



Gay, Lesbian, Bisexual and Transgender Behavioral Health Overview?

- ✦ Robert Paul Cabaj, MD
- ✦ Director, San Francisco Behavioral Health Services
- ✦ Associate Clinical Professor in Psychiatry, University of California, San Francisco



Psychotherapy for LGBT

- ✦ Not “special” but required unique knowledge and skills
- ✦ Comfort with the population and related issues—non-judgmental
- ✦ Awareness of potential boundary conflict
- ✦ Working knowledge of internalized homophobia and anti-gay bias and their consequences



Special knowledge needed

- ★ See LGBT community from a “culturally-competent” point of view, similar to ethnicity and different culture background effects
- ★ Comfort with taking sexual history, including practices and intimate relationships
- ★ Know about ways people may meet and connect in the LGBT network
- ★ Understand internalized homophobia may prevent some people from acting on desires
- ★ Understand terminology

Definitions (I)

- ✦ Sexual Orientation: Homo-Bi-Hetero
 - ✦ Combination of fantasy, behavior, and affectional-needs or longings
- ✦ Sexual Behavior
- ✦ Sexual or Gender Identity: male or female
- ✦ Sex (biological) vs. Gender (maleness/masculinity to femaleness/femininity)
- ✦ Gender Role: cultural expectations

Definitions (II)

- ☀ Homophobia:

- Internalized
- Externalized

- ☀ Heterosexism

- ☀ Anti-gay Bias

- ☀ Origins of homophobia--Fear of Women?

- ☀ Gay/Lesbian/Bisexual/Transgender
“label”: Allowing self-identification

- Behavior

- Desire



Developmental Issues

- ✦ Orientation not the pathology; living with a different orientation in a biased society the source of the problems
- ✦ Psychology of difference
- ✦ Quilt for not having same attitudes, values, and moral precepts of society?
- ✦ We are all “children of Alice Miller”:
 - ✦ Seeking parental rewards and approval
 - ✦ False selves and coming out
 - ✦ Acceptance and pain of rejection
 - ✦ Overcoming internalized homophobia

That Heterosexuals Do Not Face

- ✦ Awareness of orientation difference
- ✦ Acceptance of that difference
- ✦ Decision to “come out”
- ✦ Decide who will/should know
- ✦ Creating supports and acceptance
- ✦ Living as a gay, lesbian, bisexual person; integration of a personal identity and a gay/lesbian identity
- ✦ Confronting societal bias
- ✦ (Bisexuals may face struggle for acceptance with gays and straights)



Transgender Issues: Parallels

- ✦ Awareness of discordance
- ✦ Decision to live as opposite sex
- ✦ Path to sexual reassignment surgery
- ✦ Studies indicate early awareness of the difference but inability for parents, others to acknowledge or accept
- ✦ Many studies indicate high rates of substance abuse and Borderline Personality Diagnosis



Aspects of Treatment Approach

- ✦ Respect and comfort
- ✦ Self-awareness of internalized anti-gay feelings
- ✦ If therapist is LGBT, do not assume patient had similar life-experiences
- ✦ Comfort talking about sex
- ✦ Awareness of transference and sexual feelings in therapist and patient

Ethical Issues

- ✦ There are no “special” ethics for LGBT therapists or patients
- ✦ Boundary violations can occur in several ways:
 - ✦ Sexually—directly or indirectly (in the same sexual venue)
 - ✦ Socially—shared situations and possible breaches of confidential information
 - ✦ Sharing information with significant other
 - ✦ Some borderline patients can create very difficult “blackmail-like” situations

Special Clinical Concerns (I)

- ✦ Impact of internalized homophobia
- ✦ Seek psychotherapy more but less satisfied (17.6% vs. 8%)
- ✦ Depression and adjustment disorders common
- ✦ “Conversion” or “reparative” therapy
- ✦ Intimacy and relation building: Couples therapy and stages of relationships
- ✦ Denial of marriage hurts gay/lesbian mental health—increased stress, guilt, depression, low self-esteem, substance abuse
- ✦ Chronically mentally ill clients and long term care—living arrangements and other items

(II)

- ★ Anti-gay Violence
- ★ Domestic Violence: same or greater compared to heterosexuals
- ★ Minority Issues and cultural concerns
 - behavior vs. self-identity
 - identify with ethnicity, orientation, or both
 - Lesbians of color, lower economic groups make come out later in life
- ★ Suicide--15 to 30% rates in adolescents and younger adults?
 - Nat Longitudinal Study of Adolescent Health indicated twice the risk

LGBT Substance Use

- ★ Gay/lesbian incidence 28-35% vs. 10-12% in general population
- ★ Heavy use and abuse and dependence all higher
- ★ Uniform rural vs. city and different countries
- ★ Lesbian use almost as high as gay men
- ★ Transgender: 60% in some surveys
- ★ Limitations of all the surveys

Interview and Screening

Issues

- ★ Non-judgmental, accepting approach
- ★ How is sexual orientation asked? Not assume orientation—ask directly
- ★ Married or single—not helpful on forms
- ★ Not assume partner is opposite sex
- ★ Not assume parents are male/female—ask names of parents vs. mother/father
- ★ Comfort in discussing sexual activity/behavior
- ★ May play a role as a “counselor” with coming out, relationship issues, suicidal thoughts, domestic abuse, risky behaviors, shame, internalized homophobia, dating, drug use
- ★ Recent study supports better interviewing and care by medical students the more they know about LGBT