ABSTRACT: This paper outlines the recent history of LGBT psychology and psychotherapy in the United Kingdom, focusing on key publications\(^1\), and the current terrain, highlighting similarities and differences between the UK and the US contexts\(^2\). The paper is divided into four sections: the first focuses on the early development of the field in the late 1960s. The second section explores the 1980s—a decade that witnessed the publication of two key texts that had a strong influence on the development of the field, and,

\(^1\) This is by no means an exhaustive survey of LGBT psychology in the UK—to illustrate the development of LGBT in the UK and the distinctiveness of the UK approach, we have chosen to organise this brief history around a discussion of key publications. The publications we have selected are those acknowledged as key contributions in reviews of research or in broader discussions of LGBT psychology in the UK. Furnell (1986) provides a more detailed survey of work in the UK between 1965 and 1985—although his focus is not specifically, as is ours, on affirmative lesbian and gay psychology.

\(^2\) It is important to note that we write this history as two academic LGBT psychologists; therefore, the history of LGBT psychology offered in the paper may be more complete than the history of LGBT psychotherapy.
in particular, on the development of critical and discursive approaches. The third section details the rapid changes that occurred in the 1990s including the establishment of a Lesbian and Gay Psychology Section within the British Psychological Society. The final section considers the current terrain and the similarities and differences in the theoretical commitments of researchers and practitioners working in the UK and in the US.

**KEYWORDS:** bisexual, gay, critical psychology, history, homosexuality, Hopkins, Kitzinger, lesbian, LGBT psychology, LGBT psychotherapy, Richardson and Hart, social constructionism, United Kingdom

**EARLY BEGINNINGS**

Lesbian and gay scholarship began in Britain in the late nineteenth and early twentieth centuries. Edward Carpenter and Havelock Ellis founded the British Society for the Study of Sex Psychology in 1914 (Coyle and Kitzinger; 2002, Coyle and Wilkinson, 2002; Davies and Neal, 1996, 2000) incorporates trans (Neal and Davies, 2002). However, more recently, there have been a number of explorations of bisexual and trans concerns in Lesbian & Gay Psychology Review—the journal of the British Psychological Society (BPS) Lesbian & Gay Psychology Section (see below)—and the latest symposia and papers at BPS conferences have incorporated these issues (e.g., Clarke and Peel, 2004). Our usage of “LGBT psychology” in the latter sections reflects these developments and signals a more inclusive future for work in the area in the UK.
Havelock Ellis (1897), among others, challenged the nineteenth century view of homosexuality as sinful, immoral and criminal, and presented homosexuality as an inborn, normal variation.

The work of Ellis and others significantly predated the beginnings of US work in this area; however, the development of an affirmative lesbian and gay psychology in the US outpaced that in the UK in the second half of the twentieth century. More than a decade after Evelyn Hooker (1957) published her landmark article on the projective test findings of non-patient gay men, a British-based clinical psychologist, June Hopkins, published an equally groundbreaking paper on the lesbian personality in the British Journal of Psychiatry (Hopkins, 2002/1969; see also Clarke, 2002a). Although Hopkins’ paper was not the first British psychological publication on lesbians, it was amongst the first, if not the first, to offer an affirmative psychological perspective on lesbians. Hopkins’ aim was to attempt to “fill the void in objective investigation into the personality factors of lesbians” (2002/1969: 40). As a number of the contributors to a recent reappraisal of Hopkins’ work note, her work was interesting because unlike most other lesbian and gay research at the time it focused specifically on lesbians and highlighted differences between lesbians and heterosexual women, and between lesbians and gay men (Malley, 2002a; Peel, 2002). In The Lesbian Personality, Hopkins wrote that


See Kitzinger and Coyle (2002) for a more detailed account of the early history of lesbian and gay scholarship in the UK.
When Hopkins was working as a clinical psychologist in the 1960s, the Rorschach protocol was used as a diagnostic tool to “detect” homosexuality (see Clarke and Hopkins, 2002). In Lesbian Signs on the Rorschach, Hopkins demonstrated that “homosexual signs” on the Rorschach were not useful in detecting lesbianism and that there were three “lesbian signs” that distinguished between lesbians and heterosexual women. As we document below, an emphasis on the differences between heterosexuals, lesbians and gay men is a significant theme in UK lesbian and gay psychological and psychotherapeutic theory, research and practice.

As Hopkins herself notes, she was one of very few British psychologists studying lesbians and gay men from an affirmative perspective in the 1960s and 1970s, and after her papers were published there was a significant lull in lesbian and gay psychological output until the 1980s (Clarke and Hopkins, 2002; see also Furnell, 1986).

THE 1980S: ESTABLISHING A CRITICAL TERRAIN

Shortly after publishing a paper on the differences between lesbians and gay men in the Bulletin of the British Psychological Society (Hart and Richardson, 1980), John Hart and Diane Richardson came out with a book: The Theory and Practice of Homosexuality (1981; see also Hart, 1982, 1984, Richardson, 1978, 1984, Richardson and Hart, 1980). This edited collection offered psychosocial perspectives on lesbian and gay identities, the lesbian and gay lifespan and the presenting problems of lesbians and gay men seeking professional help. The authors considered the major theoretical models relating to homosexuality and the treatment implications of such theories. Hart and Richardson were critical of the male bias in the literature on homosexuality, and--like Hopkins--were careful to distinguish the differences in the experience of homosexual women and men. They also emphasised the importance of placing homosexuality in a social context, and of acknowledging the political implications of (all) theories of homosexuality. Richardson (1981a) called for “an explicit recognition
of the close relationship between the politics and science and of homosexuality” (p. 37).

In relation to therapy and counselling, Hart (1981) argued that it was difficult to see how the conditions for successful therapy for lesbian and gay clients could be achieved by therapists who hold personal pathological models of homosexuality or who are anxious about their own sexuality. Hart was critical of US mental health professionals who advocated treatment of homosexuality and argued that evidence from “born that way” studies does not provide a basis for social engineering efforts with homosexuals. Parallel to Richardson’s call for reflexivity in research on homosexuality, Hart urged “professionals... [to] cease to see themselves as neutral technicians and instead recognize their role as moral agents” (Hart, 1981, p. 66). He also emphasised the limitations of individual therapy in compensating for the adverse experiences of homosexuals in our society.

Following a thorough going review of psychological theories of homosexuality, Richardson and Hart (1981) further outlined an alternative theory of the development and maintenance of a homosexual identity that emphasised personal choice, the possibility of change throughout the lifespan, and the meanings of homosexuality for the individual. They argued that the development, maintenance and meaning of homosexuality is unique for each individual and occurs by a complex interaction of various factors specific to the individual. Their model placed homosexuality firmly within a political arena, in contrast to the work they reviewed which theorised homosexuality as if it were apart from moral debates. Richardson and Hart viewed their model as helpful for practitioners in acknowledging the possible development of a positive homosexual identity. The publication of their text marked the beginnings of a critical (post-positivist) approach to lesbian and gay psychology.

Although critical approaches such as that used by Hart and Richardson were crucial to the development of lesbian and gay psychology in the UK,
some of the early pioneering studies were so precisely because of their reliance on more mainstream psychological theories and methods. One such study—of children of lesbian mothers—was first discussed by Richardson (1981b) in *The Theory and Practice of Homosexuality*. Two years after the publication of this milestone text, Golombok, Spencer and Rutter (1983) published their similarly groundbreaking study. This was a landmark publication in research on lesbian and gay parenting (D’Augelli, 2002) and has been widely recognised for its significant contribution to changing the tide of judicial opinion on lesbian custody in the UK and elsewhere (Clarke, 2002b). This paper examined the psychosocial experiences of the children of lesbian mothers. As D’Augelli (2002) notes, it demonstrated the need for lesbian and gay psychologists to focus on social units as well as on individual lesbians and gay men. It also documented the existence of lesbian mothers and their children at a time when these families were neither part of the wider social landscape nor part of the agenda of researchers studying “normal” families. Susan Golombok, in collaboration with Fiona Tasker, completed a follow-up to the initial study in the late 1990s (Tasker and Golombok, 1997). Theirs was the first longitudinal study of children in lesbian families to be published. The initial publication by Golombok et al. and subsequent papers by Golombok and Tasker sit firmly within a positivist-empiricist framework—and, by emphasising the similarities between lesbian mothers and heterosexual mothers, a liberal-humanistic framework as well.

Three years later, a paper in the *Bulletin of the British Psychological Society* called attention to lesbian and gay psychology as a neglected area of British research (Furnell, 1986). Furnell, the author of an early paper on gay identity development (1985), noted that issues of the treatment and aetiology of (male) homosexuality dominated British research until the late 1970s and “compared with the wealth of empirical studies emerging from the United States over the last 15 years, there is a definite dearth of such research on gay and lesbian issues by British psychologists”
Indeed, according to Furnell, the British literature in the mid-1980s resembled the US literature in the late 1960s and early 1970s. Other issues of concern to British psychologists identified by Furnell include the assessment of sexual orientation, the psychological characteristics of homosexuals, heterosexuals' attitudes toward homosexuals, counselling and therapy, psychoanalytic discussions of homosexuality, and the personal and social dimensions of lesbian and gay experience. Furnell noted that compared to the substantial American literature, there was little British research on heterosexuals' attitudes toward homosexuals. He accounted for the lack of research on this and other topics partly in terms of the lack of a self-identified UK group of lesbian and gay psychologists. This state of affairs was a marked contrast to the American Psychological Association's then-recent establishment of Division 44 (Society for the Psychological Study of Lesbian and Gay Issues) to provide encouragement and support for new research and publications.

One of the papers Furnell discussed under the heading of the personal and social dimensions of lesbian and gay experience and lifestyles was a Q-methodological study of lesbian identities (Kitzinger and Stainton Rogers, 1985). This was one of a number of publications on lesbian identities— including the now classic text, The Social Construction of Lesbianism (Kitzinger, 1987; see also Clarke and Peel, 2004, Peel and Clarke, 2005) — produced by Celia Kitzinger from the mid-1980s onwards. Like Hopkins' earlier study, Kitzinger's research focused specifically on lesbians and highlighted differences between lesbians and heterosexual women, and between lesbians and gay men (Rothblum, 2004). As Kitzinger and Coyle

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5 Furnell identified 165 papers and books published between 1965 and 1985; however, as noted above he did not explicitly distinguish between affirmative and non-affirmative work.

6 Now called the Society for the Psychological Study of Lesbian, Gay and Bisexual Issues.
(2002) note, Hart’s and Richard’s work at the beginning of the decade laid some of the groundwork for Kitzinger’s critical agenda. Kitzinger rejected the hierarchal, liberal-humanistic models of lesbian and gay identity formation developed by psychologists in the US (e.g., Cass, 1979). Instead, she offered a social constructionist account of lesbian identities. According to Kitzinger, a social constructionist approach to identity is concerned with how people construct, negotiate and interpret their experience—the focus is on people’s accounts per se, rather than on inspecting them for what they reveal about underlying emotions, thoughts and feelings, or on assessing their truth-value. Kitzinger presented five distinct accounts of lesbian identity: personal fulfilment, true love, personal sexual orientation, political/feminist and personal inadequacy. Kitzinger’s goal was to recognise the existence of numerous “truths” about lesbians and to explore the meanings and implications of each. Kitzinger explicitly acknowledged that the political/feminist lesbian account is “the account on which I have relied most heavily in constructing my own account of lesbianism and as such constitutes the context from within which I assess and discuss the other four accounts” (Kitzinger, 1986, p.164).

The Social Construction of Lesbianism incorporated a critical discussion of the then-emerging field of affirmative lesbian and gay psychology—a field dominated by the work of US psychologists and therapists. Kitzinger was critical of the liberal-humanistic and positivist-empiricist frameworks underlying much affirmative lesbian and gay psychology and concepts such as “homophobia” and “internalised homophobia.” Kitzinger (1987) called for a radical, feminist, critical, social constructionist lesbian and gay psychology that deconstructed the ideologies underlying research in this area, and the “mystique surrounding social science itself” (p. 188). She argued that the concept of homophobia “depoliticises lesbian and gay oppression by suggesting that it comes from the personal inadequacy of particular individuals suffering from a diagnosable phobia” (Kitzinger, 1997, p. 211). Lesbian and gay
(mainstream) psychology, she maintained, replaces political explanations (in terms of structural oppression) with personal explanations (in terms of the workings of the psyche). Kitzinger was equally critical of the concept of internalised homophobia; she argued that if some people are unhappy about being lesbian or gay, this is a perfectly reasonable response to oppression. “Internalised” homophobia, according to Kitzinger, shifts the focus of concern away from the oppressor and back onto the victims of oppression.

In the same year that The Social Construction of Lesbianism was published, a group of US based lesbian psychologists published Lesbian Psychologies (Boston Lesbian Psychologies Collective, 1987), an edited collection that explicitly relied on many of the concepts and theories that Kitzinger rejected (e.g., the chapter by Margolies, Becker and Jackson-Brewer on internalised homophobia). This development clearly signalled the differences between the theoretical commitments of lesbian and gay psychologists and therapists in the UK and those in the US. As Coyle (2004) notes, and as we discuss further below, social constructionism is now a defining feature of lesbian and gay psychology (and psychotherapy⁷) in the UK and one that differentiates it from lesbian and gay psychology in the US. Russell and Gergen (2004) consider why the force of Kitzinger’s critique has yet to be fully realised in the US. They argue that in relation to the discipline of psychology as whole, social constructionist

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⁷ A concerted engagement with social constructionist approaches and approaches that emphasise understanding individuals in relation to their social and relational contexts—for example, systemic approaches (see Malley, 2002b)—and how individuals make sense of their world is also a feature of lesbian and gay counselling and therapy in the UK (see Simon and Whitfield, 2000).
and other postmodern approaches remain marginal. Further, because lesbian and gay psychology has developed in a hostile context, lesbian and gay psychologists seek to counter this by using traditional research methods—dismantling the master’s house by using the master’s tools.

1990s: Achieving Recognition

The early 1990s was a period of rapid development for lesbian and gay psychology and psychotherapy in the UK. In 1990, the official publication of the British Psychological Society, The Psychologist, published a paper by Celia Kitzinger (1990a) that drew attention to the rampant heterosexism in British psychology and how it affects lesbian and gay staff and students in psychology departments. The European Association of Lesbian, Gay and Bisexual Psychologists was established two years later in 1992; one year later, homosexuality was removed from the International Classification of Diseases—a diagnostic manual used in Europe—two decades after the removal of homosexuality per se from the American Psychiatric Association’s Diagnostic and Statistical Manual (DSM) (Kitzinger and Coyle, 2002; Nakajima, 2003). In 1994, Charles Neal founded the Association for Lesbian, Gay, and Bisexual Psychologies (ALGBP-UK), which affiliated to ALGP-Europe.

By the mid-1990s, lesbian and gay psychological theory and research was gaining significant momentum (and recognition in social psychology—see Kitzinger, 1989, 1990b); however, the literature on affirmative

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8 While social constructionism may be marginal to psychological theorizing in the US, it has become increasingly important to lesbian and gay psychoanalytic authors in the US since the 1990s. For example, see Domenici and Lesser (1995), Magee and Miller (1997), Drescher (1998), Schwartz (1998) and Lesser and Schoenberg (1999).

9 ALGBP-UK folded four years later due to a lack of support for its fourth annual conference.
psychotherapeutic practice was only beginning to develop (Annesley and Coyle, 1998). Neal and Davies (1996) argued that the declassification of homosexuality per se as a mental illness in 1973 allowed gay affirmative models of therapy to develop in the US much earlier than in the UK. The work that constituted the springboard for their book—the first volume of the Pink Therapy series (Pink Therapy: A Guide for Counsellors and Therapists Working with Lesbian, Gay and Bisexual Clients)—was almost exclusively North American. This collection was pre-dated by a small number of individual papers (e.g., Hart, 1982, 1984, Richardson and Hart, 1980), and publications produced by people involved in voluntary sector organisations (Furnell, 1986); however, it stands as the first significant UK publication to address affirmative therapeutic practice. The text covered lesbian, gay and bisexual development and lifespan issues, religion and spirituality conflicts, alcohol and substance misuse, homophobia and heterosexism, and developing a model of affirmative therapeutic practice.

A Lesbian & Gay Psychology Section (a BPS Section is roughly equivalent to an APA Division) was finally established within the BPS in 1998, after nearly a decade of campaigning and three rejected proposals (two for a Psychology of Lesbianism Section and one for a Lesbian and Gay Psychology Section) (Wilkinson 1999, Comely et al. 1992). Membership of the Section is open to all members of the BPS, and Section members include researchers, teachers, clinical psychologists, counselling psychologists, and students. Although there are a number of US journals, including this one, that focus on LGBT perspectives, the Section publishes the only LGBT psychology journal of which we are aware—Lesbian & Gay Psychology Review.

10 A number of contributors to this collection, including the editors, are current or past Section committee members.

11 Non-Section and non-BPS members may subscribe to Lesbian & Gay Psychology Review; non-members may also subscribe to the Section listserv see www.bps.org.uk/sub-sites$/lesgay/lesgay_home.cfm
It also awards annual undergraduate and graduate prizes and organises conferences, symposia and other events\textsuperscript{12}.

In the US, it is mostly psychiatrists, psychologists and clinical social workers who practice counselling and therapy (with lesbian and gay clients and their families). In the UK, counselling and therapy is not part of the remit of social workers, and there is an important distinction between the National Health Service (NHS) and the private (and voluntary) sector. The majority of counsellors and psychotherapists work in the voluntary sector or in private practice, whereas psychiatrists and psychologists have a monopoly in the NHS. As yet, there is little in the way of professional infrastructure specifically for counsellors and psychotherapists working with lesbian and gay clients in the UK. Neither the British Association for Counselling and Psychotherapy nor the United Kingdom Council for Psychotherapy has groupings for those therapists and counsellors. LGBT psychiatrists also lack a professional body; however, there is a Gay and Lesbian Association of Doctors and Dentists (GLADD) (see www.gladd.dircon.co.uk).

In the years following the establishment of the Lesbian and Gay Psychology Section, a number of landmark texts were published. These included the second and third volumes in the \textit{Pink Therapy} series (Davies and Neal, 2000, Neal and Davies, 2000) in 2000, and, in 2002, \textit{Lesbian \& Gay Psychology: New Perspectives} (Coyle and Kitzinger, 2002)--the first ever British edited and authored book on lesbian and gay psychology and psychotherapy--and a special European issue of the \textit{Journal of Community and Applied Social Psychology} (Coyle and Wilkinson, 2002). These and other developments perhaps substantiate Furnell’s (1986) argument that the dearth of lesbian and gay psychological research in the UK in the mid-1980s,

\textsuperscript{12} This collection grew out of a one-day conference on sexuality and identity organised by the West Midlands (regional) Branch of the BPS.
compared to that produced in the US, can be explained by the lack of a professional network.

**THE CURRENT TERRAIN**

The rapidly developing field of LGBT psychology and psychotherapy in the UK and the more established field in the US engage with similar concerns, and both fields are defined by a commitment to justice for, and the well-being of, LGBT persons. Work in the UK focuses on: coming out (Davies, 1996a, Markowe, 1996, 2002) and identity (Kitzinger and Wilkinson, 1995); health (Fish and Wilkinson, 2000, Wilkinson, 2002); sexual health and HIV/AIDS (Flowers et al., 1997); development and lifespan issues (Rivers, 1997); relationships (Barker, 2004, Kitzinger and Coyle, 1995, Simon, 1996), family and parenting (Barrett and Tasker, 2002, Hargaden and Llewellyn, 1996); homophobia and heterosexism (Braun, 2000, Ellis, 2001, Gough, 2002, Hegarty, 2002, Peel, 2001); diversity within LGBT communities (Bennett and Coyle, 2001); methodological and theoretical concerns (Fish, 2000, Judd and Martin, 2001); LGBT affirmative therapeutic practice (Malley, 2002b); and evaluations of clinical psychology, counselling and psychotherapy services (Annesley and Coyle, 1998). There are some different concerns, for instance, interrogating representations of non-heterosexuals in the larger cultural context and in psychology (Alldred, 1996, Clarke and Kitzinger, 2004, Ellis and Kitzinger, 2002). In relation to practice, psychotherapists and counsellors in the UK—unlike those working in the US—are likely to employ particular theoretical frameworks (such as psychoanalysis, cognitive-behavioural therapy, existential therapy, systemic therapy) for working with LGBT (and heterosexual) clients. However, the most significant difference lies in the theories and methods used, and in the questions asked, by some LGBT researchers and practitioners in the UK.

Some LGBT psychology in the UK is essentialist, positivist-empiricist, quantitative and liberal; for instance, Tasker’s (2002) work on
lesbian and gay parenting. However, a significant proportion of work is constructionist, discursive, qualitative, and critical, such as Clarke’s (2002c) work on lesbian and gay parenting. As Kitzinger and Coyle (2002) note, the contrast between Tasker’s essentialist and Clarke’s social constructionist approach to lesbian and gay parenting is striking. Tasker compares children from lesbian mother families with children from heterosexual mother families in relation to family and peer relationships, mental health and psychosexual development. Tasker offers facts about family life and so contributes to positive representations of lesbian parenting. By contrast, Clarke interrogates representations of lesbian and gay parenting in popular media and in psychological research, and does so not from a presumably neutral/objective position of a scientific psychologist, but from a politically engaged, lesbian feminist stance. Whereas essentialist work like Tasker’s is concerned with generating “scientific evidence” about whether or not children in lesbian families grow up psychologically healthy, constructionist work like Clarke’s is concerned with the political/ideological costs, benefits and effects of making this kind of argument. Furthermore, whereas Tasker emphasises the similarities between children in lesbian families and children in heterosexual mother families, Clarke explores the effects, costs and benefits of emphasising similarities and offers an alternative to sameness discourse in the shape of radical lesbian feminist accounts of lesbian parenting.

As Coyle and Wilkinson (2002) note, debates about essentialism versus social constructionism are a feature of LGBT psychology in the UK (see Kitzinger, 1995, for an overview). These theoretical differences map onto methodological differences, with positivist/essentialist work mostly based on quantitative data and constructionist work mostly based on qualitative data (although not all qualitative work is social constructionist—see, for instance, Touroni and Coyle, 2002). Coyle and Wilkinson (2002) argue that LGBT psychological research in the UK looks epistemologically and
methodologically much like social psychology and could loosely be described as social psychological in nature. LGBT psychology in the UK is also closely associated with qualitative methods (Coyle, 2000). Coyle argues that qualitative approaches offer many benefits to LGBT psychology, including the concerted engagement with context and the subjectivities of participants.

Furthermore, much LGBT psychology in the UK fits firmly in the canon of critical psychology. Critical psychology is a developing area of research, theory and therapeutic practice in the UK (and elsewhere). The label “critical psychology” is regarded as an “umbrella term” (Walkerdine, 2001) for a wide variety of radical perspectives on the discipline. As the editors of a key collection (Prilleltensky and Fox, 1997) outline, critical psychologists “believe that psychology’s traditional practices and norms hinder social justice, to the detriment of individuals and communities in general and of oppressed groups in particular” (p. 3). Critical psychologists, echoing Richardson and Hart (1981) and Kitzinger (1987), argue that psychology (both mainstream and critical) is not a neutral endeavour conducted by researchers and practitioners detached from the larger social and political context. The theories and practices of mainstream psychology are value-laden and reinforce an unjust status quo. By contrast, the central themes of critical psychology are the pursuit of social justice, the promotion of the well being of communities and in particular of oppressed groups and changing the status quo of society and of psychology (Sloan, 2000). Critical psychology rejects the

However, there is no necessary relationship between criticality and social change. Kitzinger (1997) argues that although much LGBT psychology does not share the features of critical psychology outlined above, discourses of liberal individualism and of positivist empiricism--prevalent in North American lesbian and gay psychology--are powerful and persuasive
individualism, humanism, and positivistic traditions of mainstream psychology (see Spears, 1997). Recent critical psychology collections include contributions by LGBT psychologists (e.g., Kitzinger, 1997, 1999), and recent critical psychology textbooks discuss LGBT psychology (Gough and McFadden, 2001, Hepburn, 2002). Gough and McFadden’s (2001) Critical Social Psychology includes a chapter on sexualities and psychology that outlines social constructionist perspectives on homosexuality and the limitations of liberal-humanistic explanations of homosexuality. A chapter on prejudice encourages critical thinking on antihomosexual discourse. They note that LGBT scholars such as Celia Kitzinger have:

“been among the most cogent and vociferous critics of mainstream psychological theories and methods which have furnished ‘norms’ around gender and sexuality with scientific authority and contributed to the marginalisation of women and homosexuality” (p. 6).

A recent decision by the editor of The Psychologist—the official publication of the BPS—to publish a homophobic letter caused outrage among LGBT psychologists (see Accoroni et al., 2004). However, incidents such as this are now relatively rare. Less rare is the exclusion of non-heterosexuals from psychological research across a whole range of topics. Kitzinger (1996) and others (e.g., Peel, 2001b) have interrogated in particular the exclusion of lesbian experience in feminist psychology. Likewise, most counselling, therapy and clinical psychology training programmes in the UK offer limited coverage of lesbian and gay issues in their course content, yet significant numbers of lesbians, gay men and bisexuals present for counselling and therapy (Neal and Davies, 1996).

The broader social/political context for LGBT psychology and psychotherapy (and for lesbians and gay men) in the UK is significantly discourses that can be used to influence policy makers and create social change.
different from that in the US. The UK is broadly speaking a more liberal and secular society than the US—the far right/Christian right is less visible and less prevalent in the UK. The LGBT rights movement in the UK has won significant victories in the last few years including the right for same-sex couples to adopt jointly\textsuperscript{14}. The Gender Recognition Act 2004 affords trans persons a number of rights, including the right to be issued with a new birth certificate that records their gender of choice. The Employment Equality (Sexual Orientation) Regulations 2003 ban discrimination on the basis of sexual orientation in employment and vocational training (see www.hmso.gov.uk). Lesbian mothers are rarely likely to lose custody of their children simply because they are lesbian (Harne et al., 1997); however, gay men may still face considerable difficulties in the courts (Stonewall, 2004).

The provisions of the Civil Partnership Act (2004), offering same-sex couples many of the rights and responsibilities of marriage, come into force at the end of 2005. By contrast, although some US states recognise same-sex relationships, Federal legislation on same-sex partnership is highly unlikely.

Political differences are clearly evident in the domain of conversion therapy. Whereas a number of organisations in the US (both religious and scientific/psychological) promote conversion therapy, there is only one in the UK of which we are aware—the True Freedom Trust (www.truefreedomtrust.co.uk)—a member of the US based Exodus International. A recent study conducted with 30 UK psychologists and psychiatrists (most of whom had worked in the National Health Service) suggests that those professionals who did provide conversion “treatment” for lesbians and gay men from the 1950s to the 1970s now tend to view same-sex sexuality as mentally healthy (King, Smith and Bartlett, 2004). This

\textsuperscript{14} Of course LGBTs in the UK do still face significant challenges; see www.stonewall.org.uk for an up-to-date overview.
suggests that conversion therapy is more of a historical than a contemporary phenomenon in the UK. Moreover, the treatment of homosexuality has always been more common in the US than in the UK (see Hart, 1981; see also Ellis’s, 1997, commentary on homophobia and psychoanalysis).

**CONCLUSION**

Although LGBT psychologists and psychotherapists in the UK and in the US share the same broad commitment to facilitating the well-being of, and social justice for, lesbians, gay men, bisexual and trans persons, they differ in terms of their approach to achieving these goals. Whereas US psychotherapists mostly work within “integrative” models and US psychologists favour mainstream theories and methods, the majority of practitioners in the UK are strongly committed to particular theoretical frameworks and within psychology critical and discursive approaches are achieving increasing prominence.

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