuality within the social work curriculum was extremely minimal. Its absence is also reflected in the publication record of journals. Over a 10-year period, discussion of LGB subject matter not related to HIV/AIDS constituted only 1% of articles published in 12 major social work journals (Van Voorhis & Wagner, 2001). In her critical commentary relating to lesbian and gay issues in social work with young people, Trotter (2000) struggled to find articles in British/European journals about youth justice, child protection or residential work and was thus obliged to limit the scope of her article. Journals not only define the issues that will be addressed by the discipline, they also influence the practice of social work. In the absence of a theoretical rationale, social work practice will continue to utilise heterosexual models in work with LGB service users.

Because of the dearth of material about LGB issues, social workers may lack awareness of the particular needs and risks for LGB service users and assume that they are just the same as those of heterosexuals. Suicide risks have been identified as occurring more often among young gay men and self-harm among young lesbians, but these are not commonly identified by social work students (Trotter, 2000). When asked about health and social care provision, the majority of older lesbians and gay men believed that professionals were not positive towards LGB service users and only 16% thought that professionals were generally knowledgeable about LGB people's lives (Heaphy *et al.*, 2003). Moreover, Pugh (2005) argues that assessments of need for older LGB people, implemented through the *NHS and Community Care Act 1990*, prioritise physiological and safety needs above belonging, love, esteem and self-actualisation needs. It is in respect of the latter that the needs of older lesbians and gay men are likely to differ from those of heterosexuals. He argues that the medical model influences current assessment practice with older people and produces formulaic service responses which are likely to discriminate against LGB older service users. Similarly, assessments and services provided under the *Carers (Recognition and Services) Act 1995* continue to presume heterosexuality: LGB carers are absent from discussions about caregivers and services are not tailored to meet the needs of LGB people (Manthorpe & Price, 2005).

Intersecting Oppression

Although the concept of intersecting oppression is not new, the parallels between different forms of oppression are increasingly receiving attention. Both Dominelli (2002) and Thompson (2003) argue that some of the processes which maintain oppression are common across all social divisions. In this final section of the paper, I wish to examine these processes in relation to sexuality.

Othering

The concept of ‘othering’ has been important in understanding sexism (de Beauvoir, 1988) and has been developed in relation to ‘race’ by Collins (2000). Drawing on these ideas in her discussion of anti-oppressive social work theory and practice, Dominelli argues that:

othering is an important aspect of the processes of oppression. (It) involves (exclusion) from the normal hierarchies of power and (being) labelled inferior or pathological ... These (processes) create a “them–us” division which privileges those who are considered “us” ... “Othering” is socially constructed through ... the biological, social and political and/or economic domains. (2002, p. 18)

LGB people are also located outside the legal, political, social and moral order (as we have seen in the earlier discussion). Terry (1995) charts these processes of ‘othering’ which deemed women, black people and ‘homosexuals’ as intellectually and morally inferior. LGB people were considered so different from heterosexuals that they were classified as an intermediate or third sex, between man and woman.

Treating Everybody the Same

Western liberal democracies have placed considerable emphasis on equal treatment: it implies parity in access to services and it is believed to ensure fair treatment in health and social services. The concept of treating everyone the same fails to take account of structural oppression and works in two ways: it assumes everybody is the same (e.g. people are offered the same services) and it compels disadvantaged groups to become similar to dominant groups. These arguments have been made in relation to ‘race’ and gender, but they are less developed in relation to sexuality. Early analyses of racism in social work identified this as the colour-blind approach; little account was taken of black people’s different needs for social work. These issues were explored earlier in relation to LGB people’s needs for differentiated provision.

Oppression operates through assumptions of a deficit and it demands that those deemed inferior approximate the characteristics of the superior group. In asserting the legitimacy of gay parenting, LGB parents have often argued that lesbian and gay parenting is indistinguishable from heterosexual parenting: LGB parents help children with their homework, make packed lunches and argue about bedtimes (Clarke, 2001). Because *family* is a heterosexual concept (lesbians and gay men have only had *pretend* families), lesbians and gay men who want to be considered a family have been obliged to approximate heterosexuality. Rather than posing a challenge to the family as a heterosexual institution—for example, an analysis that argued the benefits of having two same-sex parents on conceptions about the sexual division of labour—many of the debates have instead served to bolster traditional family forms. There are good reasons for making these kinds of arguments: they are a response to heterosexist assumptions (Hicks, 2005). Heterosexism enforces assimilation, but it does so by imposing the standards of heterosexuality. Anti-racist analyses delineate similar processes of accommodation in which black people are expected to assimilate

to white cultural norms: by wearing western clothes (not the *hijab*), eating western foods and by adopting Eurocentric traditions, values and ways of thinking. Oppression is maintained through the double bind: being just like the dominant group means that minorities lose their distinct identities; being different, constructs minorities as inferior.

Invisibilisation

Invisibility is usually represented as an individual choice: LGB people make decisions whether or not to come out. But invisibility is structural in the absence of data and official statistics about the LGB population, the lack of social policies, the dearth of equality targets and monitoring systems, the paucity of published guidelines about sexuality and the lack of practice models and examples. Because improving access to services relies upon a visible, readily identifiable population; LGB people are often overlooked in developing service provision. Although invisibility is a key process in LGB oppression, other groups, for example women and disabled people, have similarly been rendered invisible.

Conclusion

By using homophobia as the construct to understand LGB oppression, we create the misleading impression that it exists in isolation from other forms of oppression. I do not seek to argue that oppression has the same outcomes across social divisions, but rather that understanding oppressive processes in general, helps both to identify how heterosexism operates and also the means to combat it. Emancipatory social work practice with LGB people is more likely to become an achievable goal if the nature and form of sexuality oppression is commonly understood. In this paper, I aimed both to reveal the complexity of heterosexism and to illustrate that while it may be pervasive, it is far from mundane.

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