



# Queering Your Therapy Practice

Queer Theory, Narrative Therapy, and  
Imagining New Identities

Julie Tilsen



ROUTLEDGE  


# QUEERING YOUR THERAPY PRACTICE

*Queering Your Therapy Practice: Queer Theory, Narrative Therapy, and Imagining New Identities* is the first practice-based book for therapists that presents queer theory and narrative therapy as praxis allies.

This book offers fresh, hopeful resources for therapists committed to culturally responsive work with queer and trans people, and the important others in their lives. It features clinical vignettes from the author's practice that bring to life the application of queer theory through the practice of narrative therapy and serve as teaching tools for the specific concepts and practices highlighted in individual, relational, and family therapy contexts. The text also weaves in questions for reflection and discussion, and Q-tips summarizing key points and practices.

A practical resource for both seasoned therapists and students, *Queering Your Therapy Practice* demonstrates how therapeutic practice can be informed, improved, and deepened by queer theory.

**Julie Tilsen**, PhD (she/her/hers), is a therapist, consultant, and trainer, and the author of *Narrative Approaches to Youth Work* and *Therapeutic Conversations with Queer Youth*. She is based in the USA.



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Queer Theory, Narrative Therapy, and  
Imagining New Identities

*Julie Tilsen*

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# FOREWORD

Stories about us have already been told, even before we take our first breath into this world. There are stories about how we came to exist, whether we will be welcomed warmly or not, and stories about expectations that our caregivers have of who we might become. Our names sometimes carry the stories of those who have gone before in our own family lines. We might even share the name of another older, living family member. We come into the world surrounded by stories, carrying their weight, being shaped by them until we are old enough to tell our own stories and to evaluate the stories we were given to decide what still fits and what needs to be composted and left behind.

These stories are not just familial and personal; they are also cultural, historical, and social. They depend on our geographical location; the language(s) we are born into; the social positions our family members and we occupy; and the ways our bodies are racialized and categorized in relation to class, standards of health, and more. Stories have power, and, some would say, they are the currency of therapy. In *Queering Your Therapy Practice*, Julie Tilsen guides us to understand not only why stories are important but also how language shapes us and our relationships. She does not shy away from a critical analysis of the power of dominant discourses. Julie tackles the gargantuan task of making accessible complex



and fluid theoretical ideas, such as queer theory and narrative therapy, so that they can be applied to our everyday practices as clinicians.

Even though I am a writer, as well as a family therapist, sex therapist, and clinical supervisor, I struggled to find the words to describe just how important and groundbreaking this book is. Julie takes several matters that are close to my heart—such as systemic thinking, queer theories, narrative practices, and working with marginalized clients—and weaves them seamlessly into a book that should be recommended reading for anyone who has ever sat with a client or anyone who is planning on sitting with a client. In fact, even though the book is aimed at colleagues within the mental health field, the tapestry woven so expertly in this book would also benefit educators and allied health professionals. Hopefully, you can understand why it has been so challenging for me to find words to describe how vital this book is to our field.

To better illustrate why I believe this book is such a vital contribution to the therapeutic field, let me get personal for a few moments. One of the stories I was born into five decades ago is that I was assigned female at birth and assumed to be straight in a predominantly Catholic country. I had no words or frameworks for many of my feelings and experiences growing up, and I started to find them in another language after I had migrated away from everything familiar: land, family, friends, and community. It was through geographical and linguistic displacement that I came to name myself as bi, trans, queer, and nonbinary. With time, I also came to understand my story as one of displacement from home, in great part due to my own trans and queer identities. It would take books to unpack all of these stories; so, for now, suffice it to say that several of these stories included painful encounters with clinical providers and, later, with educators and clinical supervisors.

The first time I ever sought out counseling support, in fact, I was told that maybe, if I were willing to take on more feminine endeavors, such as knitting or baking, *maybe* I would not have so much conflict with one of the cis, white, Anglo professors in my PhD program. At times, I believe it is a genuine miracle that I ever sought therapeutic support again. Or maybe it was just a desperate need for support and understanding! That counselor needed this book. She needed to understand how patriarchy and gender were impacting me. She needed to uncouple gender from wonderful activities, such as knitting and baking, which I very much



enjoy, by the way. If she had had the skills to invite me into queering her own and my understanding of what was happening in my life, I would have been spared a few years of strife! Dr. Tilsen could have shown her how a praxis that combines queer theories and narrative therapy can be liberatory and far more ethical than what happened to me in that therapy room in the mid-1990s.

Not long after that, I found my way to what Julie calls the *audacity of queerness*, as I embraced and embodied my intersecting identities. However, when I started my education to become a therapist, the power of normative discourses continued to weigh heavily on me. I was told that I would never be a therapist if I did not want to train in a psychodynamic approach. Even when I chose a systemic-oriented training program with a significant narrative therapy component, there was not much space for queerness, let alone a trans identity. Dominant discourse dictates that people like me were never meant to be the therapist in the room, only the client. Yet, even though my program was not as ready for all the intersections I embodied, narrative therapy showed me the possibility of developing a counter narrative, a new story, in which I could have the audacity to be queer, trans, disabled, an immigrant... and a therapist. In fact, I became so audacious, I now hold multiple specialty certifications, serve as a clinical supervisor, and contribute to scholarship in our field.

This is why I want every therapist, psychologist, counselor, psychiatrist, and educator in these fields and beyond to read *Queering Your Therapy Practice*. This is the book I wanted every one of my past therapists to have read, the book I wanted to read as a student, and the book I will now have the pleasure of recommending to each student and supervisee I come into contact with. Thank you for picking up this book and choosing to enrich your clinical practice. I know that whether you are a new or seasoned clinician, familiar with queer theories or not, competent in narrative therapy or not, there is a precious thread in this book for you, a thread that you and all your clients will benefit from.

Happy reading.

Alex Iantaffi, PhD, MS, SEP, CST, LMFT  
 Author of *How to Understand Your  
 Gender, Life Isn't Binary, and Gender Trauma*

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*Gratitude is when memory is stored in the heart and not in the mind.* — Lionel Hampton

My heart is filled with memories of so many who helped me out with this book through their unforgettable generosity:

To the Dakota and Ojibwe peoples, upon whose stolen lands I live and write, I acknowledge your ongoing stewardship and protection of the land.

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To all those who, for 30 years, have invited me into your lives as your therapist, supervisor, or teacher, thank you for your grace, patience, and trust. Your stories live in my heart as invitations to your wisdom fostered through humility and struggle; your fierce queerness, embodied as resistance, humor, and undeterred resolve; and your hope and wonderment at what *could be*. My time with each of you is a gift of immeasurable value.

To Lauri, "thank you" doesn't do the work here that needs to be done to convey the truth that there is no book without you. Let's ride this thing out together, my love.

# INTRODUCTION

## Preparing a Path for the Unicorn

Mic, a 13-year-old expert on all things Harry Potter, sighed, shook their<sup>1</sup> head, looked at me through tears, and said, “You know, it’s not like everyone at school attends the GSA.<sup>2</sup> Not everyone learns about the gender unicorn, not even all the teachers. I’m tired of having to explain all the time. I don’t even need them to agree, or even understand everything, but can’t they just respect what I tell them? It just sucks.”

Mic is a white, gender non-binary young person frustrated with the effects of living in a world organized by the gender binary. As I listen to their hurt and exasperation, a cartoon unicorn trots across the marquee of my mind’s eye.

“Mic, I’m really sorry that this sucks so much. I get that it’s really hard, and you’re doing everything you can.” I paused. “I have a goofy question. Is it OK to ask now, or is there more you wanted to say about how much this all sucks?”

“Your goofy questions usually help when things suck, so OK, go ahead.”

“Mic, if the gender unicorn were to trot in here, burping rainbows and throwing glitter everywhere, and it made the idea of male and female, gay and straight, and all the rules and assumptions that go with those things disappear, what would happen? What would that make possible?”

I watch a smile slowly crawl across Mic's face, even as tears make tracks to the corners of their mouth.

"If the gender unicorn came to save us, it would be amazing. People, everyone, would be freer."

I ask, "Can you tell me more? What would people be freer to do? And what would they be freer from?"

Mic raises their eyebrows and crosses their legs under themselves on the loveseat, as if settling in before telling a story. "Well, to begin with, freer from all the stuff that goes with being either a boy or a girl, and then the assumptions of how to be either of those. And I think freer to do things, too, like what kinds of activities they like, or clothes and hair. And people will be free to not be mean and bully people about gender or who they like, because it wouldn't be a thing to bully people about anymore. I wouldn't have to worry about who I am and what people will think. I'd be freer to be a better friend."

*Queering Your Therapy Practice* is a book about having a therapy practice that, like Mic, is at once practical, full of wonder, and attentive to people's lived experience, yet ready to take flight into the imaginary. This is a practice that attends to the pain of injustice, while envisioning futures that are just and hope-full. It acknowledges the effects of sexual and gender-based oppression and violence. It supports courageous acts of resistance. It conjures a kind of magic in its capacity to create new and previously unimagined possibilities.

I use "magic" as Steve deShazer (1994) did when he borrowed Freud's words (1959) for the title of his book *Words Were Originally Magic*. This is the "magic" that constructs identities and creates worlds of possibilities through purpose-full conversations. It's the magic that led Mic and me to conjure visions of a Queertopia, a place where—with or without unicorns—Mic wouldn't need to endlessly explain themselves. Instead, they would be free to be the kind of friend they want to be. This is the magic of language: *Abacadabra*, a word of Aramaic origin, translates to "I will create as I speak." Indeed, language, as a social practice, holds the power to make worlds.

Narrative therapy creates conversational pathways to possibilities. Earnest curiosity and the art of creative, critical questioning provide alternative routes to life-saving identities for queer and trans people as they find their way through the ever-shifting world of gender and sexuality. To support people on their journey through this emergent identity-scape, narrative therapy needs a conceptual compass—one that accounts

for and reflects the lived experiences of people who take up sexual and gender identities that never point straight north.

I knew that, as a therapist, I needed a new compass. In the early 2000s, queer and trans people (particularly youth and young adults) started showing up in my practice more than ever before. As an “out” lesbian with years of experience doing family therapy across multiple levels of care, I’d always had a fair number of LGB clients. But what was different was why people were seeking my services. Increasingly, people were describing experiences—and feelings—about who they were that they could not account for with the usual identity categories and the language available to them in our standard discourse.

Sometimes this meant that people wanted to reject identity categories based on gender and sexuality altogether. These people often asked me, “Why should who I’m attracted to and have sex with require me to claim an identity?” They rejected the notion that who you *do* (or want to do) determines who you *are*. Sometimes it meant that people’s confidence in the stability of their identity began to waver; they experienced a flexibility or fluidity in their perception of who they *were*. Their sexual interests and their sense of gender also fluctuated, in an experience of almost-constant liminality. What’s the category—or the language—that we use for that?

Sometimes, it meant that people couldn’t find an identity category that fit them at all. They identified with no language, no models, no stories of others who came before them. Or, if they found a category, it came in a stigmatizing and lonely world of otherness.

To transgender and nonbinary people, not seeing or hearing themselves reflected—or accounted for—in our language practices<sup>3</sup> meant that their legitimacy was suspect.

Often I share with people one of my favorite Wittgenstein quotes, whose resonance and pertinence can hardly be overstated: “*The limits of my language mean the limits of my world*” (Wittgenstein, 1953).

The words associated with sexuality, gender, and identity are constantly changing and emerging. Iantaffi and Barker (2018) point to “an explosion of words” relating to gender alone. People and communities create words to include—and make visible—ways of being in the world that had previously gone un-languaged (e.g., ACE, ARO, and nonbinary).

We also reject terminology that has medicalized origins or pathologizing implications (e.g., hermaphrodite, homosexual, and transsexual).

Also, the meanings of words can change over time. The meaning and use of the word *queer* has shifted several times over the last century or so (I address this in Chapter 1). The words we use are not only time contingent; they're also place contingent. That is, the terminology and phraseology used in one locale are not necessarily the same that are used in another.

So it's incredibly important to always check in with people about the language they use and the meanings they assign—even if you are part of their community, and especially if you're not.

One more thing: I almost included a glossary for this book, but realized that it's antithetical to everything I just said in the paragraphs above. So, rather than provide a list of definitions that will be, by the time of your reading, partly obsolete and partly incomplete, I encourage you to do your due diligence in checking in with each person you meet.

As I witnessed people's stories of becoming and their searches for belonging, I also heard their accounts of less-than-helpful and, too often, hurtful experiences with other therapists. My clients heard things like, "You have to be male or female. You can't be neither, both, or something else." Some were told that they were "in denial" if they resisted claiming a specific gender identity. When they told therapists of their own uncertainties, some therapists declared their identities for them ("You're gay, of course," etc.). They shared stories of humiliation and shame in which some of these therapists subtly, and some not-so-subtly, expressed their disgust with them.

When the mom of a 14-year-old trans youth told me that I was "the best therapist we've seen, because you don't have an ish reaction," I knew I needed more tools in my practice repertoire in order to provide the most meaningful and helpful service possible. Not denying the dignity and agency of people is a pretty low bar, but evidently some therapists were failing to clear it. I also knew that I was at risk of doing harm if I didn't cultivate understandings and practices that honored—and were responsive to—this terrain that people were traversing.

After that session with the mom and her child, I went searching for concepts and practices that would help me not merely avoid doing harm, but also increase the likelihood that I would "make a difference that makes a difference" (Bateson, 1972).



## Queer Theory and Narrative Therapy Hook Up

Queer theory<sup>4</sup> (Butler, 1990, 1993; Duggan, 2002; Foucault, 1978; Halberstam, 1998; Rubin, 1984; Sedgwick, 1990, 1993; Warner, 1993, 1999) is a set of critical practices influenced by social construction, feminist theory, and post-structuralism. Queer theory focuses on questioning (through deconstruction) assumptions about identity; power relations; social norms and practices; and, in particular, gender, sexuality, and desire.

I found in queer theory not only the compass I needed to wander far off the beaten path of normativity, but also an ideal praxis ally for narrative therapy. Because the two share foundations in social construction and post-structuralism, and because they both reject the notions of interiority and an essential self, they go together like glitter and rainbows. Furthermore, both rely extensively on deconstruction (Derrida, 1967.)

Queer theory provided the ideas and language my practice needed, and narrative therapy put queer theory into action in meaningful ways. Since then, this alliance has been central not only to my conversations with clients, but also to a self-reflexive practice of entertaining doubt about my certainties.

These ideas are conceptual resources for me to draw on; they are not the stuff of my conversations. They are like apps I keep open in the back of my head, not the screen I share with people in conversation. Narrative therapy, especially, helps me co-create the conversational terrain I travel with clients, one that reflects people's lives, both lived and aspirational.

Queer theory and narrative therapy serve as a praxis that is indispensable in my work with people like Mic. I believe that you—and your clients—will find the combination to be an invaluable asset as well.

This book is for therapists who know they need to do *something* differently in their work with queer and trans people, even if they're not sure what that would be. It's also for therapists who have met some dialogical dead ends when in conversation with clients (or anyone) about gender, sexuality, relationships, and identity. And it's also for therapists who are familiar with queer theory, or who have found it to be personally meaningful, but who have not been sure how to put it to work in therapeutic conversations.

If you're a therapist who is competent in narrative therapy, this book offers a host of critical concepts and practical principles for integrating

queer theory into your practice. It is likely that the ideas presented here will challenge you, at least a bit. I've found the stronger a normative discourse is in your worldview, the more you feel challenged. But don't worry, I'll provide you with plenty of ways to unpack and create some discursive space between you and those tenacious discourses.

If you are a practitioner new to narrative therapy, I present core tenets and practices of the approach so that you have helpful handholds as you read. The vignettes, transcripts, and reflexive questions will make narrative therapy visible to you, and you will see the praxis relationship shared by queer theory and narrative practice. Post-structural and queer theories are notoriously daunting in their density, so I do my best to make them both accessible and practical.

### **Queering Your Practice**

This book is my invitation to you to queer your practice. Although *queer* is often used as an adjective (“he’s a queer man”) and a noun (“this event is for queers”), I suggest that using it as a verb is its queerest elaboration.

*Queering* is an ever-emergent process of becoming, one that is flexible and fluid in response to context, and in resistance to norms. When we queer something, we question and disrupt taken-for-granted practices and we can imagine new possibilities. Queering something breaks rules (usually discursive and social rules, and sometimes legal ones) in order to liberate people who have been held hostage by what the rules require or prevent.

What does this look like in therapeutic practice? Because queering your practice involves resisting, challenging, and operating outside of norms, it can manifest in many ways, including:

- Resisting conventional notions of professionalism
- De-privatizing practice and creating communities of care that connect clients to one another
- Positioning and consulting clients as experts in their lives, and in the things and events that affect them
- Rejecting notions of psychopathology and the medicalization of human experience

- Refusing to function as an agent of social control
- Talking about unicorns in therapy.

Each chapter of this book includes a case vignette that focuses on that chapter's theme or topic. These vignettes will include young people and adults. They will involve individual, relationship, and family therapy sessions. And they will show people addressing issues such as sexual orientation; transgender and nonbinary identities; sexual desire and practices; non-monogamous relationship structures; family rejection; suicidality; and parenting concerns. While my focus is on matters of gender and sexuality, I ground my practice (and I strongly encourage you to ground yours) in critical intersectionality. Thus, it's impossible for me not to consider the ways in which other systems of power and oppression operate in people's lives. To this end, I provide the social locations of the people in the vignettes I share, and I do my best to address issues that impact BIPOC<sup>5</sup> communities.

I've also provided Q-tips—practical principles and suggestions—in some of the chapters. Q-tips are pins to insert into your newly minted map of queer theory-informed narrative therapy. Use them as landmarks as you get your bearings. But don't get too used to them; as all things queer do, they're likely to change before you know it—and the terrain certainly will. And, as all family therapists know, the map is not the territory. Be ready and willing at all times to remove any pin and move it to a new location.

Chapter 1 provides the theoretical and philosophical foundations for the concepts and practices that I introduce throughout the book. It answers the question of not only what queer theory is but also what queer theory *does*. This chapter includes an introduction to social construction and post-structural theory, with emphases on discursive production, essentialism, and power relations. These hefty-sounding concepts are important in practice, and central to this chapter, which shows you how to use social construction and post-structural theory in practical, meaningful ways.

In Chapter 2, I focus on helping you listen for the normative discourses that shape your ideas about gender, sexuality, and identity. The

chapter focuses on deconstructing these discourses and questioning your own assumptions about gender, sexuality, identity, and so much more. I also discuss intersectionality and the importance of understanding gender and sexuality in relationship to dominating discourses, such as capitalism, white supremacy, and others.

Chapter 3 introduces narrative therapy and highlights some of its fundamental concepts and practices, such as externalizing, double listening, reauthoring, and counter documents. I discuss the idea of praxis and the relationship between queer theory and narrative therapy, with an emphasis on reflexivity. If you're new(ish) to narrative therapy, this chapter will give you a solid foundation; if you're a narrative therapy vet, you'll find new ways to put your narrative skills to work in the application of queer theory.

In Chapter 4, I critique conventional practice ethics for, among other things, applying universal codes of conduct in a one-size-fits-all way. The chapter includes a special focus on the matter of multiple (or dual) relationships for queer and trans therapists working in their communities. This chapter looks at queering ethics as a way of being accountable, and of attending to power relations.

In Chapter 5, I critique two common narratives that therapists encounter when working with queer and trans people: the coming out narrative and the parental loss narrative. Through the vignettes in this chapter, I demonstrate some queer theory-informed approaches to coming out and to parental responses to their queer and trans children.

In Chapter 6, I challenge the notion that sex is an immutable, "natural" phenomenon. Instead, I situate sex (and the meanings we make of it) in discourse. I introduce Rubin's (1984) seminal work on sex positivity, and then pivot to the more current and nuanced notion of *sex critical* (Downing, 2012) practice. I discuss how a sex critical stance is ethically and philosophically in alignment with a queer theory-informed narrative practice.

Chapter 7 focuses on queer theory-informed narrative therapy practices for storying resistance to rejection, isolation, or violence. I discuss diagnosing discourses (instead of people)—and, in particular, the conventional narratives around suicide. Finally, I introduce response-based practice (Coates & Wade, 2007; Richardson, 2015), an approach that

can be especially useful in working with the effects of violence and oppression.

Chapter 8 challenges therapists to approach ethical practice as seeing beyond the constraints of the therapist/client relationship, and working for societal change. I discuss transformational change (or, second-order change), audacious hope, dangerous ideas, and (with Mic) how to get to Queertopia.

The stories and vignettes I share are real; that is, they come from actual therapeutic conversations with real people who are grappling with real stuff. I have changed names and other details, and in some cases made composites of conversations that shared similar themes.

### **Abacadabra: Unicorns, Magic, and Transcendence**

Unicorns have been associated with queer culture for some time. More recently, Trans Student Educational Resources created The Gender Unicorn in 2014 as a teaching graphic.

Unicorns are fun; queerness embodies a playfulness in its disregard of solemnity. Unicorns are queer in their otherness; they are not of this world. Unicorns are mythical, magical creatures, queer in their transcending of norms. The queerness of transcendence exists in its ushering in of ways of being and knowing that eclipse convention. For all these reasons, unicorns are fitting and familiar paragons of queer culture. And it was for all these reasons that I asked Mic about the gender unicorn. My intention was to bring out the magic-making of words—magic that Mic didn't know they could conjure, until I asked a question they'd never considered.

However, the potential for magic is not in the gender unicorn. Nor is it in any formulaic use of the concepts and practices in this book, or in a specific question that you can ostensibly use with all clients. You'll find the magic in the imaginations and aspirations of queer and trans people—people who live courageously and dangerously in resistance to the binding norms of mundanity. Your job is to clear a conversational path so that they can speak into being the worlds—the Queertopias—that allow them to embody their richest stories of their fullest lives. When that happens, you will know that the words have been magic, even if no one mentions a unicorn.

## Notes

1. Mic uses *their* as a singular pronoun. Some people use they/theirs/them as singular pronouns when they do not identify as either (or solely) male or female.
2. Historically, GSA stood for Gay-Straight Alliance. More recently, some groups have changed their names to Gender and Sexuality Alliance. These are groups in schools that provide support for students through policy, political action, and social activities. GSA is now the widely used generic acronym, similar to calling the place where you exercise The Y.
3. In constructionist philosophy, “language practices” refers not only to literal words, but also to all social activities among people that involve meaning making, such as images, memes, relationships with the environment, non-verbal communication, and much that is “beyond words.”
4. There are many elaborations of queer theory, some of which assert perspectives incompatible with other queer theories. To further complicate (or queer) the task of describing queer theory, some queer theorists insist that defining queer theory is itself antithetical to the project of queer theory: resisting definition and fixity.
5. BIPOC is the acronym for Black, Indigenous, and people of color. I use this acronym instead of POC (people of color) or POCI (people of color and Indigenous people) because it emphasizes the unique ways Black and Indigenous peoples relate to and are impacted by whiteness, while also remaining in solidarity with other peoples of color. For more information, see <https://www.thebipocproject.org/>.

# 2

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## UNPACKING NORMATIVE DISCOURSES

### No More Role Playing

Dianne is a 48-year-old white, cisgender woman. She's also a single mom. She adopted Jackson, now 16 and also white, when he was an infant. They live in an outer-ring suburb, where Jackson is a junior in high school and Dianne is a nurse. Now they are sitting in my office, sharing the story of how they are facing what is, in Dianne's words, "their biggest challenge ever": Jackson's gender identity.

"I told her," Jackson said solemnly, "that I'm not a girl, I'm a boy, and that I want my name to be Jackson because I like the name and it starts with the same letter of the name mom gave me when she thought I was a girl." Dianne reached over and squeezed her son's hand as tears welled in her eyes.

Jackson was assigned female at birth (AFAB). Both mom and son described how he "never was a stereotypical feminine girl" and was a standout athlete, lettering in hockey and softball.

About four months before they came to see me, Jackson shared with his mom what he had figured out about himself after months of reading and watching other trans youths' personal



testimonies online. This search, he explained, followed “years of thinking something’s wrong with me and just pretending to be a girl as best I could. But I found out there isn’t anything wrong with me—and that I’m not the only one who feels this way.”

As we talked together, I learned how Jackson had an ah-ha! moment when he first heard a young person on YouTube describe themselves as transgender. I asked him, “What was it like before you knew the word transgender, and what did knowing that word make possible?”

Without pausing to think about it, Jackson said, “It made everything possible. Before I knew what transgender was, that it even was a thing, I thought something was wrong with me, because I didn’t even know how to talk about how I felt. Now, I can talk about who I am and what’s happening. And I have people to talk to about it who understand.”

“What ideas do you have,” I asked, “about why you had to do so much research to find the word? I mean, why do you think you’d never heard it before?”

Dianne smiled and said, “You know, we talked about that a lot, didn’t we?” She turned to Jackson, acknowledging that it was his question to answer.

“Yeah, we did,” Jackson said, “because I was mad that I had never heard it before and I had to spend months searching about it, and then reading trans people’s stories online. I think it’s hidden from people, especially kids, because some people think it’s wrong.”

“What might get some people to think it’s wrong to be trans?” I asked.

Jackson thought for a moment before answering. “I think it’s like a circle: if no one talks about it, it’s like a secret. That gets people to think it’s wrong, and then they make up stories about trans people, instead of actually talking to us.”

I asked Jackson if I could ask his mom a question before getting back to him about what he had said. He agreed.

“Dianne,” I said, “you told me that the two of you talked a lot about why Jackson had never heard the word transgender before.”

“Yes, we did. We still do.”

“Could you talk about how those conversations became so important?”

“Well, Jackson was angry, and some of that anger was toward me, because he felt I’d kept this from him. We talked about how I didn’t keep it from him on purpose—it never came up because it just didn’t occur to me that my child could be trans. I mean, I wasn’t actively and intentionally not talking about it.”

Jackson said, “So that’s a whole thing, too, right? It’s all part of it—no one thinks of it, like trans kids are invisible or not normal. That pisses me off!”

Dianne nodded. “Exactly, it makes me mad, too—yet I did it. So, we’ve talked about how some things people assume and take for granted, and not being trans is one of those things.”

I asked Dianne, “When you were planning on becoming a parent, applying for an international adoption and all that goes with that, what kinds of things did you assume about your baby who you’d be taking home?”

Dianne nodded slowly and glanced at Jackson. “Oh, you know, the usual. I wondered if I’d have a boy or a girl. I didn’t care which one. And I still don’t. As long as he’s happy.” She smiled warmly at Jackson.

I asked if we could back up a bit so I could ask them about the anger they experienced, and they agreed.

“Jackson,” I said, “your mom says you were angry at her. Why was that? Was there something that matters to you in your relationship that wasn’t met?”

“Totally! She’s my mom, so she’s supposed to do what’s best for me. I thought she’d deliberately kept this from me, so I was mad at her. Now I’m still pissed, but not at her,”

“What changed so that you’re still pissed off, but not at your mom?”

Jackson thought for a moment. “Well, when I was mad at her, it’s cuz I thought she kept this from me, and that’s not OK. After we talked, I realized that, in a way, the possibility that I’m trans was kept from her, too! I mean, she knew that there are trans people, but, like I said before, it’s not talked about like a normal thing.”

“OK,” I said. “I get that. So, what are you pissed off about now? Are you protesting or angry about something that’s not fair—an injustice?”

“Yeah, I’m pissed off that our society thinks that gender is just male and female, and that how you’re assigned at birth is who you have to be. That’s what got my mom to not even think about my maybe being transgender. Now she’s mad about it, too. So, I guess I’m protesting society!”

“That sounds like a big protest!” I said. “Jackson, are you saying that, instead of being mad at your mom, the two of you together are mad, and protesting society’s ideas about gender?”

Jackson pumped his fist and said, “One hundred percent!” Dianne chuckled.

Over the course of a few sessions, Jackson and Dianne addressed a range of issues related to his transition. These included safety concerns at school; setting limits with Dianne’s Christian fundamentalist family members; and making decisions about Jackson’s participation in sports.<sup>1</sup>

One evening, Jackson asked to meet with me alone, without his mom. He and I had already been doing some individual sessions, so Dianne was fine with this. But in this session, Jackson was visibly frustrated as he sat silently on the loveseat across from me, fidgeting with a squishy ball.

I knew that he wanted his mom to schedule an appointment with the trans health clinic so that he could begin taking testosterone (T). I had already sent a letter of support to the clinic, and Jackson saw Dianne as “dragging her feet on T.” For her part, Dianne consistently

expressed her support for Jackson starting T. But she also voiced her hope that he would “slow down and think about all the implications, especially for sports.”

Jackson’s sullenness surprised me, so I asked him about it. He told me that he and Dianne had, in fact, met with the doctor. Jackson now had his prescription and had started taking T. Yet, he explained, he was “frustrated with my how mom is handling it.”

I asked him to help me understand. Here’s a brief segment from our conversation:

JACKSON: I feel like she’s supporting me taking T, but she’s not doing it happily.

JULIE: Are you saying that you’d like her to support you and do it with happiness? How would that make a difference for you?

JACKSON: It’s like she doesn’t really understand. If she really understood, she’d be happy to support me because she wants the best for me.

JULIE: If she really understood, then, she’d show up with happiness, is that it? (Jackson nods yes.) What do you think gets in the way of your mom really understanding and showing that she’s happy to do what’s best for you?

JACKSON: Losing her daughter. That’s what it feels like for her.

JULIE: She feels a loss...What do you think it’s like for a mom to do her best for her son, even if the mom feels it means she’s losing her daughter?

JACKSON: It’s really hard...and she wouldn’t be happy about it.

JULIE: Jackson, it sounds like you have a lot of compassion for your mom. What would you want her to understand about how you experience her feeling that she’s losing a daughter?

JACKSON: She’s not losing a daughter. She never had one. I was in the role of daughter, but I never really was a daughter.

JULIE: When you were in that role, were you trying to believe it, too?

JACKSON: For sure, even though it wasn’t the right role for me.

JULIE: What do you think played a part in your continuing to play that role? Do you think the things that had you play that role could be the same ones that have your mom feeling like she’s losing a daughter? Do you think those things make it hard for her to understand?

JACKSON: Yes. We both thought I had to be a girl because of my body. She adopted a girl—what she thought was a girl. So, yeah, there’s some of the same stuff, the assumption that your gender is what you’re told you are.

JULIE: What is that stuff? What do you call it? I know we've talked before about social ideas and assumptions—is that what you mean?

JACKSON: Totally. Like the assumptions that there are only girls and only boys, and that it has to do with your body, and that there's something wrong with you if you transition. That has me feeling not like myself—even if I'm not playing a role anymore, and even after starting T. And it has my mom not understanding that I never was a daughter.

Acknowledging that social and cultural norms (such as the gender norms faced by Jackson and Dianne) impact identity is not a mind-blowing idea for therapists. What are often out of their reach, however, are concepts and practices that help bring these normative influences into the therapeutic conversation in ways that are accessible, meaningful, and useful to clients.

This chapter focuses on the normative discourses that are relevant when addressing matters of gender, sexuality, and identity. In it, I introduce deconstruction as a tool to examine discourses and their implications. I'll also introduce the analytic framework of intersectionality as a method for engaging with the complexity of multiple discourses.

### **Tuning in to Discourse: Listening to the World in the Room**

The word *discourse* has more than one use and more than one meaning, so it's important that I be clear about exactly how I use it in this book.

Because queer theory and narrative therapy both draw on Foucault's work, in this book *discourse* refers to the cultural stories and meanings that are circulated through everything we do socially (Foucault, 1970). This includes when we talk to people; when we engage in social media; when we write and publish (formally or informally); when we share memes; and when we amplify some ideas and ignore, erase, or vilify others.

*Prevailing or dominating discourses* are meta-narratives that have great influence in shaping our assumptions, values, and beliefs. We may not be aware of them because they're so ingrained in our lives. We usually take

them for granted and see them as “natural,” rather than as the cultural productions that they are.

In Chapter 1, I noted that our personal narratives exist within, and are influenced by, multiple discourses. This is what I call “stories within stories,” and it’s at the heart of Foucault’s assertion that we can’t live outside of discourse. Remember, discourse has a regulating effect on what may—or may not—be spoken. Remember, too, that when we view language as productive, what can be said is not merely a matter of “free speech”; it’s also about what realities can become possible in the world.

For example, think back to the account of Jackson and Dianne. Jackson initially described how he had struggled and suffered because he had never heard the word *transgender*. His lived experience—feeling like a boy, but being told he was a girl—wasn’t reflected in the prevailing discourses of gender and identity that were available to him. This is an experience that I hear from many trans and nonbinary people. They feel adrift, and are often in significant distress, until they encounter the language that helps them speak themselves into the world.

In this way, discourse has everything to do with what gets to be an identity. As we’ve seen, not all stories are available to everyone at all times.

To be clear, in the example of Jackson, this is not merely a matter of an individual young person who had a limited vocabulary; after all, there are plenty of 16-year-olds who do know the word *transgender*. Jackson’s story illustrates the power of a prevailing discourse. Jackson had no trouble learning how boys and girls are expected to be masculine and feminine. This knowledge—the specifications and rules of masculinity and femininity—is repeatedly shared and circulated widely through the dominating discourse. But, for many years, Jackson heard next to nothing about being transgender.

This is what Butler (1990) refers to as *gender performativity*: the repetition of gender norms to meet an idealized notion of gender. This is how Jackson knew how to play the role of daughter, though he felt himself to be a son.

If dominating discourses regulate what stories and identities are available, then how do alternatives even become possible? How do realities that exist outside of the assumptions of normative cultural narratives come into being?

**Q-TIPS: EXPOSING GENDER TRAINING**

Think about how you first learned what it meant to be a girl/woman or boy/man.

1. How did you learn this? Who and what were your teachers?
2. How were the lessons enforced? What happened if someone didn't follow the rules of femininity or masculinity?
3. Were the consequences of breaking gender rules the same for people assigned male at birth as they were for people assigned female at birth?
4. How did the training change as you got older?
5. When did you first become aware of anyone who did not meet the expectations of *either* femininity or masculinity?

A *counter discourse* is a narrative that stands in resistance to dominating discourses. Counter discourses are acts of resistance.<sup>2</sup> They emerge when people construct and circulate alternative stories in response to the institutionalized normative discourses that regulate and limit ways of being in the world.

Let's consider an example:

You'll recall that Jackson spent months reading personal stories shared by other trans youth. As Jackson learned about the lives of trans youth—lives that existed in resistance to cultural gender norms—an alternative became available to him. Nevertheless, even after Jackson had the language of, and stories about, trans lives, he still had to struggle against normative ideas of gender and identity. Counter discourses don't erase the effects of prevailing discourses; they open up alternative pathways than run against the grain of prevailing discourses. In fact, we can only understand counter discourses in relationship to the dominating discourses that they oppose.

**Deconstruction: What's in Words?**

How do we work with discourses so that they become visible to clients, allowing them to consider their impact on their lives?

Deconstruction (Derrida, 1967, 1977) is an approach to understanding meaning that is central to both queer theory and narrative practice. Deconstruction decenters dominant ideas by asking questions about the assumptions embedded within them.

Decentering dominance is important because, when certain ideas are centered—that is, given positions of dominance, privilege, or normativity—other ideas get pushed to the margins. For example, Jackson’s experience of not knowing the word *transgender*, and his desperate search to find language and representations that validated his identity, demonstrates what happens when some ideas and identities are marginalized: they become the Other.

When we deconstruct a word, idea, or discourse, we unpack the meanings in it. This reveals things we take for granted, yet are not always true across all times, places, and cultures. Put another way, they are not the only truth. Deconstruction dovetails with queer theory’s skepticism toward essentialist ideas and truth claims (Tilsen, 2013) by asking questions about things we don’t usually investigate, because we assume them to be true and natural. Through deconstruction, we expose the centrality of one idea, which then allows us to subvert it and make room for previously marginalized ideas—and, perhaps, entirely new ones.

Please reread the first five pages of this chapter again. Then ask yourself these questions:

- What are some of the assumptions or “truths” that were deconstructed in that conversation with Jackson, Dianne, and me?
- What questions did I ask that facilitated the deconstruction of these ideas?
- What answers did Jackson and Dianne come up with that exposed the assumptions that affected them?
- What became possible once these assumptions were exposed and decentered?

At this point, you may have begun to notice things that you have taken for granted in the past—things that you’re now questioning. How did that happen? What questions are you asking yourself. Which “certainties” may be in flux for you right now?

As you can see, I’m asking questions to deconstruct your experience of learning about deconstruction.



## Beyond Binaries

Queer theory is especially interested in challenging binaries. This is a central task of deconstruction.

A *binary* refers to two related ideas that are defined against each other. That is, each is defined by what it is not.

A characteristic of binaries, according to Derrida, is that one of the ideas has privilege (it's centered) while the other does not (it's marginalized).

Another important (and problematic) thing about binaries is that, with only two possibilities, binaries ignore complexities. Binaries insist that things are either/or rather than both/and. Let's check out some examples:

- Healthy/unhealthy
- Trustworthy/untrustworthy
- Mind/body
- Thinking/feeling
- Safe sex/unsafe sex
- Man/woman
- Cisgender/transgender
- Straight/gay.

Stop here for a moment. I'd like you to back over the above list of binary opposites. This time, though, for each binary, come up with some ways of describing things that are not either/or. For example, something may be healthy for some people, but not for others; or, it could be somewhat healthy or unhealthy, but not completely one or the other.

Starting now, also watch and listen for binaries that show up in your everyday encounters and thinking. Ask yourself what is privileged, what is marginalized, and what is rendered non-existent by the binaries that you notice.

## Hearing Queerly: Listening for Normative Discourses

Now that you have an understanding of what discourses are, and how deconstruction is a resource to unpack them, let's move on to some of the

specific discourses that are especially germane to matters of sex, sexuality, gender, and identity.

A variety of cultural meta-narratives shape and influence our identities and actions, whether we're aware of them or not. Narrative therapy differs from many other practices, in part, because it focuses on exposing discourses to "give people an opportunity to decide how they want to respond to them" (Freedman, 2012, p. 7). In this section, we'll look at what discourses shaped Jackson's understanding and prevented him from having an awareness that transgender "was even a thing." We'll also look at other discourses that a queer theory-informed narrative therapist needs to be cognizant of.

## The Gender Binary

We are constantly inundated with cultural messages about gender such as: "boys don't cry," "that's a woman's job," "boys have a penis," "this is a boy's toy," "women give birth," "act like a lady," or "pink is for girls." What should be apparent from these messages is that (1) there are two distinct and opposite genders (and *only* two genders); (2) that these distinctions are determined by anatomy ("natural" or "biological" differences), as well as by cultural rules and roles; and (3) breaking these rules, or stepping out of the roles, has consequences. These messages reflect and produce the prevailing discourse of the gender binary.

The *gender binary* is the system that imposes and polices adherence to two genders. The system hides in plain sight in so many ways that it's almost impossible to catalog them all—yet it constructs and shapes our assumptions about gender. The gender binary is ubiquitous. It appears in the first question we typically ask pregnant people (a category that we assume means certain things); in the toys, clothing, and activities we associate with and endorse for members of each of the two binary genders; and in our judgment of (and responses to) particular behaviors and expressions of emotion.

The gender binary is inextricably tied to the discourse of patriarchy, which dictates ideas about "normal" masculinity and femininity, particularly in regard to social power, authority, and privilege. It's impossible to work responsibly with issues of sex, sexuality, and gender without situating our discussions within these discourses.

## Gender Essentialism

The gender binary is related to ideas of *gender essentialism*, another assumption of patriarchal ideology. Gender essentialism asserts that differences between men and women (remember, according to gender essentialism, there are only two genders!) are innate and universal (i.e., the same across all times, places, and cultures); that they are due to biological, psychological, and genetic factors; and that they are therefore, “by nature,” unchangeable. Gender essentialism is responsible for ideas such as *Men are inherently domineering and aggressive* and *Women are by nature emotional and reactive*.

## Cisnormativity

*Cisnormativity* (Heinz, 2012) is another powerful discourse that is related to the gender binary and gender essentialism. Cisnormativity is the assumption that people are cisgender<sup>3</sup>—that is, whatever gender they were assigned at birth—and that this is, forevermore, their only legitimate and acceptable gender identity. Examples of cisnormativity include paperwork that offers only “male” and “female” as options; women’s and men’s bathrooms; assuming someone’s gender based on appearances (which require us to impose normative ideas about gender based on our read of someone’s gender); and drawing conclusions about gender based on primary and secondary sex characteristics.

Gender essentialism and cisnormativity rely on stereotypes constructed within the gender binary—and, at the same time, reinforce them. This is how discourse works.

Because of the pervasiveness of these discourses, Jackson knew how to “be in the role” of daughter. And, because of the gender binary and gender essentialism, he had a hard time finding language and other representations of his gender experience as a trans young person.

## Heteronormativity

The gender binary serves as the backbone of other dominating discourses that influence gender, sexuality, sex, and relationships. One of the most pervasive of these discourses is *heteronormativity*. According to Michael Warner (1991), the queer theorist who coined this term,

heteronormativity is a set of practices and institutions that legitimizes heterosexuality as the only “natural” and legitimate sexual orientation. When we ask a woman who her boyfriend or husband is, we are making a heteronormative assumption. When we joke about keeping a good-looking boy “away from the girls,” we are acting on and reinforcing heteronormativity. When we tell young people that they can’t know if they’re gay, lesbian, bi, queer, pan, ACE, or ARO<sup>4</sup> because they’re too young to make these decisions, we are imposing heteronormativity (and adulthood!).

Think about it: Are straight youth ever told that they’re too young to determine that they’re heterosexual? Unless they are surrounded by adults who are making deliberate efforts to subvert essentialist ideas about gender and sexuality, the answer is no. We don’t question young people when they’re straight because being hetero is the normative default.

This isn’t only true for youth. Indeed, plenty of queer adults have been told that they can’t know they’re queer if they haven’t “tried” heterosexuality, as if it’s an ice cream flavor. Normative discourses get their power by thriving inside the assumptions we unquestioningly pass along.

Consider this vignette. Ty and Patrick are both cis gay men in their early 30s. They are a committed couple; Patrick is white and Ty is Black. They sought therapy with me because they were struggling to find ways, in Ty’s words, “to move forward with our marriage plans without alienating our families.”

As they shared what was making trouble for them around the planning of their ceremony, I learned that the issue wasn’t so much between them, but, as Ty said, “the ideas that our families are putting on us about getting married.” Here’s how the beginning of our conversation unfolded:

JULIE: Can you describe what ideas your families are putting on you?

TY: So, my mom wants a big throw-down with all the traditional kinds of stuff you see at a straight wedding, stuff like the format, how vows are done, all the typical components of a wedding. I think it’s fair to say, for the most part, that this is true for Patrick’s parents as well.

PATRICK: Yeah, totally. My dad really wants a pastor of some kind—any kind—to marry us. We’re having a friend do it. I think my mom has resigned herself to the fact that we’re not using a pastor of any kind, but my dad...not so much. (Ty shakes his head, chuckles, and says, “Nope. Not happening.”)

JULIE: How are your folks' ideas are at odds with your ideas about your ceremony?

PATRICK: I'd say our ideas are not so traditional; they're more radical. Queerer. Like, we're not following the script (Patrick makes air quotes), and we're doing things that are personal and meaningful to us about the issues that matter to us. It's way more political.

TY: We debated whether we even wanted to get married, not because of our commitment to each other and the relationship, but because of the institution. We've tried to explain this to our parents, but they don't get that we can have a committed relationship and also not sanction the idea that the government or church is what makes our relationship valid. My mom actually questioned if we're (air quotes) "really serious" if we don't want to get married in (more air quotes) "the right way." She apologized, but it still pissed me off, and I don't get mad at my mom a lot. I respect her too much.

JULIE: Given your respect for your mom, what does being pissed off at her say about what matters to you? Has something that's really important to you been overlooked or minimized in some way?

TY: For sure. What matters is that she has always supported us every step of the way. She talks about us having a "long life together." But now that we have our own ideas about how to have that life, our relationship is suspect to her, because it doesn't line up with her straight assumptions that your relationship can only be legit if you put a ring on it in a church and sign a state marriage license. What matters to Patrick and me is that this ceremony says something about our relationship—and those traditional things ain't it. I mean, we're queer—we don't have to do any of that!

PATRICK: My parents haven't come out as explicitly as Ty's mom. They haven't said, "You must not be serious if you don't get married in a traditional, churchy way," but they for sure imply it. Stuff like, "Oh, we thought this was going to be the official ceremony" or, "Now that it's legal, wouldn't you want to show everyone that your relationship is just as legitimate as anyone's?" It's super dismissive.

You can hear the many heteronormative assumptions in this example. These include not only the functional aspects of traditional weddings that the parents saw as "normal," but also the very notion that relationships aren't legitimate unless they're sanctioned by the state and the

church. Even when two men are getting married, the norms of heterosexuality can take over. This speaks to the power of the heteronormative discourse.

## Homonormativity

A somewhat parallel normative discourse is *homonormativity*, a term coined by scholar Lisa Duggan (2002). Homonormativity mimics heteronormativity in its embrace of the same assumptions and values that uphold heterosexual institutions—and, thus, our cultural institutions in general. Homonormative ideas or values are those held by LGBT people that don't challenge or critique the taken-for-granted practices of a heteronormative society. Homonormativity thus lacks a queer ethic.

### Q-TIPS: THAT'S SO HOMONORMATIVE!

*Heteronormativity* is a fairly familiar term, but *homonormativity* is not yet as widely known. Because it refers to deeply embedded cultural institutions and practices, it can be a hard concept to grasp.

Here are some examples of homonormative assumptions, contrasted to a position that reflects a queer analysis and a queer ethic:

#### HOMONORMATIVITY

- Seeking to serve opening in the military
- Gentrifying historically BIPOC neighborhoods with gay-affirmative businesses
- Working to legalize same-sex marriage
- Buying products and services from companies that advertise at Pride
- Downplaying sex and physical pleasure; emphasizing love
- Cis men playing trans women in TV and film roles
- Insisting to straight people that “we’re just like you”
- Focusing on single issues that reflect the normative ideas of “gay rights”
- Celebrating individual consumption and wealth
- Portraying queer culture in pop culture with (overwhelmingly) gay, able-bodied, cisgender, middle class, white people.

### QUEER ETHIC AND ANALYSIS

- Working to dismantle military imperialism
- Investing in communities and building local wealth
- Working to eliminate governmental sanction of kinship structures; making benefits available to all people
- Challenging anti-labor, racist, homophobic, and/or anti-environment practices
- Promoting sex positivity
- Hiring trans women to play trans women on TV and film
- Insisting that people see, embrace, and value differences
- Taking an intersectional approach to issues of justice; creating solidarity across marginalized communities and issues
- Working for the collective good and equitable access to resources for all
- Offering a range of representations of queer identities and lived experiences.

To see how homonormativity shows up in the lives of people we consult with, let's look at a couple of examples.

First, think back to LaTrisha's story in Chapter 1. Her refusal to take on a label of gay, lesbian, bisexual, or queer challenges the homonormative assumption of compulsory coming out. (Chapter 5 discusses the coming out narrative in more detail.) These assumptions include the idea that whom we have sex with is an essential and static identity (and, remember, the invention of "sexual orientation" categories is quite recent); that not coming out is a sign of "internalized homophobia"; and that coming out is necessary for someone's well-being (if their essentialized sexual orientation is gay). Insistence on coming out and claiming an LGBT or queer identity also disregards many intersectional complexities, as well as issues of privilege and oppression. I'll address intersectionality in greater depth later in this chapter.

Second, let's consider the experience of Gracie, a white, 16-year-old high school junior who identifies as a queer, bisexual, cisgender girl. Gracie attends a majority-white suburban high school, where she is a member of the Gender and Sexuality Alliance (GSA).

Gracie shared with me that, every year, her GSA chooses a community project to volunteer and raise money for. Gracie had suggested that the



group volunteer for a housing program in their district that helps low-income people stay in their homes. She explained that she had “been hearing a lot about how there is less and less affordable housing in our community, because people keep building McMansions and tearing down apartments.” Gracie said that she knows that “there are kids at our school who are homeless, or could become homeless, and queer and trans kids are homeless more than other kids.”<sup>5</sup>

When I asked Gracie what happened when she raised the idea with her GSA, she said,

The other members liked the idea, but the advisor gave us a lecture about sticking to gay rights stuff. He said that GSA only does community projects that have to do with gay rights. I argued that housing is a queer issue, and talked about intersectionality and solidarity with all marginalized groups, but he doesn't get it.

How did Gracie come to understand housing as a “queer issue,” while her GSA advisor didn't? Gracie explained that her debate team had been reading about gentrification and how the contemporary gay rights movement had “gotten narrower because of capitalism and neoliberalism.” She learned that, historically, queer politics had been more intersectional and had taken a multi-faceted approach to social justice. But the modern gay-rights movement rejected that approach in favor of things that were less radical, in order to fit in and be seen as normal. (I was impressed with her analysis and understanding; I didn't cultivate that kind of knowledge until I was in my 40s!)

As for her advisor, Gracie said, “I'm more frustrated that he's not willing to listen to us about what we think than I am about his taking a more conservative position. I'll put up with that, but he needs to listen to students.”

I asked Gracie, “Given how you've described your commitment to an intersectional and queer approach to social justice, what makes it possible for you to put up with his conservative position?”

Gracie said,

He comes from a different place. For him, focusing on what he considers gay rights is really important for him. He's a white, cis man with a master's degree. Gay marriage was huge for him. So, I get

him; but I think it's his job to get us, to listen to us and what we think it means *now* to address queer issues. It's our group, not his.

Gracie's experience is another textbook example of homonormativity (and adultism!).

Not all of my clients have had Gracie's analytical strengths, but they don't need to.<sup>6</sup> It's our job to attend to discourses and invite clients into conversations. In these conversations, we can, together, consider the effects of discourses on them, as well as bring forward ways in which they might (or already) resist discursive constraints.

I think of queer theory as an app that is open and running in the back of my head. It's a resource that helps me host a conversation that is richly situated within the many discourses that impact people and their identities. I don't talk using these terms and concepts (unless a client is already using the language of queer theory and discourse). Instead, I have a dialogue with people using their own language and ideas.

It's in this shared and constantly emerging conversational space that, together, we illuminate the relationship between cultural stories and the personal narratives of people's lives. Once this relationship is visible, new and generative conversational pathways emerge, leading to courageous acts of resistance—and people imagining new identities to live into.

### **Stepping into Complexity: Multiple Discourses and Intersectionality**

The identities and lived experiences of every person who sits across from us are impacted and shaped by multiple discourses. In North America, people typically come to therapy not only with gender and sexual identities, but also with identities that are constructed around race, ability, class, national origin, age, and cultural ethnicity (as well as innumerable discourses that emerge from these).<sup>7</sup> As with sexuality and gender, dominating discourses circulate and reinforce stories about race, class, ability, ethnicity, age, and national origin in ways that impact people's lives. People's sexual and gender identities are interconnected with all of their other identities and lived experiences. Because of this, it's incumbent upon us as therapists to pay attention to this landscape of

multiplicity—and, especially, to the crossroads where various identities intersect and contextual nuances emerge.

In North America, nothing goes unmediated by capitalism, white supremacy, and patriarchy. We cannot escape the effects of these discourses, even when we're focused on sexuality and gender. In fact, I propose that we can't escape the effects of these discourses especially when exploring matters of gender and sexuality.

Capitalism, white supremacy, and patriarchy, in particular, play crucial roles in the construction of normative ideals and standards that mark some bodies as "normal" and some as "other." Meanwhile, an entire industry now exists around trans healthcare, making "gender identity... something that is, to a degree, bought and sold" (Travers, 2018, p. 179). Regardless of whom we're working with, we need to take care to avoid the mistake of treating gender and sexuality as independent from these discourses. (Unfortunately, this is what queer theory has historically been guilty of (Barnard, 1999).)

#### **Q-TIPS: WHAT'S CAPITALISM GOT TO DO WITH THIS?**

Perhaps you're thinking, *Hey, I'm a therapist. What's capitalism got to do with helping people?* As you'll see, for a queer theory-informed narrative therapist, pretty much everything.

In North America and much of the Western world, capitalism—and, in particular, *neoliberal capitalism*, or *neoliberalism*—has become more than an economic system. It's become a way of encountering and being in the world—and it shapes every assumption we make about ourselves and our lives.

Neoliberalism refers not only to a political and economic system in which private corporations control wealth and goods, but also to the way this system influences and shapes social discourses and people's identities (LaMarre, Smoliak, Cool, Kinavey, & Hardt, 2018).

Neoliberal capitalism goes hand-in-hand with individualism; they both over-emphasize personal independence and under-emphasize societal effects on people's lives. It defines people as consumers, who compete for the most things and the best deals. Inside this worldview, "freedom" no longer refers to inalienable rights, but to the right to

choose from among a wide range of products and services (Fisher, 2009). Neoliberalism also defines people as workers who compete for jobs; as vendors or sub-contractors who participate in the precarious gig economy; or as resources or commodities who are managed, and often replaced, by offices with the title of *Human Resources*. (In an extreme version of neoliberalism, people working for the most successful company in the world are constantly surveilled, forced to pee in bottles, and sometimes pass out on warehouse floors from overwork and dehydration.) When we have problems, neoliberalism has trained us to question our personal choices and individual responsibility, rather than to examine possible social inequities and oppressive policies that may contribute to our difficulties (LaMarre et al., 2018). This is a central aspect of neoliberal discourse.

Neoliberalism has far-reaching impacts on people beyond direct economic effects, and this impact should matter to any therapist who wants to provide meaningful support and help. When it comes to mental health—and therapy in particular—neoliberalism has a significant influence on how we think, talk about, and act in response to our problems.

Cushman (1995) points out that mental illnesses “are not universal, they are local” (p. 7). As such, we need to look beyond one-size-fits-all explanations in order to understand what’s behind problems in people’s lives. Faulty cognitions, misfiring biochemical processes, and personal pathologies are common explanations of mental illness that bear the mark of neoliberal capitalism and individualism. Indeed, in the very act of collapsing problems onto individual people, we participate in the capitalist practice of burdening individuals and privatizing social problems (Fisher, 2009; Tilsen, 2018).

Psychotherapy’s complicity in this privatization of social problems goes beyond how we understand problems. It also can largely determine how we intervene with them. We push pharmaceuticals to make individuals happier and less anxious in a depressing and stressful world. Meanwhile, “providers” deliver therapy in 55-minute billable hours, treating symptoms and patching people up so they can go back and produce (as workers) and spend (as consumers). We focus treatment on “self-improvement” that helps people overcome personal deficits rather than situate problems within limiting discourses and oppressive social systems.

Fisher (2009) and James (2008) document how the rise of neoliberalism has corresponded with an increase in mental health problems.

Given this surge of stress and distress, we should be asking questions about the conditions that lead to these problems. We can ask these questions in partnership with our clients as we unpack the discourses produced by and within capitalism. In fact, Lamarre et al. (2018) assert that all therapists need to understand and attend to the impact of neoliberalism on both the macro level (e.g., policies that impact people's lives) and the micro level (e.g., therapeutic interventions and individual decisions and acts).

For years, critical theory scholars of color have pointed out that sexuality and gender are racialized, and that race is gendered and sexualized (Anzaldúa, 1987, 1991; Ferguson, 2019; Gopinath, 2005; Mercer, 1994). This means that we make different meanings, and circulate different stories about sexuality and gender, when they involve white people than when they involve people of color and Indigenous people.

We can extend these differences beyond race to account for a variety of discourses and the identities they shape. People's experiences of gender and sexuality are different within different cultures and communities (Iantaffi & Barker, 2018). Failure to see these differences—or assuming that everyone experiences gender and sexuality in the same way—results in a “white-washing” of gender and sexuality (Anzaldúa, 1987, 1991; Barnard, 1999; Moraga, 1996; Namaste, 1996). This white-washing imposes Western ideals, values, and practices as a default “normal” setting.

### **Q-TIPS: MARKING POWER: MAKING ASSUMPTIONS VISIBLE**

You'll recall from Chapter 1 that power moves through discourse. Discursive, or modern, power refers to the influence that any given discourse has on the construction of norms and practices. This influence circulates through everyday social practices.

One way to track how power operates discursively is to notice what goes *unmarked* by language because it is the assumed “normal” or default position. (No need to say anything when we can just assume!) For example, if I say, “I have a really good doctor,” chances are good that, in your mind's eye, my doctor is a white man.

On the other hand, we tend to specify, or mark, non-whiteness, femaleness, and other subordinate positions. Sports teams are a good example: typically, we speak of the US National soccer team and the US National *women's* soccer team, while on the collegiate level we have, for example, the *Tennessee Volunteers* and the *Lady Volunteers*.

In clinical settings, I frequently hear therapists in consultation name the race of clients only when they're not white, the sexual orientation of clients only when they're not straight, the religion of clients only when they're not Christian, and the physical ability of clients only when they're not physically fully able.

To be sure, making marginalized people and their identities visible is important; the problem lies in that we (mostly) continue to *only* mark marginalized positions, while allowing the "default" positions to go unnamed.

Try this: during the next few days, in casual conversations, make a point of saying:

- "White" when talking about white people, but not naming race when talking about people of color
- "Straight" when talking about straight people, but not naming sexuality when talking about lesbian, gay, bisexual, asexual, pansexual, ACE, ARO, or queer people
- "Able-bodied" when talking about able-bodied people, but not naming ability when talking about people with disabilities
- "Man/boy" or "male" when talking about men, but not naming gender when talking about women or girls
- "Cisgender" when talking about cisgender people, but not naming gender when talking about trans, nonbinary, or genderqueer people
- "Christian" when talking about people who are Christian, but not naming religion when talking about people who are Muslim, Jewish, atheist, Hindu, Wiccan, etc.
- "Non-immigrant" when talking about people who are non-indigenous and were born into citizenship, but not naming citizenship status or nation of origin when talking about immigrants and refugees.

Then reflect on your experiences. What was it like to do this? How did you feel? How did people respond? How were your conversations impacted by doing this?

Then ask yourself this: How do your own social locations influence what you do and don't mark?

In your therapy practice, be sure to acknowledge (by naming them) both dominant and marginalized identities.

More importantly, beyond naming, be sure to attend to how people's experiences are shaped by their social locations and the effects of systems of privilege and oppression.

So, how do you attend to the multiplicity of discourses and the relationships among the identities they shape?

I've used the term *intersectionality* quite a few times, but I haven't yet discussed its origin. The terms *intersectionality* and *intersectional feminism* were coined in 1989 by Kimberlé Crenshaw, a Black feminist legal scholar.<sup>8</sup> Crenshaw introduced the concept as an analytic framework for addressing the ways in which interrelated systems of power (in her work, white supremacy/racism and patriarchy/sexism) marginalized Black women who were involved with the criminal justice system. Crenshaw maintained that, because of the ways racism and sexism intersect, Black women experience oppression in ways that are distinct from what white women and Black men experience. Since then, this tool of analysis has expanded (e.g., Collins, 2009, 2015) to examine the ways in which people of various social locations experience oppression.

Intersectionality is not an additive model (Crenshaw, 1993; Sullivan, 2003); that is, an intersectional approach is not merely about adding up the various social locations one occupies (and thus determining one's positions of privilege and/or oppression). Rather, intersectionality examines the complexities that are created within the crucible of dominating discourses that produce systems of oppression, in which the whole is much more powerful than the sum of its parts (Iantaffi & Barker, 2018).<sup>9</sup>

Consider Cesar, a 27-year-old cisgender gay man from El Salvador. He is in the United States on a student visa while attending a doctoral program in environmental science. Initially, Cesar came to see me to help him "feel more confident doing public presentations in English, and make decisions about plans after graduation." One day in late November, he told me that he and his boyfriend Troy (a white American cisgender

gay man he met at a queer student event on campus) had been arguing about Cesar's upcoming visit home to El Salvador over Christmas.

"Troy's upset that I'm not out to all of my family," Cesar explained. "He says this means that I've internalized homophobia—that I don't really accept myself, and, by extension, that I don't fully accept him and our relationship." Cesar explained that he'd tried to make Troy appreciate the realities for queer people in El Salvador. "I told him," Cesar said with tears in his eyes, "that I came here to the U.S. not just for school, but because I knew I would be safer to be myself here—and, hopefully, to find love. If I didn't accept myself, I wouldn't have done that." While Troy understood that it wasn't safe for Cesar to be fully out in El Salvador, he disagreed with Cesar about his need to maintain close ties with family members who were homophobic.

As we talked, Cesar shared that he loved his family and that maintaining his connection with them was non-negotiable. He found it shocking "how willing my white friends are to cut people off."

This was the thrust of the conflict between Cesar and Troy: Troy (and some of their mutual friends, all white) thought Cesar should cut off all family members who didn't accept him. Cesar acknowledged that he hoped for a day when he and other gay people in El Salvador would be accepted, but said that he would never consider turning his back on family. "It's not even a 'choice,'" Cesar said, making air quotes.

Using an intersectional lens, I understood Cesar to be caught in the crosshairs of a variety of discourses, all of which marginalized particular aspects of his identity and lived experience. On one hand, Cesar's identity as Latinx<sup>10</sup>—whose cultural emphasis is on valuing family connection—was under assault by dominating American discourses of individualism, homonormativity, and racism. On the other hand, he experienced oppression as a gay man in a traditionally (and colonially) Catholic country that vehemently upheld patriarchal and heteronormative values.

Let's look more closely at how these intersecting discourses impacted Cesar.

When Cesar's gay white American friends encouraged him to cut ties, they imposed the ultimate of American values: revering the individual over the collective. This is in direct opposition to El Salvadoran culture, which values the family over the individual. Uplifting the individual is



also supported by the homonormative values of (1) compulsory coming out (which I will address in depth in Chapter 5) and (2) isolating and prioritizing a distinct gay identity over other identities. Furthermore, because homonormativity re-inscribes the values of white society, the imposition of this discourse on a Latinx man is inherently racist.

Cesar was also affected by the discourses of heteronormativity, patriarchy, and colonialism. These discourses engendered a significant degree of homophobia and upheld rigid assumptions of the gender binary, defining masculinity narrowly and in heterosexist terms. Yet, because of the discourse in El Salvadoran culture that values the centrality of family, Cesar found ways to live around the edges of these oppressive stories about gay men.

Living at the intersections of these multiple discourses generated complexities and contradictions for Cesar. As I listened intersectionally and attended to the multiple discourses, I was able to enter the complexity of Cesar's experience. I was able to understand Cesar as a proud gay Latinx man who was committed to his family in El Salvador, and who was also in love with another man. His gender and sexual identities were in relationship to a variety of different (and competing) discourses and systems of power.

Thinking intersectionally helped me avoid the trap of the single story, or the "right" story. I was able to partner with Cesar to hold many stories which he could move in and out of, depending on which discursive and relational context he was in at any given time.

### **It's a Discursive Life**

Understanding the relationship between discourse and individual narratives is central to queer theory and narrative therapy.

Discourse is the landscape of queer theory-informed narrative practice; in order to navigate the terrain of people's lives and partner with them to map preferred pathways, we have to be able to see the discursive forest for the trees of individual people's stories.

In this chapter, I've highlighted some (but by no means all) of the discourses specific to matters of sexuality and gender. These are the discourses upon which queer theory targets much (but not all) of its analysis. What's most important is for you to cultivate your ability to tune into

discourses and deconstruct their impact on people. This requires you to resist the constant pull toward normative practices that privatize social problems and perpetuate the burden of individualism.

And remember: each of the discourses I've outlined in this chapter is shaped by other discourses. Heteronormativity, for example, operates in particular ways in white people's lives—and it operates in some different ways in the lives of people of color and Indigenous people. Attending to these intersections is necessary for providing just and responsive therapy.

In the next chapter, we'll look more closely at narrative therapy. In particular, I will focus on the relationship between narrative therapy and queer theory, and on how narrative therapy puts queer theory into therapeutic action.

## Notes

1. Student athletes who are transgender may be offered widely varying degrees of support, depending on the policies of each school and each sports league administration. For more about this issue, see <https://www.transathlete.com/>.
2. Foucault (1978) asserts that “where there is power, there is resistance (p. 95-6).” Here Foucault is addressing discursive power—that is, the power of discourse to produce, regulate, and limit social practices. Resistance is a response to the regulating and limiting effects of dominating discourses. Resistance creates alternative forms of being and doing in the world.
3. *Cisgender* is the term used for people who identify with the gender they were assigned at birth. This term is helpful for making visible the experience of gender for people who aren't trans. It also challenges our standard languaging practices of naming only marginalized identities.
4. The gay/straight binary is, like nearly all binaries, highly questionable. There are a variety of sexual orientations. Pansexuality refers to people who are sexually attracted to all genders. ACE is an acronym for asexual people—people who don't experience sexual attraction. ARO is an acronym for aromantic—people who don't experience romantic feelings for anyone.
5. A 2018 study reports that LGBT youth are more than twice as likely as straight, cisgender youth to experience homelessness, and that up to

40% of homeless youth are queer. For the full report, see <http://voicesofyouthcount.org/brief/LGBTQ-youth-homelessness/>

6. Each model of therapy is informed by particular theories and uses a special language. As therapists, we shouldn't expect clients to know any of these concepts or speak the language of its approach. For example, a Bowenian therapist thinks and listens in terms of individuation and the multigenerational transmission process, while a CBT therapist tunes into core beliefs and automatic thoughts. We shouldn't expect our clients to have this kind of insider knowledge.
7. This is true for us as therapists as well, so it's equally as important that we reflect on our own relationships with these discourses.
8. Prior to Crenshaw's introduction of intersectionality, other queer and feminist scholars of color had written about ideas that, in retrospect, pointed to intersectionality—for example, Anzaldúa, 1987; hooks, 1984; and King, 1988.
9. For a more in-depth critique of the additive model, see Anzaldúa (1991).
10. *Latinx* is a gender-neutral alternative to *Latino* and *Latina*.

# 5

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## QUEERING NARRATIVES, HONORING LIVES

### Chicken Smarts

Thirteen-year-old Quinn, a cisgender BIPOC girl, settled into the chair next to me and reached for the candy jar. Her parents, Eric (a Black, straight, cisgender man) and Rachel (a white, straight, cisgender woman), sat on the loveseat across from us. The four of us had met a handful of times before, and the family always came prepared to talk about any new developments and challenges they were addressing since Quinn had come out as bi. I enjoyed their humor and the affection they expressed for each other, and I especially appreciated how fiercely supportive and proud of Quinn Rachel and Eric were.

Eventually the conversation landed on the topic of, in Quinn's words, "coming out to more people at school." As Quinn talked, I heard an all-too-common refrain: "I'm just not brave enough to come out to them." I'd often heard both young people and adults disparage themselves for lacking the courage to come out to certain people. Of course, I had questions.

"Quinn," I asked, "what kinds of situations or experiences have you encountered in your life that required courage?"

"Well, I guess stuff that seems scary. Like when I auditioned for the musical. Also, when I told my teacher last year that he was wrong about something."

“OK, so stuff that seems scary requires some kind of courage. . . . Is something at risk in those scary situations—something that matters to you?”

Quinn nodded. “With the teacher, I was afraid I’d get in trouble, or he’d say something to embarrass me. With the musical, I just really wanted to be in it with my friends. I didn’t want to miss out.”

I asked Quinn if I could check with her parents about when they’d seen her have courage, and she agreed.

Eric and Rachel talked about how they saw Quinn as being “very courageous, but not stupid.”

“For example,” Rachel said, “when Quinn was about eight, she told her best three friends that she wouldn’t play with them anymore if they kept making racist comments about the Somali family that lives down the street. . . . We weren’t sure, to be honest, how these kids or their parents would react, and Quinn had literally grown up playing with these three little girls. They were tight, and she knew she could lose them, but she said it was OK because she had other friends who aren’t mean.”

Eric added, “That’s what we mean by courageous but not stupid: it was a risk, but she understood what was at stake and had a back-up plan. She might end up hurt and sad, but she knew she’d be OK.”

“OK,” I said. “So, does she have smart courage, or courageous smarts?”

“Both!” Quinn half-shouted. Her parents nodded in agreement.

Eric said, “I also think she used smart courage when she came out to us. It was really brave to come out to us, but I hope for her it wasn’t stupid. I mean, she knew we’d support her.”

Quinn added, “I didn’t feel brave coming out to you because it wasn’t scary. I didn’t think that anything bad would happen.”

We talked for a few minutes about what this meant in terms of their connection, the trust among them, how well Rachel and Eric were living into their mission as parents, and the security Quinn experienced with them. Then I said, “So, if I have this right, stuff that’s scary, where something bad could happen, requires courage. But stuff that isn’t scary, and something bad can’t happen—like coming out to your parents—doesn’t require courage. Am I keeping up?”

“Barely!” Quinn said, then popped some candy in her mouth.

“Thank you for bearing with me.” I smiled. “So, regarding coming out to everyone at school, how do you assess this situation—is it one that requires courage, or nah?”

“Totally. It’s really scary,” Quinn said seriously.

“And, would you say that you’re using smart courage or courageous smarts, or both, or something else?”

"I don't know. . . I don't have any courage. I'm a chicken."

"Quinn, do smart courage and courageous smarts mean that you always do the thing that's scary and risky? I mean, what would stupid courage or courageous stupidity look like? Wait, maybe it's chicken smarts?"

Quinn paused. Then she laughed and looked at her parents. "I don't know. . . What do you mean by chicken smarts?"

"Well, I'm wondering a couple of things. First, in general, does having courage and smarts mean you always do something that's scary? And, I'm wondering if there's something smart about being chicken in this specific situation."

"Maybe. . .?" It was half a statement, half a question.

"OK, so, before you told your teacher he was wrong, you weighed the possibility of getting in trouble and decided it was worth it. Before you auditioned, you weighed the possibility of not being in the show and missing out on stuff with your friends. When you were little, you decided you could handle not being besties with those three friends anymore if they wouldn't shut down the racist stuff. . . Do I have this right, Quinn?"

"Uh-huh."

"So, Quinn, what's at stake that you're not willing to do without, or that you're deciding is not something you should have to go through, if you come out to everyone at school?"

"Well, I could get beat up, or teased, and all the stuff that straight people do to queer people. I go to a really conservative school."

"Quinn, are you saying that you're not willing to get beat up or teased or subjected to homophobic stuff?"

"I'm not stupid!"

"No, you're not. In fact, is this what chicken smarts might be?"

"Yeah, I guess so!" Quinn laughed.

"Quinn, if you're using chicken smarts to keep from getting beat up and stuff, does that mean you value your safety and dignity?"

"Well, yeah. I do. I never thought of it like that."

"Is it okay if I ask your parents some questions?"

"Sure," Quinn said.

I asked Eric and Rachel if they had any other stories about Quinn taking care of her own safety and dignity. They offered a few examples, and I asked them if they saw any connection between Quinn's history of keeping herself safe and how she was now protecting herself at school. They both did. "In every example" Rachel said, "Quinn chose her safety over what she would hope for someday—but other people or circumstances made it too dangerous for her, either physically or emotionally."

I asked Rachel, "So, you saw, and now see, Quinn staying away from danger?"

Rachel nodded. Eric said, “Totally.”

“So, she’s engaging in practices of protection?”

Eric’s face opened in a smile. Rachel said, “Absolutely.”

I turned back to Quinn. “So, what do you think about what your parents said? Are you engaging in practices of protection?”

Quinn’s mouth fell open a little. Then the words “Yes, yes I am!” jumped out.

We continued talking about how chicken smarts, courageous smarts, and smart courage were all types of Quinn’s practices of protection. Quinn also identified some other practices that she used at school, and out in the community, that involved friends and family helping her. She dubbed these people her “protection posse.”

By the end of the conversation, Quinn decided that “I’m out to the people that I want to be out to, right now. I’m not going to win a medal if I tell every random kid at school.”

We all agreed that this showed all kinds of smarts and courage—and that it was a testimony to Quinn’s regard for her own worth.

As we wrapped up the session, Quinn pulled her phone out of her pocket and starting feverishly texting. Eric asked her to put the phone away until they left.

“Sorry,” Quinn said. “I’m just texting Sonny, Bree, Jessi, and André to tell them that they’re not chicken—they have chicken smarts!”

## From Queer Narratives to Queering Narratives

When a 13-year-old queer girl (or, really, a queer or trans person of any age) collapses the identity of “chicken” onto themselves, my discursive landscape compass immediately points to the *compulsory coming out* narrative. This influential discourse comes out of various models of identity development<sup>1</sup> that position “coming out” as a targeted achievement and end point (Tilsen, 2013), in which queer and trans people ostensibly emerge from a universalized developmental trajectory, and are then whole and complete.

This narrative relies, first and foremost, on the individualistic notion of an essential self. According to this notion, there is an “authentic self” that develops within people, and this self includes their gender and sexuality (although, as we’ve seen, these categories are highly unstable). It also relies on the institutionalization of heterosexuality and cisgenderism. After all, there would be nothing for anyone to develop into and come out to if we didn’t set cisness and straightness as defaults—and if gender and sexuality were not categories into which we sorted people.

In this chapter, I provide some queer critiques of this pervasive discourse. I offer an alternative queer theory-informed narrative therapy approach to working with this important issue. And I critique another prevalent (and related) narrative: *the parental loss narrative*. As with the coming out narrative, I provide alternative ways to engage people around this idea of “losing a child” when that child comes out.

### Q-TIPS: NARRATIVE THERAPY IN ACTION

In my conversation with Quinn and her parents, I did a good deal of deconstructing and asking meaning-making questions. I’d like you to read that vignette again, and identify some of the narrative therapy practices that I used.

Here are a few examples:

- **Absent but implicit:** I asked Quinn about what was on the other side of the scariness she experienced—that is, what mattered to her—when she considered coming out to someone. This paved the way for our conversation about protecting what matters to her
- **Externalizing:** I externalized chicken smarts, smart courage, courageous smarts, and practices of protection, rather than locating them internally, as Quinn’s characteristics or attributes
- **Multiple perspectives:** I sought Rachel and Eric’s input. This provided not only a variety of perspectives, but also a history that enabled us to connect Quinn’s current courageous smarts and smart courage to her past actions and decisions.

## Coming In from Coming Out

In general, therapists—queer and cis, straight and trans—are trained to encourage coming out. Yet our cultural and professional infatuation with the individualistic ideal of “being yourself” can obscure the unique complexities surrounding any person’s coming out and being out. Although this stance is well-intentioned, assuming that stance is potentially problematic.

To begin with, compulsory coming out can function as a standard that people feel obligated to uphold. This often sows the seeds for feelings of



failure, as people evaluate themselves and feel that they are not coming out in the “right way.” Quinn was caught up in self-evaluation because she felt that she was failing a standard of being totally out to everyone.

A second problem is the implication that not coming out represents internalized homophobia, and is dishonest, and lacks courage—that is, that if a person chooses not to come out to everyone, they’re broken or bad in some way. For example, recall the story of Cesar from Chapter 2. His white American friends accused him of internalized homophobia and of not being honest with himself. Yet they ignored important cultural contexts that involved not only Cesar’s physical safety, but also the safety of his connections with family. This was an ill-suited and ill-advised standard for coming out. LaTrisha (from Chapter 1) also faced allegations of internalized homophobia, because she took a stand against identity labels and categories. In short, compulsory coming out perpetuates the burden of individualism and the privatization of social problems by placing the responsibility of coming out on individual persons, while ignoring both context and personal meaning-making.

Discourses around honesty in coming out are especially problematic—and especially powerful. I often hear people say, “I don’t want to lie about who I am.” I also hear therapists say that they want to encourage people “to be honest about who they are.” Of course, I am not advocating dishonesty or lying. I am saying that the honest/dishonest binary, like most binaries, is limiting. It ignores context, and it values one of only two acceptable and recognized positions (in this case, honesty) over the other.

For an alternative way to approach the notion of honesty, we can turn to Foucault’s (1997) ideas about what he calls *games of truth*. Foucault defines truth games as “a set of rules by which truth is produced” (p. 197). According to Foucault, truth is socially constructed, and both produced by and productive of power relations. When we participate in games of truth, we engage in self-subjugation and self-policing that are indistinguishable from the policing of identity by dominating discourses, institutions, systems, structures, and people. The compulsory coming out discourse becomes a truth game when people’s primary or sole purpose for coming out is a response to this pressure to “be honest.”

When I explore this with clients, I inquire about their relationship with honesty, and why it’s something they value. This enables them to honor and thicken the story of their relationship with honesty. I also ask

questions that situate their experience in discourse. This positions us to consider how “failing at honesty”<sup>3</sup> might also mean resisting unjust or dishonest expectations. It might also mean succeeding at maintaining dignity, practices of protection, or something else that matters.

Here are some sample questions I might ask a client as we deconstruct discourses of honesty:

- Can you tell me about your history with honesty, and what about it matters to you?
- Who has inspired your relationship with honesty?
- Who else can relate stories about your relationship with honesty?
- Could there be situations when there’s something other than honesty or dishonesty involved—where there are some complexities or nuances? What examples of such situations can you think of, either from your own experience or the experience of others?
- Do you think all people always respect the truths of others? Has everybody always respected your truth?
- Given how much you value honesty, how do you decide who deserves your truth, and who does not?
- What might be the relationship between considerations of honesty/dishonesty and practices of protection?
- Think again about the people you know who can speak of your relationship with honesty. What advice do you think they would give you about coming out—and about honesty—in situations that you see as unsafe?
- If not coming out in a particular situation is dishonest, does this make you a liar? Does it erase all the times you’ve been honest?
- Is it fair or just to consider yourself or someone else a “liar” if they choose to engage in practices of protection?
- Do you think that a world that assumes cisness and straightness is honest in making those assumptions?
- If the assumption of cisness and straightness is not honest, then how is it that you and other trans or queer people end up as dishonest—or as liars?

Stories of being liars, and/or of lacking courage, place the problems of homophobia and transphobia squarely on the shoulders of queer and

trans people. The questions in the list above, and others like them, free people from this unjust burden by situating the issue of coming out in discourse. They also challenge the binaries of honest/dishonest and courageous/cowardly, and situate them not as essential qualities of a person, but as relational acts. Each such act occurs within, and is influenced by, the discourse—as well as by the politics and the ethics of the particular relationship involved.

What are the implications for your therapy practice? By situating honesty and courage in discourse—and understanding them as relational activities rather than as essential, internal characteristics—we are better positioned to help people generate thick, contextualized stories. For Quinn, understanding what she was doing as “practices of protection” and “chicken smarts” (practices that had both a history and appreciative witnesses) freed her from the thin and problem-saturated identity conclusion that she lacked courage. These practices then became available to Quinn as important skills that she could use again, as she saw fit.

When people who are tangled up in truth games have a chance to question the idea of “being honest,” they often tell stories that involve practices of protection and taking care of relationships. There are other practices, too, that can help people navigate the complexities and contradictions that this issue is thick with. For example, Randy—a white, cis, gay man from a fundamentalist Christian family—said to me, “Not everyone deserves my truth, because they’ll distort it to hurt me and others.” Randy’s pronouncement is as clear a comment on the politics of truth as I’ve ever heard.

While claiming a queer identity can be enormously powerful and liberating for some people, coming out “is not an equal-opportunity endeavor” (Tilsen & Nylund, 2010). For example, the consequences of coming out and being out are different for me as an older, middle-class, white, cisgender professional living in the United States than they may be for people who occupy other social locations—or for people with less financial stability or less access to support and resources. This is another critical reason for taking up an intersectional approach.

Given the contexts of heteronormativity, homonormativity, and cisnormativity, visibility is undeniably important for queer and trans people. This means that, as a therapist, you need to reconcile the tension between queer theory’s questioning of mandatory identity practices

(e.g., fixed categories and compulsory coming out) and the personal and collective political power that people experience through coming out (Tilsen, 2013).

Cultural theorist Jack (formerly Judith) Halberstam (2005) queers the process and trajectory of the conventional coming out narrative and offers a useful stance for this dilemma. Halberstam suggests that, rather than coming out being an end point, it is a starting point from which we ask the question, *Now what?* Other questions naturally follow: *In what ways might your identity continue to unfold or emerge from this place? What does being out make possible for you and others? How can you use your outness to challenge the constraints of normativity?* Embracing coming out as a collective practice that cultivates community, rather than as an individual task to accomplish, is one way to re-imagine and re-organize our relationship with coming out. In doing so, we help generate, make available, and welcome in an abundance of nuanced and situated stories. One or more of these can then be selected and lived into.

Conversations such as these signal our recognition of both the constructive and the problematic aspects of coming out. They also help us to have complex and generative conversations with our clients about meaningful futures.

We can understand coming out as a political reality in a heteronormative, homonormative, and cisnormative world, while simultaneously fostering resistance to the oppressive realities that make coming out a perceived necessity.

Ultimately, what matters is that we approach coming out with a critical curiosity; an openness to a variety of ways people make meaning of it; and conceptual and conversational resources that question the effects of coming out or not coming out.

### **Q-TIPS: REFLECTING ON COMING OUT**

Consider these questions (with a conversational partner or by yourself) about coming out:

- How have you thought about coming out?
- What position do you take with clients on coming out?
- How does intersectionality influence your thoughts about coming out?

- Do you think straight and cis people should practice routine coming out?
- What's new for you to consider? What's challenging? What new possibilities are emerging for you?

What does all of this look like in the therapy room? In addition to having conversations about practices of protection and resisting dishonest demands for honesty, I have conversations about *inviting people in* (Beckett, 2007; Tilsen, 2013). Extrapolating on White's (1997) idea of each of us having a *club of life* (in which we choose whom we invite into our lives and who merits a high-status membership, based on how much we value their influence), I ask questions such as these:

- Who would you like to invite into your life, where you can be a gracious host—rather than coming out into a hostile world that treats you as an unwelcome stranger?
- How do people qualify for a platinum-level membership in the club of your life? A gold-level membership? A silver? A bronze?
- What are disqualifiers—things that prevent people from being invited in?
- What will people discover when you invite them in that isn't available to them from the outside?
- What difference do you imagine (or have you experienced) inviting people in will make, compared to when you come out?
- Who do you get to be when you've hand-selected who you invite in? How does this compare to whom you get to be when you feel pressured to come out?

Shifting the conversation from coming out to inviting others in puts people in charge of their own stories and processes. It also undoes the all-or-nothing, in-the-closet/out-of-the-closet binary that's at least implicit, and often explicit, in the conventional coming out narrative. Thus, we create space for the relationship complexities, nuances, and contradictions that most people live with.

Critiquing the compulsory coming out narrative does not imply that it is universally and categorically wrong. For some people, surely, it is

useful and relevant. My purpose here is not to completely devalue a dominating discourse, but to critique it—and to remind you that such a critique makes visible what has been obscured by the very domination of that discourse. In other words, we critique influential discourses in order to stay mindful of the assumptions that uphold them—and to acknowledge that these discourses do not include or apply to everyone. This is one way we can stay close to our clients' experiences—and avoid participating in games of truth and other dominating practices.

### **Q-TIPS: RESISTING THE BINARY OF SUPPORTIVE/ NOT SUPPORTIVE**

How often do you say (or think) that someone is either supportive or not supportive of a queer or trans person? This is an easy binary to fall into, but one that is very important for therapists to unpack. If we don't, we run the risk of overlooking meaningful nuances—and missing opportunities to nurture relationships between queer and trans people and the significant people in their lives.

Support is not an all-or-nothing thing; it almost always happens in degrees. There are a variety of ways of expressing support. For example, a parent may not understand or support their trans or nonbinary child's desire for gender affirmation surgery, but they may use their child's chosen name and respect their pronouns. Or, a gay man's sister may not be willing to go to a gay drag show with him at a gay bar, but she may welcome him and his boyfriend into her home.

Finding points of support—even imperfect or partial support—is important for starting conversations, and for keeping them going. Allowing support to occur in steps, or to unfold over time, respects the complexity of support, focuses on relationships, and provides an opportunity for queer and trans people to experience greater affirmation from significant people in their lives.

## **Say Goodbye to the Parental Loss Narrative**

*Jen and Owen, both straight, cisgender, and white, were the parents of their five-year-old gender-creative trans daughter, C.J. Owen and Jen met with me to talk about some questions they were grappling with around parenting C.J.*

After our initial introductions, I asked if I could “meet” C.J. through some pictures or videos they had on their phones. Jen showed me a video of C.J. wearing purple tights, a long, polka-dot t-shirt, and a blinged-out tiara. C.J. was singing the theme from *Frozen*, punctuating the high notes with dramatic, full-body gestures. “C.J. loves theatrics,” Owen said, laughing.

The couple shared how C.J., who was assigned male at birth, first told them that she was a girl when she started pre-school a year earlier. They decided at the time to, as Jen said, “give him some room, not force anything.” She described trying to make available all kinds of clothes and toys for C.J., “so that his stuff didn’t have to be gendered.”

Owen added, “We wanted him to get the idea that there’s not a right way to be a boy, and that he could be any kind of a boy he wanted to be—including a boy who likes and does what some people think are girl things.”

“The thing is,” Jen said, “C.J. isn’t any kind of boy. She’s a girl. And it took us almost a year to really believe her.”

As we talked, it was clear that Jen and Owen were advocating fiercely for C.J. They had set clear expectations with extended family members about pronouns and C.J.’s name. (They were using the initials of her given name until C.J. decided she wanted to change her name.) They made sure that play dates validated C.J.’s female gender. They made sure that C.J.’s school was supportive of gender-creative and trans children, in both its policies and its practices. It was clear to me that Owen and Jen were as responsive as possible to their child’s needs. They had also connected with some other parents of trans and gender-creative children for perspective and support.

Yet, while doing what they needed to do for C.J., Owen and Jen found themselves struggling with some conflicting feelings. “We absolutely know we’re doing what’s best for C.J.,” Owen said. (Jen nodded her agreement.) “But sometimes one of us, or both of us, feels sad about it. It’s not about worry or fear about the challenges she’ll face—that’s real, and something to talk about sometime, for sure. This is something different than that.”

Jen added, “Yeah, it’s like, we see how absolutely happy she is now, and how it hurts her if someone misgenders her. It feels like a selfish thing we both get caught up in. It’s a kind of disappointment, like we’ve lost the little boy we had. . . or thought we had.”

They both explained that they felt bad about feeling bad. They wanted to celebrate the happiness and freedom that C.J. was experiencing, but they weren’t able to. Owen said, “Some people, including my own therapist, tell us it’s natural to feel this way, and that it’s a loss we need to grieve. But both Jen and I go back and forth on that.”

The discourse that Owen named—the discourse of parental loss—receives less attention in the professional literature than the coming out discourse. Yet it influences many queer and trans people, many of their parents, and many of their therapists. In fact, when I do trainings or consultations, I’m often asked how to address “parental grief and loss.”

Understandably, this discourse seems to matter a great deal to therapists. Bull and D'Arrigo-Patrick (2018) reviewed the family therapy literature and called the prevalence of this discourse "striking" (p. 174). A somewhat parallel review of the literature marketed to the parents of gay, lesbian, and bisexual children (Martin, Hutson, Kazyak, & Scherrer, 2010) reveals an extensive history of equating coming out as queer "to the death of a loved one" (Bull & D'Arrigo-Patrick, 2018, p. 174).

Many self-help books treat the emergence of a child's queer identity as, at best, disappointing to parents and, often, as tragic. Both the professional and lay literature cite Kubler-Ross's stages of grief as a framework for "working through" and "incorporating" the "loss" of a child who is queer or trans. One study of families with a transgender family member used the concept of *ambiguous loss* to explore people's reactions to having someone in the family come out as trans (Norwood, 2012).

Bull and D'Arrigo-Patrick (2018) acknowledge that some parents do experience feelings of grief and loss when their child announces their queer or trans identity. However, they also suggest that questioning the prevalence of the parental loss discourse in the professional literature (and the assumptions that undergird it) is necessary, so that therapists can avoid centering that discourse or imposing it on clients.

The parental loss narrative assumes straightness and cisness as defaults. To see this more clearly, let's return to my conversation with Jen and Owen. During our discussion, I strove to take a both/and approach, in which I honored and validated their feelings, and also asked questions that invited them to examine where those feelings came from. This is of course a queer approach; it's relational rather than individual in multiple ways. It locates feelings in the social world (i.e., in discourse) rather than views them as an internal state. It approaches gender transition as a family experience that involves all members and their relationships with each other. It questions norms. And it challenges one of therapy's most sacred cows: the exalted status of feelings.

Here is how my conversation with Owen and Jen continued:

JULIE: When it "feels like a loss," I'm wondering what has gone missing, or is no longer present in your lives, that's important to you, that you value?

JEN: I guess it's the ideas I had about who C.J. is, or who she would become. The idea that C.J. is a boy. That's what's gone.



OWEN: When you ask that, I think, *Well, what have we lost, actually?* C.J. is still C.J. But I still feel it...

JULIE: Yeah, that feeling is strong. It keeps a hold on you?

OWEN: Yes, very much.

JULIE: Owen, Jen said it's the *idea* about C.J. being a boy that's lost. Does that fit for you, too—that there's something about that idea that's lost, and that's what keeps you feeling it?

OWEN: Yeah, it's like you organize around some sense of what it means to have a boy or a girl, even when you try to avoid all the stereotypical gender crap, like we did. We didn't want all the problems that come with the idea. But maybe there's something comforting in the idea that your kid's gender is what it is.

JULIE: Jen, I see you nodding. What's Owen touched on that resonates for you? Can you say what's wrapped up in that idea that feels important, and speaks to what feels like it's lost?

JEN: It's just this really fundamental idea of having a boy or having a girl. But we're not invested in traditional "boy things" or "girl things," so I just swim in the feeling of sadness, of loss, even though it doesn't make logical sense.

JULIE: Yeah, it doesn't make sense, given the critique you have of gender, right? And all the ways you've responded to C.J.'s gender-expansive interests and inclinations speak to your resistance to those norms. But the sadness is still there....Am I getting this?

JEN AND OWEN: Yes.

JULIE: OK, I want to make sure I understand this sadness and how it shows up, even though you've been so intentional around avoiding gender conventions. It sounds really painful. I'd like to ask some more about the idea of having a boy or having a girl. This might sound silly, but I'm really interested in understanding something—where does that idea come from? I mean, what set you up to have this fundamental idea, as Jen said, that you had a boy?

OWEN: Silly or not, that's a good question...

JEN: Yeah, it does feel like a set-up. It's everything that we're led to believe about gender...

OWEN: You know, the first question is always, "Is it a boy or girl?," and people buy stuff based on gender...

JEN: Yeah, it's like people have an idea that they can know something about a person, or a baby, by knowing the gender. And of course, the assumption is that we can even know the gender without the person having a say in it.

JULIE: OK, so there's all this stuff we do culturally that pressures us to identify gender, plus the assumption that a gender identity tells us something about the person. Plus, that someone's gender can be known independent of their having a say in it...Are there other assumptions that contributed to this set-up, and to the feelings of loss?

JEN: Well, the obvious one: that it's a girl or a boy based on their body, and that it will stay that way.

JULIE: Yeah. So, you mean it's a set-up for parents to assume that gender is based on anatomy? And that there only are boys and girls?

OWEN: Yeah, like, I knew it intellectually, and I know Jen did, too, but it was just an abstract idea. We weren't prepared for the possibility that our kid would be gender-creative and trans.

JULIE: What were you prepared for?

JEN: We were prepared to have a cisgender child who conformed to what we assumed her gender was, according to her body.

JULIE: How has your preparation for a cisgender child, and lack of preparation for a trans child, contributed to the sadness and loss you're experiencing?

JEN: Totally. I mean, that's it.

OWEN: Yeah, and that's why it doesn't feel right to feel this. We're losing an idea that's false anyway.

JEN: It's false and hurtful. I know it hurts C.J. to think that we're sad or missing something when she's so happy.

In this conversation, you can see that I took care to understand and validate Jen and Owen's experience, while I also asked questions to deconstruct their feelings. Understanding parents' feelings of grief and loss as products of discourse (rather than as "natural" internal states) shows compassion for parents. At the same time, situating loss within discourse gives parents discursive space to see that their experience is not their fault. This helps to alleviate the guilt that some parents feel.

Parents of queer and trans people did not ask for the gender binary, heteronormativity, or gender essentialism to shape their expectations and experiences of parenthood. When parents see how gender's cultural position as a powerful construct—one central to how we organize identities—contributes to their experience of loss, they can position themselves in relation to gender in ways that allow them to live into their values as parents.

In my work with clients, once the parental loss experience is deconstructed, I encourage the de-centering of gender (or sexuality, if that's the case), and uncouple it from what parents love about their child. Gender and sexuality are not typically what parents love about their children. Indeed, when I ask parents what they cherish, admire, enjoy, or love about their kids, they typically point to their children's actions, achievements, and ways of being in the world. I have never heard a parent say, "I love my child because they are a girl (or a boy)" or "We love our kids because they're straight." Through further deconstruction, we can detach personal qualities from gender or sexual identities—and, in the process, reveal the influence of discourse on constructing these specifications.

#### **Q-TIPS: PARENTAL LOSS DISCOURSE AND THE DIFFERENCE BETWEEN SEXUALITY AND GENDER**

There are actually two parallel parental loss discourses: one about a child's sexuality (whom they are attracted to) and one about their gender (how they define and describe themselves, and what they experience themselves to be). It's of course possible to have to grapple with both discourses in regard to the same child. Let's look at how these two discourses are similar—and how they diverge.

Both involve unmet expectations established by normative discourses: heteronormativity when a child's sexuality is queer, and cisnormativity when a child is transgender. As therapists, we can help our clients deconstruct these responses, and expose the assumptions of heteronormativity or cisnormativity wrapped inside them.

However, the effects of these two normative discourses tend to be quite different. While I frequently hear parents of queer people express a loss, I never hear them say, "I could handle this if they were trans." However, I often hear parents of trans people say, "This is really

hard—I could handle it if they were gay.” This speaks to the way that gender is seen as an immutable and natural attribute, while sexuality is not. And when something we thought was permanent changes, we are likely to experience a significant loss. (Of course, queer theory demands that we interrogate the discourses that circulate stories of gender as immutable.)

Then there is the conflation of anatomy with gender identity. Parents often focus on what a transgender identity means in terms of their child’s body. Because trans and nonbinary people sometimes medically change their bodies so they can feel more at home in them, parents’ feelings of loss can be a response to a gut-level reaction to the idea of making physical changes. Bodily adaptations seem more “real” in a world where corporeal matters are privileged. This gender essentialism, coupled with the cultural power of gender as fundamental to identity, produces the perfect discursive context for parents to feel a significant loss. They feel that the very “essence” of their child is changing—along with, perhaps, the body that houses that essence.

Compare this with essentialist discourses about sexual orientation (e.g., born this way; biological and genetic explanations; etc.). While these are also dominant, and widely accepted and assumed, parents may not feel as heavy a loss when their kids come out as queer, because this does not involve a body modification.

In addition, the success of the contemporary gay rights movement’s core message—“We’re just like you”—has blurred the difference between queers and straights. Queer people are now far more widely accepted by mainstream culture than they were only a generation ago. As of 2021, however, trans people have not received this wide acceptance. Thus, part of the trans parental loss discourse includes feeling that a child’s inclusion in mainstream culture has been lost.

For example, Owen and Jen said that they always admired C.J.’s “confidence in her physical strength and abilities.” While these particular qualities are traditionally gendered as male, Jen and Owen rejected that sexist coding. Instead, they embraced C.J.’s physicality as a “reflection of her passion for life and feeling good in her body.” As they identified the many other things they cherished about C.J., I invited them to share stories around each of their daughter’s qualities—the histories

and possible futures of C.J.'s skills and attributes—so that they could imbue C.J. and her abilities with meanings other than those organized around gender.

Another practice I use when working with parents is interviewing them about their mission as parents. A Mission Interview helps parents take a bird's-eye view of their parenting by focusing on their values and aspirations *as parents*. This gives parents an opportunity to reclaim what matters to them, and to reposition themselves in resistance to ideas that don't align with their own values, or with their hopes for their children.

For Jen and Owen, the Mission Interview (which we did in our second meeting) allowed them to reclaim their priority of “caring for C.J. and fostering her independence and happiness.” After naming their mission and identifying the principles and practices that support it, Owen and Jen came to see the cisnormativity of the parental loss discourse as a barrier to their mission. As Jen said, “Supporting and celebrating C.J.'s health and happiness is at the heart of our mission. Anything that reinforces cisness takes away from her joy and doesn't align with our mission.” This helped free them from the feelings of loss.

Below are some examples of questions I might ask in a Mission Interview:

- What is your mission, purpose, or aspiration as parents or (if my client is a single parent) a parent)? If you were to write a mission statement, what would that be?
- What is the history of this Mission? Who inspired it, and how?
- What experiences have you had in your life that helped shape this Mission?
- What values and principles inform this Mission?
- What are the practices you engage in that bring these values and principles to life?
- How will you know if you've accomplished your Mission?
- What are some of the barriers to living into your Mission?
- How do the conventions of gender and sexuality support your Mission? How do they thwart or complicate it?
- Who supports you in your Mission as parents? Who helps you live into it when these barriers get in your way?

- What would your child say have been some of your greatest Parenting Mission successes?
- What advice would they have for you to better live into your Mission?
- When you are really nailing your Mission, and parenting according to its values and principles, how much do the rules of normative gender and sexuality matter?
- What would you advise parents of a queer or trans child to do to help keep themselves focused on their Mission?

Mission interviews solidify parents' commitments to their children, and to their preferred identities as parents.

Sometimes, the questions I ask in a Mission interview help parents put words to—and reclaim—intentions and practices that they already center in their lives, but may have lost sight of in the struggle to make sense of their experience of their child's sexuality and gender identity. At other times, the questions evoke responses that parents say they had never felt or considered before. This is the magic of words—the *abracadabra* of language: the ability to create new, significant meanings that help people imagine and live into stories that matter.

## Queering Narratives and Narrating Queerly

Let me say it again: the conventional discourses of coming out and parental loss can be meaningful, legitimate, and well-suited to many queer and trans people and their families. But they do not define the limits of legitimacy or meaning.

As a therapist, accepting these discourses without question puts you at risk of imposing unhelpful and possibly harmful narratives on people. It also prevents you from bringing out important nuances that lend meaning to people's lives.

Queering these narratives involves questioning the previously unquestioned assumptions and the discourses they uphold. It also involves helping people to story their lives in ways that not only resist convention, but *honor* this lack of convention, in all its contradictions and complexities.

## Notes

1. The emergence, acceptance, and integration of a gay, lesbian, bisexual, or transgender identity is known variously as *identity development* (Coleman, 1981–1982), *identity formation* (Cass, 1984), *identity acquisition* (Troiden, 1979), or *differential developmental trajectories* (Savin-Williams, 1998; Savin-Williams & Diamond, 1997), depending on the model used.
2. I use “child” and “children” to define a relationship, not to distinguish age. In other words, my use of child/children is inclusive of queer and trans adults in relationship with their parents.
3. I draw on Halberstam’s (2011) idea of the *queer art of failure* here. “Failing” to do something that is unhelpful, unmeaningful, or otherwise problematic is actually an art, given the pressure to doing or complete it.