



# PSYCHOLOGY AND LGBT: REFLECTIONS ON EQUALITY AND DIVERSITY

In 2014/2015 the Psychological Society developed and launched guidelines for good practice with lesbian, gay and bisexual clients. In addition, the issue of equality and diversity is a key feature of the PSI Society and Public Policy Committee's work plan for 2019. As we look forward to Dublin LGBTQ PRIDE 2019 (taking place in June – see [www.dublinpride.ie](http://www.dublinpride.ie)), we have invited some members of the Society to reflect on the way in which the profession recognises and addresses issues for and with LGBT individuals.

## Reflections on LGBT and Psychology

Twenty-two years ago, events surrounding the 1997 European Congress of Psychology, held in Dublin, prompted an apology from PSI and the holding of a symposium at our Annual Conference some months later entitled "Homophobia – A Problem for Psychologists?"

In the years that followed, I completed research with the former Eastern Health Board (EHB) in conjunction with Dr Maria Dempsey (University College Cork) exploring the prevalence and aspects of homophobia amongst psychologists. On foot of the findings we developed and delivered a sustainable training package with the EHB. In this work I directly experienced homophobic discrimination from a small minority of well-established people within our profession and to be honest, became disheartened with the integrity of our profession as represented by some people at the time. How times have changed! At the PSI Conference gala dinner in 2018 I was approached by some of our older members who told me how thrilled they were to see a PSI President openly with their same-sex husband at Conference – I am sure they were far less impressed by our dance moves!

It makes me proud to see how far our profession has come in Ireland in readily supporting human rights, in very real and tangible ways. I do not doubt the presence of that support historically amongst most of us, but for those of us from previously or currently excluded communities, it must be made explicit – we have to "see it to be it". We can be justly proud of achievements such as our explicit guidelines on working with LGB people and evidenced, publicly declared statements on various policies and laws that may 'other' and negatively impact our most vulnerable and excluded members of society. So, today, let's relish the celebration that is PRIDE, but tomorrow, let's not rest on our laurels but look to those less visible in Society – such as our people in custody; our members of the Travelling community; people in direct provision; people with disabilities to name but some – and let's ask ourselves three questions:

- Where are the psychologists from these communities?
- What practical things can I and we do to promote inclusion of these people more in PSI and Society?
- What would somebody writing this in another 22 years, at PRIDE 2041 say of our efforts?

Proud love,

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**Brendan O'Connell**  
PSI Past President

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## Still not Cool to be Queer: Reflections on PSI Guidelines for Good Practice with LGB Clients

A few weeks ago as I walked through Dublin on my way to the launch of a policy document related to lesbian, gay, bisexual, transgender, queer and related issues (LGBTQ), I noticed – not the first time – how much Irish society has changed since the publication by PSI of *Guidelines for Good Practice with Lesbian, Gay and Bisexual Clients* (2015). Gay and lesbian couples walked openly hand in hand or arm in arm and might even kiss each other without provoking the hostile reactions that Panti spoke about so movingly in her Noble Call of 2014. Since 2015, when same-sex marriage was legalised after being approved by a popular plebiscite, we have had a gay Taoiseach, and a lesbian Minister for Children and Family. The Gender Recognition Act (2015) has placed Ireland at the forefront of transgender rights. Public and private institutions ranging from universities to corporations now have LGBTQ staff networks or associations, and policies relating to sexual orientation and gender identity and expression that are readily visible and accessible on their websites.

Unfortunately, soon after I arrived at the launch, I heard of the stresses that young people still experience in coming out as LGBTQ, and of a case where a young person was recently asked to leave the family home. Parents now in their 40s still have difficulty accepting LGBTQ children, and it must be remembered that 28% of the electorate voted against same-sex marriage. The word queer can still provoke strong reactions even though it has been used since the 1990s by many members of the LGBTQ community. And despite the advances outlined above, many LGBTQ people of all ages remain isolated and fearful of revealing their identities. Evidence for the continuing stress experienced by LGBTQ youth is provided by a national study of the mental health and wellbeing of lesbian, gay, bisexual, transgender and intersex (LGBTI) people in Ireland published in 2016 by Professor Agnes Higgins and her associates at the School of Nursing in Trinity College Dublin (Higgins et al., 2016). Higgins et al. report that:

"[the] rate of severe or extremely severe depression, anxiety and stress for the adolescent cohort (14-18 years) was four times higher than the rates reported for the 12-19 year old cohort in the My World survey of Irish adolescents and young people" (p. 23).

Readers may note the use of LGBTI as an acronym by Higgins et al. This reflects the constantly changing and more specific language that is a feature of LGBTQ culture in Ireland and internationally today, and that was evident in interviews in which I participated while producing a documentary about Irish Lesbian Community (see <https://www.facebook.com/OUTTITUDEdocumentary/>). It is reflected in the evolving use of language in research on LGBTQ people and indeed on sexuality itself. As the 2015 Guidelines noted, varying acronyms and phrases are used in the psychological literature for concepts related to sexuality, sexual orientation, gender identity and expression, homophobia, transphobia and gender and sexual minorities. Research on clinical experiences of LGBTQ people has found that inappropriate language, discomfort with vernacular language and use of pathologising language by psychologists is a barrier for clients (Tolman & Diamond, 2014).

The example of language is just one of the many areas where specialist competence is required by psychologists in practice with LGBTQ clients. The good news is that there is now a considerable body of evidence, specialist journals and handbooks that provide conceptual and empirical discussions across the diversities of LGBTQ people and across the entire range of psychological functioning from childhood through to late adulthood. For example, a recent publication that included an Irish editor (Skinta & Curtin, 2016) contained chapters on shame, stigma, relationships, parenting and spirituality.

Reflections on the PSI Guidelines firstly highlight the necessity of guidelines. In addition to language, there are several specialist areas of knowledge. The experience of coming out, and the risks associated with that, are examples that are unique to LGBTQ clients. While psychologists obviously have a large body of knowledge and possibly everyday experience with LGBTQ individuals, as the example of language shows, such knowledge is insufficient for good practice with LGBTQ clients. Psychologists can rely on training and experience, but even if they themselves are LGBTQ or have family members who are, as with other areas of psychological functioning where there is specialist knowledge (e.g. youth mental health), they cannot rely on personal experience for the knowledge and competencies needed to work with clients, who themselves may reflect the diversities within the LGBTQ community.

Reflections also raise the question of who should produce guidelines for PSI and for what purpose. As convenor of the LGB Guidelines I am aware of the amount of work required to produce these documents. The context of the time involved contestation (some questioned the need for guidelines), politicisation (a referendum on same-sex marriage was being discussed), and limits to evidence (considerable research on lesbian and gay but much less on bisexual experiences). The PSI Guidelines addressed sexual orientation (albeit with limited reference to bisexuality), but not gender identity and expression, as PSI had previously distributed *Transgender and Gender Dysphoria Information for Psychologists* which had been produced by the Transgender Equality Network Ireland (TENI). Gender identity and expression now has a great deal more visibility and resources, which can be included in training and in guidelines. Another notable shift from 2014/5 is the consolidation of national organisations in Ireland that support LGBTQ people – LGBT.ie, TENI, and BeLongTo.

Like other areas of specialist knowledge, language, concepts and research are constantly evolving, and guidelines need to reflect this. However, with vastly expanded areas of research, I would suggest that it is impractical for PSI to produce comprehensive overviews of research. Other professional psychological associations such as APA and EPPA, with many more resources, have already done this work, and provided guidelines for practice. Furthermore, the main national organisations in Ireland that support LGBTQ people – LGBT.ie, TENI, and BeLongTo – all have extensive information on their websites that include glossaries and guidelines for mental health professionals. PSI could utilise these resources, focus on existing Irish research, and highlight the specificities of the Irish context. Guidelines can be placed in the context of the *PSI Code of Ethics* and the *PSI Policy on Equality and Inclusive Practice* which I have found to be a very useful resource in training psychologists and psychotherapists.

An important aim of guidelines is not just to provide information to psychologists but also to communicate to clients that psychologists are aware of and knowledgeable about diversity. Most professional psychological association have special interest groups and guidelines and policies relating to diversity and/or LGBTQ people that are visible on their websites. These are reflections of ethical commitments to respect, dignity and professional competence for clients who often feel marginalized and invisible. At the moment, perhaps temporarily, this is not the case for the PSI website. Hopefully this does not reflect a retreat to the universalism of 20th century psychology which ignored diversity for so long, itself a reflection of political values in society. Fortunately, there is vastly expanded evidence base that demonstrates the value for good practice of diversity awareness, and provides the knowledge and competencies needed to work with clients from diverse backgrounds, that will hopefully be reflected in PSI policies and guidelines.

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Ger Moane  
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## Accessing Training and Development on LGBT Issues

Despite the PSI LGB guidelines being nearly five years old, there is still relatively little LGBTQ+ training available for psychologists in training and qualified psychologists in Ireland. A recent study (McNamara, Wilson & Leonard-Curtin, 2019 awaiting publication) found that, of 108 participants who were trainee or qualified clinical or counselling psychologists, predominantly within the Irish context, only 32% had received specialised LGB training as part of their psychological training. Only 44% had received specialised LGB training at some point. This is deeply concerning given a vast range of studies have consistently reported that LGBTQ+ people struggle more with mental health challenges than their heterosexual and cisgender (where sex assigned at birth maps onto societal expectations) counterparts, this being related to the consistent experiences of invalidation that many LGBTQ+ people experience around their sexual orientation and/or gender identity.

McNamara et al.'s recent study found a statistically significant correlation between LGB training and LGB competency, as measured by case conceptualisation vignettes. Numerous studies have indicated that LGB people feel more comfortable and satisfied with therapy when their sexual orientation is affirmed, however research indicates that often many psychologists are not sufficiently trained to give affirmative therapy to sexual minorities.

In order to ensure that LGBTQ+ clients are receiving optimal psychological care within the Irish context, it may be worth exploring whether LGBTQ+ training needs to become a mandatory part of professional psychological training and for qualified psychologists as part of their continuing professional development.

For psychologists who are interested in training in working with LGBTQ+ clients, one of the leading international expert psychologists in working with transgender people is m. dickey, who is also

transgender himself, is coming to Dublin to co-lead a workshop on mindfulness-based affirmative practice for LGBTQ+ people on June 25 and 26. Our speaker has received a number of American Psychological Association awards for his contributions to transgender psychological research and practice and we are delighted to welcome him. Full details can be found at [https://contextualscience.org/mindfulnessbased\\_affirmative\\_practice\\_for\\_lgbtq\\_people](https://contextualscience.org/mindfulnessbased_affirmative_practice_for_lgbtq_people)

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**Aisling Leonard-Curtin**  
PSI Chartered Psychologist, Co-editor of *Mindfulness and Acceptance for Gender and Sexual Minorities*

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## Moving Forward: PSI Division of Counselling Psychology Workshop – Save the Date

Just what is *affirmative* clinical practice and research on sexual orientation and gender identity (SOGI) concerns? It is not a special technique or set of skills, rather, practicing affirmatively includes an awareness of how LGBTI people are similar to other clients with respect to clinical issues, but also may have minority stressors that call for particular attention and awareness. The PSI Division of Counselling Psychology is excited to host an event in August 2019 exploring these themes and interacting with others who are interested in how to best support people who identify as LGBTI. We will discuss SOGI-related stigma and attitudes, the role of allies, and best practices in counseling and therapy for minority stress issues, such as coming out, transition concerns, and support networks. The workshop will also discuss the impact of local and global policy on LGBTI communities and cover the important role of national guidelines on LGBTI concerns and their relationship to mental health access and treatment. We will also learn of the global commitment of psychology organizations toward LGBTI+ social justice through the recently released International Psychology Network for Lesbian, Gay, Bisexual, Transgender and Intersex Issues (IPsyNet) Statement and Commitment on LGBTI Concerns.

Sharon G. Horne, APA Fellow, Professor of Counselling Psychology and Director of the APA accredited counselling psychology PhD programme at the University of Massachusetts Boston, is our invited speaker. Her scholarship is focused on the intersection of sexual orientation and gender identity mental health concerns with policy and legislation. She is an APA Representative to IPsyNet and chaired the policy committee that drafted the IPsyNet statement, which has been endorsed by 28 national psychology organisations worldwide. She has worked on LGBTI concerns in Russia and Kyrgyzstan and is the recipient of a Global Fulbright Scholarship for 2018-2020 on the role of psychology policies and guidelines on mental health access and treatment for sexually and gender diverse individuals in Colombia, South Africa, and the Philippines.

Look forward to welcoming Prof. Horne and colleagues from within PSI to this event. Further details will follow.

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**Megan Gaffney**  
Chair, PSI Division of Counselling Psychology

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## References

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Skinta, M. & Curtin, A. (2016). *Mindfulness and acceptance for gender and sexual minorities*. New York: New Harbinger Publications.

TENI. (2010). *Transgender and gender dysphoria information for psychologists*. Dublin: Transgender Equality Network Ireland. Available from [www.teni.ie](http://www.teni.ie).

Tolman, D.I. & Diamond, L.M. (2014). *APA handbook of sexuality and psychology*. Washington CD: American Psychological Society.

### Relevant Websites

<http://www.belongto.org>

<https://lgbt.ie>

<http://www.teni.ie>



Guidelines  
for Good  
Practice  
with Lesbian,  
Gay and Bisexual  
Clients