

Psychotherapy with Lesbian, Gay, and Bisexual Clients

By Christine Browning, PhD

Most psychologists will see lesbian, gay, and bisexual (LGB) clients in their practices, although few have had any formal training about sexual orientation issues. Even clinicians who do not want clients from this community may discover after several sessions that a person may be LGB or questioning their sexual orientation. Psychologists may also see family members of LGB people. The American Psychological Association *Guidelines for Psychotherapy with Lesbian, Gay, and Bisexual Clients* (Guidelines) were created because of the well-documented need for psychologists to become better informed about the unique issues experienced by LGB clients. The Guidelines offer a gay affirmative perspective on psychotherapy, and suggestions or recommendations that can be incorporated into many theoretical orientations. I will briefly summarize the major content areas of the Guidelines and hope this will encourage you to read it in its entirety.

Attitudes Toward Homosexuality and Bisexuality

Many of us grew up learning myths and stereotypes about LGB people. The APA Ethics Code calls upon psychologists to "strive to be aware of their own belief systems, values, and limitations and the effect of these on their work" (APA, 1992, p.1599). Recognizing the beliefs we may hold about LGB people, and replacing these beliefs with accurate information is essential in order to provide competent care.

It is also critical to understand how heterosexism and homophobia impact the daily lives of LGB people. *Heterosexism* is the institutional manifestation of negative attitudes toward LGB people, creating a society in which LGB people do not have the same level of basic human rights afforded to heterosexual people. The lack of legal recognition of LGB family structures and relationships have a wide range of negative consequences including potential loss of child custody, survivorship, the inability to provide health insurance for partners and children, and to make medical decisions for an incapacitated partner. There are also few legal protections against discrimination in housing, employment based on sexual orientation, or to combat hate crimes.

In addition to heterosexism, LGB people often encounter homophobic attitudes and behavior. These experiences may range from homophobic jokes to physical violence, and may create a significant amount of stress. Negative social attitudes may also be internalized by LGB clients and impact their self-esteem, relationships, and coping strategies. Some clients may wish to "change" their sexual orientation in order to avoid social stigma. The APA policy on "Appropriate therapeutic responses to sexual orientation" describes the ethical and practical considerations involved in this issue.

LGB Relationships and Families

The lack of legal and social recognition of LGB families and couples poses numerous challenges. Both heterosexual and same-sex couples face many similar issues (e.g., money, division of labor, time, power imbalances, differences in sexual desire, communication problems, and childrearing practices). The unique issues faced by same-sex couples are often related to gender socialization, differences between partners about the degree of openness about their sexual orientation, stereotypes about the viability of LGB relationships and lack of social support.

LGB families that include children also face distinct challenges. Same-sex couples never accidentally become parents. Deciding to have children within the context of a same-sex relationship requires overcoming obstacles. Families may be formed through adoption, foster care, "alternative insemination," heterosexual sex, and surrogacy. LGB families may also include children born from previous heterosexual relationships, and may experience stepfamily or blended family issues. In some states it is illegal for a same-sex couple to adopt. In most states the non-biological parent is prevented from obtaining legal parenting status. Clinicians can refer clients to legal resources to help them protect their families.

It is also important for clinicians to understand issues faced by the family of a LGB person. Parents often

experience their own "coming out" process in accepting their child's sexual orientation, including mourning the loss of expectations they had for their child's heterosexuality and related privileges. Parents may be anxious about their child's safety and worry about discrimination that he/she may encounter. Cultural and/or religious values may add to parental distress or conflicts. Clinicians may help parents obtain support and information from resources like PFLAG at <http://www.pflag.org>.

Issues of Diversity

The LGB community is extremely diverse and cannot represent the needs or interests of all LGB people. The differences among LGB people are based on the same differences that are present in the general population (e.g., ethnic/cultural/racial, social class, age, educational level, religious backgrounds, political ideology, geographic location, and physical ability/disability). The one element that LGB people share in common is the experience of living in a heterosexist culture. Even this, however, is not a universal experience.. How life is experienced may vary greatly depending upon some of the socio-cultural variables listed above. The Guidelines provide specific information about issues related to ethnic/racial identity, age and physical abilities/disabilities. It also offers information about the unique challenges faced by those with a bisexual identity.

Education

Clinicians can increase their awareness and knowledge about sexual orientation through continuing education, training, supervision, and consultation. It is imperative that graduate programs in psychology require sufficient training in the curriculum, practicum, and internship about sexual orientation issues. Clinicians would benefit greatly knowing local, regional, and national LGB resources (e.g., political, legal, social, religious, and support) for use as an adjunct to therapy.

Summary

In addition to the information in the Guidelines, clinicians who work with LGB people and other sexual minorities should have a working knowledge of issues related to human sexuality, gender issues, and ethnic identity. A clinician needs to understand the "coming out" process, adolescent and older adult concerns, spiritual issues, career issues, and health related risks faced by LGB people.

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