When a Spouse Comes Out: Impact on the Heterosexual Partner

AMITY P. BUXTON
Straight Spouse Network, Oakland, California, USA

When a spouse comes out as gay, lesbian, bisexual, or transgender, the disclosure is a family matter. However, the impact on the heterosexual partner is usually overlooked. Most cope alone, though some find peer support. The most common issues faced are sexual rejection, challenge to the marriage, concern for their children, and crises of identity, integrity, and belief system. Resolving the most unique of these (sexuality, identity, integrity, and belief system) typically takes from three to six years as the straight spouses move from shock and confusion to accept reality, heal, reconfigure their identity, moral compass, and belief system; and, finally, to transform their lives, whether or not they stay married. About a third of couples break up within the first year of disclosure; another third stay together for about two years before separating; and a third commit to staying married, half of whom remain together for three or more years. Knowing spouses’ issues and stages of coping helps therapists work with them, especially those overwhelmed by anger, fear, anger, pain, or low self-esteem. Sexual addiction of some disclosing partners magnifies the impact of disclosure, and co-addiction or codependency problems of some heterosexual spouses further complicate the resolution process. To help spouses resolve disclosure issues constructively, any addiction and, if present, codependency or co-addiction problems need to be addressed first.

More and more married persons are coming-out as gay, lesbian, bisexual, or transgender, (GLBT) in the United States, as seen by the increasing number of persons who have contacted the Straight Spouse Network (SSN) following New Jersey’s Governor McGreevey’s announcement that he was “a gay

Address correspondence to Amity Buxton, 33 Linda Avenue, #2607, Oakland, CA 94611-4820. E-mail: amitypd@aol.com
American” on national television in August 2004, his wife and children beside him (New York Times, 2004). Whether the tripling of requests indicates an actual increase or simply greater visibility of SSN, the multiplying cries for help are but the tip of a phenomenon that has been widely ignored for decades. Reports about closeted married men first appeared in the literature at the time of or just after the Stonewall Inn Riot began Gay Liberation (Humphreys, 1970; L. J. Hatterer, 1970; Imielewsky, 1969). In the 30-plus years since then, a scattering of studies or autobiographies of gay, bisexual, or lesbian married or once married individuals appeared (Buxton, 2001), as well as fewer accounts of heterosexual spouses (Atwood, 1998; Auerback & Moser, 1989; Buxton, 1991, 1994, 2000, 2004b; Gochros, 1989; Grever, 2001; M. Hatterer, 1974; Hays & Samuels, 1988; Pearson, 1989; Whitehead, 1997) or about mixed-orientation or trans/nontrans couples (Allen, 1989; Boyd, 2003; Buxton, 2001, 2004a; Deabill, 1987; Kohn & Matusow, 1980; Malone, 1980; Nahos & Turley, 1979; Schneider & Schneider, 1991; Whitney, 1990; Wolf, 1985.)

The lack of a sizeable body of literature, especially examinations of straight spouses and couples, is of concern, given the large numbers of families facing a spouse’s coming out. It is estimated that up to two million gay, bisexual, and lesbian persons in the United States have ever married, based on the most recent random survey of sexual behavior (Laumann, Gagnon, Michael, & Michaels, 1994), and earlier research studies of the percentages of married gay men and lesbians (Auerback & Moser, 1989), into which figures the numbers of bisexual persons were often collapsed. No data exist on married transgender persons. Disclosures happen across all adult age groups, socioeconomic levels, locations, occupations, races, ethnic groups, and faith communities.

Those who come out or are “outed” are the ones who draw attention, as happened with Governor McGreevey and the two married gay cowboys in the recent Golden Globe award-winning film, Brokeback Mountain. The impact of their coming out on their wives was minimized. Overlooked and not understood, heterosexual spouses cope alone with a complexity of unique issues affecting them and, if they have children, the family.

Neglecting one member of a family member during a family crisis, of course, impedes everyone’s healing and recovery. A husband’s or wife’s coming out is such a crisis, not limited to only the disclosing partner’s individual trauma. Yet most family members, friends, and professionals, knowing little about these situations, are not aware of the extent of a disclosure’s impact on family members. In view of the increasing number of spouses who are coming out, more knowledge about the effects of a disclosure on heterosexual wives and husbands is critical for therapists who work with individuals or couples in those relationships, especially those who present sexual addiction problems as well as sexual orientation or gender identity issues. Helping them resolve their unique concerns will benefit everyone in their immediate and extended families as they model constructive coping and acceptance.
Providing this knowledge, this paper presents an overview of the impact of disclosure in families. Since considerable literature exists about the coming out process for gay, lesbian, bisexual persons (See, D’Augelli & Patterson, 1995), and little has been written about transgender persons, the focus here is on how heterosexual spouses of men and women process the coming out of their spouses. The following sections present their major concerns with an emphasis on sexual issues including partners’ sexual addiction, typical stages of resolving those issues, and the kind of peer and professional help that most report as being effective. More detailed examinations of issues and coping can be found in reports of studies that I conducted. (Buxton, 1991, 1994, 2000, 2001, 2004b, 2007).

The cumulative database for this account consists of self-reports of over 10,000 spouses (mostly heterosexual) with whom I have been in contact or interacted in support groups and whom I have interviewed or surveyed, or observed for periods of time since 1986. For my research studies of various samples of these individuals, I used a phenomenological approach and applied content analysis and frequency of mention techniques that revealed common issues, the most effective coping strategies, and typical patterns of behaviors, reactions, and stages of resolution.

Analysis also revealed the significant roles that the familial and societal contexts of spouses played in their perceptions of their mate’s sexual orientation or transgenderism and the coping styles with which they resolved consequences of the disclosure on them, the relationship, and their family. The influence of the family, community (mainly locale, workplace, and faith community) and culture on how spouses viewed and dealt with common problems became increasingly evident as I talked with, listened to, and read the e-mails of individuals from all over the world. Perceptions and assumptions about homosexuality, bisexuality, transgenderism, and sexuality as well as accepted ways to handle life’s vicissitudes affected their reactions and actions taken. As you read the abbreviated report below, know that there are as many ways of coping with and resolving issues as there are individuals because of these layers of cultural, familial, and societal factors, as well as differences of individual personalities and couple relationship styles.

**MAJOR ISSUES RELATED TO SEXUALITY, IDENTITY, INTEGRITY, AND BELIEF SYSTEM**

The issues that are most common to heterosexual spouses, men and women alike, arise in the same areas as those with which their GLBT partners struggled or still struggle at the time of disclosure: sexuality; marriage, children (if they are parents), identity, integrity, and belief system. The difference is that these problems do not derive from something internal to the spouses and their processing of them occurs at a later time period than that of their mates.
Their most pressing concerns, contrasted with problems faced by spouses in heterosexual marriages, relate to their sexuality, identity, integrity, and belief system. If they are dealing with a partner’s sexual addiction also, both the sexuality and addiction factors intensify all other issues.

Sexual addiction among GLBT partners is more widespread than has been assumed, according to impressions from spouse reports on various face-to-face and online support groups. This reported addictive behavior is with same-gender individuals in person or on Internet pornography sites, chat rooms, and other cyber venues, a virtual environment that has grown in size in scope since the World Wide Web was launched about 15 years ago (Carnes, 2001b). In my survey of spouses in marriages that endure after a gay or bisexual husband’s disclosure, one of the most frequently mentioned obstacles to the couples’ staying together was time that husbands spent on the Internet (Buxton, 2001).

Diagnosing this addiction and recognizing the tell-tale signs that Carnes lists (2001a) is hard, because of the varying degrees of the strength of sexual libido from person to person, the unwillingness of many partners to admit having such an illness, the frenzy of closeted, forbidden sexual activity with people of the same gender, and the views of some therapists that promiscuous behavior is characteristic of all gay or bisexual men and therefore is not an addiction. Despite that difficulty, identifying sexual addiction and learning how to manage it needs to precede any attempt to deal with sexual orientation issues. Following this order assures both spouses of a more realistic basis for working through their issues related to the coming out.

Problems arising for the heterosexual spouses when their husbands or wives come out are similar in some respects to concerns of wives or husbands in heterosexual marriages when one of them has a romantic or sexual extramarital affair. However, there are striking differences because of the unexpected revelation of a same-sex attraction, of a different sexual orientation or gender identity than what they assumed, and, for many, of extramarital sex with people of the same gender.

Issues in the first three areas, sexuality, marriage, and children, emerge in day-to-day living during the first year after the coming out and are manifested in their sense of sexual rejection, threat to the marriage, and worries about the effects on their children. Discovering that their husband or wife is attracted to others of the same gender makes them question the quality and power of their own sexuality as women and men, often blaming themselves for being sexually inadequate or feeling rejected as a man or a woman. They also wonder about the consequences of the newly revealed same-sex attraction or gender identity on their marital lovemaking. In addition, they fear that their children may be hurt by antigay comments or experiences in school, in the neighborhood, or in their faith community.

The feeling of sexual rejection as a man or a woman is unique to heterosexual spouses in this situation and requires a long time of reflection,
peer support, reading, and experience before they rediscover their own sexual core and strong self-image as a man or woman, a process discussed at length below. In contrast, concerns about the future of the marriage and effects of having a GLBT parent on their children require many of the same resolution strategies used effectively by spouses in problem heterosexual marriages, such as honest communication between partners and listening to children’s concerns.

About a third of post-disclosure couples commit to trying to make their marriages work under the new circumstances, and roughly half of them stay together for three years or more. They jointly work out diverse ways of maintaining the marriage including monogamy, open marriage, or closed loop (the GLBT spouse has a relationship with another married person of the same gender). Another third of the these couples stay together to figure out what is best for them and the family for two to three years until they separate or divorce. The remaining third end their marriages within the first year.

Couples with a sexually addicted partner have an added problem to resolve as they tackle the challenge to their marriage. Schneider and Schneider (1999) surveyed 142 married persons who were sex addicts or co-addicts, of which 45 in 25 marriages included husbands who had had sexual relationships with men. These men viewed their behavior as an addiction and learned to take responsibility to avoid situations where they might act on their addiction. They wanted to change their behavior because it was addictive, not for the purpose of meeting their wives’ expectations or demands. In turn, their wives, understanding that their husbands’ extramarital sexual activity was an addiction and not a choice, and that therefore it could be cured, accepted and worked with their husbands as they participated in addiction programs. They were stressed by their partners’ struggle to manage the addiction, but not by fears that they might fall in love with someone of the same gender.

Worries about the impact of the disclosure on their children are usually worse than the reality. For most children, divorce is the greater problem or just as unsettling. They react in different ways when they hear or find out that their parent is gay, lesbian, bisexual, or transgender. The most common reactions are silence, questions, anger, tears, or fear. As they process the information, school age children usually encounter antigay comments and behaviors from classmates, neighbors, or people in their faith community, especially those living in conservative communities or attending religious-based schools. Adolescents have the most difficult time dealing with the new information since they, too, are coping with changes in their own sexuality, identity, and life plans. (Buxton, 1994, 1999; Garner, 2004; Hart, 2000; Howie & Samuels, 2000; Lynch, 1993; Snow, 2004). Some act out with the straight parent or at school as they try to handle conflicting emotions. Parents typically help school-age children handle these challenges by listening and
providing fact-based information. With supportive parents who understand their concerns and peers found through Children of Gays and Lesbians Everywhere (COLAGE), Families Like Mine, and SSN, many children resolve their issues by the time they are in late high school or college. By then, a number express pride in their gay parent and gradually understand the effects of the experience on their straight parent. (Garner, 2004) All continue to love their GLBT parent.

In the sexuality realm, most issues that arise for straight wives and husbands differ from those of partners in troubled heterosexual relationships, and all of their sexual concerns are exacerbated if their husband or wife is sexually addicted as well. For partners of gay men or lesbians, the disclosure makes them feel sexually inadequate and, for many, a confirmation of self-blame as being sexually inadequate prior to the disclosure, when they felt something was missing, a real distancing, or a lack of passion. Most are angry at being short-changed, losing years of sexual pleasure, or becoming dysfunctional. Wives of gay men fear they have been exposed to an STD or AIDS; many are enraged that they were put at risk and now need to be tested. Some are infected. Mates of bisexuals, though still sexually attractive to their husbands or wives, are anxious that their partners will prefer lovemaking with someone of same gender.

Feeling rejected in what many see as the central element of their marriage, some spouses question their own orientation, identity, and womanhood or manhood. One wife thought she had fallen in love with her adult education teacher, until she realized she was simply starved for physical touch. Another, who continued to have sex with her husband after he came out in an open marriage situation, became pregnant but then miscarried. To her, that proved she really was not an authentic woman. Similarly, a husband in his forties, wondering if his wife left him for a bisexual woman because he was not enough of a man, joined an Outward Bound expedition of much younger men and then trained to become a triathlete and ran the Iron Man to prove to himself that he truly was a man.

Many ask themselves, “Can I date again? Will I be found to be missing something in the sex department? Can I make love?” Some wonder what straight persons want sexually from the opposite gender. Some women who start dating are startled to have men respond to their femaleness or flirty clothes and to feel a man’s passion.

Women whose husbands are sexually addicted as well feel continuous rejection. One, for example, suffered as her husband kept seeing a special man until she decided to meditate under the scroll given her by her Buddhist grandfather for three days, while her husband panicked that she was contemplating suicide. Instead, it was a way to release her suffering. In her Asian culture, going to a professional counselor is a sign of character weakness. After her husband enrolled in a sex addiction program, he only socialized with gay and bisexual men but she prepared to divorce him because he
was not there for her. Before she could leave, however, he contracted AIDS. She stayed to care for him, during which process they achieved a spiritual reconciliation before he died.

Lack of emotional intimacy accompanies the sense of rejection and intensifies the loss of sexual connection with their partners. Continued rejection or diminished emotional closeness before and after disclosure is common and creates a kind of sexual starvation that makes some become promiscuous, close to addictive, for a period after disclosure or divorce. A mother, after divorcing her gay husband, did just that, going out in the evening during the week and leaving her twelve-year-old daughter at home to be a surrogate mother for her younger sister. In contrast, her gay father and his partner provided the girl a secure adult-led home with a curfew.

Sexual concerns also run through the more profound issues that emerge slowly for straight spouses during the second year after their partners come out: a crisis of identity, integrity, and belief system. Many accommodated so much to their husbands’ or wives’ needs that they lost the sense of who they were. Feelings of sexual inadequacy often feed their low self-esteem and lack of self-confidence and decrease their sense of self worth. Those married to mates who cross dress or transition to the other gender face the challenge of their own future identity, perhaps being seen as the same gender as their mates and therefore labeled lesbian or gay. Some spouses plummet to an absence of any sense of self. Jane, the woman who lost her baby, proving she was therefore not enough of a woman, also lost her identity. In a therapy group during a Women’s Liberation week, she was paired with another woman in an exercise designed to discover one’s inner self. They were to ask each other who they were. Each of the three times the other woman asked the question, she answered, “I don’t know.” It took her two more years in a retreat setting to forge an answer. To realize that identity, she became a minister specializing in homosexuality and spirituality.

Codependence characterizes many straight spouses, whether or not sexual addiction is involved, preventing them from getting in touch with their core being. Some therefore cling to what is left of the past or to unrealistic hopes. A number of husbands, for instance, losing the sexual connection to or emotional closeness with their wives, seek and lose a series of women upon whom they shower gifts and with whom they imagine an idealistic future. Despite the drain on their psychic resources, they need to be needed, a codependency that grows to be more than sexual. Wives who want to keep the marriage and the family together typically ignore problems related to their husband’s coming out and continued lying. One, whose husband kept breaking his vow not to see gay men, kept on cheerfully running the household of four children under the age of eight. To keep the family intact, she bent to her husband’s behavior with no complaints. Whether his continued sex with other men despite vowing not to do so stemmed from an addiction
or was just a way to satisfy the sexuality he had repressed because of his
Latino Catholic culture, that activity took him away from the family.

This disconnect between reality and behavior, stemming from not op-
erating from one’s core identity, impacts children. They can sense hidden
anger and pain. Two of the children of the cheerful woman described above
attempted suicide because, their psychiatrist said, one was confused by the
contradiction of his mother’s happy face and the actual tension in the house-
hold and the other was angry at her father’s lying, an emotion she never
felt comfortable to express. By then the mother no longer denied the truth,
followed her fantasy of an intact family, or bent her behavior to adapt to her
husband’s. Having accepted the reality and released her anger, she gained
her own autonomy and was able to help the children understand her pain
and the damage that his actions—not his orientation—caused.

For GLBT partners who are addicted to sex, their attendant shame, low
esteem, and guilt are compounded and that negativity is often projected onto
their wives and husbands in the form of blaming them for their addictive
behavior. In turn, some straight spouses become co-addicts, going into their
partners’ closet, daring to tell no one the secret. Others who start to share
with friends or family find few who understand and many who respond
with questions about the spouses’ role in their partners’ being in the closet
so long, such as, “How could you not know he/she was gay?” As a result,
many spouses go further into hiding, enabling their partners to pursue their
addiction and validating their own feelings of inadequacy and incompetence.
Therapists who do not believe that sexual addiction exists reinforce this
denial of the core problem by leaving it unaddressed.

Like identity issues, concerns about deception cause pain on many lev-
els. Just as GLBT partners had to find their own truth before they dared
come out, so do their spouses. Having their partners’ core truth hidden
from them by the very persons who presumably trusted them the most is
viewed not only as a betrayal but also as an act that shatters their moral
compass and makes them question their own integrity. No matter how far
along their partners were when they disclosed their true orientation or gen-
der identity, spouses feel duped and bereft of a credible measure of what
is true or false, right or wrong. Most wonder what was real, imagined, or a
charade in their marriage and no longer trust their partners’ word or their
own judgment. Many extend distrust to anyone’s word, and those who di-
vorce fear dating. If their partners are also sexually addicted, they question
the validity of the love factor in their marital sex. Spouses raised to be-
lieve that homosexual behavior is immoral or a manifestation of personality
disorder or that transgenderism is a similar illness are conflicted between
that belief and the fact that this GLBT person is their partner and their chil-
dren’s parent. For many African Americans, condemnation of homosexual-
ity in their church communities and denial of the presence of closeted gay
men in their congregations, make it difficult to find validation of their pain
or assistance in discerning moral values in the very place they expect to find it.

Cognitively, most spouses are confounded by the apparent contradictions between being gay or lesbian and married, the non-dualism of bisexuality, and the biology of transgenderism. These challenges mirror those that confronted or still confront their partners. In addition, most feel conflicted between competing values: the family unit versus the marriage; support of one’s spouse or fidelity to marriage vows. The mother of the four children described earlier reflected one evening about what she could do about her husband’s continued extramarital activities. She wondered whether she might take an outside lover, too. “No,” she thought, “that would be cheating,” and suddenly realized that that was what her husband was doing and she had been accommodating to his behavior because of her “fantasy” that she could keep the family together. Regardless of the cause of his obsessive behavior, his lying about it was the final straw that caused her to divorce and to enroll in a Twelve Step Co-Dependents Anonymous (CODA) program.

In addition to shattering spouses’ core identity and integrity, the disclosure destroys the belief system that provided them a direction for living. Previously held assumptions about gender, marriage, and the future are destroyed. Most feel disoriented, uprooted, and without purpose, fearing they may never find meaning in their lives again. Despite reading, studying, or asking questions of their partners and other spouses, many remain confused for months as to how or why their partner’s orientation or gender identity suddenly became manifest. A number experience a crisis of faith and either leave their church or temple or seek ways to strengthen their faith through readings and workshops. One wife in her mid-fifties voraciously read philosophies from the Middle East and Asia to gain perspective on her suffering and the meaning of love and truth. A young husband who was a minister was asked to leave his church because his wife was a lesbian. He decided to reconstitute his life as a spiritual consultant, married a woman from another English-speaking country, and now lives in that totally new culture.

**COPING: FROM TRAUMA TO TRANSFORMATION**

Most spouses take three to six years to work through these issues, progressing from initial shock, confusion, and pain to eventual transformation. Each issue tackled raises one or more emotions that slowly exhaust many husbands and wives alike. Most common are pain from rejection, anger at betrayal, grief over losses, and fear of the future. Several of these emotions often converge at turning points in their coping, especially when they face the reality of the changes wrought by the disclosure; measure the impact of the disclosure on their marriage and themselves, acknowledge and
accept the revealed sexual orientation or gender identity, and finally let go of their previously held assumptions and expectations to look forward rather than back. These turning points are often the hardest steps to take, because of the powerful feelings that prevent action that will change the status quo.

The steps forward begin with the first challenge of facing the reality of the situation, rather than denying or disbelieving the disclosed information about their partners’ orientation of gender identity. In discerning what is real, a major question is whether their GLBT partner’s desire and actions to have sex with the same gender is sexual addiction or the result of opening up feelings and desires that have been suppressed and repressed sometimes for years, leading both GLBT and straight spouse to compare post-disclosure activity to acting like a kid in a candy shop. Promiscuous behavior does not necessarily indicate addiction, nor does cross-dressing always meet the criteria of obsession or loss of control. Either set of actions may stem instead from the core orientation or identity of the individual The aura of the “forbidden,” infatuation with the first “trick,” effects of drugs or alcohol, the climate of gay bars, baths, or health clubs, or cyber sex rooms all present physical and sensual thrills that can be motivators.

Most heterosexual spouses gradually figure out that they cannot change their partners back to what they were and that they have to accept the revealed and developing reality or wander in confusion, continually hurt by or isolated from their partner. Up to this point, they have been in reactive mode. Many neglected their physical, mental, emotional, and spiritual well-being as they dealt with day-to-day consequences of the coming out and tried to figure out what was going on with their partners. Just today a wife called, nine weeks after discovering her husband’s Internet activities with gay porn. He denied he was gay and sent her to a therapist because she was crazy to think so. After recounting several bizarre events, she added, “I have to figure out what he wants to be.”

Once spouses acknowledge and accept the new circumstances and let go of hope or desire to know the bottom line, healing begins. One senses a move in this direction when they ask, “What about me?” signaling a need to be heard, to take responsibility for their own decisions, and to develop autonomy, whether or not they stay married.

As they heal, they become more proactive, taking steps to restore health of their body, mind, emotions, and spirit. Since their pre-disclosure life cannot be rebuilt, they need to reconfigure their identity, integrity, and belief system out of the pieces left of the past, the reality of the present, and buried needs, wants, and values that most reflect who they are. Slowly, they forge a new philosophy to govern their lives out of these elements.

Clarifying the needs, interests, and values that comprise their identity enables them to delineate boundaries between them and their partners. They thereby gain an equal say in what happens in the relationship, a huge step
When a Spouse Comes Out

for those who discover they are codependent. A spouse at this stage recently wrote me, “What I’m learning now is the difference between kind and co-dependent . . . and that does mean emotional distance.” Working on integrity issues, they learn how to trust their own instincts and judgments and, in time, others’ words. Finally, spouses discern their own moral values, set priorities and future goals, and find or create something of meaning beyond themselves in their lives, be it nature or music, dance or a spiritual discipline, or becoming a triathlete.

Through this process, they enlarge their perspective to view their situation more objectively and forge a purpose for living, growing, and achieving greater understanding about themselves, their partners, and life in general. In effect, they recast their belief system, a major goal that many spouses intuited early on. Last year, I met with the wife of a prominent figure in her community who had come out publicly a few weeks earlier. As she talked, stricken with shock, she kept repeating “I’ll be all right if I can find the meaning in this.”

Pain, anger, fear, or grief or some combination of these emotions arises during each of these stages. Professional help to process those feelings constructively is critical lest they become mired in a victim, vengeful, despairing, or suicidal mode that prevents constructive action. Most eventually, reconfigure their self-concept, strengthen their sense of self-worth, reconstruct their moral compass, and create a realistic belief system. With that shift, their courage is rekindled to take action that moves them toward transformation, the final and continuing step of their journey. Becoming autonomous, integrated persons with purpose, they trust again and work jointly with their partners to create a positive relationship whether or not they stay married.

PEER SUPPORT AND PROFESSIONAL HELP

Peer support in a safe place seems to provide the experiential and continued validation that makes it easier for spouses to cope, to discern reality, to gain perspective and progress. Through SSN, they can find that kind of support in face-to-face groups, one-on-one personal contact, online groups, phone calls, letters, and e-mails, in which spouses share, encourage, and offer experience-based suggestions and examples of coping strategies that worked for them and resolved their issues. Here they can vent without hurting their spouses and find feedback to evaluate their reactions and decisions. SSN also offers research-based information about homosexuality, bisexuality, transgenderism, and mixed-orientation marriages to help guide their personal work.

A number find therapy essential for working on personal problems such as low self-esteem, lack of self-confidence, inability to act proactively, and/or debilitating fear, rage, pain, sorrow, or depression. The few
therapists whom spouses and couples find most useful in helping resolve disclose issues listen without preconceptions or bias about them, their GLBT spouses, or mixed-orientation marriages, and then help them to clarify their needs, wants, and values; to develop productive relationship strategies, especially skills of communication and mutual respect; and to act as responsible parents and models for their children. Least helpful, according to the responses to several surveys I conducted, are counselors who show bias toward one or the other spouses because of their attitudes about sexual orientation (pro or con) or transgenderism or who tell spouses or couples that divorce is the only solution after a husband or wife comes out (Buxton, in press).

Twelve-step programs are imperative if sexual addiction is involved. Both spouses profit from them, learning how to deal better with addiction, their personal problems, and the couple relationship. One woman supported her gay husband’s working through his addiction in a twelve-step program and finding a same-gender partner. Divorced, the three of them formed a strong friendship. While there are several sexual addiction programs for addicted individuals, Sexual Compulsives Anonymous (SCA) is geared just for gay or bisexual men, many of whom feel uncomfortable talking about their activities with the heterosexual men in other groups.

Straight spouses who are codependent or co-addictive have found tremendous assistance in Twelve Step Programs like CODA, Co-Dependants of Sexual Addicts Anonymous (COSA), or S-Anon through these sessions, many have learned how to let their partners deal with their issues and focus on what they themselves need. COSA groups have aided wives to understand that their partners have an illness to manage. They then become less fearful that their partners might leave for love or intimacy from someone of the same gender.

One wife, who found out about her husband’s addiction and same-sex attraction after 20 years of marriage, stayed with him during and after his learning how to control his addiction. Before tackling the orientation and the consequent relationship problems, both enrolled in Twelve Step programs and individually sought therapists to guide them in determining their separate needs and goals. In the process, she developed her own strengths and became an effective peer support group leader for SSN. She described the therapy experience over the phone: “We each answered the questions: Who am I? Where do I want to go? And with whom do I want to go there? Going back even to my family of origin to understand who I really was, I found I needed monogamy and loved him enough to let him go and find a partner if he didn’t want that kind of marriage. He said he loved me enough to forego an outside relationship but he needed to express himself sexually in healthy ways. And so he does with various gay and bisexual men’s group in our area.”
DISCUSSION

When a spouse comes out as gay, lesbian, bisexual, or transgender, the disclosure is a family matter. The disclosing partners usually receive considerable attention, while the impact on the heterosexual spouses is overlooked. Their situation minimized, most cope alone. Some eventually find peer support through SSN. The most common and unique issues are sexual rejection, challenge to the marriage, concern for their children, and a crisis of identity, integrity, and belief system. Resolving the most unique of these issues (sexuality, identity, integrity, and belief system) typically takes from three to six years. Sexual addiction problems complicate the impact of these concerns and coping strategies. Knowing the unique issues these spouses face and the stages of coping with them helps therapists work with them in severe problem areas.

Resolving their concerns progresses from initial shock and confusion, through facing and accepting reality, to reconfiguring their identity, moral compass, and system of beliefs, and finally to transforming their lives, whether or not they stay married. A third of the couples break up within the first year after disclosure. Another third stay together for about two years before deciding it is best to separate. The final third commit to maintaining their marriages and half of them remain together for three years or more.

Sexual addiction of the partners magnifies the impact of their disclosure and makes problems more complex and challenging since that obsessive behavior, like that which derives from the partners’ sexual orientation and gender identity, is directed toward the partners’ fulfillment. The straight spouses do not initiate the crisis nor are they the intended target. The resultant sense of powerlessness and disconnect exacerbates effects of the coming out, especially their sense of sexual inadequacy, deteriorated self-image and self-worth, questionable role in marital lovemaking, distrust in their partner’s word and their own judgment, and loss of purpose or meaning in their lives.

Whether or not GLBT husbands or wives are sexually addicted, repeated encounters outside the marriage weaken the marital relationship. If they continue to lie about them, trust is further eroded. While addiction can be treated in 12 Step programs or therapies that help GLBT partners to manage its power and spouses to understand and accept the nature of the addiction, the input of both spouses is needed to resolve the issues raised arise for each and both of them by the disclosure of a different sexual orientation or gender. Honest communication, mutual respect and support, and taking time are essential for trust to be rebuilt and the relationship mended so that the two spouses can decide jointly and equally what action is best for them to take.
I hope that this brief account may aid counselors in understanding more about the experience and perspective of heterosexual spouses facing a partner's disclosure with or without sexual addiction problems. Both peer support and professional guidance are needed for them to learn and grow from the aftermath of the disclosure. Support and shared experience from peers is vital for them to forge ways to resolve overwhelming concerns and to grow in confidence and wisdom. At the same time, skilled counseling is invaluable for assisting them to discern personal issues that keep them from progressing, manage overwhelming emotions, understand to what degree, if any, sexual addiction plays a role in their partner's behavior, and, most important, heal their wounded psyche and spirit regardless of the outcome of the marriage itself. Learning to be true to themselves and expanding their worldview to acknowledge the breadth of personal and sexual differences will benefit them and their families, their communities and, in time, the whole society.

REFERENCES


Copyright of Sexual Addiction & Compulsivity is the property of Routledge and its content may not be copied or emailed to multiple sites or posted to a listserv without the copyright holder's express written permission. However, users may print, download, or email articles for individual use.