Queers and Crips: Parallel Identity Development Processes for Persons with Nonvisible Disabilities and Lesbian, Gay, and Bisexual Persons

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Traditional models of identity development are inadequate when applied to lesbian, gay, and bisexual (LGB) persons and persons with disabilities. The identity development and life experiences of persons with disabilities and LGB persons are similar in many respects including being raised/socialized by persons who are not a part of that group, and being educated to conform to the standards of behavior and appearance of the dominant culture. This article describes and critiques four models of identity development as applied to LGB persons and persons with nonvisible disabilities: stage/linear, issues/milestone experiences, social constructionist, and interactional. The authors propose an interactional identity development model for persons with disabilities and LGB persons that incorporates the significance of bio-psycho-social-cultural contexts, the influence of multiple identities, the fluidity of identity formation, and the importance of language.

KEY WORDS: identity development; disability; queer.

INTRODUCTION

The concept of identity formation or development has typically been related to those who are white, male, heterosexual, and nondisabled. Early theorists, such as Erik Erikson, Erich Fromm, and Abraham Maslow, noted that identity formation is an important human experience (Ewen, 1980), but they largely failed to differentiate identity formation experiences based on such characteristics as biological sex and gender, race, class, sexual ori-
presentation, or disability. As a response to the exclusion of the unique developmental experiences of women and persons of color, theories that focus on female identity development (see: Gilligan, 1982) and racial identity development (see: Hall, Freedle, & Cross, 1972) have emerged.

Late twentieth-century gay male and lesbian identity development models were developed in response to the pathologizing of homosexuality popular in the early to mid century (Bayer, 1981), and in order to address unique issues in the identity development of lesbians and gay males. Early lesbian and gay male identity development models tended to ignore bisexuality or characterize bisexuality as a phase through which a person passes when becoming a lesbian or gay male. During the 1970s and 1980s, researchers began to identify bisexuality as a unique identity (see: Klein, 1978; Wolff, 1977). Debate over the differences between biological sex, gender, sex role, gender identity, and sexual orientation lead to theory and research on transgender identity as a unique gender identity (Bullough, Bullough, & Elias, 1997; Feinberg, 1996). In a similar fashion, concurrent with the rejection of the medicalization of disability and the emergence of a disability community (Asch & Fine, 1988), there has been an articulation of models of the development of disability identity (see: Gill, 1997; Linton, 1998; Nagler, 1993).

The identity development and life experiences of disabled persons and lesbian, gay, bisexual (LGB) persons are similar in some respects and different in others. Hillyer (1996), in comparing lesbians and disabled women, notes several areas in which the two groups are comparable, including being: (a) raised/socialized by persons who are not a part of that group; (b) educated to conform to the standards of behavior and appearance of the dominant culture; (c) persons whose civil rights movements have come later in the century; and (d) women whose sexuality is at issue when their sexual or disability status is identified. Another similarity between both these groups is that language used to demean and degrade members of these groups has been reclaimed by LGBs and persons with disabilities. “Queers” and “crips” are examples of words used by nondisabled and non-LGB persons to harm LGBs and people with disabilities; by reclaiming these words as expressions of pride and cultural identity, the influence of them to harm diminishes.

Additionally, persons with nonvisible disabilities and LGB persons are faced with decisions around disclosure of a stigmatized identity and whether one can or wants to “pass” as nondisabled or heterosexual and how this affects one’s self-esteem (Hecht & Gutman, 1997; Hillyer, 1996). Although some persons with nonvisible disabilities and LGB persons may be able to pass in some situations, therefore being viewed as members of the privileged group, there is usually a cost (Berger, 1990). Hillyer (1996) notes that lesbian coming-out narratives have been the model for coming-out narratives of disabled women. Within the LGB community and the disability