Best Practice Clinical Standards For LGBTQ-Affirmative Therapy

An LGBTQ-Affirmative Psychotherapist:

Does not make an assumption about the sexual orientation of a client

Accepts than an identity as a LGBT person is a positive outcome of the helping process

Believes that a client can achieve a positive identity as a LGBT person when internalized homophobia and social homophobia are decreased

Provides psycho-educational feedback to facilitate the client finding a language to define her/his sexual orientation

Advocates for client self-determination in choosing the sex and sexual orientation of the therapist with whom they want to work

Attains knowledge about different theories of the coming out process and identity development for LGBTQ individuals

Beyond taking a stance of complete neutrality, celebrates the validity of LGBTQ persons and the diversity of their relationships and actively works to counter oppression

Acquires knowledge that is grounded in diverse experiences, rather than being gained only through intellectual/academic methods alone

Exercises careful judgment and takes responsible steps to ensure the competence of his/her work in helping to protect clients from harm and be effective in their lives

Has a willingness to make appropriate clinical self-disclosure of his/her sexual orientation if that information is pertinent to maintaining a healthy therapeutic relationship with a client

Has a working knowledge of the variety of LGBTQ sensibilities, values, needs, and "lifestyle contexts"

Considers the context of homophobia and the impact of this dynamic on all aspects of the lives of LGBTQ clients – work setting, personal relationships, life choices, psychological and behavioral concerns, etc.

Invests a genuine commitment to deal with his/her own homophobia, bi-phobia, transphobia, and heterosexual bias.

Embraces an on-going commitment to self-awareness about how cultural and/or familial messages regarding LGBT individuals might impact their work with LGBT clients

LGBTQ-Affirmative Psychotherapists Uphold the Following World Views:

Being Homosexual or transgendered is not a mental illness or developmental disorder.

Same-sex sexual and romantic attractions are normal and positive variations of human sexuality

LGBTQ individuals can be as equally healthy as heterosexual identities and have strengths that can assist them in addressing their presenting issues

No a priori assumption is made of how a client will identify or live out her or his sexual orientation and/or other aspects of her/his life (e.g., ethnicity, spirituality, relationships)

Sexual orientation is uniquely individual and inseparable from an individual's personality and sense of self

Homophobia in the client and society is the problem, rather than sexual orientation

Sources for these affirmative standards and worldviews:

"Appropriate Therapeutic Responses to Sexual Orientation," American Psychological Association (2009)

Code of Professional Ethics, National Association of Social Workers

Appleby, G. & Anastas, J. (1998). Not Just A Passing Phase: Social Work With Gay, Lesbian, and Bisexual People.

Tozer, E.E. & McClanahan, M.K. (1999). "Treating the Purple Menace: Ethical Considerations of Conversion Therapy & Affirmative Alternatives." *Counseling Psychologist*, 27, 722-742;

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