Polymy as a Cultural Identity
Implications for Clinical Practice

Abstract

Polyamory can constitute a complex, variable, and ever-evolving culture whose adherents must create their own relationship, family, and sexual practices from scratch, as well as the language in which to communicate it all. Therefore polymy clients may present for therapy with unique challenges, needs, and strengths compared to monogamous clients.

Responding to a shortage of culturally competent care, this paper presents an initial foundation for therapists working with the present authors' ethnographic impressions, sample vignettes and case conceptualization notes from clinical work both with and without experience serving this population. Clinical implications and recommendations are discussed and suggestions for further reading are provided.

What is Polymy?

Polyamory is a lifestyle in which a person may have more than one concurrent romantic, sexual, or emotionally committed relationship, with the knowledge and consent of all parties involved (Weltman, 2006).

Unlike infidelity, polymy implies honesty and open communication even between partners (Debruyne & Rubin, 1982). Polymyous relationships may or may not be sexual in nature and usually emphasize some form of emotional or romantic commitment (Hymer & Rubin, 2003). Polymy clients may vary widely in presentation and there are many trends, styles, and characteristics of relationships that do not identify as polymyous.

Prevalence

• Though evidence suggests consensual non-monogamy is quite common among heterosexuals, such as Blumstein & Schwartz's (1983) finding that 15-28% of American heterosexual couples fit this description, data on polymy prevalence in this population is practically nonexistent.
• Roughly 1/3 of lesbian women may be polymyous or similarly non-monogamous (Blumstein & Schwartz, 1983; Munson & Stelboum, 1999).
• Robust data suggest 50% or more gay male couples are sexually non-monogamous, but a study of non-monogamous identifiers found this to be quite low (Adam, 2010; Bonello, 2009; Blumstein & Schwartz; 2001; LaSala, 2001).
• 30-60% of bisexuals may identify as polymyous or similarly non-monogamous. Roughly half of polyamorous people report having more relationships than one has time or energy for.

Clinical Implications

Common Presenting Issues

The vast majority of polymy clients seek therapy for reasons unrelated to their lifestyle (Weltman, 1996; 2006). However sometimes polymy-specific issues or needs may arise.

• Some common examples:
  - Struggling with stigma arising from polymy identity, or issues around acceptance within families/friendships.
  - Struggling with internal or external shame due to cultural, heterocentric, mononormative biases.
  - Assistance negotiating conflicting values and needs, especially regarding issues such as introduction of new partners, shifting relational roles, task sharing, and rules.
  - Time management and avoiding “polysaturation,” or having more relationships than one has time or energy for.
  - Managing polymy and childrearing.

Microaggressions and Polymy

Microaggressions are subtle expressions of bias or discrimination common in clinical settings that may impact a client's care. Polymy clients may experience these, for example:

- A subtle sigh or eye-roll, or avoidance/discomfort, when a client mentions having multiple relationships.
- “Focusing unnecessarily on a client’s poly lifestyle.”
- “Not wanting to lose the new connections in their lives.”
- “I am suspicious that she is using the polymy idea just to go against what society says is wrong.”
- “I am not sure that I would be allowed to make a personal bias against the door to their couple.”

Polymy and LGBT

LGBT Relationships May Support Polymy

- Much of the polymy/conventional non-monogamy research has focused on LGBT populations, in part due to higher polymy prevalence.
- As with polymy, LGBT relationships lack existing models and therefore are highly individual.
- This approach results in greater dialogal openness between partners (Debruyne, 2003). Common concerns (e.g. monogamy often not a given).
- LGBT couples often reflect a “friendship model,” emphasizing co-independence, egalitarianism (Heaphy, Donovan, & Weeks, 2004).
- LGBT clients may often report a greater variety of choice for relational support: partners, ex-partners, lovers, etc.
- These trends are all convergent with, and may facilitate, polymy or similar forms of non-monogamy.

Influence of Gender Identity on Lesbian/Gay Male Polymy

- Increased emphasis on loving friendships vs. pure sexuality in lesbian populations (Rhode, 2011).
- More common to form loyal, long-term friendship groups and to mix concepts of friend/lover/partner.
- Represents an example of feminine re-framing of non-monogamy, often resembling polymy even if not identified as such.
- Gay male poly often less emotionally open/focused.
- Influenced by male standards and constructs.

Influence of Race on Polymy

- The poly community places a very strong emphasis on open (and frequently copious) communication, honesty, and personal ownership of one's feelings (e.g. jealousy), needs (e.g. reassurance) and actions (e.g. boundaries).
- The poly community values and protects the right of patients to determine who, when, and how they discuss their relationships and the boundaries of those relationships.

Common Misconceptions

Polymy signifies sexual promiscuity and is inherently unstable.
- Numerous studies have compared monogamous and non-monogamous relationships on measures of relationship happiness, satisfaction, and communication. No significant differences were found (e.g. Weltman, Davidson, & Phillips, Jr., 2012).
- Longitudinal research demonstrated no difference in marital stability between monogamous and polymyous couples (Rubin & Adams, 1986), and that non-monogamous relationships usually end for similar reasons as monogamous ones (Ramsay & Delgado-Romero, 2011).

A polyamorous household is detrimental for children.
- Preliminary research of polymy family's found that children in polymy households appear healthy and happy, often reporting greater availability of love, nurturing, and resources (Steffl, 2010; 2011).
- Polymyous people are mentally ill, or have certain psychological deficits.
- Polymyous people are not necessarily emotionally detached from their partners, and are more likely to manage their other relationships, such as friends, ex-partners, and family or other loved ones, in a manner that serves their individual needs.
- Polymyous people control the narratives of their own lives, and are more likely to manage their other relationships, such as friends, ex-partners, and family or other loved ones, in a manner that serves their individual needs.
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References


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