

Eating Disorders in Gay Men - Current Issues

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Gay men are vulnerable to eating disorders. This article will focus on some of the issues that create this vulnerability and how eating disorders are often expressed in gay men.

Issues of vulnerability

Eating disorders are expressions of low self-esteem and a lack of a sense of control over one's life. In an appearance focused culture, any individual who experiences himself or herself as inadequate or marginalized is at risk. For gay men, a number of factors increase vulnerability to developing eating disorders.

First, is the issue of growing up gay in a very straight world. "Times have changed" over the past number of years, evidenced by the recent open proclamation of her homosexuality by Ellen DeGeneres on television (although it may be many more years before a male lead does the same). However, we need only look at recent debates in the Ontario legislature on Bill 167, or at a federal level, regarding same-sex rights or any debate where gay and lesbian issues are discussed, to see the degree of hatred expressed publicly. Comments that all gays are pedophiles, perverted, etc. are common and have been overtly or covertly approved by conservative religious, medical and other organizations. The more visible the gay population becomes and the more openly gay civil rights are fought for, the greater the personal tension of being part of a high profile, often negatively perceived sub-group. Small wonder then, that gay people growing up in this environment have issues with self-acceptance.

Most gay people know instinctively that they are somehow "bad," "disturbed" or "shameful," and anticipate rejection from people around them, including friends and family. This hatred is felt so acutely that it inevitably leads to some form of self-hatred, more commonly known as internalized homophobia. Given the degree of real or perceived hatred felt from those around them and in the public mind, it is not surprising that overcoming internalized homophobia is one of the most difficult tasks gay men face, a task that is frequently not achieved, resulting in lingering consequences including lowered self-esteem. Since North American culture tells one that looking a particular way can bring success, happiness and health, gay men with particularly poor self-esteem may be more likely to turn to appearance oriented criteria to raise their lowered self-worth, or displace conflicts regarding their sexuality onto their body, with the potential of developing an eating disorder.

"Coming out," or acknowledging one's homosexuality, and seeking acceptance from family members and friends are fraught with the risk of negative reactions and rejection. Yet it remains an essential component of self-acceptance. Even with these tasks

completed, it is impossible for any gay man to escape the negative atmosphere and comments that occur throughout his life.

Within this negative climate, it is understandable that gay men may actively seek acceptance and understanding. The need for acceptance and approval can be strong, and a frequent assumption is that only other gay people can provide them with that acceptance. The problem occurs because, as one begins to fit into the gay community, it is quickly learned that appearance oriented criteria determine how much acceptance, understanding and positive regard one receives. Unfortunately, this is one of the hallmarks of gay culture. The better one's perceived appearance, the more attention, recognition and sexual partners one will obtain. Gay men quickly learn the importance of their own appearance in obtaining the desired attention and acceptance.

And what is the appearance that gay men learn will get them that attention? Interestingly, much of it is based on stereotypical masculinity and what that represents: The social construction of masculinity as strong, powerful and assertive as opposed to femininity with its perceived weaknesses and vulnerability. This distances gay men from effeminacy and creates a sense of safety. Which brings us to the next issue: The long-standing public image of gay men as effeminate – “sissy boys” growing up to be florists, hairdressers or in the arts. Gay men are aware of the public stereotypes and, especially if perceived as “sissies” themselves when younger, are all too painfully aware of the stigmatization. This awareness encourages them to distance themselves from the reviled image. Preoccupation with creating this masculine stereotype – a lean, muscular, defined body – creates more problems because it relies on a narrow, physical image of masculinity.

Creating the image of the stereotyped male is an attempt by insecure gay men to reassure themselves of their own masculinity while they ignore other aspects of themselves, their personality and their abilities. Creating the image of the male stereotype lets them deal with the insecurities they may have about themselves as gay men and encourages others to accept them as straight and “masculine.” It is ironic that by identifying themselves with a perceived macho, heterosexually inspired image of gay men, they have merely replaced one stereotype (the “sissy”) with another.

It is unclear why this preoccupation with the masculine stereotype is stronger now than ever before. One can speculate that as gay rights and visibility began to take centre stage, perhaps the need has increased to be viewed in a more “acceptable” light and to reduce the impressions in others' minds that all gay men are effeminate (and hence of less value). The era of AIDS may also have played a role with HIV-negative men wanting to create a healthier, more muscular appearance to distance themselves from appearing ill, and hence further stigmatization and rejection. More recently, HIV-positive people with recovering health from newer antiretroviral medications may also feel the need to create a healthier look to distance themselves from their own illness. Physical appearance has always been equated with one's health status, despite not being an accurate marker. Thus myths about fat people abound, while muscularity and leanness is thought to automatically connote good health. Whatever the reasons, it is clear that this “Cult of

Masculinity” as described by Michelangelo Signorile in his book *Life Outside* has taken a tenacious hold.

Gay men have condescended to other gay men if they are perceived as anything less than the stereotypic masculine ideal. Personal advertisements in gay papers commonly use descriptions such as “straight acting/straight looking” to highlight the notion that being straight and masculine is the ideal, and anything effeminate is reviled and shunned. In their desperate attempts to avoid exclusion, gay men take up the struggle to appear “masculine,” only to be burdened with increased body dissatisfaction and the pressure to achieve unattainable bodies, easily leading to eating disorder symptoms.

The preoccupation with the stereotypic masculine image is no different than the preoccupation with the slender look idealized by most women. The media also plays a strong role in strengthening the desire for a specific body type, and the erroneous belief that it can be attained by anyone with enough willpower. All the men in advertising directed at gay men look identical – lean with a defined chest, washboard abdominal muscles (“abs”) and an absence of body hair. Gay pornography uses actors who fit the same description. The message is strong and clear – this is what you have to look like in order to be successful, accepted and loved.

For gay men, it also encourages the idea that these men should be the objects of desire, and the only way to “have” a man like that is to be one. The focus is not personality, abilities or accomplishments but strictly a look that will be desired and valued by others. Because the impact of the media most strongly affects those most dissatisfied with their bodies or who see their bodies as furthest away from the ideal, it creates a downward cycle from which it is difficult to remove oneself. In the same way that women are encouraged to believe that thinness is associated with beauty, happiness and success, gay men have come to believe that a fit, lean, tight, sculpted body will bring them the happiness and success they are seeking. As with women, the focus for gay men is on the body and its parts, not the person. As with women, gay men use their bodies to feel good about themselves and to feel desired by others. Of course, none of this allows them to focus on the underlying issues of their low self-esteem in the first place. Nor does it allow for the development of self-worth in other, more meaningful and durable ways.

The combination of growing up feeling excluded and shunned, longing for acceptance and love on the one hand, and a culture strongly linking acceptance and love with a particular physical appearance on the other hand, creates enormous pressure to attain that ideal body. This great emphasis on appearance increases the vulnerability of gay men to body dissatisfaction and the attitudes and behaviours associated with eating disorders. One study looking at the influence of sexual orientation on body dissatisfaction highlighted the pressures on body image within the gay community. It showed that the level of body dissatisfaction and psychosocial distress experienced by gay men was similar to that of heterosexual women, and much higher than for heterosexual men. The study also noted that the greater the affiliation and involvement with the gay community, the greater the degree of body dissatisfaction experienced by gay men. It is very clear that gay male culture exerts great pressure on gay men to meet a physical ideal, and the costs

in terms of body dissatisfaction, psychosocial distress and an increased vulnerability to eating disorders can be significant.

Presentation of eating disorders

The presentation of gay men's eating disorders has been reported to be quite similar to that of women, in terms of symptoms and behaviours. However, in my opinion, some differences are apparent. Many gay men would have difficulty accepting the notion of a "drive for thinness." Rather, the drive is more for leanness, muscle tone and definition. Frequently, their focus is not on losing mass but on losing "fat" and much of the eating disorder symptoms are focused on that endeavour. Their difficulties often begin with excessive exercise for the express purpose of changing their physical appearance. Dieting behaviours gradually come more into play as they fail to increase or, in fact, decrease caloric intake with increased exercise. Studies have shown that over-activity, especially excessive exercising, may be a more common method of purging for men as it is considered more socially acceptable. Certainly, for gay men trying to obtain a lean, defined body, exercise is perceived as the route to take. Typically, they increase the amount or length of their workouts each time, schedule all activities around their exercise, and feel guilty and worthless for missing a workout. Because of the initial body changes that occur with the exercise and calorie reduction, they often receive positive attention from others. This encourages a very negative cycle in which they come to rely increasingly on body shaping for self-esteem and acceptance.

Food restriction seems mostly focused on fat intake, which leads to an increased limit on the foods that individuals at risk allow themselves to eat, and eventual caloric reduction. Binge eating does occur, as a consequence of both physiological and psychological deprivation. However, self-induced vomiting seems to occur less often than in women with disordered eating. When gay men do start to self-induce vomiting, it is often the point at which they acknowledge their eating disorder.

What can be done?

Education is probably the most important strategy for prevention and early detection of eating problems. It is clear that most gay men do not seek treatment for their difficulties. One of the reasons is that with the focus on exercise, the behaviour is culturally sanctioned and encouraged. It is therefore viewed as normal, and they believe that what they are doing is simply "working out." Eating disorders are also perceived to be a woman's problem, not something that affects gay men, thus the stigma of having a "woman's illness" when trying to create an aura of masculinity would be great. Education needs to be culturally specific, and for gay men this is especially so, given a chronic sense of being marginalized and stigmatized by society.

Education focused on gay men's unique struggles, and the pressures placed on them by the gay community, would be helpful. It must also focus on healthier approaches to exercise where the goal is enjoyment, improved health and fitness, not strictly shaping physical appearance. Encouragement to stay out of situations and environments that are filled with negative messages, e.g., certain clubs where the focus is strictly on the "perfect" body, would also be helpful. Education that creates awareness can reduce the power of the negative cultural messages being received from both the gay and straight establishments and potentially allow for the establishment of more meaningful and lasting sources of self-esteem. It should also focus on health care practitioners so that they can counsel their gay male patients regarding diet, exercise and lifestyle.

The gay media also needs to be confronted about their role. Portraying the gay population in its true diversity allows for the acceptance of the full range of body types in which people naturally come. Another major focus should be on gay youth, to assess their vulnerability and help them avoid getting caught in the trap of gay male culture's focus on appearance, and encourage them to focus on other ways of building self-esteem.

Perhaps, through these ways, gay men will eventually escape the negative pressures they currently experience. And hopefully, as the years go by, the issue of public and personal acceptance will fade, and with it the toll on gay men's self-esteem. With greater self-acceptance, gay men can begin to lead healthier and more well rounded lives.

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