A model for working with identity 'difference' integration
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I have adapted the models of Arlene Istar Lev's "Transgender Emergence Model" (1) and Fassinger's 'coming out' model (2) to produce a model for 'difference' that can be used in contexts of other diversities and differences (i.e. sudden disability or a developmental awareness of a difference)

Lev's stage model looks at how trans people come to understand their identity. Lev is writing from a counselling/therapeutic point of view and this model talks about not only what the individual is going through, but also the task of therapy.

Fassinger proposed two processes of identity development: ***Individual*** *sexual identity relating to one's internal awareness and acceptance of self*, and ***group*** *membership identity relating to one's role in the gay/lesbian community.* The two proposed processes consist of four sequential phases. An individual can reside in a different phase for each process ; Awareness; Exploration; Deepening/Commitment; Internalisation/Synthesis.

Through my work with people in therapeutic settings, I have observed these processes in those with a difference unrelated to gender or sexual orientation and propose that this transposed model can be applicable to considering all kinds of 'difference' and be useful as a contextual frame to work from within the therapeutic alliance:

Four sequential Phases:

1. **Awareness;** perceiving oneself as different from other people
2. **Exploration;** investigating feelings about that difference
3. **Deepening/Commitment;** internalizing the difference into the sense of self
4. **Internalization/Synthesis;** incorporating one's difference into one's overall identity

Six Stages and the Therapeutic Tasks:

- **Awareness** – In this first stage of awareness of their difference, people are often in great distress; *the therapeutic task is the normalization of the experiences involved in living with the difference*

- **Seeking Information/Reaching Out** – In the second stage people may seek to gain education and support about their difference; *the therapeutic task is to facilitate links and encourage outreach.*

- **Disclosure to Others** – The third stage involves the disclosure of the difference (where the difference is hidden) to significant others who may not be aware (i.e. potential partners, work

colleagues, friends and staff in settings that need to be aware); *the therapeutic task involves supporting the person's integration in the social system.*

- **Exploration (Identity & Self-Labeling)** – The fourth stage involves the exploration of various 'diverse' identities; and *the therapeutic task is to support the articulation and comfort with one's identity*.

- **Exploration** The fifth stage involves exploring options for any possible changes regarding identity, presentation, and where available /appropriate, body modification; *the therapeutic task is the resolution of the decision and advocacy towards the manifestation of change*.

- **Integration (Acceptance)** – In the sixth stage the person is able to accept, integrate and synthesise the identity; *the therapeutic task is to support adaptation to the related difference.*

Working with the model:
Therapists must hold in mind that whilst these are primarily linear processes, occasionally they are not, and it can be helpful for the practitioner to work with the client to identify where they may be 'stuck' and/or if a stage has been 'skipped' (potentially as a psychological defense) or where a stage has had an unhelpful adaptation (potentially integrated but as a negative)

The stages may also be reached at varying ages and stages of development and the client may have developed unhelpful related psychological adaptations.

Not all clients need to process each stage, for example wanting to join groups relating to their difference. It may be helpful however, in that example, to explore 'how it might be' to access a specialist support organisation or join a group, or conversely how to integrate outside such groups, as there may be some *internalised shame* about the difference to address.

Internalised shame (oppression) refers to ways we, in the subconscious, take into our psyches and ways of thinking and being, the negative oppressive ideas, attitudes and beliefs received from society.

It is hoped this model will act as a tool for therapists in addressing clients' internal negative responses to their own differences.

Case Study examples will be available shortly here: www.livingandlife.co.uk

1. Lev. A .I Transgender Emergence: Therapeutic Guidelines for Working with Gender-Variant People and Their Families (Haworth Marriage and the Family) 2004
2. Fassinger, R. E.; McCarn, S. R. "Revisioning sexual minority identity formation: A new model of lesbian identity and its implications for counseling and research.". *Counseling Psychologist* **24**: 508–534.