



6TH ANNUAL INTERPROFESSIONAL FORUM ON ETHICS & RELIGION IN HEALTHCARE

FROM CONFLICT TO THRIVING:

Well-Being at the Intersection of Sexual Orientation, Gender, & Spiritual Identities

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Context: Why me?

- Who am I?
 - Professional Roles: psychologist, psychiatric pharmacist, teacher, speaker, researcher
 - Research = intersectionality, identity conflict, and identity development
 - Personal Roles: husband, father, son, friend, listener, provider, advocate
 - Identities: Black, gay, Christian, cisgender, man
- These frame the lens through which I address these topics
- No amount of understanding these truly lets you know who I am
- Why I wished to speak on this topic
 - Not just esoteric or academic, but personal

Overview

- Describe identity conflict specifically related to sexuality, gender, and spirituality
- Describe available pathways for those struggling with identity conflict:
 - Prioritizing sexual/gender identity
 - Ethical considerations related to prioritizing spirituality and the orientation/gender identity change process
 - Where lesbian/gay celibacy fits
 - Integration strategies
- Discuss major impediments to resolving identity conflict
- Briefly describe some resources to aid those in conflict, and healthcare practitioners working with such clients

Personal vs Generalized vs Empirical

Caveats

- The literature is mostly focused on:
 - White people
 - Christians
 - Gay men
- So, we won't spend as much time on:
 - QPOC
 - Other faiths
 - Gender minorities (TG, GQ, GNC, GNB, etc.)
 - GICE (my expertise is on SOCE)
- And no time on:
 - Asexual
 - Intersex
 - So many others SGMs!

BUT, hopefully the principles discussed here can be helpful in our study and work with those communities/people we are not spending much time on.

We can certainly **discuss the generalizability (or non-generalizability) of this knowledge**



IDENTITY CONFLICT

Introduction and Context

Identity Conflict: Sexuality vs. Spirituality

- Major religions (Judaism, Islam, Christianity):
 - Promote + values
 - Proscribe same-sex love and intimacy (Balkin, Watts, & Ali, 2014; Jahangir & Abdul-latif, 2016)

Thus, religious LGBTQ people often find that their sexual identities conflict with their religious identities...

- Identity conflicts related to the intersection of sexuality and spirituality have been well-documented in social science research (Anderton, Pender, & Asner-Self, 2011; Rodriguez & Ouellette, 2000; Rodriguez, 2010)
 - Can have effects on mental health and well-being

LGBTQ Mental Health

- The Minority Stress Model (Meyer 1995, 2013)
 - Stigma + discrimination → negative mental health correlates
 - There are several factors that contribute to promoting stigma...
 - Internalized stressors (e.g., IH) + externalized stressors (e.g., prejudice, victimization) → mental health outcomes as well as physical health outcomes such as pain, GI distress, CV problems, infections, etc. (Frost, Lehavot, & Meyer, 2015; Mereish & Poteat, 2015)
 - Various sources of discrimination: peer attitudes, laws, religion (Barnes & Meyer, 2012; Harper & Schneider, 2003; Mereish & Poteat, 2015; Rostosky, et al., 2010)
- Research has established how stigmatization contributes to greater mental health risks among LGBTQ people (Haas et al., 2010; King et al., 2008; Mays & Cochran, 2001; Meyer, 2013; Westefeld et al. 2001):
 - Depression
 - Anxiety
 - Substance Use
 - Suicidality
- ***The role of religion as a source of stigma and prejudice in LGBTQ minority stress is not entirely clear*** (Barnes & Meyer, 2012).

Religion: Harmful or Helpful?

- Can be both **protective** AND **harmful** (Dahl & Galliher, 2012; Lease, Horne, & Noffsinger-Frazier, 2005; Walker & Longmire-Avital, 2013), for example:
 - A survey of 250 non-heterosexual youth (Longo, Walls, & Wisneski, 2013):
 - Those raised with a secular worldview were 3.8x as likely to self-harm vs. raised Christian
 - Religiosity predicted self-harm (those with great deal of guidance 9.3x more likely than those with little/none)

Religion and QPOC

- Churches can be places of **homotolerance** whose benefits include (Lassiter, 2014):
 - Connection with a higher power
 - A place to serve
 - Social connection and social uplift
 - Affirmation of masculine identity in a dominant culture that disparages and oppresses men of color
 - Provide resilience in the face of IH (Walker & Longmire-Avital, 2013)
- Churches can be places of **homonegativity** whose drawbacks include (Lassiter, 2014):
 - Condemnation about orientation
 - Self-shame and psychological damage
 - Deeming SGL as having "sin" that is worse than any other

Religion: Harmful or Helpful?

- **Harmful effects**

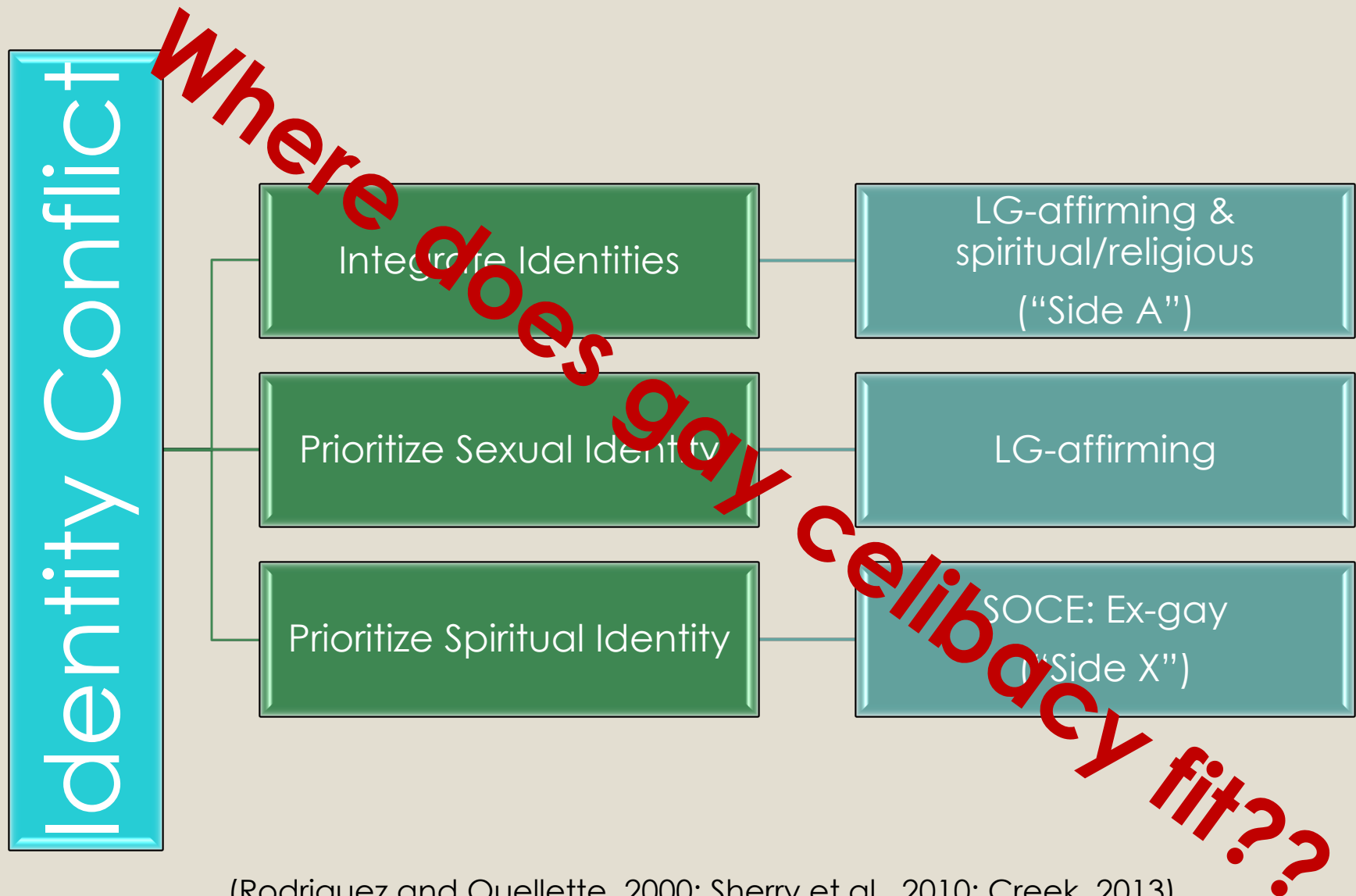
- Non-affirming religious guidance can become manipulative or coercive (Super & Jacobson, 2011) → spiritually abusive bullying or neglect (Wood & Conley, 2014 → deleterious effects on LGBTQ people:
- Deficits in identity formation, mental health, and overall well-being:
 - Loss of spiritual identity, lowered self-esteem, IH, poorer quality of life, fear of damnation, depression, NSSI, suicidality (Crowell, Galliher, Dehlin, & Bradshaw, 2014; Dehlin et al., 2014; Kubicek et al., 2009; Longo et al., 2013)

- **Protective effects**

- Gay-affirming spiritual experiences have been shown to positively predict psychological health and well-being, mediated by the benefits afforded by spirituality and decreased IH (Lease et al., 2005; Rosenkrantz et al., 2016; Scroggs et al., 2018)

The overall effect religion has is likely d/t the content of messages received and the nature of an individual's relationship to religion/spirituality... (Dahl & Galliher, 2012)

Conflicted Identities



(Rodriguez and Ouellette, 2000; Sherry et al., 2010; Creek, 2013)

Gay-Affirming/Side A



Side B vs. Side X



Married to Jesus



Married to "the opposite"
sex/gender

VS.



WORKING WITH CONFLICTED LGB PEOPLE

Integrating Identities

Identity Integration

- In the past decade counseling and psychology research has overwhelmingly emphasized client-centered integration strategies
- Various theoretical modalities and frameworks utilized (Bartoli & Gillem, 2008; Beagan & Hattie, 2015; Bozard, R. Lewis & Sanders, 2011; Buchanan et al., 2001; Haldeman, 2002, 2004, 2010; Sherry et al., 2010)
 - Postmodernism and constructivist thought
 - Multiculturalism
 - Social justice-oriented
 - Feminist
- 5-stage model for identity conflict resolutions (Levy, 2012):



Identity Integration: Resolution

- A **dynamic** process requiring modifications in religious beliefs, practices, or affiliations (Bozard, R. Lewis & Sanders, 2011; Haldeman, 2010; Levy & Reeves, 2011; Rodriguez & Ouellette, 2000; Sherry et al., 2010)
- Requires some means of **processing homophobic messages**, particularly for those with multiple oppressed intersectional identities
 - Retaining positive aspects of faith while:
 - Devaluating homophobic messages through critiquing: upbringing, morality of the messenger, theological or scientific foundations of the sacred texts or practices (Kubicek et al., 2009; Pitt, 2010; Sullivan-Blum, 2004).
- This process is inherently one of **personalizing spirituality** (Halkitis et al., 2009; Smith & Horne, 2007; Worthington, Hook, Davis, & McDaniel, 2011)
 - Maintaining membership in traditional faith settings
 - Exploring lesser-known faiths (e.g., Earth-spirited)
 - Discovering the divine in personal experiences and connections

Roadblocks to Integration

- **Multiple overlapping Identities**

- Culture, race, and ethnicity
- Social class
- Family values

- **“Clobber Passages”**

- Genesis 19
- Leviticus 18:22 & 20:13
- Romans 1:26-27
- I Corinthians 6:9-10
- I Timothy 1:9-10
- Jude 1:7





WORKING WITH CONFLICTED LGB PEOPLE

Prioritizing Sexual Identity

Prioritizing Sexual Identity

- Harm caused by religious institutions has necessitated many LGBTQ people to leave their faith traditions completely in order to achieve psychological health and congruency (Sherry et al., 2010; Super & Jacobson, 2011; Wood & Conley, 2014)
- Among 1,612 Mormon same-sex attracted individuals (Dehlin et al., 2014), those who were active (i.e., attended services at least monthly) were least healthy:
 - **worse IH and sexual identity distress** (medium to very large effect sizes, $d = .61$ to 1.66)
 - **worse depression, lower self-esteem, and poorer quality of life** (small to medium effect sizes, $d = .17$ to $.64$)
 - Those excommunicated from the church fared best in all five psychosocial realms.
- Both integration of identities and rejecting faith have been associated with improved well-being for conflicted LGBTQ people.

Does rejecting sexual identity produce similar benefits to well-being?



WORKING WITH CONFLICTED LGB PEOPLE

**Ethical Considerations about
Prioritizing Spirituality through SOCE**

Prioritizing Spiritual Identity

- Those choosing to prioritize spiritual identity generally hail from more conservative, fundamentalist, or authoritarian religious communities
- Internal dissonance these individuals struggle with (Anderton et al., 2011) is linked to **IH** they harbor in the face of the heteronormative or **homophobic contexts** in which they exist (Beckstead & Morrow, 2004), and it ultimately propels them to seek orientation change (Tozer & Hayes, 2004)

Prioritizing Spiritual Identity

- Many Christian ministries are devoted to helping LGB people “change” (Yarhouse, Burkett, & Kreeft, 2002)
 - Exodus International
 - Restored Hope Network, Hope for Wholeness Network, Overcomers Network
 - Love in Action
 - Courage (Catholic)
 - OneByOne (Presbyterian)
 - Evergreen (Mormon)
- Other groups
 - Homosexuals Anonymous
 - JONAH (Jews Offering New Alternatives to Homosexuality) → JIFGA (Jewish Institute for Global Awareness)
 - NARTH (National Association for Research and Therapy of Homosexuality) → ATCSI (Alliance for Therapeutic Choice and Scientific Integrity)

How is it done?

- Psychotherapy
 - **Sexual Orientation Change Efforts (SOCE) =**
 - **Reparative Therapy =**
 - **Conversion Therapy =**
 - **Sexual Reorientation Therapy (SRT)**
 - Previously: aversion therapy (electric shock, emetic drugs)
- Support groups (online and in-person)
- Prayer/Meditation
- Exorcism
- SOCE is not quite as institutionalized and formalized in other Abrahamic faiths, but **Jewish and Muslim** people have also adopted these methods, including aversive techniques (Borowich, 2008; Itzakhy & Kissil, 2015; Jahangir & Abdul-latif, 2016)

Prevalence of SOCE

- Based on the Generations Study, a national probability study of LGB adults (18-59), commissioned by The Williams Institute (Mallory et al., 2018)
 - **6.7% of LGB adults have received SOCE treatment**
 - An estimated **700k LGB adults have received SOCE/GICE** from licensed MH professionals, about $\frac{1}{2}$ of them (350k) as adolescents
 - An estimated **20k LGB youth (13-17) will receive SOCE/GICE** by the time they are 18yo in states that have not banned the practice for minors

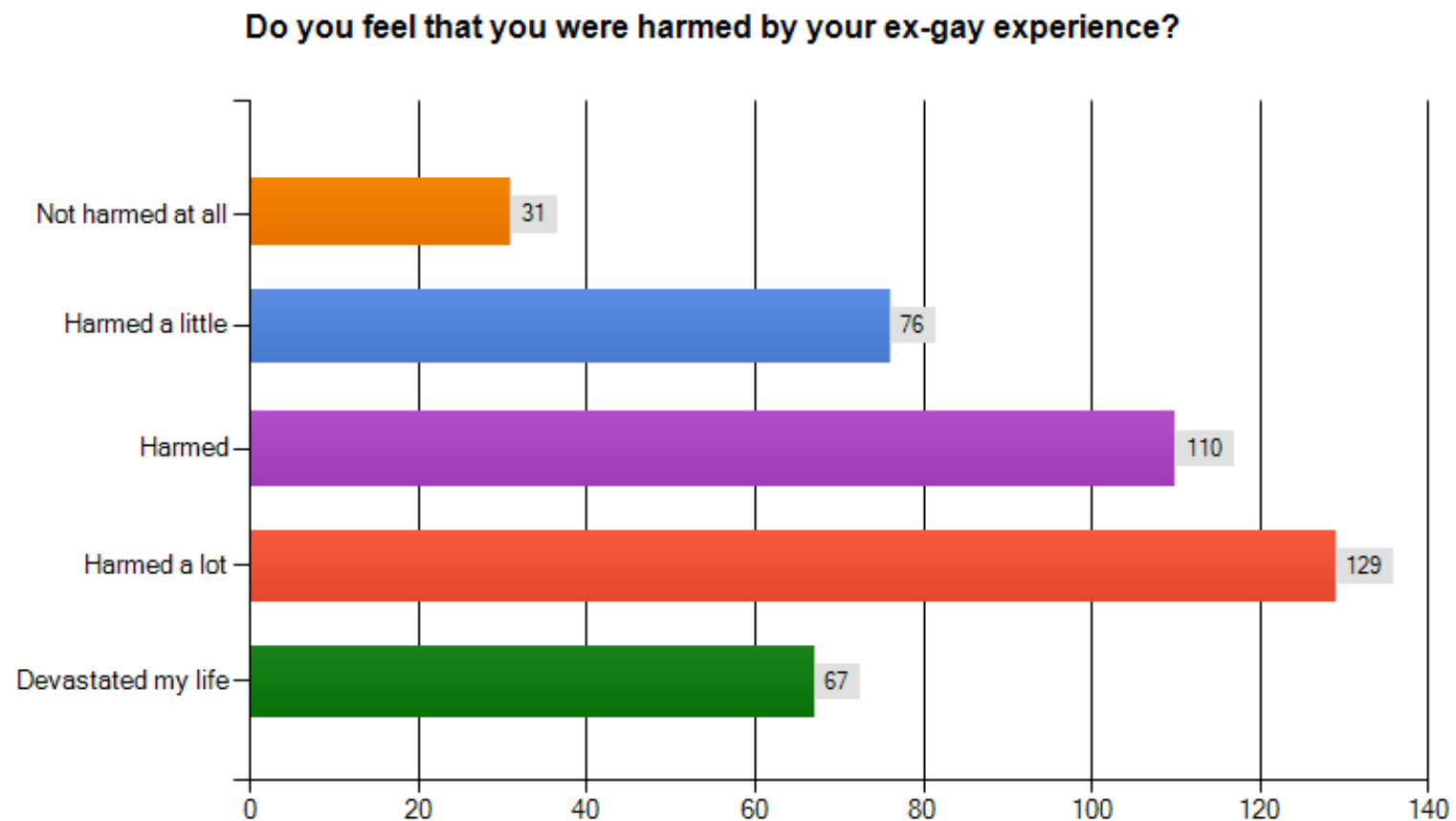
SOCE: Beneficial or Harmful?

- **Benefits** described along multiple domains:
 - **Sociality** (Bradshaw et al., 2015; Dehlin et al., 2015; Shidlo & Schroeder, 2002)
 - Improved relationships with families, peers, and their religious communities
 - **Spirituality** (Byrd, Nicolosi, & Potts, 2008; Shidlo & Schroeder, 2002)
 - Increased spiritual activities (praying, studying sacred texts, attendance at religious institutions, etc.), decreased anger with God, and increased sense of acceptance from God
 - **Psychological health** (Beckstead & Morrow, 2004; Bradshaw et al., 2015; Dehlin et al., 2015; Karten & Wade, 2010; Kubicek et al., 2009)
 - Decreased depression, anxiety, and self-harming behaviors as well as increased self-esteem, self-acceptance, and hopeful outlook
- Not necessarily long-lasting: Disillusionment (Shidlo & Schroeder, 2002)

SOCE: Beneficial or Harmful?

- **Harms** described along multiple domains:
 - **Sociality** (Beckstead & Morrow, 2004; Dehlin et al., 2015; Fjelstrom, 2013; Haldeman, 2001; Shidlo & Schroeder, 2002)
 - Worsened family relationships, general disconnection from others, cutting off other LGBTQ friendships or romantic relationships, and social isolation
 - **Spirituality** (Beckstead & Morrow, 2004; Bradshaw et al., 2015; Dehlin et al., 2015; Shidlo & Schroeder, 2002)
 - Lost faith, excommunicated, distance from/anger toward God, the church, and church leaders
 - **Psychological health** (Beckstead & Morrow, 2004; Bradshaw et al., 2015; Dehlin et al., 2015; Flentje et al., 2013; Haldeman, 2001; Shidlo & Schroeder, 2002)
 - Worsened self-esteem, shame, disrupted sexual/gender identity development, anxiety, depression, suicidality
 - **Lost time, energy, and money** (Dehlin et al., 2015)
 - Flentje et al. (2013): \$7,000 on average was spent for SOCE (Mdn = \$2,150.00)
 - Rix (n.d.): average length of time spent in therapy = 6 yrs. and 10 mos. (range: < 1 month to 50 years).

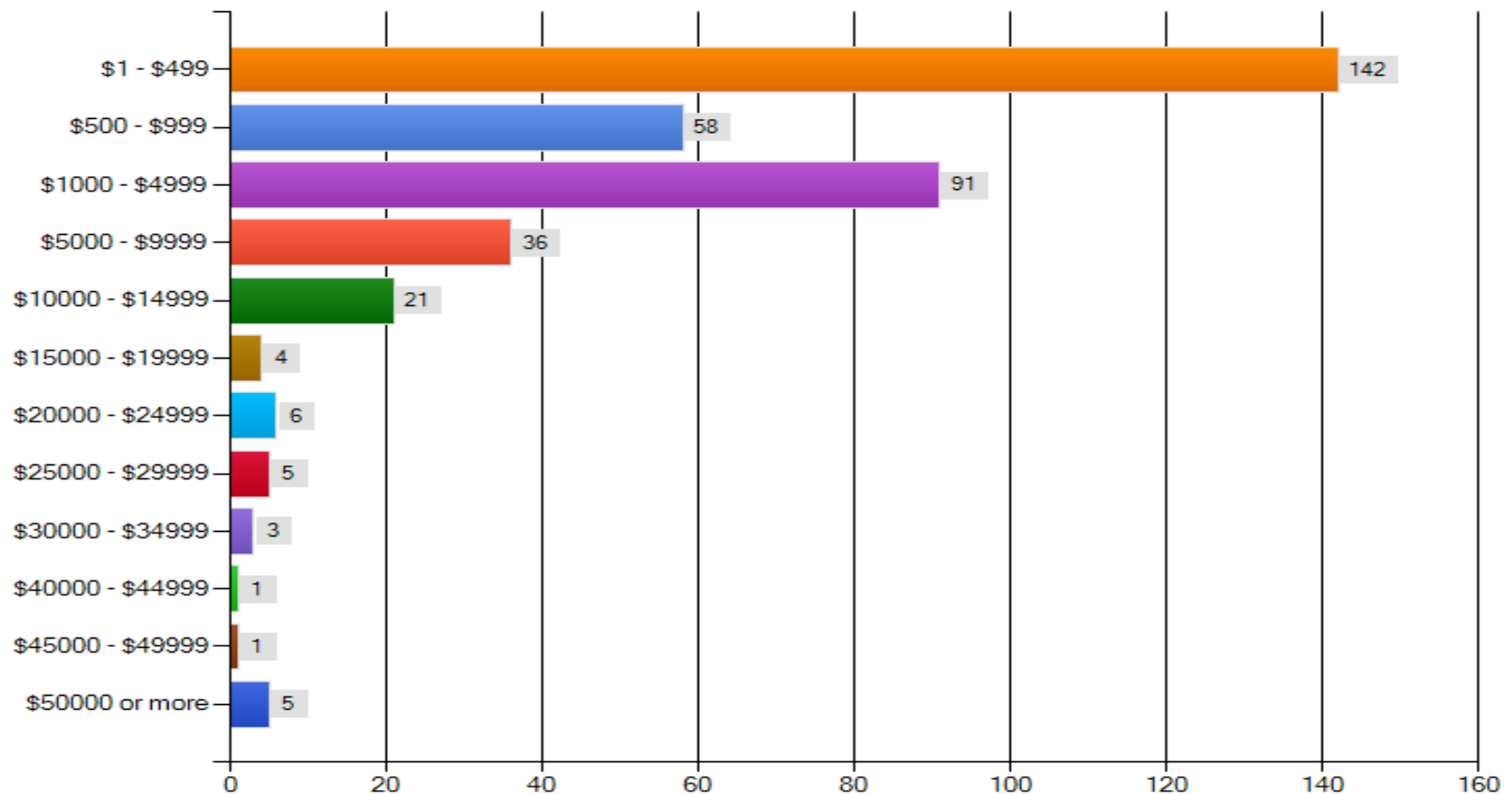
More on harm...



<http://www.beyondexgay.com/survey/results>

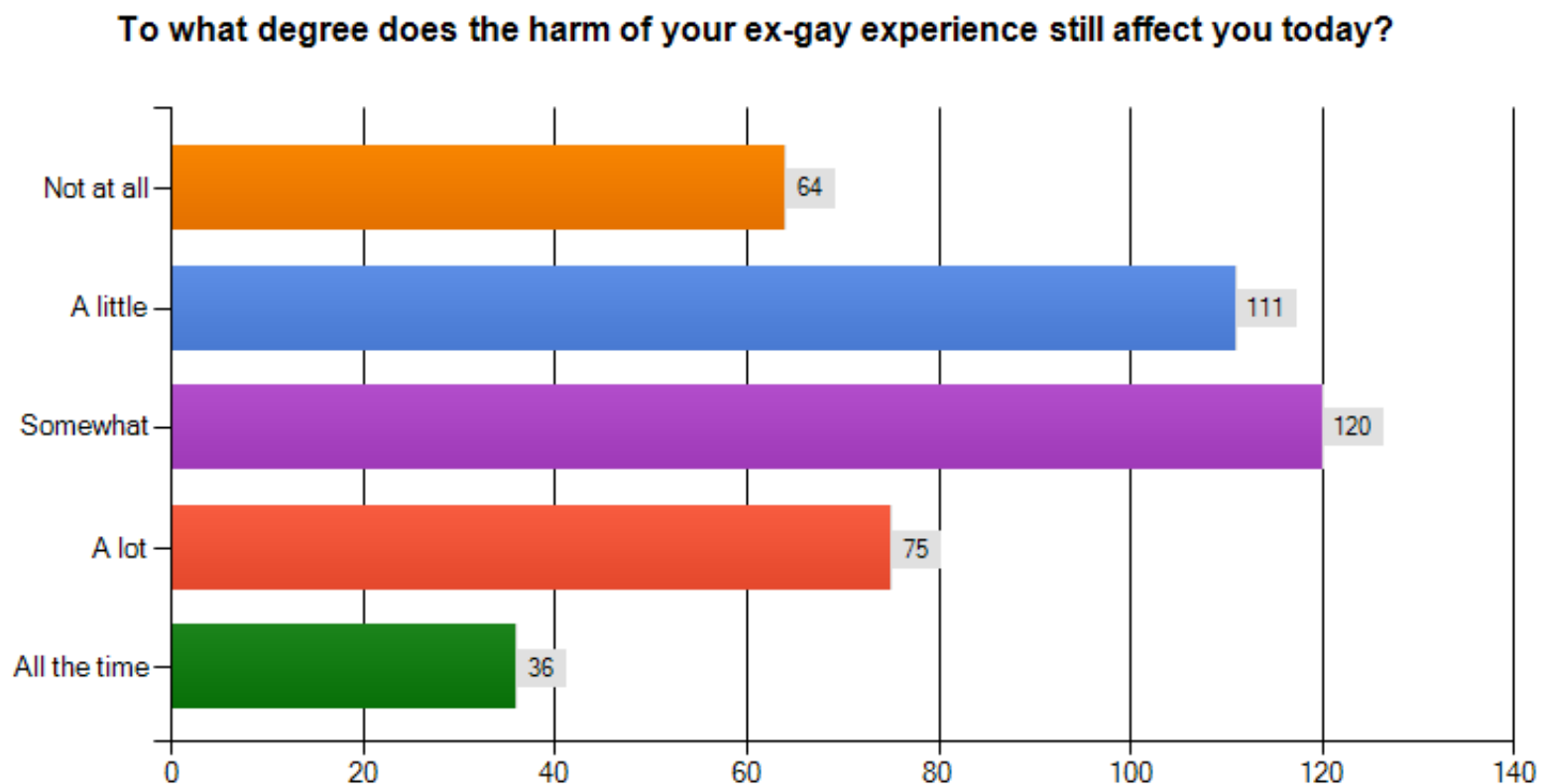
More on harm: \$\$\$

Approximately, how much money did you spend on the experience?



<http://www.beyondexgay.com/survey/results>

More on harm: long-term effects



<http://www.beyondexgay.com/survey/results>

Does it work?



My Big Fat Gay Wedding!!

SOCE: Summary

- **Effectiveness** rates reported in contemporary studies *between about 3% up to a generous estimate of just over 20%* (Bradshaw et al., 2015; Dehlin et al., 2015; Jones & Yarhouse, 2011; Shidlo & Schroeder, 2002)
- **Benefits** often outweighed by **harms**
- **APA Task Force on Appropriate Therapeutic Responses to Sexual Orientation** (2009): benefits could be achieved without attempts to change orientation

Does not appear that rejecting sexual identity produces similar benefits to well-being as integration and rejecting spiritual identity...

Consensus on SOCE

- National and international healthcare organizations who have advisories against SOCE
 - American Psychological Association?
 - American Medical Association
 - American Psychiatric Association
 - American Academy of Pediatrics
 - National Association of Social Workers
 - Academy of Family Practice
 - American Counseling Association
 - American Psychoanalytic Association
 - International Psychology Network for Lesbian, Gay, Bisexual, Transgender and Intersex Issues
 - Others... <https://www.hrc.org/resources/policy-and-position-statements-on-conversion-therapy>



COUNSELING CONFLICTED LGB PEOPLE

Gay Christian Celibacy



HARMONY, DISSONANCE, OR HARM?

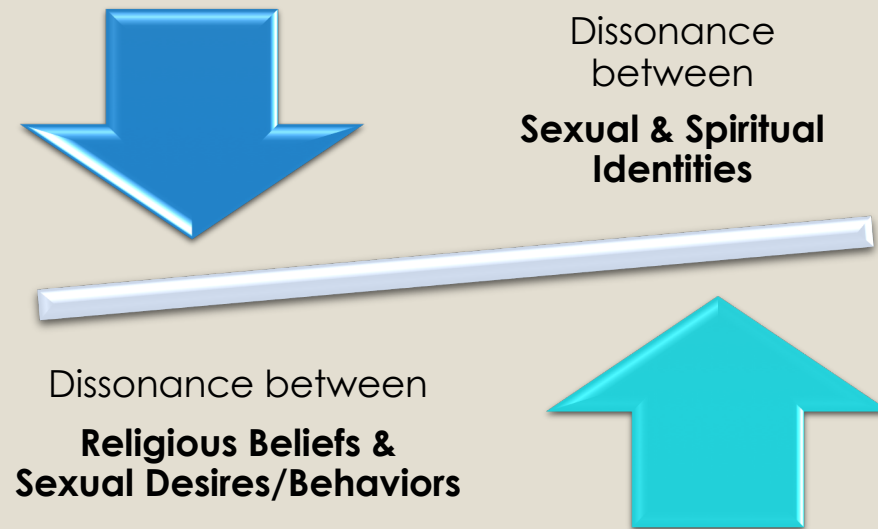
The Psychological and Spiritual Promises
and Perils of Gay Christian Celibacy

Participant Summary

- **12 participants**
 - 7 current celibates (Side Bs), 5 ex-celibates (Side As)
 - Age range: 23-50
 - 9 cis gay men, 3 cis lesbian women
 - Almost all White (except 1 participant)
- **All conservative Christian**
 - Evangelical (7), Catholic (4), Orthodox (1)
- **Geographically spread throughout US** (except 1 international participant)
 - South (3), West Coast (3), East Coast (3), Midwest (2)
- **SES**
 - Well-educated: some college (1), bachelor's (8), master's (3)
 - Middle-class: unemployed (1), low wage < \$25k/yr (4), \$25-49.9k/yr (3), \$50-74.9k/yr (3), \$75-99.9k/yr (1)
- 8 attempted SOCE at some point (including all ex-celibates)

What Is the Experience of GCC?

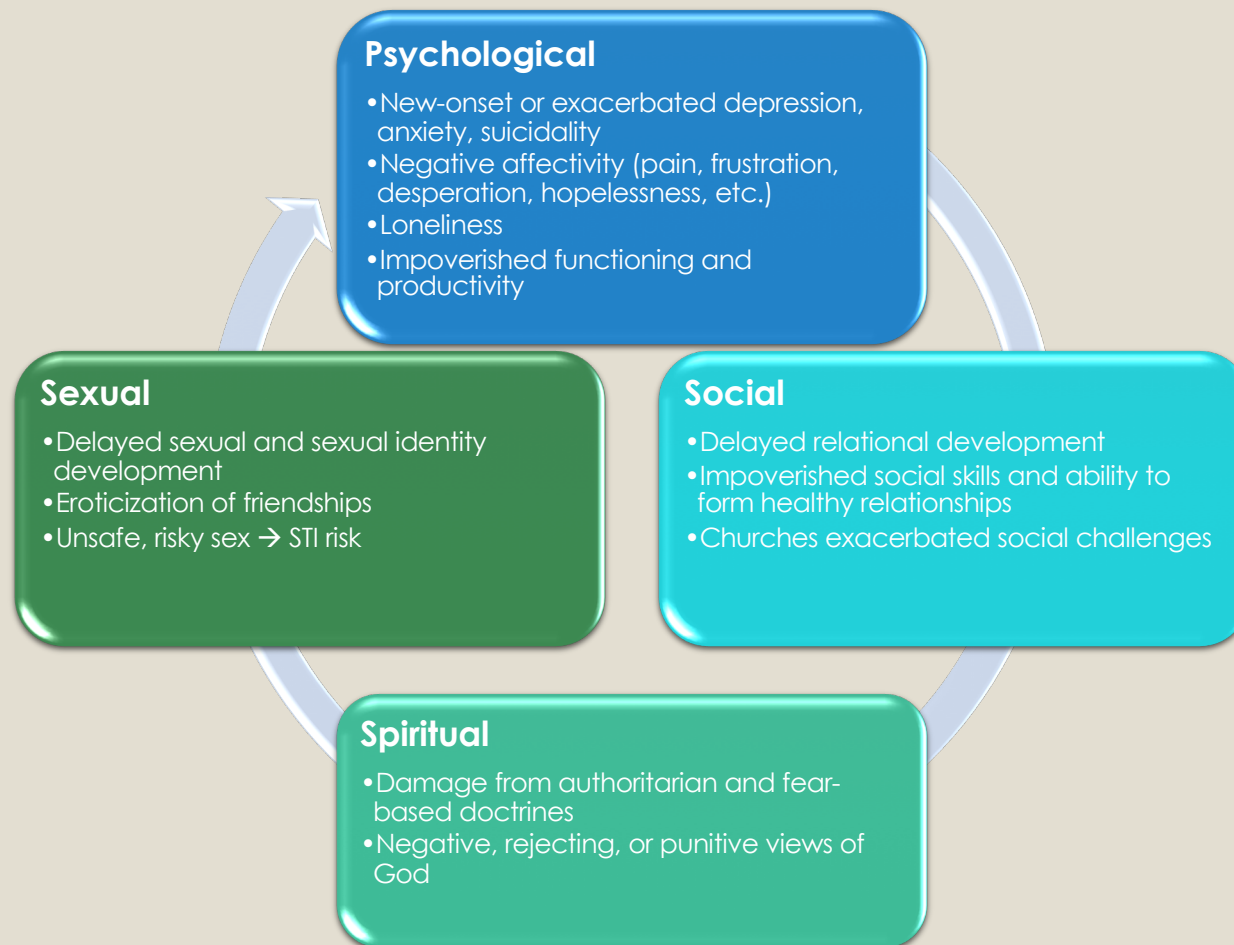
- A search for **harmony**
- Avoidance of cognitive **dissonance**
- **But the pursuit of celibacy can instigate a different, but just as intolerable, dissonance**



Benefits and Harms

- Remarkably similar to those reported in SOCE studies
 - Psychological
 - Social
 - Spiritual
- BUT, this study elucidated an additional harm not often discussed in SOCE studies
 - Sexual
- Social benefits were not as robustly described as in SOCE studies or as alluded to in other qualitative GCC studies (Yarhouse et al., 2017)

What's the Harm in That?



(Un)Safe Havens

- Where can GCCs find comfort, support, and safety?
 - **Society?**
 - Heteronormativity and homonegativity
 - “Strange”
 - **LGBTQ Community?**
 - “Repressed,” “in denial,” “homophobic”
 - **Churches and religious communities?**
 - Liberal churches pressure gay affirmation
 - Conservative churches view suspiciously and question their orthodoxy, motivations, and purity
 - **GCC-specific affinity groups?** (celibate partnerships and communes)
 - Good options for those who can find them, but complicated by sexual desire

Take-home: GCC

- GCC is an **individual, varied experience**
 - Some are at peace, satisfied, and find great benefit in GCC
 - Others are relatively well-adjusted, though less satisfied
 - Others are dissatisfied and struggle to make celibacy more viable
 - Negotiating relationships with sexual desire
 - Adopting less harmful religious beliefs
 - Others are so dissatisfied that they must abandon celibacy to preserve mental/spiritual health and find harmony
- Social justice oriented researchers and clinicians must be **knowledgeable and aware of ways to help resolve identity conflict**
 - Don't oppose GCCs, but find ways to respect and empathize with their choices
 - Don't compromise on ethical values that promote equality for LGBTQ+ people
 - Help GCCs find harmony and congruence by mitigating harms and working towards identity integration/gay affirmation for those ready to explore it



WORKING WITH CONFLICTED GENDER MINORITIES

**Ethical Considerations about Identity
Conflict and GICE**

Some (non-exhaustive!) helpful terms...

Acronym	Descriptor	Definition
GB	Gender binary	Social & biological classification of sex/gender into two distinct, opposite forms of masculine & feminine
CG	Cisgender	Gender identity congruent with natal sex; assigned at birth by society
GM	Gender Minority	Umbrella term for those who do not identify as cisgender
TG	Transgender	Gender identity does not align with natal sex as assigned at birth by society
GQ/GF	Genderqueer/ Genderfluid	Rejects gender norms or binaries and whose gender varies by situation/context over life; live as man, woman, neither, both
GNB/GNC	Gender Nonbinary/ Gender Nonconforming	Do not ascribe or conform to binary definitions & representations of gender; live as agender, nongender, along gender spectrum, not exclusively man or woman, etc.
	Pronouns	GB = he/him/his, she/her/hers NB = they/them/their, xe/xem/xyr, ze/hir/hir, etc.

Identity Conflict: Gender vs. Spirituality

- **Not as well studied** as sexuality/spirituality conflict
 - Often subsumed within LGBTQ studies
- **Few T participants among LGBT** (and few GM participants among the "+") in LGBTQ+ studies of identity conflict leads to poor understanding of the intersection of gender and religion/spirituality
- **Recent literature** in the past decade has brought more (though still inadequate) attention to the particularities of gender/spirituality conflict

Reasons for Conflict

Complementarianism

Cisnormativity/Binarism

Patriarchy

(Looy & Bouma, 2005; Yarhouse & Carrs, 2012; Sumerau et al., 2018)

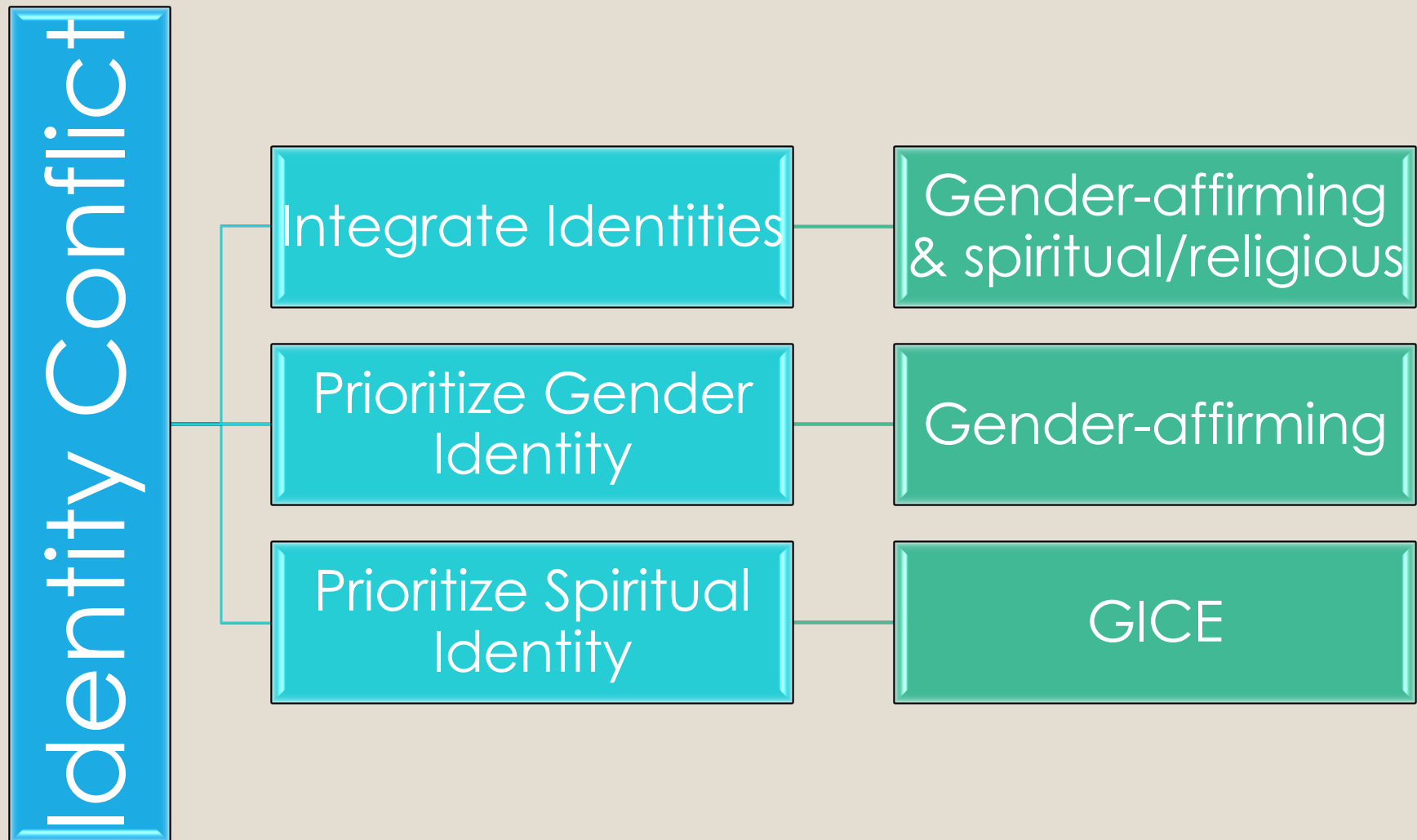
Religion: Harmful or Helpful for GMs?

- As with sexual minorities, can be both **protective** AND **harmful**, though the relationship may be more complicated for GMs vs SMs (Golub et al., 2010; Kid & Witten, 2008; Rodriguez & Follins, 2012)
 - Much literature on this topic focuses on theological issues (Lowe, 2017; Stone, 2007) or focuses on how religious people perceive GMs (Campbell et al., 2019) vs how GMs reconcile gender and spirituality (Bockting & Cesaretti, 2001; Levy & Lo, 2013)
 - Qualitative study of 249 Bi+/Trans people (Sumerau et al., 2019)
 - 98% experienced religious **damnation** (antipathy, abuse, excommunication, exorcisms, coercion → **LT harm** mentally, physically, emotionally, and spiritually → **closeting/guarding**)
 - 75% experienced religious people (esp. leaders) as **inconsistent** (making up proscriptions about SGM IDs d/t politics and bias) → **oppression** → **leaving behind** churches, traditions, religious beliefs
 - Yet... 36% remained religiously affiliated and 35% experienced religious people to be trans and/or bi+ **inclusive** (esp. moderate and liberal religious contexts)

The overall effect: internal experiences with the Divine can be positive, while experiences with religious communities/people tend to be negative ...

(Yarhouse & Carrs, 2012)

Conflicted Identities



GICE

- Gender identity change efforts (GICE)
 - Techniques practiced by mental and medical health professionals and non-professionals with the goal of changing gender identity, gender expression, or associated components of these (APA draft of GICE Resolution; SAMHSA, 2015)
- Has not been as systematized or institutionalized as SOCE, but operates on a more subtle (and therefore, perhaps more dangerous) way
- Not as well studied or formally and systematically investigated as SOCE

Prevalence of GICE

- Recent analysis of cross-sectional nonprobability sample of TG adults ($N > 27k$) showed **exposure to GICE = ~14%** (Turban, King et al., 2019)
 - **Estimated that >188k TG people** have experienced psychological attempts to change their gender identity
- Prevalent in every US state (**9-25%**)
- **5%** exposed to GICE b/w 2010-2015 (**estimated that >73k TG people** experienced GICE during that period)
 - Prevalence of **1-16%** in every state

GICE: Beneficial or Harmful?

- **Benefits?**

- GICE has **NOT** been shown to alleviate stress OR resolve gender dysphoria

- **Harms** described along multiple domains (APA draft of GICE Resolution, SAMHSA, 2015):

- **Sociality**

- Loss of relationships, loss of sexual feeling/impotence, deteriorated family relationships, general disconnection from others, cutting off other LGBTQ friendships or romantic relationships, and social isolation

- **Spirituality**

- Lost faith, excommunicated, feeling unloved by God, religious communities, and religious leaders (feeling judged and condemned)

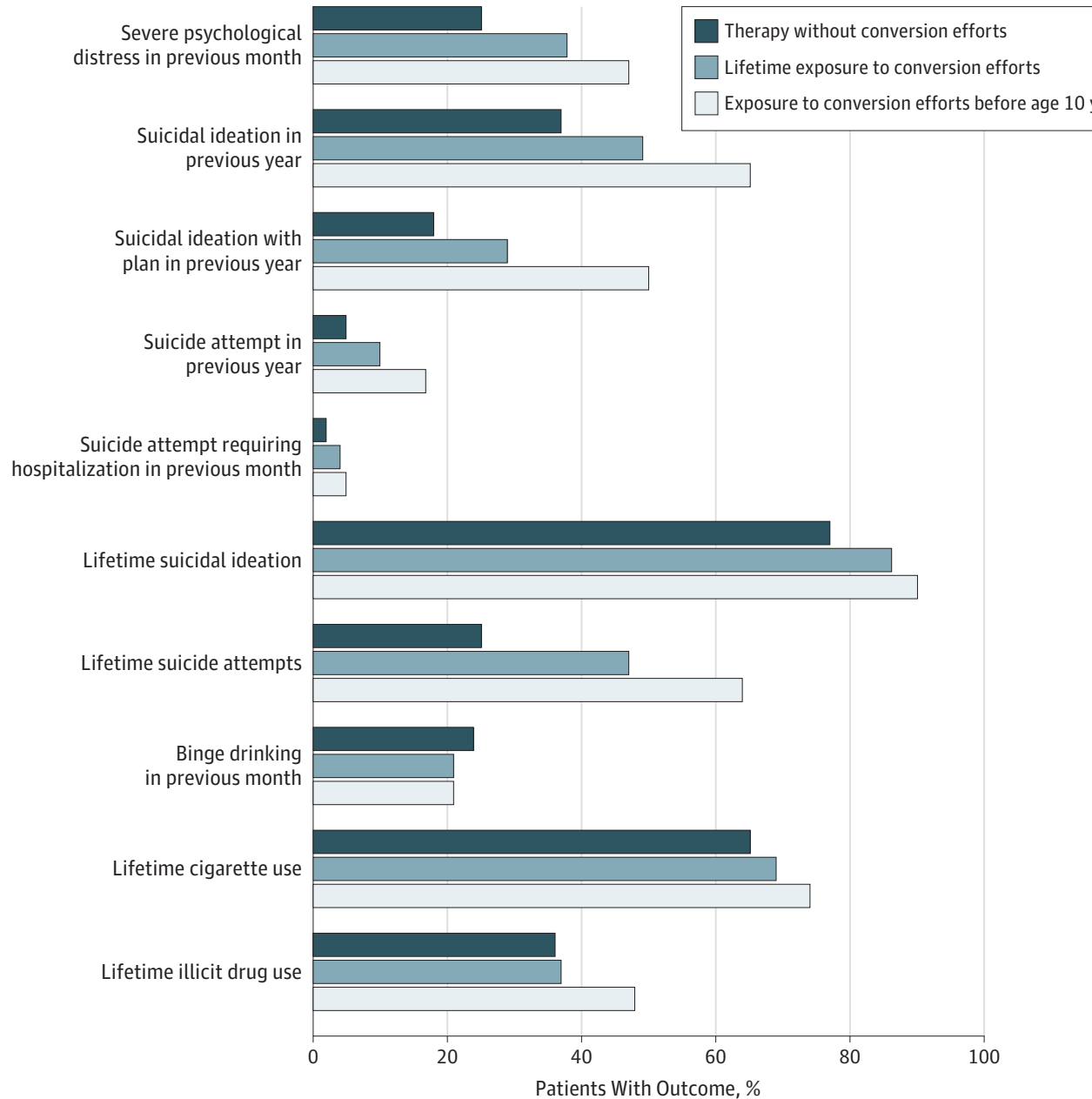
- **Psychological health**

- Emotional distress, lower self-esteem, disrupted sexual/gender identity development, intrusive imagery, SUDs, anxiety, depression, suicidality, decreased willingness to pursue MH tx

Harms

- Recent analysis: Cross-sectional survey of TG adults ($N > 27k$) who had ever spoken to a professional about gender identity ($N > 19k$) (Turban, Beckwith et al., 2019)
- Past exposure to GICE (~4k) vs. no GICE (~16k)
 - 35.2% exposed to GICE by religious advisor
 - No statistically significant differences in outcomes based upon religious vs. secular GICE
 - **Lifetime exposure to GICE significantly associated w/**
 - Severe psychological distress in previous mo.
 - **> 2x likelihood of lifetime suicide attempt**
- Exposure to GICE <10yo (~200) vs. no GICE (~16k)
 - **Pre-pubertal (before 10yo) exposure to GICE significantly associated w/:**
 - Severe psychological distress in previous mo.
 - Lifetime illicit drug use
 - **>2x likelihood of SI, SI + plan, attempt in previous 12 mos.**
 - **>4x likelihood of lifetime suicide attempt**

Figure. Mental Health Outcomes Among Those With and Without Exposure to Gender Identity Conversion Efforts



HARMS

(Turban, Beckwith, Reisner, & Keuroghlian, 2019, p. E7)

Consensus on GICE

- National and international healthcare organizations who have warned about the harmfulness of GICE
 - World Professional Association for Transgender Health
 - American Counseling Association
 - American Medical Association
 - American Academy of Family Physicians
 - American Academy of Nursing
 - American Psychoanalytic Association
 - GLMA: Health Professionals Advancing LGBTQ Equality,

Resolving Gender/Spirituality Identity Conflict

- Qualitative study of 5 GMs conflicted about gender identity and Christian faith (Levy & Ro, 2013)
- 5-stage model for identity conflict resolution, similar to the model for sexual minorities (Levy, 2012; Levy & Ro, 2013):



Identity Integration: Resolution

- Similar to SMs, literature on resolving conflict for GMs suggests that it is a (Levy & Ro, 2013; Oswald, 2001; Rodriguez & Follins, 2012; Yarhouse & Carrs, 2012):
 - **Dynamic, ever-changing** process requiring modifications in religious beliefs, practices, or affiliations
 - Process of **personalizing spirituality**:
 - Distancing from rejection and abusive beliefs
 - Distinguishing core beliefs from people and negative interpretations
 - Selectively choosing beliefs that affirm gender identity
 - Seeing transgenderism as a sacred gift
 - Identifying with another faith than they were raised in



CARE AT THE INTERSECTIONS

GENDER, RACE/ETHNICITY,
& CULTURE

Work with Conflicted QPOC

- **SOCE are common among QPOCs**, but not necessarily in an institutionalized or formal manner
 - Strength of ethnic identity pride may motivate POC to negotiate sexuality/spirituality conflict and form primary connections within familiar churches vs ex-gay groups or predominately White churches (Pitt, 2010b; Quinn, Dickson-Gomez, & Kelly, 2016)
 - Does that make it more or less dangerous?
 - Case in point - Andrew Caldwell: <https://www.youtube.com/watch?v=6v91cp0i35E>
- Many QPOC come from families and cultures where it could be **emotionally, psychologically, or physically harmful** to embrace their SGM status
- Full **cultural integration is not always possible**, nor should it necessarily be encouraged
 - This includes coming out:
 - QPOC who come out risk losing not only social support, but also a source of self-identification and association within their respective communities (Potoczniak et al., 2009)
 - **Compartmentalization** is sometimes the safest, most optimal strategy

Work with Conflicted QPOC

- Integration requires rejection of negative messages, personalizing spirituality, but **continuing religious activities** can be vital for QPOC/SGL people (Lassiter, 2014; Quinn et al., 2016; Seegers, 2007)
 - Religion vs. spirituality has been shown to be more important and rewarding for Black gay men w/ HIV (Seegers, 2007)
 - May require leaving home to accomplish integration (Lassiter, 2015)
 - "Neutralizing" homophobic religious messages via devaluing messengers' (Pitt, 2010a):
 - **Theological/scientific knowledge** (deeming it outdated or misinformed)
 - **Moral standing** (acknowledging the messenger's sins)
 - **Inappropriate focus on homosexuality** (recognizing how the frequency of mentions of homosexuality in the pulpit are disproportionate to its rare mention in the Bible)
 - **Motivations** (surmising that the messenger's aim is to appease other congregants in order to gain power or money)

Care for Gender Minorities

- Gender-affirming psychological and medical practices (APA draft of GICE Resolution; Austin & Craig, 2015; de Vries et al., 2014; Haas et al., 2011; Sevelius, 2013; White Hughto & Reisner, 2016)
 - ↓ **psychological distress**, **gender dysphoria**, and **maladaptive coping**
 - ↑ **psychological functioning**, **QOL**, and **treatment retention/engagement**
- **The components of care:**
 - **Social support:** Advocacy, friendship, acceptance/valuing/celebrating
 - **Spiritual support:** Leaders that celebrate, inclusive language (“brothers/sisters,” “sons/daughters” feels exclusive)
 - **Mental health support:** Minimizing gatekeeping, letters of support for transitioning, encouragement, competency (ally vs affirming)
 - **Medical support:** Hormone therapy, training/competency of self and staff, inclusive language on paperwork (“a different identity” vs “other”), ally signaling (e.g., L/G, Bi, Trans flags/colors)

Implications for Healthcare Workers and Spiritual Leaders

- The **accumulated impact** of stigma and discriminatory actions from all arenas of life make LGBTQ+ people hyperaware of their surroundings and the people they're interacting with
 - There are few more vulnerable positions to be in than needing medical, psychological, and/or spiritual care
- You do not know **what LGBTQ+ are bringing with them** when they walk through the door, and they may not tell you...
 - Painful past, present, and future
- LGBTQ+ people are **strong and resilient**...we have survived b/c of it! Capitalize on that strength.
- **Above all else:** compassion, empathy, acceptance, beneficence...



LOVE

Between the Lines

What we say...

Can I schedule a physical?

Could you refill my antidepressant?

I'm trying to lose weight and work out more.

I've had a hard time keeping my blood pressure and glucose controlled.

What we don't say...

I'm terrified you're going to hate me, mistreat me, misgender me, etc.

I am having a really hard time dealing with my own internalized homo/bi/transnegativity brought on by years of abuse and mistreatment.

I hate my body. I worry that gay men will never find me attractive, and I'll be alone for the rest of my life.

Years of struggling to reconcile my sexuality/gender identity with my faith, family, culture... years of hating myself... has left a mark on my soul and has deleteriously impacted my mental and physical health to this day... even though I integrated my identities years ago.

YOU can **BE THE CHANGE**

- Will you be a practitioner/leader who demonstrates **LOVE**:
 - Making it clear we are **welcomed** here, in your office, practice, spiritual community?
 - Letting us know that we can **bring our whole selves** here: minds, bodies, partners, families, etc.?
 - Ensuring that we can **say the things we're too scared to say**, but are literally dying to say, so that we can get the holistic help and care we so desperately need?

Resources

◦ Literature

◦ Christian:

- **Bible, Gender, Sexuality:** Reframing the Church's Debate on Same-Sex Relationships, James V. Brownson, 2013
- **Torn:** Rescuing the Gospel from the Gay-vs.-Christian Debate, Justin Lee, 2012
- **God and the Gay Christian:** The Biblical Case in Support of Same-Sex Relationships, Matthew Vines, 2014
- **UNFAIR:** Christians and the LGBT Question, John Shore, 2013

◦ Islamic:

- **Homosexuality in Islam:** Critical Reflection on Gay, Lesbian, and Transgender Muslims, Scott Siraj al-Haqq Kugle, 2010

◦ Jewish

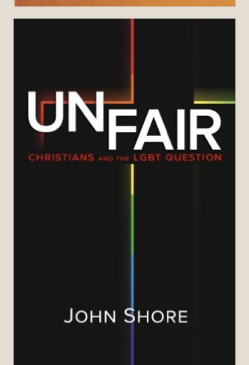
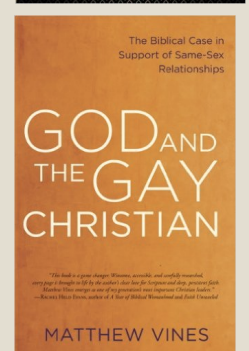
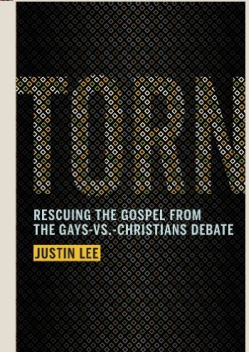
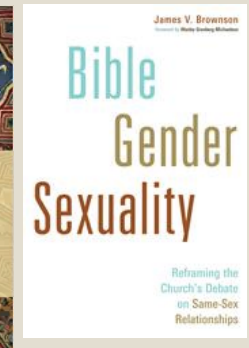
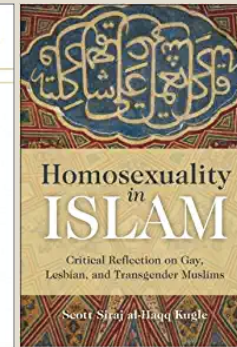
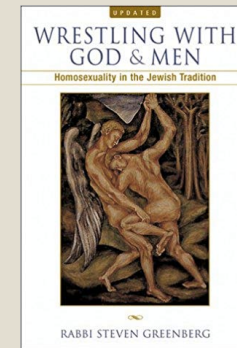
- **Wrestling With God and Men:** Homosexuality and the Jewish Tradition, Rabbi Steven Greenberg, 2004

◦ Social justice oriented organizations:

- Christian: The Reformation Project, Soulforce, The Evangelical Network, Q Christian Fellowship (formerly Gay Christian Network)
- Muslim: Al-Fatiha Foundation (dissolved in 2011)
- Jewish: Keshet, The World Congress: Keshet Ga'avah

◦ Religious Communities (Balkin, Watts, & Ali, 2014):

- Christian: Metropolitan Community Church (MCC), Episcopal Church, Presbyterian Church (PCUSA), United Church of Christ (UCC), Evangelical Lutheran Church in America (ELCA), others
- Jewish: Reform Judaism, Conservative Judaism



GM Resources

- For healthcare workers
 - WPATH Standards of Care (V7):
<https://www.wpath.org/publications/soc>
 - APA guidelines:
<https://www.apa.org/practice/guidelines/transgender.pdf>:
 - The importance of pronouns and gender inclusive language:
 - <https://www.mypronouns.org/>
- For clients
 - RAD REMEDY: <https://www.radremedy.org/>
 - Trans Health: <http://www.trans-health.com/>

Summary

- There are several potential impediments to healthy sexual/gender minority identity development, and *conflict with religion/spirituality* is one of the most controversial, poorly researched, and potentially pernicious such impediments – yet **spirituality is often neglected in therapeutic/healthcare work with LGBTQ+ people**, precluding them from accessing a significant source of strength, hope, coping, and resilience.
- Those conflicted between sexual/gender and spiritual identities have the option of prioritizing one identity over the other, or integrating them.
- Most recent trends in research and clinical practice favor **integration strategies**.

Where do we go from here?

- **Professional Involvement**

- Advocacy wings of our respective professional organizations
- Continuing to counter groups like JONAH/JIFSA and NARTH/ATCSI

- **Research**

- Include more intersectional identities (especially gender, other religions, POC, cultural contexts)
- Direct comparisons b/w groups (affirming vs. SOCE vs. GCCs)
 - e.g., 4 Options Studies (Lefevor et al., 2019)
 - Quantitative study of nearly 1,800 sexual minority individuals (nearly 70% were Mormon)
 - Compared participants who had chosen various relationship options: same-sex relationships, mixed-orientation marriages, single and non-celibate, and single and celibate
 - Those in relationships of any type were more satisfied with their life choice and had significantly less depression, anxiety, and IH and significantly greater levels of life satisfaction and physical health than those who were single;
 - Single and celibate individuals exhibited the greatest IH and lowest life satisfaction compared to all other groups. These findings suggest that LG celibacy may in fact be associated with significant limitations on well-being.

- **Advocacy and Legislation**

- Legal battles opposing SOCE/GICE bans
- Professional/Health organizations have done well to drive SOCE out of their ranks, but that has relegated it to religious institutions → advocating in less familiar spheres



Questions

Comments

Reactions?

References

- Ambrosino, B. (2015, July 26). Gay celibacy is the new ex-gay therapy. *The Daily Beast*. Retrieved from <http://www.thedailybeast.com/articles/2015/07/26/gay-celibacy-is-the-new-ex-gay-therapy.html><http://www.thedailybeast.com/articles/2015/07/26/gay-celibacy-is-the-new-ex-gay-therapy.html>
- Anderson, J. (2007). The contest of moralities: Negotiating compulsory celibacy and sexual intimacy in the Roman Catholic priesthood. *The Australian Journal of Anthropology*, 18, 1–17. <http://doi.org/10.1111/j.1835-9310.2007.tb00074.x>
- Anderton, C. L., Pender, D. A., & Asner-Self, K. K. (2011). A review of the religious identity/sexual orientation identity conflict literature: Revisiting Festinger's cognitive dissonance theory. *Journal of LGBT Issues in Counseling*, 5, 259–281. <http://doi.org/10.1080/15538605.2011.632745>
- APA Task Force on Appropriate Therapeutic Responses to Sexual Orientation. (2009). *Report of the Task Force on appropriate therapeutic responses to sexual orientation*. Washington, D.C.: American Psychological Association. Retrieved from <http://www.apa.org/pi/lgbt/resources/therapeutic-response.pdf>
- Austin, A., & Craig, S. L. (2015). Transgender affirmative cognitive behavioral therapy: Clinical considerations and applications. *Professional Psychology: Research and Practice*, 46(1), 21.
- Balkin, R. S., Watts, R. E., & Ali, S. R. (2014). A conversation about the intersection of faith, sexual orientation, and gender: Jewish, Christian, and Muslim perspectives. *Journal of Counseling & Development*, 92, 187–193. <http://doi.org/10.1002/j.1556-6676.2014.00147.x>
- Barnes, D. M., & Meyer, I. H. (2012). Religious affiliation, internalized homophobia, and mental health in lesbians, gay men, and bisexuals. *American Journal of Orthopsychiatry*, 82, 505–515. <http://doi.org/10.1111/j.1939-0025.2012.01185.x>
- Bartoli, E., & Gillem, A. R. (2008). Continuing to depolarize the debate on sexual orientation and religion: Identity and the therapeutic process. *Professional Psychology: Research and Practice*, 39, 202–209. <http://doi.org/10.1037/0735-7028.39.2.202>
- Beagan, B. L., & Hattie, B. (2015). Religion, spirituality, and LGBTQ identity integration. *Journal of LGBT Issues in Counseling*, 9, 92–117. <http://doi.org/10.1080/15538605.2015.1029204>
- Beckstead, A. L., & Morrow, S. L. (2004). Mormon clients' experiences of conversion therapy: The need for a new treatment approach. *The Counseling Psychologist*, 32, 651–690. <http://doi.org/10.1177/0011000004267555>
- Benoit, M. (2005). Conflict between religious commitment and same-sex attraction: Possibilities for a virtuous response. *Ethics & Behavior*, 15, 309–325. http://doi.org/10.1207/s15327019eb1504_3
- Bilodeau, B. L., & Renn, K. A. (2005). Analysis of LGBT identity development models and implications for practice. *New Directions for Student Services*, (111), 25–39.
- Bockting, W. O., & Cesaretti, C. (2001). Spirituality, Transgender Identity, and Coming Out. *Journal of Sex Education & Therapy*, 26(4), 291. <https://doi.org/10.1080/01614576.2001.11074435>
- Bogaert, A. F. (2004). Asexuality: Prevalence and associated factors in a national probability sample. *Journal of Sex Research*, 41, 279–287. <http://doi.org/10.1080/00224490409552235>
- Bogaert, A. F. (2006). Toward a conceptual understanding of asexuality. *Review of General Psychology*, 10, 241–250. <http://doi.org/10.1037/1089-2680.10.3.241>

References

- Borowich, A. E. (2008). Failed reparative therapy of orthodox Jewish homosexuals. *Journal of Gay & Lesbian Mental Health*, 12(3), 167–177. <https://doi.org/10.1080/19359700802111072>
- Bozard, R. L. J., & Sanders, C. J. (2011). Helping Christian lesbian, gay, and bisexual clients recover religion as a source of strength: Developing a model for assessment and integration of religious identity in counseling. *Journal of LGBT Issues in Counseling*, 5, 47–74. <http://doi.org/10.1080/15538605.2011.554791>
- Bradshaw, K., Dehlin, J. P., Crowell, K. A., Galliher, R. V., & Bradshaw, W. S. (2015). Sexual orientation change efforts through psychotherapy for LGBTQ individuals affiliated with the Church of Jesus Christ of Latter-Day Saints. *Journal of Sex & Marital Therapy*, 41, 391–412. <http://doi.org/10.1080/0092623X.2014.915907>
- Buchanan, M., Dzelme, K., Harris, D., & Hecker, L. (2001). Challenges of being simultaneously gay or lesbian and spiritual and/or religious: A narrative perspective. *The American Journal of Family Therapy*, 29, 435–449. <http://doi.org/10.1080/01926180127629>
- Byrd, A. D., Nicolosi, J., & Potts, R. W. (2008). Clients' perceptions of how reorientation therapy and self-help can promote changes in sexual orientation. *Psychological Reports*, 102(1), 3–28. <http://doi.org/10.2466/PRO.102.1.3-28>
- Cacioppo, J. T., Cacioppo, S., & Boomsma, D. I. (2014). Evolutionary mechanisms for loneliness. *Cognition & Emotion*, 28, 3–21. <http://doi.org/10.1080/02699931.2013.837379>
- Campbell, M., Hinton, J. D. X., & Anderson, J. R. (2019). A systematic review of the relationship between religion and attitudes toward transgender and gender-variant people. *International Journal of Transgenderism*, 20(1), 21–38. <https://doi.org/10.1080/15532739.2018.1545149>
- Caspi, A., Harrington, H., Moffitt, T. E., Milne, B. J., & Poulton, R. (2006). Socially isolated children 20 years later: Risk of cardiovascular disease. *Archives of Pediatrics & Adolescent Medicine*, 160, 805–811. <http://doi.org/10.1001/archpedi.160.8.805>
- Celenza, A. (2004). Sexual misconduct in the clergy: The search for the father. *Studies in Gender and Sexuality*, 5, 213–232.
- Chaney, M. P., & Burns-Wortham, C. M. (2015). Examining coming out, loneliness, and self-esteem as predictors of sexual compulsivity in gay and bisexual men. *Sexual Addiction & Compulsivity*, 22, 71–88. <http://doi.org/10.1080/10720162.2014.1001543>
- Cragun, R. T., & Sumerau, J. E. (2015). The last bastion of sexual and gender prejudice? Sexualities, race, gender, religiosity, and spirituality in the examination of prejudice toward sexual and gender minorities. *Journal of Sex Research*, 52(7), 821–834. <https://doi.org/10.1080/00224499.2014.925534>
- Creek, S. J. (2013). "Not getting any because of Jesus": The centrality of desire management to the identity work of gay, celibate Christians. *Symbolic Interaction*, 36, 119–136. <http://doi.org/10.1002/SYMB.58>
- Croghan, L. M. (1974). A question of freedom. *Journal of Religion & Health*, 13, 201–206. <http://doi.org/10.1007/BF01532659>
- Crowell, K. A., Galliher, R. V., Dehlin, J., & Bradshaw, W. S. (2014). Specific aspects of minority stress associated with depression among LDS affiliated non-heterosexual adults. *Journal of Homosexuality*, 62, 242–267. <http://doi.org/10.1080/00918369.2014.969611>
- D'Augelli, A. (2006). Coming out, visibility, and creating change: Empowering lesbian, gay, and bisexual people in a rural university community. *American Journal of Community Psychology*, 37(3/4), 203–210. doi:10.1007/s10464-006-9043-6
- Dahl, A. L., & Galliher, R. V. (2012). LGBTQ adolescents and young adults raised within a Christian religious context: Positive and negative outcomes. *Journal of Adolescence*, 35, 1611–1618. <http://doi.org/10.1016/j.adolescence.2012.07.003>

References

- Dehlin, J. P., Galliher, R. V., Bradshaw, W. S., & Crowell, K. A. (2014). Psychosocial correlates of religious approaches to same-sex attraction: A Mormon perspective. *Journal of Gay & Lesbian Mental Health*, 18, 284–311. <http://doi.org/10.1080/19359705.2014.912970>
- Dehlin, J. P., Galliher, R. V., Bradshaw, W. S., Hyde, D. C., & Crowell, K. A. (2015). Sexual orientation change efforts among current or former LDS church members. *Journal of Counseling Psychology*, 62, 95–105. <http://doi.org/10.1037/cou0000011>
- de Vries, A. L., McGuire, J. K., Steensma, T. D., Wagenaar, E. C., Doreleijers, T. A., & Cohen-Kettenis, P. T. (2014). Young adult psychological outcome after puberty suppression and gender reassignment. *Pediatrics*, 134(4), 696–704. <https://doi.org/10.1542/peds.2013-2958>.
- Diener, E., Emmons, R. A., Larsen, R. J., & Griffin, S. (1985). The Satisfaction With Life Scale. *Journal of Personality Assessment*, 49, 71–75. http://doi.org/10.1207/s15327752jpa4901_13
- Diener, E., Inglehart, R., & Tay, L. (2013). Theory and validity of life satisfaction scales. *Social Indicators Research*, 112, 497–527. <http://doi.org/10.1007/s11205-012-0076-y>
- Exline, J. J., Pargament, K. I., Grubbs, J. B., & Yali, A. M. (2014). The Religious and Spiritual Struggles Scale: Development and initial validation. *Psychology of Religion and Spirituality*, 6, 208–222. <http://doi.org/10.1037/a0036465>
- Fassinger, R. E. (2005). Paradigms, praxis, problems, and promise: Grounded theory in counseling psychology research. *Journal of Counseling Psychology*, 52, 156–166. <http://doi.org/10.1037/0022-0167.52.2.156>
- Fjelstrom, J. (2013). Sexual orientation change efforts and the search for authenticity. *Journal of Homosexuality*, 60, 801–27. <http://doi.org/10.1080/00918369.2013.774830>
- Flentje, A., Heck, N. C., & Cochran, B. N. (2013). Sexual reorientation therapy interventions: Perspectives of ex-ex-gay individuals. *Journal of Gay & Lesbian Mental Health*, 17, 256–277. <http://doi.org/10.1080/19359705.2013.773268>
- Flentje, A., Heck, N. C., & Cochran, B. N. (2014). Experiences of ex-ex-gay individuals in sexual reorientation therapy: Reasons for seeking treatment, perceived helpfulness and harmfulness of treatment, and post-treatment identification. *Journal of Homosexuality*, 61, 1242–1268. <http://doi.org/10.1080/00918369.2014.926763>
- Frost, D. M., Lehavot, K., & Meyer, I. H. (2015). Minority stress and physical health among sexual minority individuals. *Journal of Behavioral Medicine*, 38, 1–8. <http://doi.org/10.1007/s10865-013-9523-8>
- Glaser, B. G., & Strauss, A. L. (1967). *The discovery of grounded theory: Strategies for qualitative research*. Chicago, IL: Aldine Publishing Company.
- Gold, S. P., & Stewart, D. L. (2011). Lesbian, gay, and bisexual students coming out at the intersection of spirituality and sexual identity. *Journal of LGBT Issues in Counseling*, 5(3/4), 237–258. doi:10.1080/15538605.2011.633052
- Golub, S. A., Walker, J. J., Longmire-Avital, B., Bimbi, D. S., & Parsons, J. T. (2010). The role of religiosity, social support, and stress-related growth in protecting against HIV risk among transgender women. *Journal of Health Psychology*, 15(8), 1135–1144. <https://doi.org/10.1177/1359105310364169>
- Gonsiorek, J. C. (2008). Human sexuality, celibacy, and recovery. *Seminary Journal*, 15(1), 21–26.
- Goodman, L. A. (1961). Snowball sampling. *The Annals of Mathematical Statistics*, 32, 148–170. <http://doi.org/10.1214/aoms/1177705148>

References

- Haas, A. P., Eliason, M., Mays, V. M., Mathy, R. M., Cochran, S. D., D'Augelli, A. R., ... Clayton, P. J. (2010). Suicide and suicide risk in lesbian, gay, bisexual, and transgender populations: Review and recommendations. *Journal of Homosexuality*, 58, 10–51. <http://doi.org/10.1080/00918369.2011.534038>
- Haldeman, D. C. (2002). Gay rights, patient rights: The implications of sexual orientation conversion therapy. *Professional Psychology: Research and Practice*, 33, 260–264. <http://doi.org/10.1037/0735-7028.33.3.260>
- Haldeman, D. C. (2004). When sexual and religious orientation collide: Considerations in working with conflicted same-sex attracted male clients. *The Counseling Psychologist*, 32, 691–715. <http://doi.org/10.1177/0011000004267560>
- Haldeman, D. C. (2010). Reflections of a gay male psychotherapist. *Psychotherapy (Chicago, Ill.)*, 47, 177–185. <http://doi.org/10.1037/a0019757>
- Halkitis, P. N., Mattis, J. S., Sahadath, J. K., Massie, D., Ladyzhenskaya, L., Pitrelli, K., ... Cowie, S.-A. E. (2009). The meanings and manifestations of religion and spirituality among lesbian, gay, bisexual, and transgender adults. *Journal of Adult Development*, 16, 250–262. <http://doi.org/10.1007/s10804-009-9071-1>
- Hanson, W. E., Creswell, J. W., Plano Clark, V. L., Petska, K. S., & Creswell, J. D. (2005). Mixed methods research designs in counseling psychology. *Journal of Counseling Psychology*, 52(2), 224–235. <http://doi.org/10.1037/0022-0167.52.2.224>
- Harper, G. W., & Schneider, M. (2003). Oppression and discrimination among lesbian, gay, bisexual, and transgendered people and communities: A challenge for community psychology. *American Journal of Community Psychology*, 31, 243–252. <http://doi.org/10.1023/A:1023906620085>
- Hawkey, L. C., & Cacioppo, J. T. (2007). Aging and loneliness: Downhill quickly? *Current Directions in Psychological Science (Wiley-Blackwell)*, 16, 187–191. <http://doi.org/10.1111/j.1467-8721.2007.00501.x>
- Hawkey, L. C., & Cacioppo, J. T. (2010). Loneliness matters: A theoretical and empirical review of consequences and mechanisms. *Annals of Behavioral Medicine*, 40, 218–227. <http://doi.org/10.1007/s12160-010-9210-8>
- Heckathorn, D. D. (2011). Comment: Snowball versus respondent-driven sampling. *Sociological Methodology*, 41, 355–366. <http://doi.org/10.1111/j.1467-9531.2011.01244.x>
- Hostetler, A. J. (2009). Single by choice? Assessing and understanding voluntary singlehood among mature gay men. *Journal of Homosexuality*, 56, 499–531. <http://doi.org/10.1080/00918360902821486>
- Hostetler, A. J. (2012). Singlehood and subjective well-being among mature gay men: The impact of family, friends, and of being “single by choice.” *Journal of GLBT Family Studies*, 8, 361–384. <http://doi.org/10.1080/1550428X.2012.705621>
- Itzhaky, H., & Kissil, K. (2015). 'It's a horrible sin. If they find out, I will not be able to stay': Orthodox Jewish gay men's experiences living in secrecy. *Journal of Homosexuality*, 62(5), 621–643. <https://doi.org/10.1080/00918369.2014.988532>
- Jahangir, J. B., & Abdul-latif, H. (2016). Investigating the Islamic perspective on homosexuality. *Journal of Homosexuality*, 63(7), 925–954. <https://doi.org/10.1080/00918369.2015.1116344>
- Jones, S. L., & Yarhouse, M. A. (2011). A longitudinal study of attempted religiously mediated sexual orientation change. *Journal of Sex & Marital Therapy*, 37, 404–427. <http://doi.org/10.1080/0092623X.2011.607052>

References

- Karten, E. Y., & Wade, J. C. (2010). Sexual orientation change efforts in men: A client perspective. *The Journal of Men's Studies*, 18, 84–102. <http://doi.org/10.3149/jms.1801.84>
- Kidd, J. D., & Witten, T. M. (2008). Understanding spirituality and religiosity in the transgender community: Implications for aging. *Journal of Religion, Spirituality & Aging*, 20(1–2), 29–62. <https://doi.org/10.1080/15528030801922004>
- King, M., Semlyen, J., Tai, S. S., Killaspy, H., Osborn, D., Popelyuk, D., & Nazareth, I. (2008). A systematic review of mental disorder, suicide, and deliberate self harm in lesbian, gay and bisexual people. *BMC Psychiatry*, 8, 70. <http://doi.org/10.1186/1471-244X-8-70>
- Kubicek, K., Mcdavitt, B., Carpineto, J., Weiss, G., Iverson, E., & Kipke, M. D. (2009). "God made me gay for a reason": Young men who have sex with men's resiliency in resolving internalized homophobia from religious sources. *Journal of Adolescent Research*, 24, 601–633. <http://doi.org/10.1177/0743558409341078>
- Lassiter, J. (2014). Extracting dirt from water: A strengths-based approach to religion for African American same-gender-loving men. *Journal of Religion & Health*, 53(1), 178–189. <https://doi.org/10.1007/s10943-012-9668-8>
- Lassiter, J. M. (2015). Reconciling sexual orientation and Christianity: Black same-gender loving men's experiences. *Mental Health, Religion & Culture*, 18(5), 342–353. <https://doi.org/10.1080/13674676.2015.1056121>
- Lease, S. H., Horne, S. G., & Noffsinger-Frazier, N. (2005). Affirming faith experiences and psychological health for Caucasian lesbian, gay, and bisexual individuals. *Journal of Counseling Psychology*, 52, 378–388. <http://doi.org/10.1037/0022-0167.52.3.378>
- Lefevor, G. T., Beckstead, A. L., Schow, R. L., Raynes, M., Ty, R., & Rosik, C. H. (2019). Satisfaction and health within four sexual identity relationship options. *Journal of Sex & Marital Therapy, Advance on*(0), 1–15. <http://doi.org/10.1080/0092623X.2018.1531333>
- Levitt, H. M. (2015). Interpretation-driven guidelines for designing and evaluating grounded theory research: A constructivist-social justice approach. In O. C. G. Gelo, A. Pritz, & B. Rieken (Eds.), *Psychotherapy research: Foundations, process, and outcome* (pp. 455–483). Wien, Austria: Springer-Verlag. http://doi.org/10.1007/978-3-7091-1382-0_22
- Levy, D. L. (2012). The importance of personal and contextual factors in resolving conflict between sexual identity and Christian upbringing. *Journal of Social Service Research*, 38, 56–73. <http://doi.org/10.1080/01488376.2011.586308>
- Levy, D. L., & Lo, J. R. (2013). Transgender, transsexual, and gender queer individuals with a Christian upbringing: The process of resolving conflict between gender identity and faith. *Journal of Religion & Spirituality in Social Work: Social Thought*, 32(1), 60–83. <https://doi.org/10.1080/15426432.2013.749079>
- Levy, D. L., & Reeves, P. (2011). Resolving identity conflict: Gay, lesbian, and queer individuals with a Christian upbringing. *Journal of Gay & Lesbian Social Services*, 23, 53–68. <http://doi.org/10.1080/10538720.2010.530193>
- Longo, J., Walls, N. E., & Wisneski, H. (2013). Religion and religiosity: Protective or harmful factors for sexual minority youth? *Mental Health, Religion & Culture*, 16(3), 1–18. <http://doi.org/10.1080/13674676.2012.659240>
- Looy, H., & Bouma, H., III. (2005). The nature of gender: Gender identity in persons who are intersexed or transgendered. *Journal of Psychology and Theology*, 33(3), 166–178. Retrieved from <http://search.ebscohost.com/login.aspx?direct=true&db=psyh&AN=2005-12471-002&site=ehost-live>
- Lowe, M. E. (2017). From the Same Spirit: Receiving the Theological Gifts of Transgender Christians. *Dialog: A Journal of Theology*, 56(1), 28–37. <https://doi.org/10.1111/dial.12293>

References

- Mallory, C., Brown, C. N. T., & Conron, K. J. (2018, January). Conversion therapy and LGBT youth. *Williams Institute, UCLA School of Law*. Retrieved from: <https://williamsinstitute.law.ucla.edu/demographics/conversion-therapy-and-lgbt-youth/>
- Mays, V. M., & Cochran, S. D. (2001). Mental health correlates of perceived discrimination among lesbian, gay, and bisexual adults in the United States. *American Journal of Public Health, 91*, 1869–1876. <http://doi.org/10.2105/AJPH.91.11.1869>
- McDowell, I. (2010). Measures of self-perceived well-being. *Journal of Psychosomatic Research, 69*, 69–79. <http://doi.org/10.1016/j.jpsychores.2009.07.002>
- Mereish, E. H., & Poteat, V. P. (2015). A relational model of sexual minority mental and physical health: The negative effects of shame on relationships, loneliness, and health. *Journal of Counseling Psychology, 62*, 425–437. <http://doi.org/10.1037/cou0000088>
- Meyer, I. H. (1995). Minority stress and mental health in gay men. *Journal of Health and Social Behavior, 36*, 38–56.
- Meyer, I. H. (2013). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. *Psychology of Sexual Orientation and Gender Diversity, 1*, 3–26. <http://doi.org/10.1037/2329-0382.1.S.3>
- Meyer, S., & Schwitzer, A. M. (1999). Stages of identity development among college students with minority sexual orientations. *Journal of College Student Psychotherapy, 13*(4), 41–65. doi:10.1300/J035v13n04_05
- Mohr, J. J., & Kendra, M. S. (2011). Revision and extension of a multidimensional measure of sexual minority identity: The Lesbian, Gay, and Bisexual Identity Scale. *Journal of Counseling Psychology, 58*, 234–245. <http://doi.org/10.1037/a0022858>
- Noy, C. (2008). Sampling knowledge: The hermeneutics of snowball sampling in qualitative research. *International Journal of Social Research Methodology, 11*, 327–344. <http://doi.org/10.1080/13645570701401305>
- Pavot, W., & Diener, E. (1993). Review of the Satisfaction With Life Scale. *Psychological Assessment, 5*, 164–172. <http://doi.org/10.1037/1040-3590.5.2.164>
- Pavot, W., Diener, E., Colvin, C. R., & Sandvik, E. (1991). Further validation of the Satisfaction With Life Scale: Evidence for the cross-method convergence of well-being measures. *Journal of Personality Assessment*. http://doi.org/10.1207/s15327752jpa5701_17
- Pitt, R. N. (2010a). "Killing the messenger": Religious Black gay men's neutralization of anti-gay religious messages. *Journal for the Scientific Study of Religion, 49*, 56–72. <http://doi.org/10.1111/j.1468-5906.2009.01492.x>
- Pitt, R. N. (2010b). "Still looking for my Jonathan": Gay Black men's management of religious and sexual identity conflicts. *Journal of Homosexuality, 57*, 39–53. <http://doi.org/10.1080/00918360903285566>
- Ponterotto, J. G. (2010). Qualitative research in multicultural psychology: Philosophical underpinnings, popular approaches, and ethical considerations. *Cultural Diversity & Ethnic Minority Psychology, 16*, 581–589. <http://doi.org/10.1037/a0012051>
- Potoczniak, D., Crosbie-Burnett, M., & Saltzburg, N. (2009). Experiences Regarding Coming Out to Parents Among African American, Hispanic, and White Gay, Lesbian, Bisexual, Transgender, and Questioning Adolescents. *Journal of Gay & Lesbian Social Services, 21*(2–3), 189–205. <https://doi.org/10.1080/10538720902772063>
- Quinn, K., Dickson-Gomez, J., & Kelly, J. A. (2016). The role of the Black Church in the lives of young Black men who have sex with men. *Culture, Health & Sexuality, 18*, 524–537. <http://doi.org/10.1080/13691058.2015.1091509>

References

- Redmond, J. P. (2014, July 16). Queer Catholics and "the third way." Retrieved October 22, 2015, from http://www.huffingtonpost.com/j-patrick-redmond/queer-catholics-and-the-t_b_5325001.html
- Rennie, D. L. (2000). Grounded theory methodology as methodical hermeneutics: Reconciling realism and relativism. *Theory & Psychology*, 10, 481–502. <http://doi.org/10.1177/0959354300104003>
- Rennie, D. L., Phillips, J. R., & Quartaro, G. K. (1988). Grounded theory: A promising approach to conceptualization in psychology? *Canadian Psychology*, 29, 139–150. <http://doi.org/10.1037/h0079765>
- Riggle, E. B., Gonzalez, K. A., Rostosky, S. S., & Black, W. W. (2014). Cultivating positive LGBTQA identities: An intervention study with college students. *Journal of LGBT Issues In Counseling*, 8(3), 264–281. doi:10.1080/15538605.2014.933468
- Rodriguez, E. M. (2010). At the intersection of church and gay: A review of the psychological research on gay and lesbian Christians. *Journal of Homosexuality*, 57, 5–38. <http://doi.org/10.1080/00918360903445806>
- Rodriguez, E., & Follins, L. (2012). Did God make me this way? Expanding psychological research on queer religiosity and spirituality to include intersex and transgender individuals. *Psychology & Sexuality*, 3(3), 214–225. <https://doi.org/10.1080/19419899.2012.700023>
- Rodriguez, E. M., & Ouellette, S. C. (2000). Gay and lesbian Christians: Homosexual and religious identity integration in the members and participants of a gay-positive church. *Journal for the Scientific Study of Religion*, 39, 333–347. <http://doi.org/10.1111/0021-8294.00028>
- Rostosky, S. S., Riggle, E. D. B., Horne, S. G., Denton, F. N., & Huellemeier, J. D. (2010). Lesbian, gay, and bisexual individuals' psychological reactions to amendments denying access to civil marriage. *American Journal of Orthopsychiatry*, 80, 302–310. <http://doi.org/10.1111/j.1939-0025.2010.01033.x>
- Rosenkrantz, D. E., Rostosky, S. S., Riggle, E. D. B., & Cook, J. R. (2016). The positive aspects of intersecting religious/spiritual and LGBTQ identities. *Spirituality in Clinical Practice*, 3(2), 127–138. <https://doi.org/10.1037/scp0000095>
- Russell, D. W. (1996). UCLA Loneliness Scale (Version 3): reliability, validity, and factor structure. *Journal of Personality Assessment*, 66, 20–40. http://doi.org/10.1207/s15327752jpa6601_2
- Russell, D. W., Peplau, L. A., & Ferguson, M. L. (1978). Developing a measure of loneliness. *Journal of Personality Assessment*. http://doi.org/10.1207/s15327752jpa4203_11
- Ryff, C. D. (1989). Happiness is everything, or is it? *Journal of Personality & Social Psychology*, 57, 1069–1081. Retrieved from <http://content.apa.org/reviews/034645>
- Ryff, C. D., & Keyes, C. L. M. (1995). The structure of psychological well-being revisited. *Journal of Personality & Social Psychology*, 69, 719–727. <http://doi.org/10.1037/0022-3514.69.4.719>
- SAMHSA (2015). Ending Conversion Therapy: Supporting and Affirming LGBTQ Youth. HHS Publication No. (SMA) 15-4928. Rockville, MD.
- Scroggs, B., Miller, J. M., & Stanfield, M. H. (2018). Identity development and integration of religious identities in gender and sexual minority emerging adults. *Journal for the Scientific Study of Religion*, 57(3), 604–615. <https://doi.org/10.1111/jssr.12538>
- Seegers, D. L. (2007). Spiritual and religious experiences of gay men with HIV illness. *JANAC: Journal of the Association of Nurses in AIDS Care*, 18(3), 5–12. <https://doi.org/10.1016/j.jana.2007.03.001>

References

- Sevelius, J. M. (2013). Gender affirmation: A framework for conceptualizing risk behavior among transgender women of color. *Sex roles*, 68(11-12), 675-689
- Sherry, A., Adelman, A., Whilde, M. R., & Quick, D. (2010). Competing selves: Negotiating the intersection of spiritual and sexual identities. *Professional Psychology: Research and Practice*, 41, 112-119. <http://doi.org/10.1037/a0017471>
- Shidlo, A., & Schroeder, M. (2002). Changing sexual orientation: A consumers' report. *Professional Psychology: Research and Practice*, 33, 249-259. <http://doi.org/10.1037/0735-7028.33.3.249>
- Sipe, A. W. R. (2003). *Celibacy in crisis: A secret world revisited*. New York: Brunner-Routledge.
- Sipe, A. W. R. (2008). Celibacy today: Mystery, myth, and miasma. *Cross Currents*, 57, 545-562.
- Smith, B. L., & Horne, S. G. (2007). Gay, lesbian, bisexual and transgendered (GLBT) experiences with Earth-spirited faith. *Journal of Homosexuality*, 52, 235-248. http://doi.org/10.1300/J082v52n03_11
- Stevens, R. J. (2004). Understanding gay identity development within the college environment. *Journal of College Student Development*, 45(2), 185-206. doi:10.1353/csd.2004.0028
- Stone, K. (2007). "Do not be conformed to this world": Queer reading and the task of the preacher. *Theology & Sexuality: The Journal of the Institute for the Study of Christianity & Sexuality*, 13(2), 153-165. <https://doi.org/10.1177/1355835806074431>
- Sullivan-Blum, C. R. (2004). Balancing acts: Drag queens, gender and faith. *Journal of Homosexuality*, 46, 195-209. <http://doi.org/10.1300/J082v53n03>
- Sumerau, J. E., Mathers, L. A. B., & Lampe, N. (2019). Learning from the religious experiences of bi+ trans people. *Symbolic Interaction*, 42(2), 179-201. <https://doi.org/10.1002/symb.387>
- Super, J. T., & Jacobson, L. (2011). Religious abuse: Implications for counseling lesbian, gay, bisexual, and transgender individuals. *Journal of LGBT Issues in Counseling*, 5, 180-196. <http://doi.org/10.1080/15538605.2011.632739>
- Tozer, E. E., & Hayes, J. A. (2004). Why do individuals seek conversion therapy? The role of religiosity, internalized homonegativity, and identity development. *The Counseling Psychologist*, 32, 716-740. <http://doi.org/10.1177/0011000004267563>
- Turban, J. L., Beckwith, N., Reisner, S. L., & Keuroghlian, A. S. (2019). Association between recalled exposure to gender identity conversion efforts and psychological distress and suicide attempts among transgender adults. *JAMA Psychiatry*, 1-9. <https://doi.org/10.1001/jamapsychiatry.2019.2285>
- Turban, J. L., King, D., Reisner, S. L., & Keuroghlian, A. S. (2019). Psychological attempts to change a person's gender identity from transgender to cisgender: Estimated prevalence across US states, 2015. *American Journal of Public Health*, 109(10), 1452-1454. <https://doi.org/10.2105/AJPH.2019.305237>
- Walker, J. J., & Longmire-Avital, B. (2013). The impact of religious faith and internalized homonegativity on resiliency for Black lesbian, gay, and bisexual emerging adults. *Developmental Psychology*, 49(9), 1723-1731. <https://doi.org/10.1037/a0031059>
- Weiss, E. M., Morehouse, J., Yeager, T., & Berry, T. (2010). A qualitative study of ex-gay and ex-ex-gay experiences. *Journal of Gay & Lesbian Mental Health*, 14, 291-319. <http://doi.org/10.1080/19359705.2010.506412>

References

- Westefeld, J. S., Maples, M. R., Buford, B., & Taylor, S. (2001). Gay, lesbian, and bisexual college students: The relationship between sexual orientation and depression, loneliness, and suicide. *Journal of College Student Psychotherapy*, 15(3), 71–82. <http://doi.org/10.1300/J035v15n03>
- White Hughto, J. M., & Reisner, S. L. (2016). A systematic review of the effects of hormone therapy on psychological functioning and quality of life in transgender individuals. *Transgender Health*, 1(1), 21–31.
- Wood, A. W., & Conley, A. H. (2014). Loss of religious or spiritual identities among the LGBT population. *Counseling and Values*, 59, 95–111. <http://doi.org/10.1002/j.2161-007X.2014.00044.x>
- Worthington, E. L., Hook, J. N., Davis, D. E., & McCaniel, M. A. (2011). Religion and spirituality. *Journal of Clinical Psychology*, 67, 204–214. <http://doi.org/10.1002/jclp.20760>
- Wright, E. R., & Perry, B. L. (2006). Sexual identity distress, social support, and the health of gay, lesbian, and bisexual youth. *Journal of Homosexuality*, 51, 81–110. http://doi.org/10.1300/J082v51n01_05
- Yarhouse, M. A., & Carrs, T. L. (2012). MTF transgender Christians' experiences: A qualitative study. *Journal of LGBT Issues in Counseling*, 6(1), 18–33. <https://doi.org/10.1080/15538605.2012.649405>
- Yarhouse, M. A., Morgan, T., Anthony, K., & Sadusky, J. (2017). Celibate gay Christians: Sexual identity and religious beliefs and practices. *The Journal of Pastoral Care & Counseling*, 71, 52–59. <http://dx.doi.org/10.1177/1542305017693245>
- Zubernis, L., Snyder, M., & McCoy, V. A. (2011). Counseling lesbian and gay college students through the lens of Cass's and Chickering's developmental models. *Journal of LGBT Issues in Counseling*, 5(2), 122–150. doi:10.1080/15538605.2011.578506 Yarhouse, M. A., Burkett, L. A., & Kreeft, E. M. (2002). Paraprofessional Christian ministries for sexual behavior and same-sex identity concerns. *Journal of Psychology & Theology*, 30, 209–227.