

Bibliography on Gender, Sexuality and Relationship Diversity

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For registrants of the BPC

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on Gender, Sexuality and Relationship Diversity

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Literature on sexuality, sexual orientation, gender and relationship diversity in psychotherapy and psychoanalysis.

All readings compiled for this bibliography are accompanied by a short overview, which briefly outlines what the reading is about. These overviews have been collated from a number of different sources:

1. For academic papers journal abstracts have been used in their entirety or in part.
2. For books the publishers' descriptions have been used in their entirety or in part.
3. When neither of the above has been available the compiler has written a description.

While every effort has been made to acknowledge the sources from which these overviews have been collated, some errors or omissions may have occurred. The Compiler and the BPC Task Group, who supported the development of this bibliography, take full responsibility and will be more than happy to make appropriate revisions or add relevant acknowledgments.

How to Use the Bibliography

This bibliography has been compiled primarily for psychoanalytically informed teachers, seminar leaders and trainers across the BPC membership who may wish to ensure that their teaching on gender, sexuality and relationship diversity reflects contemporary theoretical and clinical perspectives. However, the bibliography may be of interest to the general BPC member and to trainees who wish to remain up-to-speed with contemporary theories and clinical thinking in this area of study.

The bibliography is divided into key sections covering a range of topics and themes including sections on lesbianism, gay male sexuality, bisexuality, transgender, sexuality studies and scientific studies. Each section is accompanied by a short introduction adapted from the compiler's PhD thesis and presents a list of key readings. An abstract is included with each key reading so users can obtain an overview of what each book or article is about.

On the whole, readings prioritise perspectives from the last twenty years but some landmark contributions before 2000 are also included. All texts in each section are listed chronologically, the most recent to the least recent. Where texts are from the same year, the readings for that year are arranged alphabetically. The only exception to this approach is section 18 on 'Classical Perspectives', which shows how ideas on gender and sexuality developed from Freud's earliest theoretical positions to their elaboration by later theorists.

The readings compiled for this bibliography include contributions from a range of theoretical traditions including contemporary Freudian, object relations, self-psychology, Lacanian, relational, and post-Jungian amongst others. The majority of readings are interdisciplinary in nature, drawing on insights and evidence from other disciplines including feminism, sexuality studies, social constructionism, queer theory, bisexuality studies, biogenetic studies and empirical research. The majority of readings emphasise the idea that gender, sexuality and relationship diversity is part of a normal spectrum of human diversity.

One way the bibliography might be used is to position psychoanalytic theories of sexuality and gender within a wider biopsychosocial framework. Biopsychosocial

models provide a theoretical framework that considers the possibility that biological, psychological and social influences interact and influence how sexuality is shaped and experienced. So, while there is scientific evidence to suggest a genetic and biological basis for sexuality (see section 10), postmodern and interdisciplinary perspectives (see sections 8 and 9) show that, at the same time, the meanings we attach to sexuality change often over time and are historically and culturally constructed; and that sexuality can be plural, contingent and multi-dimensional rather than timeless, categorical and fixed.

Sections 13 - 16 focus on clinical issues and areas relevant to technique such as therapist self-disclosure and transference and countertransference dynamics in work with LGBTQIA+ patients and clients. Section 13 in particular includes existing guidelines from other organisations, such as the American Psychological Association (APA), the British Association of Counselling and Psychotherapy (BACP) and the British Psychological Society (BPS), that are generally thought to address some of the most up-to-date clinical good practice for work with LGBTQIA+ patients and clients. These guidelines provide practical information to trainees and qualified therapists about LGBTQIA+ lives, norms and issues, particularly the ways in which social stigma and internalised homophobia/biphobia pose a risk to LGBTQIA+ patients and clients and their mental health.

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1. Sexuality and Gender: Contemporary Psychoanalytic Overviews

The following volumes offer wide-ranging general introductions on sexuality, sexual orientation and gender from a contemporary psychoanalytic perspective. These introductions place psychoanalytic theories of sexuality and gender within a broader, interdisciplinary framework. This interdisciplinary framework draws on ideas and insights from feminism, social constructionism, postmodernism and biogenetic studies. There are individual chapters within these books addressing gay male sexuality, lesbianism, bisexuality, transgender, non-binary gender identities and relationship diversity. Contributors represent a range of theoretical traditions including contemporary Freudian, object relations, self-psychology, Lacanian, relational, and post-Jungian amongst others.

Belkin, M. and White, C. (2020). *Intersectionality and Relational Psychoanalysis: New Perspectives on Race, Gender, and Sexuality*. London: Routledge.

The book examines the links between race, gender and sexuality through the dual perspectives of relational psychoanalysis and the theory of intersectionality. This anthology discusses the ways in which clinicians and patients inadvertently reproduce experiences of privilege and marginalisation in the consulting room. Focusing particularly on the experiences of immigrants, women of colour, sex workers and LGBTQ individuals, the contributing authors explore how similarities and differences between the patient's and analyst's gender, race and sexual orientation can be acknowledged, challenged, and negotiated.

Hertzmann, L. and Newbiggin, J. (2020). *Sexuality and Gender Now: Moving Beyond Heteronormativity*. London: Routledge.

This book confronts the heteronormative bias dominant in psychoanalysis, using a combination of theoretical and clinical material, offering an important training tool as well as being relevant for practising clinicians. The contributors address the shift clinicians must make not only to support their patients in a more informed and non-prejudicial way, but also to recognise their own need for support in developing their clinical thinking. They challenge assumptions, deconstruct theoretical ideas, extend psychoanalytic concepts and, importantly, show how clinicians can attend to their pre-conscious assumptions.

Knafo, D. and Lo Bosco, R. (2020). *The New Sexual Landscape and Contemporary Psychoanalysis*. Suffolk: Confer Books.

The sexual landscape has changed dramatically in the past few decades, with the meaning of gender and sexuality now being parsed within the realms of gender fluidity, nonheteronormative sexuality, BDSM and polyamory. The sea change in sexual attitudes has also made room for the mainstreaming of internet pornography and the use of virtual reality for sexual pleasure - and the tech gurus have not even scratched the surface when it comes to mining the possibilities of alternative realities. This book surveys modern sex culture and suggests ways psychoanalysis can update its theories and practice to meet the novel needs of today's generations.

Van Haute, P. and Westerink, H. (2017). *Deconstructing Normativity? Re-reading Freud's 1905 Three Essays*. London: Routledge.

The contributors reflect on the fundamental and often very radical ideas present in Freud's original 1905 edition of the *Three Essays on the Theory of Sexuality*. The book has three aims: (1) the contextualisation of the text; (2) the reconstruction of its central ideas; and (3) the further philosophical reflection of the contemporary relevance and critical potential of the 1905 edition. The authors challenge mainstream interpretations

of the *Three Essays* and of the development of Freudian thought including, most importantly, the centrality of the Oedipus Complex and the developmental approach relative to a tendency towards heteronormativity.

Blechner, M. J. (2016). *Psychoanalysis and sexual issues. Contemporary Psychoanalysis*, 52 (4), 502-546.

Psychoanalysts were once thought to be experts on sexual issues, but that is less true today. In this article, Blechner suggest ways this situation can be remedied. Psychoanalysts can best become more literate about variant forms of sexuality by reading first-person accounts and by garnering information from empirical research and Internet sites for specific forms of sexuality. In addition, psychoanalysts need to examine their own attitudes to different forms of sexuality, make sure they learn a patient's goals in treatment, be honest and open about whether they can help achieve those goals, and pay attention to the difference between psychopathology and societal pathology. In addition, the analyst needs to be aware of how sexual excitement can unconsciously bind erotic experience with other complex emotions and motivations. A case of coercive voyeurism is presented to illustrate these principles.

Lemma, A. and Lynch, P. (2015). *Sexualities: Contemporary Psychoanalytic Perspectives*. London: Routledge.

This volume includes a range of international contributions that examine contemporary issues and trace common themes needed to understand any sexuality, including the basics of sexuality, and the myriad ways in which sexuality is lived. The clinical examples provided demonstrate contemporary psychoanalytic techniques that uncover meanings that are both fresh and enlightening, and address heterosexuality, homosexuality, gender, and perversion from a psychoanalytic perspective.

Celenza, A. (2014). *Erotic Revelations: Clinical Applications and Perverse Scenarios*. London: Routledge.

This book delves into erotic desires and fantasies ... above all, how our sexuality expresses our inner being and defines the ways in which we engage in the psychoanalytic situation. The author addresses the 'desexualisation' of the psychoanalytic field by reclaiming sexuality as one of the many nexes that are of central concern to the patient. She illustrates a wide range of erotic manifestations (for both therapist and patient) and offers recommendations to practitioners for dealing with erotic material when it arises. This book puts sexuality back into psychoanalytic theorising and makes a place for erotic transferences of whatever shape, in every analysis or therapy.

Quindeau, I. (2013). *Seduction and Desire: The Psychoanalytic Theory of Sexuality Since Freud*. London: Karnac.

Modern society has introduced many new relationships and family forms and the pluralisation of sexual lifestyles in the hundred years since Freud. This book provides a systematic account of the current state of theory, developing a gender-wide model of human sexuality and outlining the implications of this for psychotherapy practice. The author argues that the development of human sexuality follows no innate biological programs, but takes place in an interpersonal relationship, often established in the early parent-child relationship. Whereas the current psychoanalytic discourse emanates from a rather rigid division of gender relations emphasising the differences between men and women, Ilka Quindeau develops a gender-wide model of human sexuality in which the 'masculine' and 'feminine' are integrated and contribute to the full diversity of gender identities and sexual varieties. She points to structural similarities of hetero-and homosexuality and perversion and calls for a general human sexuality

that is based less on differences between men and women than with each other. Freud's postulation of the primacy of the genital is thereby called into question, as is the cultural primacy of heterosexuality. The author concludes by asking what the consequences are of this new perspective for the development of psychotherapy practice.

Chodorow, N. J. (2012). *Individualising Gender and Sexuality: Theory and Practice*. New York: Routledge.

Chodorow examines the complexity and uniqueness of each person's personal creation of sexuality and gender and the ways that these interrelate with other aspects of psychic and cultural life. She brings her well-known theoretical agility, wide-ranging interdisciplinarity and clinical experience to every chapter, advocating for the clinician's openness, curiosity, and theoretical pluralism. The book begins with reflections on Freud's *Three Essays on the Theory of Sexuality*, followed by considerations of Melanie Klein and Stephen Mitchell, as well as on her own work and on the postmodern turn in psychoanalytic gender theory.

Fonagy, P., Krause, R. and Leusinger-Bohleber, M. (2006). *Identity, Gender and Sexuality: 150 Years After Freud*. London: Karnac.

This book provides fresh insights into heterosexuality, bisexuality, homosexuality, gender identity disorder, transvestism and transsexualism. This publication considers in depth the complex interweaving of identity, gender and sexuality from theoretical, clinical, historical and research perspectives. The reader will find a debate about the relative merits of clinical, empirical, and conceptual research, critical assessments of interdisciplinary findings from infant and child development research, embodied cognitive science, academic psychology, neurobiology, genetics, ethology, and other fields of inquiry, and honest and illuminating psychoanalytic case studies.

Caldwell, L. (2005). *Sex and Sexuality: Winnicottian Perspectives*. London: Karnac.

'Winnicott' and 'sex' are two subjects that are rarely associated with one another. Sexuality is not a prominent theme within the work of Winnicott, who preferred to concentrate on the development of the self from infancy. However, his writings contain unexplored insights into sexuality, and it is these hidden insights that prompted Lesley Caldwell to invite papers from leading analysts to expand upon them. This collection provides a fresh and innovative look at the work of Winnicott and into sexuality, in particular infantile sexuality. The unusual link of Winnicott to Freud and to a psychoanalysis located in the drives encourages a different perspective into British psychoanalysis. Other diverse themes include a historical examination of Winnicott through the British Society; an exploration of the similarities between Laplanche and Winnicott; the use of Winnicott's work in the treatment of sexual dysfunction; and the interrelation between sexuality and play.

Denman, C. (2004). *Sexuality: A Biopsychosocial Approach*. Hampshire: Palgrave.

The author uses the biopsychosocial approach to human behaviour to analyse sexual behaviour, object choice, transgendered experience, sexual problems, transgressive sex and sex therapy. Issues of sexuality in the consulting room, including transference and countertransference are also considered. The human capacity for inventive imagining is presented as an important force for beneficial change and, in relation to sexuality, discussed in terms of the 'erotic imagination'.

Matthis, I. (2004). *Dialogues on Sexuality, Gender and Psychoanalysis*. London: Routledge.

This volume presents a thought-provoking dialogue on femininity, sexuality, gender and masculinity. These key issues are analysed and discussed in new and stimulating ways, whilst familiar concepts are dissected and dismantled to bring forward fresh ideas. The diversity and developments currently advancing studies on femininity towards new understandings are shown clearly throughout. This rich and inspiring collection of papers grew from the 'Sexuality and Gender' conference held in Sweden in 2002, organised by the Committee on Women and Psychoanalysis. The conference was created with the conscious intent of bringing different ideas to bear upon each other in order to promote further research into this vital area.

Friedman, R. C. and Downey, J. I. (2002). *Sexual Orientation and Psychodynamic Psychotherapy: Sexual Science and Clinical Practice*. New York: Columbia University Press.

This book bridges psychoanalytic thought and sexual science. The authors present a new perspective about male and female development, emphasising the ways in which sexual orientation and homophobia appear early in life. The clinical section of the book focuses on the psychodynamics and treatment of homophobia and internalised homophobia.

Dean, T. and Lane, C. (2001). *Homosexuality and Psychoanalysis*. Chicago: University of Chicago Press.

This collection of essays reconsiders the troubled relationship between same-sex desire and psychoanalysis, assessing homosexuality's status in psychoanalytic theory and practice, as well as the value of psychoanalytic ideas for queer theory. Works by Freud, Klein, Reich and Lacan are examined.

Cohler, B. J. and Galatzer-Levy, R. M. (2000). *The Course of Gay and Lesbian Lives: Social and Psychoanalytic Perspectives*. London: University of Chicago.

Drawing on their own work with gays, lesbians and bisexuals as well as other pertinent studies, the authors examine how psychological development and clinical intervention as well as social and historical change across generations contribute to how we think about sexuality. The authors suggest that the search for a cause is much less important than the need to understand the meaning of being homosexual. They consider the destructive nature of an intolerant society that fosters so-called conversion psychotherapy and stress the importance of helping to rebuild a sense of coherence and personal integrity among homosexuals.

Domenici, T. and Lesser, R. C. (1995). *Disorienting Sexuality: Psychoanalytic Reappraisals of Sexual Identities*. New York: Routledge.

Drawing on a largely social constructionist perspective, the contributors in this volume expose the biases against gay men and lesbians in psychoanalytic theory and practice and examine the clinical implications of these biases.

2. Lesbianism: Contemporary Psychoanalytic Perspectives

Classically, lesbianism was theorised as pathology and female sexuality, more generally, was viewed as something in deficit (i.e. women as castrated). Theories of lesbianism have been significantly reformulated in recent decades. As more feminist, lesbian and queer therapists have entered the profession, they have rejected the phallogocentric, masculinist theories of the past and have delineated their own model of female sexuality, not defined in relation to men or masculinity. Contemporary accounts of lesbianism are strongly informed by three main theoretical developments: (1) a move away from psychosexuality towards relationality in psychoanalysis, particularly emphasising the mother-daughter relationship; (2) dialogue with feminist thought; and (3) an engagement with postmodern ideas challenging conventional accounts of gender and sexuality. Contributors in the recommended volumes and papers below come from a variety of backgrounds and theoretical perspectives. There are individual chapters on lesbianism in the overview books listed in section 1.

Cereijido, M. (2020). *Changing Notions of the Feminine: Confronting Psychoanalysts' Prejudices*. London: Routledge.

Ten prominent psychoanalysts (nine female, one male) explore the socially constructed and culturally varied notion of the *feminine*. Theories and practices with regard to sexuality and gender are in widespread transition and nuanced consideration of the concept of the feminine (and the masculine) must include biologically sexed bodies, gender assignment at birth, multiple identifications, bisexual fantasies, fields of desire and varied object choices, and changing gender roles. Many changing ideas are explored, including the earliest mother-daughter relationship, psychic bisexuality, female genital anxiety, primary and secondary femininity, the role of penis envy, lack, positive femininity, maternity itself, the feminine/masculine binary with respect to power dynamics, parenting, as well as to assertiveness, ambition and aggression; women's role in cultural, historical and phallogocentric contexts; feminine narcissism and masochism and the psychoanalytic impact of new reproductive techniques and changing gender roles. (Review by Michael J. Diamond)

Hertzmann, L. (2018). *Losing the internal Oedipal mother and loss of sexual desire*. *British Journal of Psychotherapy*, 34 (1), 25-45.

While this paper focuses on lesbian relationships, the relevance of the ideas presented here for other gender pairings is explored. The paper aims to examine how it might be possible to use psychoanalytic concepts to explore a deeper understanding of the difficulties with conscious and unconscious same gender sexual desires in psychoanalytic psychotherapy. The author explores how the loss of the unconscious oedipal mother can be manifested as a loss of sexual desire in a couple's relationship. The author suggests that the move from what is referred to as the longed-for state of being in perfect harmony, to a more realistic state of imperfect harmony can bring about the recovery of an unconscious belief that one can possess the oedipal mother. The move from this fantasy state of merger to a more reality-based relationship can induce feelings of abandonment and loss, particularly of sexual desire. The implications of this for the transference and countertransference, and the conscious and unconscious nature of erotic desires within the therapeutic relationship are considered.

Cohen, J. N. and Byers, E. S. (2014). *Beyond lesbian death bed: enhancing our understanding of the sexuality of sexual minority women in relationships*. *Journal of Sex Research*, 51 (8), 893-903

The goal of this study was to characterise the sexuality of sexual-minority (i.e., lesbian, bisexual, queer, unlabelled, questioning) women. Participants were 586 women (87% White) in a same-sex relationship of 1 to 36 years in duration. They completed measures assessing their sexual behaviour (frequency of non-genital and genital sexual

activities), motivation (sexual desire), and cognitive-affective responses (sexual satisfaction, sexual esteem, sexual anxiety, negative automatic thoughts). On average, the women reported experiencing their sexuality positively across all domains. Regardless of relationship duration, most of the women reported engaging in both genital and non-genital sexual behaviours with their partner once a week or more; few reported that they had not engaged in sexual activity in the previous month. The findings are discussed in terms of the idea that lesbians have sex less frequently than other couple types and that sexual frequency declines rapidly in lesbian relationships (i.e. 'lesbian bed death') and descriptions of sexual-minority women's sexuality that suggest that genital sexual activity is not important to sexual satisfaction.

Leavitt, J. (2013). Lesbian desire in the age of AIDS: from the head of Medusa sprung. *Studies in Gender and Sexuality*, 14 (2), 144-152.

In the age of AIDS, lesbians' sexualities were strangely protected from the epidemic spread of the HIV virus, even while many lesbians' social and political lives were deeply impacted by its catastrophic effects on the gay community. The 'so close but yet so far' phenomenon defining lesbian experience during the AIDS crisis evoked mixed and complicated emotions unique to that sector of the gay community. This article highlights the manifold emotional experience for lesbians, which paralleled an equally complex web of identifications and disidentifications with gay men. Although this perpetuated a sense of invisibility for lesbians during the epidemic's crisis years, it may have contributed to opening a space for new possibilities of feminine sexualities and identities as the crisis receded.

Lester, E. P. and Notman, M. T. (2009). The complexity and plasticity of female sexual choice. *Canadian Journal of Psychoanalysis*, 17 (2), 220-230.

Attention has recently been given to female sexuality as separate from reproduction. A range of responses and shifts in object choice have been described. These have been considered to represent 'plasticity' of response. This paper considers some of the dynamics of this plasticity, particularly in relation to object choice. These include the early relationship to the mother, the changes in the female body, and the need for intimacy expressed sexually. Concepts about the nature of development antecedents leading to particular object choices may need to be reconsidered.

Glassgold, J. M. and Iasenza, S. (2004). *Lesbians, Feminism and Psychoanalysis*. London: Routledge.

This collection of lesbian-affirmative writings addresses transference and countertransference, gender subjectivities, privilege and racism, therapist homophobia, and violence in lesbian relationships. In the past decade, psychoanalysis has undergone changes in clinical theory that have led to views on human sexuality that are less focused on what is 'normal' and therapy practices that resist attempts to fit individuals into prescribed developmental models.

Golden, C. (2003). Improbable possibilities. *Psychoanalytic Inquiry*, 23 (4), 624-641.

This article explores the variabilities among women in sexual object choice and expression and elaborates on the claim that women's sexuality is fluid. It does so by presenting a summary of interviews with women of all sexual orientations who do, in fact, experience their sexuality as a conscious choice. Their own words reveal the plasticity of sexual attractions, experiences and identities and the more fluid sexuality that emerges as a result.

Jalas, K. (2003). Between tomboys and butch lesbians: gender nonconformity viewed through clinical psychoanalysis and lesbian and gay theory. *The Psychoanalytic Review*, 90 (5), 655-683.

This article investigates the relations between the identity categories of 'butch' lesbian and of 'tomboy, and the troubled relations between some mainstream psychoanalytic approaches to questions of cross-gender identification in girls and recent lesbian and gay perspectives on this issue.

Elise, D. (2002). The primary maternal Oedipal situation and female homoerotic desire. *Psychoanalytic Inquiry*, 22 (2), 209-228.

In this paper, Elise closely examines classical psychoanalytic theory on the female Oedipal complex in order to shed light on same-sex object choice. Elise suggests that, although desire for the mother is a primary experience for both sexes, the mother never fully recognises the girl's same-sex desire for her. Instead of the little girl experiencing lack as a result of penis envy, Elise proposes instead that there is a void resulting from the mother's lack of recognition of the daughter's Oedipal desire.

Lasensa, S. (2002). Beyond 'lesbian death bed'. *Journal of Lesbian Studies*, 6 (1): 111-120.

Myths about lesbian sexuality continue to exist but none have received such widespread discussion as "lesbian bed death", a myth that has become a clinical entity even though it lacks definitional clarity and empirical validity. Its users, often relying on gender socialisation theory, overgeneralise and essentialise lesbian women's sexual experiences, obscuring the diversity of lesbian sexual experience. This paper critiques the use of the term 'lesbian bed death' and provides examples from sex research and lesbian literature of the panoply of lesbian passions and play.

Reed, K. (2002). Listening to themes in a review of psychoanalytic literature about lesbianism. *Psychoanalytic Inquiry*, 22 (2), 229-258.

This chapter focuses on the predominant, recurring themes found in the work of a group of less widely known writers. These themes include separating the concepts of gender identity and object choice, re-examining assumptions about developmental pathways, fluidity in object choice in women, dilemmas in lesbian experience and treatment issues. Dilemmas include feeling different, 'coming out', relationship patterns and decisions about parenting.

Gould, E. and Kiersky, S. (2001). *Sexualities Lost and Found: Lesbians, Psychoanalysis and Culture*. Madison, CT: International Universities Press.

This book illuminates controversy, contexts and theories that often do violence to lesbian experience as it is actually lived and fills a significant gap in the literature on the lesbian patient in the clinical situation. The contributors delineate major shifts in psychoanalytic understanding of the body, relatedness, subjectivity, desire, and the role of culture, and apply these to the question of same-sex desire in women.

Jacobo, M. C. (2001). Revolutions in psychoanalytic theory of lesbian development: Dora to dykes and back again. *Psychoanalytic Psychology*, 18 (4), 667-683.

Theories of lesbian development have evolved to appreciate the complexity of sexuality and gender as expressed in sexual object choice, foregrounded within psychoanalysis by proponents of relational and intersubjectivity theories. In this article, the author argues that it was not until psychoanalysis came to embrace this complex and contextualised understanding of homosexuality that therapists could become curious with patients about conflict-based aspects of their homosexual selves without risk of pathologising.

Greene, B. (2000). African American lesbian and bisexual women in feminist psychodynamic psychotherapies: surviving and thriving between a rock and a hard place. In: L. Jackson and B. Greene (ed) *Psychotherapy with African American Women: Innovations in Psychodynamic Perspectives and Practice*. New York, London: Guildford Press.

This chapter focuses on the issues of race, gender and sexual orientation in psychodynamic psychotherapy with African American lesbian and bisexual women. Neither the burgeoning literatures on psychotherapy with lesbian, gay and bisexual (LGB) people nor the developing fields of multicultural psychotherapy has much to say specifically about many issues intrinsic to psychotherapy with African American lesbian and bisexual women.

Schwartz, A. (1998). *Sexual Subjects: Lesbians, Gender and Psychoanalysis*. London: Routledge

This book is informed by gender theory, queer theory and feminism and addresses the tensions inherent in writing about lesbians and sexuality in the postmodern age. Schwartz masterfully intertwines clinical anecdotes with engaging theoretical questions that examine the construction of important categories of identity - woman, feminist, mother, lesbian. Schwartz also addresses specific issues which are problematic but nonetheless meaningful to self-identified lesbians such as roles in gender play, lesbian 'bed death', and raising non-traditional families.

Burch, B. (1997). *Other Women: Lesbian/Bisexual Experience and Psychoanalytic Views of Women*. New York: Columbia University Press.

The author redirects Freudian, Lacanian and Jungian ideas using feminist, social constructionist and contemporary psychoanalytic theories of individual sexuality, gender identity and the erotic/romantic dynamics of the family romance, moving beyond 'What went wrong?' – a question that often impedes the analytical process – to examine instead, how desires influence personal identities and choices.

Downey, J. I. and Friedman, R. C. (1997). Female homosexuality: classical psychoanalytic theory reconsidered. *Journal of the American Psychoanalytic Association*, 46, 471-506.

The psychoanalytic theory of female homosexuality occupies an unusual position in modern psychoanalytic thought because it continues to be influenced by models of the mind that have largely been discarded in other areas of psychoanalytic psychology. Psychoanalytic ideas regarding female homosexuality are considered here from an historical perspective. It is suggested that modern psychoanalytic theory about sexual orientation in women must include recent contributions on the psychological development of women, the psychoanalytic psychology of male homosexuality, and relevant extra-analytic observations.

Kulkarni, C. (1997). *Lesbians and Lesbianisms: A Post-Jungian Perspective*. London: Routledge.

This book explores lesbian experience from a Jungian and feminist perspective, through interviews with women who see themselves as lesbians or who are in a lesbian relationship. Although a feminist treatment of the subject challenges the heterosexism of Jungian theory, the author presents a link between theory and experience that is consistent with both approaches.

Magee, M. and Miller, D. (1997). *Lesbian Lives: Psychoanalytic Narratives Old and New*. Hillsdale, NJ: The Analytic Press.

The authors focus on the developmental and psychological consequences of identifying as lesbian and of having lesbian relationships. The developmental and clinical issues taken up in specific chapters include: the challenges facing lesbian adolescents; the psychological and social significance of 'coming out'; the various meanings of 'coming out' as a gay or lesbian analyst; the interaction of individual psyche and social context in clinical work with lesbian patients; and the history of homosexual therapists and psychoanalytic training.

Glassgold, J. M. and Iasenza, S. (1995). *Lesbians and Psychoanalysis: Revolutions in Theory and Practice*. New York: Free Press.

The authors bring together twenty-six pioneers in the field of lesbian psychoanalytic theory. The chapters address several topics of emerging concern including multicultural diversity, self-disclosure, homophobia, transference and countertransference issues, bisexuality, and the changing nature of lesbian sexuality. In addition, the authors examine the influence of stigma on human development.

Downing, C. (1993). *Myths and Mysteries of Same-Sex Love*. US: Authors Choice Press.

This book is written from the perspectives of depth psychology and mythology. In it, Downing explores the realities of the gay and lesbian psyche. Her purpose is to enrich our understanding of same-sex desire by discussing its conceptualisations by Freud and Jung, and its meanings as communicated in ancient myths, and by poets and philosophers. There are specific chapters on lesbian sexuality and desire.

O'Connor, N. and Ryan J. (1993). *Wild Desires and Mistaken Identities: Lesbianism and Psychoanalysis*. Karnac: London

This book provides a challenging exploration of psychoanalytic ideas about lesbians and lesbianism. Based on the authors' clinical experience as psychoanalytic psychotherapists, it offers a new and thoughtful framework that does not inevitably pathologise or universalise all lesbianism. A wide range of psychoanalytic ideas are surveyed, from Freud, Deutsch and Jung to Lacan and contemporary object-relations theorists. Questions on sexual identity, sexual desire and gender identity, of transference and countertransference, and also of institutional practices in relation to training, are all critically - and stimulatingly - addressed.

3. Gay Male Sexuality: Contemporary Psychoanalytic Perspectives

Classical accounts of gay male sexuality were underpinned by two predominant theoretical biases: (1) heterosexuality was normal, non-pathological and the most desirable form of human sexual expression; and (2) same-sex sexual orientation represented developmental arrest caused by early traumas, conflicts or disturbances in family relationship. Since the 1980s, psychoanalytic theories relating to gay male sexuality have been substantially reformulated. These reformulations may be attributed to several, overlapping factors. These factors include: (1) an increase in biogenetic studies contradicting classical psychoanalytic formulations about gay male sexuality; (2) decriminalisation of same-sex sexual acts; (3) the rise of LGB political activism from the late 1960s; (4) the gradual de-pathologisation of same-sex sexuality from the early 1970s; (5) increased visibility of openly gay male psychoanalytic psychotherapists, whose clinical input reshaped psychoanalytic models of LGB sexuality; and (6) increased engagement with psychosocial and postmodern perspectives. There are individual chapters on gay male sexuality in the overview books listed in section 1.

Lingiardi, V. (2018). Who am I? And what makes me hot and bothered? Notes on identity, sexuality, enigma, and desire. *Studies in Gender and Sexuality*, 19(4), 279-290.

This article explores the links among identity, sexuality, enigma, and desire in Lingiardi's work with 22-year-old Andrew as he explores his homosexuality. Sexuality is discussed as a developmental and relational construction simultaneously biological and social, inventive and defensive. Elaborating these vertices of sexuality in the treatment opened space to discuss Andrew's sexual experience and fantasy. In this vein, the article questions the tendency to put aside frank discussion of sex in analytic practice and proposes case vignettes useful for clinically elaborating intimate fantasies rooted in the shared narration of patient and analyst as between psychoanalyst/writer and reader. In doing so, we turn from concrete definitions and explanations of sexuality that risk getting bogged down in details and use narrative to facilitate the uncanny experience of 'finding' sexuality in clinical work.

Clarke, J. (2016). Revisiting the crossroads: can Oedipus take a gay turn in the 21st century? *Psychoanalytic Psychotherapy*, 30, 256-282

Is our foundational story of sexual identity still relevant and valid for today, or is it wrong? Oedipus has been used in the past as a cautionary tale for the consequences of transgressive sexuality, as well as an exemplar of hetero-normative development. Perhaps most influentially he has been used recently to illustrate a mechanism that underpins the concept of a pathological organisation of personality, a perverse turning of a blind eye to the truth. But is this reading mistaken? In this article Clarke returns to the crossroads with Oedipus to try to give him back – for the first time – his sexual identity. By offering a re-reading of the myth in light of how we understand the impact of internalised stigma on the formation of sexual identity today Clarke hopes to show that our psychoanalytic imagination can use the Oedipus myth to encompass a range of different developmental possibilities.

Shenkman, G. (2016). Classic psychoanalysis and male same-sex parents: a re-examination of basic concepts. *Psychoanalytic Psychology*, 33 (4), 585-598.

In response to political, technological, and sociocultural changes, the family unit built around a mother and father who are married to each other has been joined in recent decades by a range of other models, including, among others, male same-sex families. These families challenge the narratives of classic psychoanalysis, which relate explicitly to the traditional model. This article examines the potential for conflict and the possibility of coexistence between male same-sex families and basic psychoanalytic concepts such as Oedipus complex, identification with the same-sex parent, the good-enough mother, and primary maternal preoccupation. It adopts a postmodern

perspective and makes use of clinical vignettes. This article also considers the clinical implications that may result from the encounter between male same-sex parents and therapists relying on the orthodox interpretation of classic concepts. This article calls for further exploration of the applicability of classic psychoanalytic concepts to other types of new families, such as female same-sex parents and single-parent families.

Benedetti, R. (2015). *Belonging: ontogeny of a gay psychoanalytic candidate. International Journal of Psychoanalytic Self Psychology, 10 (4), 398-407.*

The author, a first-year candidate in psychoanalytic training, reflects on his personal history including aspects of the coming-out process, his first time in psychotherapy, his initial rejection of psychoanalytic theory and technique because of how it has been used to pathologise gay people, and his decision later in his career to pursue analytic training for the depth of understanding it provides. He considers the work of Ken Corbett - specifically his analysis of the gay male's passivity in relation to other men - and applies it to his own relationship to the psychoanalytic world. Throughout the article, the author reflects on perceptions of belonging personally and professionally.

Cohler, B. J. and Galatzer-Levy, R. M. (2013). *The historical moment in the analysis of gay men. Journal of the American Psychoanalytic Association, 61(6):1139-1173*

The meanings of men's same-sex desire have changed rapidly in the last fifty years. As a result, it is common that patients and analysts (or psychotherapists) have dissonant implicit understandings of the significance of this desire. This dissonance can have untoward clinical consequences, some of which are explored here, and may be partly mitigated to facilitate better analytic and psychotherapeutic work with gay men.

Botticelli, S. (2010). *Thinking the unthinkable: anal sex in theory and practice. Studies in Gender and Sexuality, 11 (3), 112-123.*

This essay takes up the issue of anal sexuality among gay men in order to consider the relationship between bodily and psychic penetrability. The lack of recognition some gay men may experience with this aspect of their sexuality suggests the importance that feeling 'mentalised' (e.g. Fonagy and Target, 1993) may play in adult life. The author explores the meanings of gay men's wishes to penetrate and be penetrated on both bodily and psychic levels as well as the consequences of feeling denied entry.

Guss, J. R. (2010). *The danger of desire: anal sex and the homo/masculine subject. Studies in Gender and Sexuality, 11 (3), 124-140.*

Anal eroticism between men has been a recurrent focus in psychoanalytic theory for over a century. Many theorists conflate anal eroticism with danger, particularly danger to masculinity and male gender identity. The author reviews numerous papers on this topic from a broad spectrum of psychoanalytic theories, including drive theory, queer theory, and relational psychoanalysis and seeks to expand the discourse on anal eroticism between men.

Isay, R. A. (2009). *Becoming Gay: The Journey to Self-Acceptance. New York: Farrar, Strauss & Giroux.*

Now revised and updated for the 21st-century, *Becoming Gay* is the classic guide on how to accept one's homosexuality. By exploring the psychological development of gay men through personal case histories - including his own - Isay shows how disguising one's sexual identity can induce anxiety, depression, and low self-esteem. Individual chapters tackle acceptance in any stage or circumstance of life, whether it be adolescence, married-with-children, retirement age, or living with HIV and AIDS.

Isay, R. A. (2009). *Being Homosexual: Gay Men and Their Development*. New York: Farrar, Strauss, & Giroux.

Now revised and updated for the 21st-century, this volume carries the reader through the main developmental stages in the gay male's life cycle from the initial awareness of same-sex impulses to coming out, forming friendships with other gay men, and a mature integration of one's sexual identity.

Lewes, K. (2009). *Psychoanalysis and Male Homosexuality: Twentieth Anniversary Edition*. Aronson: New York.

The author shows how the original psychoanalytic ideals of understanding and compassion were betrayed by later psychoanalytic clinicians and theorists. Reconsidering Freud and his early followers in a new light, Lewes shows how they posited a model of psychological development that included homosexuality as one of its natural variants. But psychoanalysis, in its later attitudes toward homosexuality, soon changed from an open-minded and humane discipline into an insular and calcified orthodoxy.

Lingiardi, V. (2002). *Men in Love: Male Homosexualities from Ganymede to Batman*. Chicago and Lasalle, IL: Open Court.

In *Men in Love*, Jungian psychoanalyst Vittorio Lingiardi traces the poetic roots of eros from ancient Greek times to modern times through myths, art, poetry, and symbols including the rape of Ganymede, Michelangelo's loves, the relationship of Batman and Robin, and the letters between Freud and Jung.

Lynch, P. (2002). *Yearning for love and cruising for sex: returning to Freud to understand some gay men*. *Annual of Psychoanalysis*, 30, 175-190.

Lynch illustrates with clinical material the complicating factor in the love life of some homosexual men that results in the same splitting of tender and sexual feelings that Freud described for heterosexual men. Lynch offers a different understanding of certain behaviour that analysts have assumed to be characteristic of homosexual dynamics.

Shelby, D. (2002). *About cruising and being cruised*. *Annual of Psychoanalysis*, 30, 191-210.

Shelby shines a different light on cruising, a phenomenon denigrated by psychoanalysts as compulsive searching for multiple sex partners. Shelby shows this to be an example of our confusing sexualisation (the compulsive behaviour) with sexual orientation (the homosexual orientation) and ignoring the needy self, which is trying to make contact.

Auchincloss, E. L. and Vaughan, S. C. (2001). *Psychoanalysis and homosexuality: do we need a new theory?* *Journal of the American Psychoanalytic Association*, 49, 1157-1186.

No need exists, it is argued, for a new psychoanalytic theory of homosexuality. Certainly, psychoanalysis should not be expected to generate such a theory using its own methodology alone. The preoccupation with producing such a theory avoids more important questions about psychoanalytic theory building raised by an examination of the long relationship between psychoanalysis and homosexuality. These questions concern the problems related to using psychoanalytic methodology: (1) to construct categories (including the categories normal and abnormal), (2) to construct causal theory (the problems include the limitations of psychoanalytic developmental theory and a long-standing confusion between psychoanalytic

developmental theory, psychoanalytic genetic reconstruction, and psychodynamics), and (3) to identify 'bedrock.' Finally, the question is addressed of what might be needed that is new in the psychoanalytic approach to homosexuality.

Drescher, J. (2001). *Psychoanalytic Therapy and the Gay Man*. Hillside, New Jersey: Analytic Press.

Drescher explores the subjectivities of gay men in psychoanalytic psychotherapy and offers a corrective to the inadequate and often pathologising tomes of traditional psychoanalytic writers. Drescher does not assume that sexual orientation is the entire or even major focus of intensive psychotherapy but argues that issues of sexual identity - which encompass a spectrum of possibilities for any gay man - must be addressed in an atmosphere of honest encounter.

Phillips, S. (2001). *The overstimulation of everyday life: new aspects of male homosexuality*. *Journal of the American Psychoanalytic Association*, 49, 1235-1267.

Phillips describes what it is like to grow up gay in a world that was designed for someone else. He explores the over-stimulating effect on the gay teenage boy of constantly being in situations, like locker rooms, where he can neither avoid his sexual feelings nor acknowledge them. Phillips discusses the adaptation the gay boy must make to this kind of over-stimulation, which may lead to the massive suppression of feelings and to isolation and shame.

Frommer, M. (2000). *Offending gender: being and wanting in male same-sex desire*. *Studies in Gender and Sexuality*, 1, 191-206.

Frommer argues that same-sex desire is not necessarily desire for sameness. This false link led many analysts to conclude that sexual desire for someone with similar genitals can only be narcissism rather than true love. Frommer challenges this view by describing a heterosexual man's identification with his girlfriend and a homosexual man's valuing of the differentness between himself and his boyfriend. He concludes: 'Loving that is termed narcissistic is not about whom one loves, but how one loves.'

Lewes, K. (1998). *A special Oedipal mechanism in the development of male homosexuality*. *Psychoanalytic Psychology*, 15, 341-359.

A special Oedipal mechanism in the development of homosexuality in high functioning neurotic men - the plicate Oedipus complex - is described, in which the father serves simultaneously as both the object and the prohibitor of erotic excitement in the Oedipal-age boy. This mechanism, it is argued, replaces the more widely recognised negative and positive Oedipal mechanisms and functions correspondingly in superego formation and general psychosexual development.

Goldsmith, S. J. (1995). *Oedipus or Orestes? Aspects of gender identity development in homosexual men*. *Psychoanalytic Inquiry*, 15, 112-124.

Goldsmith rejects the notion of a negative Oedipal explanation for the homosexual boy, suggesting instead that the configuration of father as love object and mother as rival is the normative experience for the homosexual boy and should be considered his positive triangulation experience. Goldsmith re-conceptualises the inverted Oedipus complex as the Orestes complex.

Corbett, K. (1993). *The mystery of homosexuality*. *Psychoanalytic Psychology*, 10, 345-357.

Corbett posits that male homosexuality is a 'differently structured masculinity, not a simulated femininity'. His insights challenge traditional psychoanalytic thought about

development, about types and meanings of masculinity, and about growing up in a non-traditional family.

Hopcke, R. H. (1991). *Jung, Jungians and Homosexuality*. Resource Publications.

The author examines the way in which Jung and Jungians have regarded homosexuality both clinically and theoretically, demonstrating that within a great diversity of opinion there exist many ways to deepen an understanding of the lives and loves of gay men and lesbians. Hopcke proposes a view of homosexuality that is archetypally based, empirically supportable, psychologically profound, and spiritually evocative.

Friedman, R. C. (1988). *Male Homosexuality: A Contemporary Psychoanalytic Perspective*. New Haven: Yale University Press.

This was one of the first books to integrate recent psychobiological, gender identity, and family studies with psychoanalytic theory on male homosexuality.

4. Bisexuality: Contemporary Psychoanalytic Perspectives

Classically, bisexuality was a central concept within psychoanalytic thought. Freud initially understood bisexuality as a combination of maleness and femaleness in a biological and anatomical sense, under the influence of the idiosyncratic ideas of his friend, Wilhelm Fliess. Subsequently, Freud developed it as a psychological capacity to identify with the parents of both sexes. He understood these identifications with parental objects as foundational to an individual's sense of their gender identity, and sexual orientation. He regarded femininity and masculinity as entangled with passivity and activity and came to believe that the desire to repudiate a passive position, equated with femininity, was 'bedrock' (i.e. a tendency in everyone). Freud believed that everyone could inhabit the position of either sex, and feel desire for the opposite one, but ultimately in adolescence the matter should be settled by a heterosexual outcome and an identification in line with biology. This belief in 'internal bisexuality' as a psychological property was shared by Jung, who developed the notion of 'anima' and 'animus' as the cross gendered aspect of a man and woman's internal world. Perhaps because of the theory of bisexuality as a universal aspect of individual psychology, actual bisexuality as a sexual orientation received very little theoretical development in the decades after Freud and was generally considered under theorised compared to gay male sexuality and lesbianism. In more recent years, the concept of bisexuality has been re-examined by contemporary theorists and clinicians. There are individual chapters on bisexuality in the overview books listed in section 1.

Gulati, R. and Pauley, D. (2019). *The half embrace of psychic bisexuality. Journal of the American Psychoanalytic Association, 67(1), 97-121.*

The discourse on psychic bisexuality is explored as it unfolds in Freud's writings, in contemporary papers by LGBTQ psychoanalysts, and in a volume of essays, *Psychic Bisexuality*, published in 2018 by a group of prominent French and British analysts (Perelberg 2018, see below). The greater acceptance of nonnormative sexualities and genders is reshaping the discourse on bisexuality and gender in many corners of our profession, yet, as the Perelberg volume attests, that evolution is far from universal. A strain of unquestioned heteronormativity and cisgenderism is evident in Perelberg et al.'s description of the fundamentals of psychic life, a strain that has roots (via a certain one-sided reading of Lacan) in Freud's unresolved mourning of his inchoate homosexual self.

Perelberg, R. J. (2019). *Sexuality, Excess, and Representation: A Psychoanalytic Clinical and Theoretical Perspective.* London: Routledge.

This book provides some updated thinking on Freud's original idea of a psychic bisexuality (rather than on bisexuality as sexual orientation) and how it can be understood theoretically and in clinical practice. The author articulates a Freudian metapsychology with modern preoccupations with questions of sexual difference and differences. Freud's theoretical writing on bisexuality is examined, returning us firmly to infantile sexuality and the Oedipus complex and the 'repudiation of femininity'.

Rapoport, E. (2019). *From Psychoanalytic Bisexuality to Bisexual Psychoanalysis: Desiring in the Real.* Oxon: Routledge.

This is the first book to assess bisexuality through a range of psychoanalytic and critical perspectives, highlighting both the issues faced by bisexual people in contemporary society and the challenges that can be presented by bisexual clients within a clinical setting. Examining bisexuality through the lenses of Lacanian, Winnicottian and Relational psychoanalytic theories, the book outlines the ways in which the concept is at once both dated and yet still tremendously important. It includes case studies to explore the issue of widespread countertransference responses in the clinical setting, in addition to using both bisexual theory and empirical research on biphobia to

comment on the social pressures facing bisexual men and women, and the resultant psychological effects.

Perelberg, R. J. (2018). *Psychic Bisexuality: A British-French Dialogue*. London: Routledge.

This collection provides updated thinking about the Freudian conception of a psychic bisexuality (rather than bisexuality as a sexual orientation). Drawing on British and French Freudian and post-Freudian traditions, the book explores questions of love, transference and countertransference, sexuality, and gender to set out the latest clinical understanding of psychic bisexuality and includes chapters from influential French analysts available in English for the first time.

Blechner, M. J. (2015). Bigenderism and bisexuality. *Contemporary Psychoanalysis*, 51 (3), 503-522.

The term 'bigender' is proposed to describe people who combine male and female gender identities. Bigenderism is to be distinguished from bisexuality whose meaning would be limited to sexual attraction to both sexes. This change in terminology allows for more precise theory and clinical formulations, since some cases of bigenderism have been mistakenly identified as transgender. The relationship between gender identity and sexual orientation is discussed. Irrational ideas about bisexuality and bigender, and the way they inform understanding of transference and countertransference, are identified and analysed.

Eisner, S. (2013). *Bi: Notes for a Bisexual Revolution*. Berkeley, California: Seal Books.

Depicted as duplicitous, traitorous and promiscuous, bisexuality has long been suspected, marginalised, and rejected by both straight and gay communities alike. This book takes a long overdue, look at bisexual politics - from the issues surrounding biphobia, monosexism, feminism and transgenderism to the practice of labelling those who identify as bi as either 'too bisexual' (promiscuous and incapable of fidelity) or 'not bisexual enough' (not actively engaging romantically or sexually with people of at least two different genders).

Alexander, J. and Anderlini-D'Onofrio, S. (2012). *Bisexuality and Queer Theory: Intersections, Connections and Challenges*. London: Routledge.

This provocative collection presents bisexuality and queer theory as two parallel thought collectives that have made significant contributions to cultural discourses about sexual and amorous practices since the onset of the AIDS era and explores the ideas that circulate in these thought collectives today. We learn much about the construction and experience of sexuality, and the power it still holds throughout the contemporary Western world to shape identities and practices. This volume challenges our understanding of what it means to be sexual, to have a sexual identity, and to practise the arts of loving.

Heenan-Wolff, S. (2011). Infantile bisexuality and the 'complete Oedipal complex': Freudian views on heterosexuality and homosexuality. *International Journal of Psychoanalysis*, 92,1209-1220.

In the psychoanalytical discussion of what is 'mature' sexuality we speak of the 'genital' stage and the 'resolution' of the Oedipal complex in the form of identification with the parent of the same sex and a heterosexually directed object choice. A close reading of Freud's texts about sexuality shows that such a normative view cannot be corroborated by this viewpoint. He suggests that infantile sexuality is bisexually orientated, the final object choice due to repression of either homosexual or heterosexual desires. As Freud puts it, genital heterosexuality occurs out of necessity for

procreation. In order to enrich the present psychoanalytical discussion about homosexuality and bisexuality the author returns to Freud's theories in this context.

Friedman, R. C. and Downey, J. I. (2010). Psychotherapy of bisexual men. *Journal of American Academy of Psychoanalysis and Dynamic Psychiatry*, 38,181-197.

The authors discuss clinical aspects of male bisexuality from a psychodynamic perspective. Bisexuality appears to be an attribute of some but not all men. The factors leading some men to be bisexual, and others exclusively homosexual or heterosexual are not presently known. Although bisexuality itself is not pathological, the adaptational issues of men with major psychiatric disorders who are also bisexual may be complex.

Drescher, J. (2007). From bisexuality to intersexuality: rethinking gender categories. *Contemporary Psychoanalysis*, 43, 204-228.

The study of human sexual identities is changing, and these changes oblige analysts to think about sexualities in ways never envisioned by their psychoanalytic forebears. This paper first defines the terms related to modern conceptions of sexuality and sexual identities; then reviews the historical assumptions underlying the theory of bisexuality; and next introduces the role of categories and hierarchies in general and the clinical meaning of sexual hierarchies in particular. The paper concludes with a commentary on intersexuality as an example of both the social and the surgical constructions of gender.

Fogel, G. I. (2006). Riddles of masculinity: gender, bisexuality, and thirdness. *Journal of the American Psychoanalytic Association*, 54,1139-1163.

Clinical examples are used to illuminate several riddles of masculinity - ambiguities, enigmas, and paradoxes in relation to gender, bisexuality, and thirdness - frequently seen in male patients. Basic psychoanalytic assumptions about male psychology are examined in the light of advances in female psychology, using ideas from feminist and gender studies as well as important and now widely accepted trends in contemporary psychoanalytic theory.

Bradford, M. (2004). The bisexual experience: living in a dichotomous culture. *Journal of Bisexuality*, 4 (1-2), 7-23.

Twenty self-identified bisexual women and men were interviewed for a descriptive study. The results indicate that cultural attitudes toward bisexuality affect sexual identity development, self-definition, visibility, and relationships. Three steps to establishing a sense of community included: (1) perception of outsider status; (2) location of bisexual individuals and community; and (3) formation of new community. Both gender and cultural minority status had an impact on the experience of bisexuality.

Ferraro, F. (2003). Psychic bisexuality and creativity. *International Journal of Psychoanalysis*, 84, 1451-1467.

This paper explores the relationship between psychic bisexuality and creativity. After a brief clarification regarding the relationship between psychic bisexuality and option of gender, the author takes up two meanings of the bisexuality concept, both of which are of pre-eminent significance to him. The first is psychic bisexuality as a quality of the self-related to the feminine and masculine as pure elements; the second is psychic bisexuality as an expression of identification with both parents, mother and father. The author then puts forward the hypothesis that in some blocks of creativity an alteration to psychic bisexuality can be traced.

Ferraro, F. (2001). Vicissitudes of bisexuality: crucial points and clinical implications. *International Journal of Psychoanalysis*, 82, 485-99.

The author begins by noting that the heuristic value of the concept of bisexuality can be explored in two directions, involving respectively its role in psychopathology and in the development of creativity and thought. The author concentrates on the first of these aspects, which entails a reconsideration of the 'phallic question'. The status of femininity is investigated on the basis of Freud's and Winnicott's theories of bisexuality and the author here finds an explanation for the repudiation of femininity and for the 'phallic question' thereby implied, which represents the underlying bedrock resulting in interminable analyses.

Young-Bruehl, E. (2001). Are human beings "by nature" bisexual? *Studies in Gender and Sexuality*, 2 (3), 179-213.

In this paper, the author first surveys the ways in which bisexuality was understood by late 19-century sexologists, by Freud and his followers, by Alfred Kinsey, and by contemporary social scientists and political activists. Then the three domains distinguished by Freud in which bisexuality is currently being examined are surveyed: biological bisexuality, psychological bisexuality (in terms of gender) and kinds of object choice.

Layton, L. B. (2000). The psychopolitics of bisexuality. *Studies in Gender and Sexuality*, 1 (1), 41-60.

This article begins with the observation that multiple current uses of the term 'bisexuality' render the practice of sexual desire for both men and women invisible. It then centres on the use of the term in contemporary psychoanalytic gender theory and argues that here, too, its use to mean the mix of male and female genitals or of masculinity and femininity renders bisexual desire invisible. Although theorists suggest that psychic bisexuality can work clinically to deconstruct gender polarities, the essay argues that any use of masculinity and femininity reinstates rather than challenges such polarities.

Guidry, L. L. (1999). Clinical intervention with bisexuals: a contextualised understanding. *Professional Psychology: Research and Practice*, 30 (1), 22-26.

Many clinicians, situated in a culture that privileges a dichotomous understanding of sexual orientation, are often challenged by the complex issues presented by bisexual clients. The aim of this article is to provide an expanded and contextualised understanding of bisexuality that will inform effective intervention with the clinical concerns presented by this frequently marginalised population. An overview of evolving perspectives on sexual orientation and bisexuality is followed by a discussion of treatment concerns relevant to bisexuals.

Storr, M. (1999). *Bisexuality: A Critical Reader*. London: Routledge.

This book presents the essential primary texts on bisexuality from the last 100 years in an easy-to-read format. Exploring this often-controversial concept from a range of perspectives, this book places bisexuality in its historical and cultural context and explores its many meanings and uses. Storr's introductions provide a straightforward overview of the texts included and sets them clearly in the context of debates on bisexuality.

Elise, D. (1998). Gender repertoire: body, mind, and bisexuality. *Psychoanalytic Dialogues*, 8, 353-372.

Selected aspects of case material in the treatment of a bisexual woman are used to illustrate the theme of penetrability versus impenetrability in the feminine and masculine psyches. The author examines the dimensions not of activity and passivity, but of a fixed versus a permeable bodily and psychic boundary - the ability to penetrate as well as the ability to be penetrated. The patient showed shifting gender identifications, depending on the relational context - the geography of the lover's body and mind - that she described as 'expanding her gender repertoire.' Bisexuality is discussed as a creative use of potential space that does not necessitate the collapse of core gender identity.

Blumstein, P. W. and Schwartz, P. (1977). *Bisexuality: some psychological issues. Journal of Social Issues*, 33 (2): 30-45.

This paper presents an overview of an interview study with 156 men and women having a history of more than incidental sexual experience with both men and women. Data from other studies that point to the existence of bisexuality are reviewed and suggestions are made about why bisexuality has not been incorporated into scientific thinking about sexuality. The study is described and some of the findings are presented to address the following questions: How does bisexuality fit into the erotic careers of respondents? What factors contribute to the adoption of bisexual self-identification? What circumstances are conducive to the development of bisexuality in individuals? What are the differences between the processes of becoming a bisexual female and becoming a bisexual male?

Wolff, C. (1977). *Bisexuality: A Study*. London: Quartet.

This was one of the first empirical studies examining the lives and norms of men and women who identified as bisexual. Wolff recruited seventy-five female and seventy-five male participants from lesbian and gay-friendly organisations and from advertisements in LGB -friendly publications. She used questionnaires, biographical sketches (including diaries) and interviews as her research methods. In line with Blumstein and Schwartz (1977, above), Wolff concluded that the women participants in her study were more secure in their bisexual identity while the men participants experienced their attraction to other men with conflict and anxiety.

5. Transgender: Contemporary Psychoanalytic Perspectives

Transgender remains a controversial and difficult subject for psychotherapists. Theoretical and clinical models for thinking about transgender continue to evolve and shift. Drawing on scientific research and adopting a broad, interdisciplinary approach (e.g. psychology, psychiatry, social work, endocrinology, urology etc), therapists are increasingly moving towards a trans-affirmative psychodynamic approach that aims to support trans people in fostering the emergence of an authentic gendered self and in restoring an overall sense of internal coherence. There is growing awareness of the feelings of stigma and prejudice experienced by trans people and the negative mental health consequence of such experiences. The readings compiled in this section provide an overview of some of the key literature from the last 25 years. There are individual chapters on transgender in the overview books listed in section 1.

Langer S. J. (2019). *Theorising Transgender Identity for Clinical Practice: A New Model for Understanding Gender*. London: Jessica Kingsley.

This book is ideal for clinical practice with transgender and gender nonconforming/diverse clients. Importantly, it moves beyond the medical model to advance an understanding of transgender subjectivity as a natural variation of gender in humans. The book deepens understanding of the developmental trajectory of trans and gender non-conforming individuals over their lifespan, before and beyond transition. Drawing on theories from a range of different fields including psychoanalysis, philosophy, neuroscience, consciousness studies, trauma therapy, sex therapy, gender theory, disability studies and trans studies, it illustrates how informed clinical practice can recognise the complexity of gender identity and expression.

Gozlan, O. (2018). *Current Critical Debates in the Field of Transsexual Studies*. London: Routledge.

This book introduces new thinking on non-conforming gender representation, addressing transsexuality as a subjective experience that highlights universal dilemmas related to how we conceive identity and exploring universal questions related to gender. The chapters reframe several contemporary dilemmas, such as: authenticity, pathology, normativity, creativity, the place of the clinic as a problem of authority, the unpredictability of sexuality, the struggle with limits of knowledge, a demand for intelligibility and desire for certainty. The contributors consider sociocultural, theoretical, therapeutic and legal approaches to transsexuality.

Halberstam, J. (2018). *Trans*: A Quick and Quirky Account of Gender Variability*. Oakland, California: University of California Press.

In the last decade, public discussions of transgender issues have increased exponentially. However, with this increased visibility has come not just power, but regulation, both in favour of and against trans people. What was once regarded as an unusual or even unfortunate disorder has become an accepted articulation of gendered embodiment as well as a new site for political activism and political recognition. In *Trans**, the author explores recent shifts in the meaning of the gendered body and representation and explores the possibilities of a nongendered, gender-optional, or gender-queer future.

Gherovici, P. (2017). *Transgender Psychoanalysis: A Lacanian Perspective on Sexual Difference*. London: Routledge.

The author argues for a de-pathologising of the transgender experience, while offering an original analysis of sexual difference. This book addresses sexual identity and sexuality by articulating new ideas on the complex relationship of the body to the psyche, the precariousness of gender, the instability of the male/female opposition,

identity construction, uncertainties about sexual choice - in short, the conundrum of sexual difference. *Transgender Psychoanalysis* features explications of Lacanian psychoanalysis along with considerations on sex and gender in the form of clinical vignettes from Gherovici's practice as a psychoanalyst.

Stryker, S. (2017). *Transgender History: The Roots of Today's Revolution*. New York: Seal Press.

Transgender History takes a chronological approach to the subject of transgender history, with each chapter covering major movements, writings, and events. Chapters cover the transsexual and transvestite communities in the years following World War II; trans radicalism and social change, which spanned from 1966 with the publication of *The Transsexual Phenomenon*, and lasted through the early 1970s; the mid-'70s to 1990 - the era of identity politics and the changes witnessed in trans circles through these years; and the gender issues witnessed through the '90s and '00s.

Gozlan, O. (2015). *Transsexuality and the Art of Transitioning: A Lacanian Approach*. London: Routledge.

Informed by a Lacanian perspective that locates transsexuality in the intermediate space between the clinic and culture, Gozlan joins current conversations around the question of sexual difference with the insistence that identity never fully expresses sexuality and, as such, cannot be replaced by gender. The book goes beyond the idea of gender as an experience that gives rise to multiple identities and instead considers identity as split from the outset. This view transforms transsexuality into a particular psychic position, able to encounter the paradoxes of transitional experience and the valence of phantasy and affect that accompany aesthetic conflicts over the nature of beauty and being.

Withers, R. (2015). *The seventh penis; towards effective psychoanalytic work with pre-surgical transsexuals*. *Journal of Analytical Psychology*, 60 (3), 390-412.

The author reflects on his contrasting analytic work with two transsexual patients. He uses three previous psychoanalytic studies (Stoller, Morel and Lemma) to explore whether effective analytic work with the issues driving a person's determined wish for sex reassignment surgery (SRS) is possible. Particular consideration is given to how such work might navigate a path between traumatising and pathologising the patient on the one hand and avoiding important analytic material out of fear of so doing on the other. The author proceeds to ask whether it is possible to tell in advance, with any degree of reliability, who is and who is not likely to benefit from surgery. He considers certain diagnostic issues in relation to these questions. Illustrations are given of how, in practice, countertransference anxieties about psychopathologising transsexual patients can contribute to significant difficulties in working clinically with them.

Ehrensaff, D. (2014). *Found in transition: our littlest transgender people*. *Contemporary Psychoanalysis*, 50(4), 571-592.

An increasing number of children are coming with their parents to seek out mental-health services as they explore, question, or give voice to their gender concerns. This article presents a particular orientation of practice to help those children, the gender affirmative model, proposing that psychoanalytic practitioners are ideally situated to help these children within this approach, using techniques of listening, mirroring, suspension in psychic intermediate spaces, play, and interpretation. Concepts of the true gender self, false gender self, and gender creativity are presented. Particular attention is paid to prepubertal children who affirm that their gender does not match the sex listed on their birth certificate and examines the question of whether it is in the best interests of these children to allow them to socially transition to the gender they

affirm themselves to be. A case example is presented of a five-year-old exploring gender to demonstrate the gender affirmative clinical approach in a psychoanalytic context.

Saketopoulou, A. (2014). Mourning the body as bedrock: developmental considerations in treating transsexual patients analytically. *Journal of the American Psychoanalytic Association*, 62 (5), 773-806.

This paper introduces the concept of massive gender trauma, a clinical syndrome arising at the onerous intersection of the misgendering of transgender patients and the subjective, anguished experience of the natal body. Analysts have become increasingly aware in recent years of the complex interactions between psyche, soma, and culture. Consequently, the field is increasingly hospitable to considering the psychic risks inherent in misgendering. However, patients' body dysphoria is often left unaddressed even by analysts who seek to work within their analysands' gendered experience. Through a detailed, in-depth account of work with a five-year-old trans girl (female-identified, male-bodied), the developmental implications of the natal body's not becoming sufficiently mentalised in the course of treatment are tracked and explored. Attention to unconscious fantasy and its transformations shows the importance of helping transgender patients whose bodies are a source of suffering to be able to psychically represent their pain as a critical step in the process of a psychologically healthy transition.

Lemma, A. (2013). The body one has and the body one is: understanding the transsexual's need to be seen. *International Journal of Psychoanalysis*, 94, 277-292.

The transsexual individual confronts the analyst with a disturbing otherness. How this otherness is understood, that is, how the analyst 'looks' at the patient through her distinctive theoretical lens impacts, in turn, on the patient's experience and what transpires between them. In this paper, the author outlines a developmental model rooted in attachment and object relations theory to provide one alternative way of 'looking' at some of these patients' experiences in the clinical setting. It is suggested that in some cases of transsexuality the primary object(s) did not mirror and contain an early experience of incongruity between the given body and the subjective experience of gender.

Hakeem, A. (2012). Psychotherapy for gender identity disorders. *Advances in Psychiatric Treatment*, 18, 17-24.

This article describes a special adaptation of group psychotherapy as a psychological treatment for people with a variety of gender identity disorders. It can be used as an alternative to or concurrently with hormonal and/or surgical interventions for transgender people. It is also suitable for individuals whose gender identity disorder remains after physical interventions. The article draws from a UK specialist pilot for such a treatment service and describes the explicit aims of the psychotherapy, the specialist adaptation of therapeutic technique required and observed thematic features relevant to working in this specific field.

Lemma, A. (2012) Research off the couch: re-visiting the transsexual conundrum. *Psychoanalytic Psychotherapy*, 26 (4), 263-281.

This paper outlines the findings of a qualitative study involving interviews with eight transsexual individuals who had volunteered to take part in a television (TV) documentary about transsexuality. The participants were interviewed before taking part in the documentary and after its screening on national TV. The author proposes that for either biological and/or psychological reasons, some transsexual individuals experience early on a profound and disturbing incongruence at the level of the bodily self. In turn, this experience of incongruity is not contingently mirrored by primary

attachment figures and remains unmentalised, thus disrupting self-coherence. In an attempt to restore self-coherence, the individual searches for the 'right' body that is anticipated to relieve the felt incongruity. The way this modified body relieves the incongruity is through the certainty it imparts that the image in the 'mirror' will match the subjective experience of the body.

Teich, N. M. (2012). *Transgender 101: A Simple Guide to a Complex Issue*. New York: Columbia University Press.

Written by a social worker, popular educator, and member of the transgender community, this well-rounded resource combines an accessible portrait of transgenderism with a rich history of transgender life and its unique experiences of discrimination. Chapters introduce transgenderism and its psychological, physical and social processes. They describe the 'coming out' process and its effect on family and friends, the relationship between sexual orientation and gender, and the differences between transsexualism and lesser-known types of transgenderism.

Ehrensaft, D. (2011). *Gender Born, Gender Made*. New York: The Experiment.

Drawing on the case histories of several children, each 'gender creative' in his or her own way, Ehrensaft offers concrete strategies for understanding and supporting children who experience confusion about their gender identities. She also discusses the latest therapeutic advancements available to gender-variant children. Traditionally, psychologists have sought to 'cure' gender variance by pressuring children to conform to typical gender behaviour. From her perspective as both clinician and parent of a gender creative child, Ehrensaft advocates a new approach, encouraging caregivers to support gender-variant children as they explore their gender identities.

Goldner, V. (2011). *Trans: gender in free fall*. *Psychoanalytic Dialogues*, 21 (2), 159-171.

Transgender subjectivities are paradoxical in that they both undermine the gender binary and ratify it. The contradictions inherent in trans require that we consider trans as more of a process than a thing in itself, a gerund, rather than a noun or adjective, a continuous work in progress, rather than a static fact of the self. But despite cultural upheavals and increasing tolerance, we still want our gender straight up. While we approve and often applaud efforts at excellence in masculinity and femininity (including surgery) that are sex and gender concordant, we are still deeply disturbed by any efforts toward confounding that gender or crossing over to the "other" one.

Gherovici, P. (2010). *Please Select Your Gender: From the Invention of Hysteria to the Democratizing of Transgenderism*. London: Routledge.

Utilising rich clinical vignettes and elements of Lacanian theory, the author demonstrates how the transgender discourse has both reoriented psychoanalytic practice and reframed debates about gender in society at large. She traverses historical, theoretical, and clinical grounds to explore what has been termed the 'democratizing of gender' – for what could be more democratic than the choice of one's own gender, now able to be changed on demand? Arguing for the depathologisation of transgenderism, the book aims to revise current notions of human sexuality and gender in general.

Ambrosio, G. (2009). *Transvestism, Transsexualism in the Psychoanalytic Dimension*. London: Karnac.

This book on transsexualism and transvestism shows exactly how psychoanalysis can reflect, discuss, dialogue and formulate useful insights on one of the most challenging situations that nowadays confront all members of the mental health community. Giovanna Ambrosio assembled this group of distinguished analytic thinkers, all of them

with deep experience in the field of human sexuality and asked them to contribute both to the attempt of understanding these relatively new forms of expression of human sexuality and what kind of interrelations psychoanalysis can offer.

Di Ceglie, D. (2009). Engaging young people with atypical gender identity development in therapy. *Journal of Child Psychotherapy*, 35, 3-12.

This article describes the misery and frustration of young people for whom the external reality of the body is at odds with their gender identity. As hormonal and surgical treatments to alter the sexual body increase in sophistication, clinicians may be under pressure to provide this treatment to the under-18s. This pressure is especially powerful in the absence of evidence for the effectiveness of psychological treatment in reconciling cross-gendered youngsters to their bodies. Current practice is outlined, and the legal context is described briefly. The clinician's dilemmas are explored with particular reference to conflicting views of adolescent development, our limited understanding of the aetiology of gender dysphoria, the lack of empirical data on the impact of early physical intervention and changing cultural attitudes to transsexuality.

Dallas Denny, M. A. (2008). Changing models of transsexualism. *Journal of Gay and Lesbian Psychotherapy*, 8 (1-2), 25-40,

The second half of the twentieth century saw the development within the psychological and medical communities of a transsexual model and procedures for identifying, describing, and treating individuals who sought sex reassignment. This model viewed transsexualism as a form of mental illness characterised by a pervasive and ongoing wish to be a member of the other sex. The model prescribes a set of medical and social procedures called sex reassignment, whereby an individual 'changed sex.' The 1990s saw the rise of a new model which explained transsexualism as a natural form of human variability. This model, which continues to gain prominence, views sex reassignment as but one of a variety of acceptable life choices for transsexual individuals and recognises the need and right of non-transsexual transgendered people to make similar choices. This paper discusses both models and touches on the social and treatment implications of the rise of the transgender model.

Hansbury, G. (2005). Mourning the loss of the idealised self: a transsexual passage. *Psychoanalytic Social Work*, 12, 19-35.

In this paper, the author uses a Kleinian framework to depathologise the coping strategies employed by transsexual patients and to illustrate the importance of mourning in the development of a positive transsexual identity. A clinician who is able to sit comfortably with contradiction may facilitate the transsexual patient's mourning process - saying goodbye to the persecutory object of the past and letting go of the idealised image of the future.

Hansbury, G. (2005). The middle men: an introduction to the transmasculine identities. *Studies in Gender and Sexuality*, 6, 241-264.

This essay provides an inside look at the little-examined identities within the almost invisible world of the transmasculine (female-to-male [FTM] transsexual and transgender) community. Positing that the transmasculine community does not subscribe to just one mode of identification, the author illuminates the varied experiences of transmasculine individuals by organising the plethora of defining FTM labels into three broad categories: Woodworkers, Transmen, and Gender Queers. Within the admittedly limiting confines of this taxonomy, it becomes possible to gain a better understanding of the people behind the labels and achieve insight into their individual therapeutic needs.

Chiland, C. (2000). The psychoanalyst and the transsexual patient. *International Journal of Psychoanalysis*, 81, 21-35.

Drawing on her personal work with transsexual patients at a specialised centre, as well as with children suffering from gender identity disorders and their parents, the author is able to specify the factors, which make the psychoanalysis and psychotherapy of these subjects so difficult. In particular, they are totally focused on the body and on their intention of securing sex reassignment by hormonal and surgical treatments, so that they rule out the involvement of any psychic element. Some clinical vignettes illustrate the psychic functioning of these patients, and the transference and countertransference problems are discussed.

Blumenthal, E. (1998). We all need our tails to lean on: an analysis of a latency-age girl. *Psychoanalytic Study of the Child*, 53, 181-198.

This essay reviews current theories of gender identity disorders, with particular reference to the aetiology of the problem in girls. The analysis of a latency-age girl with a serious cross-gender identity disorder is presented in detail. The case material illustrates the complex relationships among this girl's fantasies about her adoption, her ambivalent attachments to her adoptive parents and brother, her pet rats, and about herself as a boy. In the analytic work, the real and transference connections to the analyst were explored, which enabled the patient to re-enact the traumatic derailments in her early attachments, to begin to mourn her losses, and to move to a more feminine identification.

Di Ceglie, D. (1998). *A Stranger in My Own Body: Atypical Gender Identity and Mental Health*. London: Karnac.

This book brings together the contemporary thinking of a number of international clinicians, researchers and professionals from different disciplines. It shows the various perspectives that can be adopted on atypical gender identity development, and its relevance to mental health in children and adolescents. It is aimed at a multidisciplinary professional readership, as well as the interested lay reader.

Quinodoz, D. (1998). A FE/Male transsexual patient in psychoanalysis. *International Journal of Psychoanalysis*, 79, 95-111.

The author describes the analysis of a transsexual who had undergone a vaginoplasty as a young man and had since been living as a woman. The complexity of the psychic reality is epitomised by the analyst's difficulty in deciding whether to use masculine or feminine grammatical forms to refer to this patient. The author tells how she assumed the fantasy role of parents expecting a baby whose sex they did not yet know. She discusses at length her hesitation about accepting a transsexual patient into analysis and reports how she overcame her misgivings after analysing her own countertransference and consulting the literature.

6. Psychosexuality: Enigmas and Excesses

In recent years, new models of psychosexuality have been proposed. Laplanche postulates that an infant's unconscious is formed when it receives and represses 'enigmatic messages' from the mother. These enigmatic messages are partially sexual and are unconsciously transmitted to the infant through the mother's maternal gestures of care (e.g. breastfeeding, touching). As the infant cannot decipher the partially seductive, sexual elements within these messages, an enigmatic dimension of sexuality is elaborated within the infant's psyche and body. Building on the idea of the enigmatic, Ruth Stein outlines two further dimensions of psychosexuality: 'the poignant' and 'the excessive'. Sexuality becomes poignant when one's desire resonates with the desire of someone else. Sexuality becomes excessive when it feels overwhelming, when boundaries are transgressed or when there is too much excitement. Drawing on Laplanche and Stein, as well as on their joint theoretical model of self-development and affect regulation through attachment relationships, Target and Fonagy posit that caregivers may not positively affirm a child's active sexual behaviours, such as masturbation, nor adequately mirror the emotions associated with infantile sexual arousal. This parental non-mirroring of a child's sexual behaviours and feelings may mean that the child never fully symbolises or owns its sexuality. The child may experience sexuality as something inherently unstable or uncontained, leading the child to internalise an excited but alienated sense of its own sexuality.

Target, M. (2015). A developmental model of sexual excitement, desire and alienation. In: A. Lemma and P. E. Lynch (eds.), *Sexualities: Contemporary Analytic Perspectives*. London: Routledge, pp. 43-62.

This chapter focuses on the difficulty of working with psychosexuality as a central human experience within current object relational psychoanalytic theories. The first step towards understanding the self as a psychological agent is the 'discovery' of affects through primary object relationships. Affects are not inherently known to the infant. Mothers find it particularly difficult to mirror baby's sexual excitement. According to Jean Laplanche, psychosexuality evolves in infancy out of non-sexual, instinctual activity. When a non-sexual instinct, having created excitation, loses its natural object, the ego is turned in upon itself and left in a state of arousal. The chapter describes clinical cases to illustrate that the healthy path of erotic development, based in muted early mirroring of sexual feelings which leaves a continuing search for recognition and physical engagement of a partner, may go awry. In such cases, early interactions may leave the individual alienated and excluded from his or her sexual self and from the enactment of desire.

Fonagy, P. (2009). Psychosexuality and psychoanalysis: an overview. In: P. Fonagy, R. Krause and M. Leuzinger-Bohleber (eds.), *Identity, Gender and Sexuality: 150 Years After Freud*. London: Karnac, pp. 1-19.

Fonagy describes some of the different theories, historical issues, problems, and the possible alternate approaches to the topic of psychosexuality. He then considers the developmental views of sexuality, notably those of Laplanche, who believes that the driven quality of psychosexuality is not a property of the sexual drive but comes from the need of the infant to pursue a lost object that has become imaginary (phantasmatic). This phenomenon originates in the mother-infant interaction because the mother, as part of her maternal behaviour, is unconsciously seductive with her infant. Their interaction becomes sexualised for the infant. Then the mother withdraws somewhat in order to protect the infant's selfhood, interrupting the perfectly mirroring state of total love. The infant is left yearning for the lost object, which then becomes imaginary. Hence erotic experiences later in life are imbued with mystery and experienced as "enigma."

Fonagy, P. (2008). A genuinely developmental theory of sexual excitement and its implications for psychoanalytic technique. *Journal of the American Psychoanalytic Association*, 56 (1), 11-36.

A new model of human sexual experience is proposed, rooted in an integration of French psychoanalytic ideas with recent developmental observational research, that once again places sexuality at the centre of psychoanalytic clinical inquiry. Because emotion regulation arises out of the mirroring of affect by a primary caregiver and sexual feelings are unique in that they are systematically ignored and left unmirrored by caregivers, sexual feelings remain fundamentally dysregulated in all of us. Adult sexual experience serves as a way of coming to organise the psychosexual. The model accounts for some aspects of the phenomenology of sexual arousal and suggests ways of understanding pathological distortions of sexual behaviour. The nature of the psychosexual is explored in the analytic treatment of an adolescent boy.

Stein, R. (2008). The otherness of sexuality: excess. *Journal of American Psychoanalytic Association*, 56, 43-71.

The present essay aims at developing an experience-near account of sexuality by rehabilitating the idea of excess and its place in sexual experience. It is suggested that various types of excess, such as excess of excitation (Freud), the excess of the other (Laplanche), excess beyond symbolisation and the excess of the forbidden object of desire (Leviticus; Lacan) work synergistically to constitute the compelling power of sexuality. In addition to these notions, further notions of excess touch on its transformative potential. Such notions address excess that shatters psychic structures and that is actively sought so as to enable new ones to evolve (Bersani). Work is quoted that regards excess as a way of dealing with our lonely, discontinuous being by using the "excessive" cosmic energy circulating through us to achieve continuity against death (Bataille). Two contemporary analytic thinkers are engaged who deal with the object-relational and intersubjective vicissitudes of excess.

Target, M. (2007). Is our sexuality our own? A developmental model of sexuality based on early affect mirroring. *British Journal of Psychotherapy*, 23 (4), 517-530.

Psychoanalytic theory, with its move away from drive theory to object-relations, lacks a compatible model of the power of psychosexuality in adult life (including in therapy). It is proposed that in infancy drive tension, frustration and urgency may be erotised by the caregiver; while actual sexual excitement may remain unmirrored and uncontained. This produces a psychosexual core which is unstable, elusive and never felt to be really owned. In sexual acts we can project and identify with our own sexuality, felt to belong to the other, yet allowing more successful re-internalisation and gradual integration. The relief at being able to relate to troubling aspects of the self, via the other, creates a deep attachment bond, although sexual excitement may fade as self-integration becomes more secure. The technical challenges of working on sexuality in long-term, relationship-focused psychotherapy with an implicit parental model are briefly considered.

Dimen, M. (2003) *Sexuality, Intimacy, Power*. Hillsdale, NJ: Analytic Press.

Drawing on contemporary relational theory, feminism, and postmodernism, Dimen takes a sustained, sometimes irreverent, look at assumptions about psychosexuality. For Dimen, the shift from dualism to multiplicity that has reshaped a range of disciplines can also be brought to bear on our thinking about sexuality. She urges us to return to the open-mindedness hiding between the lines and buried in the footnotes of Freud's writings, and to replace the determinism into which his thought has hardened with more fluid notions of contingency, paradox, and thirdness.

Stein, R. (1998). The poignant, the excessive and the enigmatic in sexuality. *International Journal of Psychoanalysis*, 79, 254-268.

The author offers a contribution to redressing a certain lack of theorisation concerning the specific power and meaning of sexuality. This begins with George Klein's suggestion that it is the quality of a specific, poignant sensuality that characterises sexuality. Bataille's ideas about the violent and excessive aspects of eroticism provide some answers to the question of what makes for this special poignant quality. Bataille captures a profound link between the sacred and the erotic with regard to their both being linked with taboos and their transgression as opposed to habitual 'work mentality' and established order. The excessive dimension highlighted by Bataille is complemented in the work of Laplanche about sexuality as opposed to 'functional', self-preservative ego needs, and the excess of the 'enigmatic message' transmitted by the mother while satisfying the infant's ego needs that establishes the infant's unconscious and sexuality. Losing the nutritive object, a process of fantasising sets in; the influx of strong sensations that cannot yet be integrated spills over into libidinal excitement. The gap between the other's excess and the child's limited resources can then be sexualised. A picture emerges of non-procreative sexuality as foreign to ordinary experience and as transcending one's limits.

Laplanche, J. (1995). Seduction, persecution and revelation. *International Journal of Psychoanalysis*, 78, 653-666.

The author argues that seduction is not primarily a fantasy but a 'real' situation, which lies at the heart of the other two allegedly primal major scenarios: castration and the primal scene. This statement is not to be confused with an event-based realism, as, for this to be achieved, a third category of reality must be postulated. This reality, constantly misconstrued by authors as corresponding to material and psychological reality, is that of the message conveyed and, more specifically in the case of analysis, the enigmatic message. To establish his position the author re-examines Freud's presentation of the Schreber case. The sexual other and his intrusion are the essential points of Freud's analysis in the first part of his study. In the second part, however, desexualisation (in the name of love) and a return to the ego, as the centre of the whole process, both being evident in the 'primary' sentence from which Freud proposes to derive everything: 'I (a man) love him (a man)'.

7. Asexuality, Pansexuality, Sexual Fluidity, Intersexuality, Gender Queer and Non-Binary Genders

Very little psychoanalytic literature exists on clinical work with individuals who identify as asexual, pansexual, sexually fluid, non-binary and/or who are born intersex. The books and papers compiled for this section aim to provide an overview of contemporary, mostly non-psychoanalytic, thinking on these identities.

Mordanini, J., Blaszczyński, A. and Dar-Nimrod, I. (2017). Who adopts queer and pansexual identities? *Journal of Sex Research*, 54 (7), 911-922

Some non-heterosexual individuals are eschewing lesbian/gay and bisexual identities for queer and pansexual identities. The present study aimed to examine the sexual and demographic characteristics of non-heterosexual individuals who adopt these labels. A convenience sample of 2,220 non-heterosexual (1,459 lesbian/gay, 413 bisexual, 168 queer, 146 pansexual, and 34 other "write-in") individuals were recruited for a cross-sectional online survey. In support of our hypotheses, those adopting pansexual identities were younger than those adopting lesbian, gay, and bisexual identities, and those adopting queer and pansexual identities were more likely to be non-cisgender than cisgender, and more likely to be cisgender women than men. This study found that rather than a general movement toward non-traditional sexual identities, queer and pansexual identities appear most appealing to non-heterosexual women and non-cisgender individuals.

Richards, C., Bouman, W. P. and Barker, M-J (2017). *Gender Queer and Non-Binary Genders*. London: Palgrave.

This book addresses the emerging field of genderqueer or non-binary genders - that is, individuals who do not identify as male or female. It considers theoretical, research, practice and activist perspectives, and outlines a basis for good practice when working with non-binary individuals. The first section provides an overview of historical, legal and academic aspects of this phenomenon. The second section explores how psychotherapeutic, psychological and psychiatric theory and practice are adapting to a non-binary model of gender, and the third section considers the body related aspects, from endocrinology to surgery.

Savin-Williams, R. C. (2017). *Mostly Straight: Sexual Fluidity Among Men*. London: Harvard University Press.

Most of us assume that sexuality is fixed: either you're straight, gay, or bisexual. Yet an increasing number of young men today say that those categories are too rigid. They are, they insist, 'mostly straight' but they feel a slight but enduring romantic or sexual desire for men. Based on cutting-edge research, Savin-Williams explores the personal stories of forty young men to help us understand the biological and psychological factors that led them to become mostly straight.

Davis, G. (2015). *Contesting Intersex: The Dubious Diagnosis*. New York: NYU Press.

The author draws on interviews with intersex people, their parents and medical experts to explore the oft-questioned views on intersex in medical and activist communities, as well as the evolution of thought in regard to intersex visibility and transparency. She finds that framing intersex as an abnormality is harmful and can alter the course of one's life. In fact, controversy over this framing continues, as intersex has been renamed a 'disorder of sex development' throughout medicine. Within the intersex community, though, disorder of sex development terminology is hotly disputed; some prefer not to use a term which pathologises their bodies, while others prefer to think of intersex in scientific terms.

Decker, J. S. (2015). *The Invisible Sexuality: An Introduction to Asexuality*. New York: Skyhorse Publishing.

This book covers the basics of what asexuality is and isn't, explores the most common issues asexual people may be dealing with, presents some pointers for newly asexual-identified people and the people who love them, and includes some resources to find out more.

Callis, A. (2014). Bisexual, pansexual, queer: non-binary identities and sexual borderlands. *Sexualities*, 17 (1-2), 63-80

his article focuses on sexualities in the USA that exist within the border between heterosexuality and homosexuality. I first examine the usefulness of applying borderland theory to non-gay/non-straight sexualities such as queer and bisexual. I then give an ethnographic analysis of sexual self-identities on the borders, shedding light on how participants envisioned labels such as 'pansexual,' and 'heteroflexible.' Finally, I explore the ways that the sexual borderlands became tangible in Lexington, Kentucky at certain events and locations. Throughout, I highlight the ways that the sexual borderland touches on all sexualities, as individuals knowingly cross, inhabit, or bolster sexual identity borders.

Savin-Williams, R. C. and Vrangalova, Z. (2013). Mostly heterosexual as a distinct sexual orientation group: a systematic review of the empirical evidence. *Developmental Review*, 33, 58-88.

The researchers reviewed empirical evidence regarding whether 'mostly heterosexual' exists as a sexual orientation distinct from two adjacent groups on a sexual continuum - exclusively heterosexual and substantially bisexual. They found sufficient data in four areas to support an affirmative answer. Findings suggested that self-identification as mostly heterosexual or an acknowledgment of slight same-sex sexuality increases during the teenage years, peaks around the early twenties (somewhat sooner for men than women) and remains relatively high during young adulthood.

Blank, H. (2012). *Straight: The Surprisingly Short History of Heterosexuality*. Boston: Beacon Press.

Like the typewriter and the light bulb, 'the heterosexual' was invented in the 1860s and swiftly transformed Western culture. The idea of 'the heterosexual' was unprecedented. Yet, within half a century, 'heterosexual' had become a byword for 'normal,' enshrined in law, medicine, psychiatry and the media as a new gold standard for human experience. *Straight* tells the eye-opening story of a complex and often contradictory man-made creation that turns out to be anything but straight or narrow.

Bogaert, A. F. (2012). *Understanding Asexuality*. Plymouth: Rowman and Littlefield Publishers.

Asexuality can be defined as an enduring lack of sexual attraction. Thus, asexual individuals do not find others sexually appealing. Some consider 'asexuality' as a fourth category of sexual orientation, distinct from heterosexuality, homosexuality or bisexuality. However, there is also recent evidence that the label 'asexual' may be used in a broader way than merely as 'a lack of sexual attraction.' People who say they have sexual attraction to others but indicate little or no desire for sexual activity are also self-identifying as asexual. More and more, those who identify as asexual are 'coming out,' joining up, and forging a common identity. The time is right for a better understanding of this sexual orientation, written by an expert in the field who has

conducted studies on asexuality and who has provided important contributions to understanding asexuality.

Diamond, L. M. (2008). *Sexual Fluidity: Understanding Women's Love and Desire*. London: Harvard University Press.

The author argues that for some women, love and desire are not rigidly heterosexual or homosexual but fluid, changing as women move through the stages of life, various social groups, and, most important, different love relationships. This perspective clashes with traditional views of sexual orientation as a stable and fixed trait. But that view is based on research conducted almost entirely on men. Diamond is the first to study a large group of women over time. She has tracked 100 women for more than ten years as they have emerged from adolescence into adulthood.

Karkazis, K. (2008). *Fixing Sex: Intersex, Medical Authority and Lived Experience*. Durham, NC: Duke University Press.

Drawing extensively on interviews with adults with intersex conditions, parents, and physicians, Karkazis moves beyond the heated rhetoric to reveal the complex reality of how intersexuality is understood, treated and experienced today. As she unravels the historical, technological, social and political forces that have culminated in debates surrounding intersexuality, Karkazis exposes the contentious disagreements among theorists, physicians, intersex adults, activists, and parents - and all that those debates imply about gender and the changing landscape of intersex management.

Preves, S. E. (2003). *Intersex and Identity: The Contested Self*. New Brunswick, New Jersey and London: Rutgers University Press.

Drawing upon life history interviews with adults who were treated for intersexuality as children, the author explores how such individuals experience and cope with being labelled sexual deviants in a society that demands sexual conformity. Preves frames their stories within a sociological discussion of gender, the history of intersex medicalisation, the recent political mobilisation of intersexed adults, and the implications of their activism on identity negotiation, medical practice, and cultural norms. Preves argues that medical intervention into intersexuality often creates, rather than mitigates, the stigma these people suffer.

Fausto-Sterling, A. (2000). *Sexing the Body: Gender Politics and the Construction of Sexuality*. New York: Basic Books

Drawing on astonishing real-life cases and a probing analysis of centuries of scientific research, Fausto-Sterling demonstrates how scientists have historically politicised the body. In lively and impassioned prose, she breaks down three key dualisms - sex/gender, nature/nurture and real/constructed - and asserts that individuals born as mixtures of male and female exist as one of five natural human variants and, as such, should not be forced to compromise their differences to fit a flawed societal definition of normality.

8. Sexuality Studies

In addition to psychoanalytic models of sexuality and gender, psychotherapists are embracing insights from sexuality studies, an interdisciplinary field of enquiry that crosses the arts, critical humanities, politics, biological science, psychology, psychoanalysis and social sciences. The books in this section offer wide-ranging general introductions on the expanding field of sexuality studies.

Weeks, J. (2016). *What is Sexual History?* Cambridge: Polity.

This book sets out clearly and concisely how sexual history has developed, and its implications for our understanding of the ways we live today. The emergence of a new wave of feminism and lesbian and gay activism in the 1970s transformed the subject, heavily influenced by new trends in social and cultural history, radical sociological insights and the impact of Michel Foucault's work. The result was an increasing emphasis on the historical shaping of sexuality and on the existence of many different sexual meanings and cultures on a global scale.

Johnson, K. (2015). *Sexuality: A Psychosocial Manifesto*. Cambridge: Polity.

The author argues for a psychosocial approach that rethinks the relationship between psychic and social realms in the field of sexuality, without reducing it to either. Weaving through an expanse of theoretical and empirical examples drawn from sociology, psychology, queer and cultural studies, she produces an innovative, transdisciplinary perspective on sexual identities, subjectivities and politics that makes an original contribution to key debates ranging from identity politics and gay marriage, to mental health 'risks' and queer youth suicide. The author discusses ideas from developmental psychology, social constructionist sociology, social and critical psychology, psychoanalysis and queer theory.

Bristow, J. (2011). *Sexuality*. Second Edition. Abingdon: Routledge.

The author introduces readers to the fundamental critical debates surrounding the topic of sexuality. This fully updated second edition includes: (1) a historical account of sexuality from the Victorians to the present; (2) discussions of the most influential theorists including Freud, Lacan, Bataille, Baudrillard, Cixous, Deleuze, Irigaray and Kristeva; and (3) a new and extended discussion of queer and transgender theory, race, ethnicity and desire

Weeks, J. (2010). *Sexuality* (3rd ed). London: Routledge.

For over twenty years, *Sexuality* has provided a cutting-edge introduction to debates about sexualities, gender and intimate life. Previous editions included pioneering discussions of the historical shaping of sexuality, identity politics, the rise of fundamentalism, the social impact of AIDS, the influence of the new genetics, 'global sex', queer theory, 'sex wars', the debates about values, new patterns of intimacy and much more. In this new edition, Jeffrey Weeks offers a thorough update of these debates and introduces new concepts and issues. In particular, new forms of Lesbian, Gay, Bisexual, Transgender and Queer politics, and the high impact of the debates about same-sex marriage are explored.

Beasley, C. (2005). *Gender and Sexuality. Critical Theories, Critical Thinkers*. London: Sage.

Beasley's clear and concise introduction combines a wide-ranging survey of the major theorists and key concepts in an ever-growing and often passionately debated field. The book contextualises a wide range of feminist perspectives including modernist, liberal, postmodern, queer and gender difference feminism; and in the realm of

sexuality studies covers modernist liberationism, social constructionism, transgender theorising and queer theory. In men's studies, Beasley examines areas of debate ranging from gender and masculinity to questions of race, ethnicity, imperialism and gay masculinities.

Nye, R. A (1999). *Sexuality: A Reader*. Oxford: Oxford University Press.

This reader collects texts ranging from antiquity to the present. Part I forms a chronological narrative of the development of thinking about sexuality from the ancient Greeks to the present. Part II discusses nineteenth-century investigation of phenomena such as hysteria, prostitution, and fetishism. Part III brings together contemporary conceptions of the sexual body, and Part IV addresses the issue of whether the sexual revolution of the late sixties and seventies has brought about a permanent change in the sexual landscape of western civilisation.

Horrocks, R. (1997). *An Introduction to the Study of Sexuality*. London: Macmillan.

This book examines some of the ways in which sexuality has been described and interpreted in the West. The main models examined are: the Christian view of sex as sinful; the psychoanalytical model, including such notions as the sexual drive, infantile sexuality, the Oedipus Complex, and the distinction between male and female sexuality; the 'social construction' model, which proposes that 'sexuality' is a modern concept; and the links between sexuality and spirituality. There is also some consideration of feminist and gay approaches to sexuality, and the complicated subject of male sexuality.

Mondimore, M. F. (1996). *A Natural History of Homosexuality*. Baltimore: John Hopkins University Press.

This book explores the complex landscape of sexual orientation, explains how homosexuality has been understood and defined from ancient times to the present, and synthesises the latest discoveries in biology, history, psychology, and anthropology. Mondimore reviews current biological research into the nature of sexual orientation, examines recent scientific findings on the role of heredity and hormones, and discusses our current understanding of bisexuality.

9. Social Constructionism, Queer Theory, Gender Studies

Many contemporary psychoanalytic psychotherapists have been drawn to social constructionism and queer theory. Social constructionists argue that, while sexuality may have a biological basis, its meaning is shaped within the context of culture and varies over time. Historical and cross-cultural comparisons often confirm that same-sex sexual behaviours are perceived differently through the ages and across civilisations. Emerging out of social constructionism and radical LGB political activism, queer theory is notoriously difficult to define but some of its core theories question binaries like gay/straight or male/female. This section includes introductory overviews of social constructionism and queer theory as well as landmark examples of psychoanalytic thinking using concepts from these two disciplines.

Giffney, N. and O'Rourke, M. (2018). *The Ashgate Research Companion to Queer Theory*. London: Routledge.

This interdisciplinary volume of thirty original essays engages with four key concerns of queer theoretical work - identity, discourse, normativity and relationality. These contributors are especially attendant to the many theoretical discourses intersecting with queer theory, including feminist theory, LGBT studies, postcolonial theory, psychoanalysis, disability studies, Marxism, poststructuralism, critical race studies and posthumanism, to name a few.

Hines, S. (2018). *Is Gender Fluid? A Primer for the 21st Century*. London: Thames and Hudson.

When we are born, we are each assigned a gender based on our physical anatomy. But why is it that some people experience such dissonance between their biological sex and their inner identity? Is gender something we are or something we do? This intelligent, stimulating volume assesses the connections between gender, psychology, culture and sexuality, and reveals how individual and social attitudes have evolved over the centuries.

Giffney, N. and Watson, E. (2017). *Clinical Encounters in Sexuality: Psychoanalytic Practice and Queer Theory*. Brooklyn, NY: Punctum Books.

This volume makes an intervention into the fields of clinical psychoanalysis and sexuality studies, in an effort to think about a range of issues relating to sexuality from a clinical psychoanalytic perspective. The editors have chosen queer theory as an interlocutor for the clinical contributors, because it is at the forefront of theoretical considerations of sexuality, as well as being both reliant upon and suspicious of psychoanalysis as a clinical practice and discourse. The book stages, for the first time, a sustained clinical psychoanalytic engagement with queer theory.

Barker, M-J. (2016). *Queer: A Graphic Story*. London: Icon Books.

Activist-academic Meg-John Barker and cartoonist Jules Scheele illuminate the histories of queer thought and LGBTQ+ action in this ground-breaking non-fiction graphic novel.

Marinucci, M. (2016). *Feminism is Queer: The Intimate Connection Between Queer and Feminist Theory* (2nd ed). London: Zed Books.

This is an introduction to the intimately related disciplines of gender and queer theory. The author develops the original position of queer feminism, which presents queer theory as continuous with feminist theory. Whilst there have been significant conceptual tensions between second wave feminism and traditional lesbian and gay

studies, queer theory offers a paradigm for understanding gender, sex and sexuality that avoids the conflict in order to develop solidarity among those interested in feminist theory and those interested in lesbian and gay rights.

Wilchins, R. (2004). *Queer Theory, Gender Theory: An Instant Primer*. Magnus Books: New York.

In this introduction to the work of postmodern sex and gender theorists, gender activist Riki Wilchins explains the key ideas that have shaped contemporary sex and gender studies. Using straightforward prose and concrete examples from LGBT politics - as well as her own life - Wilchins makes thinkers like Derrida, Foucault, and Judith Butler easily accessible to students, activists, and others who are interested in issues of gender and sexuality.

Sullivan, N. (2003). *A Critical Introduction to Queer Theory*. New York: New York University Press.

This new take on queer theory explores the ways in which sexuality, subjectivity and sociality have been discursively produced in various historical and cultural contexts. The book begins by putting gay and lesbian sexuality and politics in historical context and demonstrates how, and why, queer theory emerged in the West in the late twentieth century.

Grossman, G. (2002). *Queering Psychoanalysis*. *Annual of Psychoanalysis*, 30, 287-299.

Grossman explores how a postmodern, social constructionist approach to understanding identity, queer theory challenges the notion of identity as essential and fixed, particularly in regard to gender and sexuality.

Benjamin, J. (1998). *The Shadow of the Other: Intersubjectivity and Gender in Psychoanalysis*. New York: Routledge.

This volume is a discussion of how the individual has two sorts of relationships with an 'other'. The first regards the other as an entirely different being from oneself, but one which is still recognisable. The second understands and recognises this other by its function as a repository of characteristics cast from oneself. In recognising how this dual relationship is reconciled within the self, and its implications in male/female relations, the author continues her exploration of intersubjectivity and gender, taking up questions of contemporary debates in feminist theory and psychoanalysis.

Queen, C. and Schimel, L. (1997). *Pomosexuals: Challenging Assumptions about Gender and Sexuality*. San Francisco: Cleis Press.

This volume contains a series of essays challenging binary notions of gender and essentialist notions of sexual orientation. PoMo: short for PostModern; in the arts, a movement following after and in direct reaction to Modernism; culturally, an outlook that acknowledges diverse and complex points of view. PoMoSexual: the queer erotic reality beyond the boundaries of gender, separatism, and essentialist notions of sexual orientation.

Jagose, A. (1996). *Queer Theory: An Introduction*. New York: New York University Press.

Jagose provides a clear and concise explanation of queer theory, tracing it as part of an intriguing history of same-sex love over the last century, from mid-century homophile movements to gay liberation, the women's movement and lesbian feminism, to the re-appropriation of the term 'queer'. Blending insights from prominent queer theorists, Jagose argues that queer theory's challenge is to create new ways of thinking, not only

about fixed sexual identities such as heterosexual and homosexual, but even 'man' and 'woman'.

Chodorow, N. (1994). *Femininities, Masculinities, Sexualities: Freud and Beyond*. Lexington: University Press of Kentucky.

Chodorow takes her fellow psychoanalysts to task for their monolithic and pathologising accounts of deviant gender and sexuality. Drawing from her own clinical experience, the work of Freud, and a close reading of psychoanalytic texts, Chodorow argues that psychoanalysis has yet to disentangle male dominance from heterosexuality. She refers to homosexualities and heterosexualities; and discusses heterosexuality as a compromise formation.

Fuss, D. (1991). *Inside/Out: Lesbian Theories, Gay Theories*. New York & London: Routledge.

The essays in *Inside/Out* employ a variety of approaches (psychoanalysis, deconstruction, semiotics, and discourse theory) to investigate representations of sex and sexual difference in literature, film, video, music, and photography. Engaging the figures of divas, dykes, vampires and queens, the contributors address issues such as AIDS, pornography, pedagogy, authorship, and activism. *Inside/Out* shifts the focus from sex to sexual orientation, provoking a reconsideration of the concepts of the sexual and the political.

Harris, A. (1991). Gender as contradiction. *Psychoanalytic Dialogues*, 1, 197-220.

Harris proposes a model of gender as a paradoxical and multidimensional structure. An extended critical reading of Freud's essay on a case of homosexuality in a woman undermines the notion of gender identity and sexual object choice as monolithic categories of experience. The Freud case is considered for its radical model of sexuality and gender.

Butler, J. (1990). *Gender Trouble*. New York, NY: Routledge

Arguing that traditional feminism is wrong to look to a natural, 'essential' notion of the female, or indeed of sex or gender, Butler starts by questioning the category 'woman' and continues in this vein with examinations of 'the masculine' and 'the feminine'. Best known however, but also most often misinterpreted, is Butler's concept of gender as a reiterated social *performance* rather than the expression of a prior reality.

Sedgwick, E. (1990). *Epistemology of the Closet*. Berkeley: University of California.

Working from classic texts of European and American writers, including Melville, James, Nietzsche, Proust, and Wilde, Sedgwick analyses a turn-of-the-century historical moment in which sexual orientation became as important a demarcation of personhood as gender had been for centuries.

Rubin, G. (1984). Thinking sex: notes for a radical theory of the politics of sexuality. In: C. S. Vance (ed.), *Pleasure and Danger: Exploring Female Sexuality*. Boston: Routledge and Kegan Paul, pp. 267-319.

Rubin articulates how sex is used as a political agent as a means of implementing repression and creating dominance in today's western society. She dissects modern culture's stance on sexuality, exposing the hypocrisy and subjugation that victimises anyone of a different orientation or sexual inclination. In her work, she focuses on homosexuals, paedophiles, children, women, sadism, transvestitism, and voyeurism.

Foucault, M. (1976). *The History of Sexuality 1: The Will to Knowledge*. London: Penguin Books.

Foucault is the most prominent thinker associated with the social constructionist position. He argues that knowledge is socially produced through institutional discourses. In relation to sexuality, Foucault (1976) describes how institutions employ certain classifications and terminology to regulate and marginalise minority sexual interests. Established institutions (e.g. law, medicine, church) use categories and labels to legitimise and demarcate what is 'desirable' and what is 'undesirable'. According to Foucault, these established institutions produce and repeat their own ideological and normative discourses about sex and sexual behaviour in order to control how sexuality is experienced and thought about in wider society.

10. Scientific and Biogenetic Studies

Psychodynamic attitudes to scientific research on sexual orientation are divided. However, there is good evidence for genetic and non-social environmental effects on sexual orientation (although this evidence focuses mainly on men). There is little evidence that the social environment plays a role in the development of sexual orientation. However, the evidence is open to a variety of interpretations. One conclusion is that genetic, hormonal and intra-uterine influences seem to be important, but the social environment during childhood and adolescence does not. On the other hand, the lack of good scientific evidence about social effects leads to conclusions or claims that the family or wider society may influence adult sexual orientation. We should not, however, understand scientific studies of sexual orientation as offering a completely deterministic account of human nature or as ignoring the role of human agency.

Jordan, B. (2020). End of the road for the 'homosexuality gene'. *Medical Sciences (Paris)*, 36 (2), 181-184.

Evidence for a 'homosexuality gene' was claimed in the early 1990s on the basis of linkage studies that were woefully underpowered. Indeed, follow-up studies gave contradictory results. Genome-wide association studies, and very large databases with detailed genetic and phenotypic data, have made possible a re-examination of this issue. While modest heritability (30%) for homosexuality is confirmed, no major locus is found, and the genetic influence appears extremely polygenic. Thus, there is no single gene, or even small set of genes, that have a strong influence on homosexuality.

Ganna, A., Verweij, K. J. H., Nivard, M. G., Maier, R., Wedow, R., Busch, A. S., Abdellaoui, A., Guo, S. J., Sathirapongsasuti, F., Lichtenstein, P., Lundström, S., Långström, N., Auton, A., Harris, K. M., Beecham, G. W., Martin, E. R., Sanders, A. R., Perry, J. R. B., Neale, B. M. and Zietsch, B. P. (2019). Large-scale genome-wide association study (GWAS) reveals insights into the genetic architecture of same-sex sexual behaviour. *Science*, 365 (6456), 869-870.

Twin and family studies have shown that same-sex sexual behaviour is partly genetically influenced, but previous searches for specific genes involved have been underpowered. The researchers performed a genome-wide association study (GWAS) on 477,522 individuals, revealing five loci significantly associated with same-sex sexual behaviour. The findings provide insights into the genetics underlying same-sex sexual behaviour and underscore the complexity of sexuality.

Bailey, M. J., Vasey, P. L., Diamond, L. M., Breedlove, S. M., Vilain, E. and Epprecht, M. (2016). Sexual orientation, controversy and science. *Psychological Science in the Public Interest*, 178, 45-101.

This article provides a current summary of scientific findings regarding sexual orientation. Although they focus most on causation, the authors also address other scientific issues concerning sexual orientation, including its meaning and measurement, sex differences in its expression, its development, and its expression across time and place. Regarding causation, the authors provide a taxonomy of causal hypotheses and review evidence for them. These include hormonal, genetic, social environmental, and non-social environmental influences. Their second goal is less scientific and more analytical: to criticise and improve common but incorrect reasoning in this domain. For example, the commonly phrased question of whether sexual orientation is 'a choice' is a poor one for advancing either scientific understanding or policy. A more meaningful formulation is whether sexual orientation is socially influenced.

Sanders, A. R., Martin, E. R., Beecham, G. W., Guo, S., Dawood, K., Rieger, G., Badner, J. A., Gershon, E. S., Krishnappa, R. S., Kolundzija, A. B., Duan, J., Gejman, P. V. and Bailey, J. M. (2015). Genome-wide scan demonstrates significant linkage for male sexual orientation. *Psychological Medicine*, 45, 1379-1388.

Findings from family and twin studies support a genetic contribution to the development of sexual orientation in men. However, previous studies have yielded conflicting evidence for linkage to chromosome Xq28. The researchers conducted a genome-wide linkage scan on 409 independent pairs of homosexual brothers (908 analysed individuals in 384 families), by far the largest study of its kind to date. Results, especially in the context of past studies, support the existence of genes on pericentromeric chromosome 8 and chromosome Xq28 influencing development of male sexual orientation.

Bao, A. M. and Swaab, D. F. (2011). Sexual differentiation of the human brain: relation to gender identity, sexual orientation and neuropsychiatric disorders. *Frontiers in Neuroendocrinology*, 32 (2), 214-226.

During the intrauterine period a testosterone surge masculinises the foetal brain, whereas the absence of such a surge results in a feminine brain. As sexual differentiation of the brain takes place at a much later stage in development than sexual differentiation of the genitals, these two processes can be influenced independently of each other. Sex differences in cognition, gender identity (an individual's perception of their own sexual identity), sexual orientation (heterosexuality, homosexuality or bisexuality), and the risks of developing neuropsychiatric disorders are programmed into our brain during early development. There is no evidence that one's postnatal social environment plays a crucial role in gender identity or sexual orientation. The authors discuss the relationships between structural and functional sex differences of various brain areas and the way they change along with any changes in the supply of sex hormones on the one hand and sex differences in behaviour in health and disease on the other.

Dawood, K., Bailey, J. M. and Martin, N. G. (2009). Genetic and environmental influences on sexual orientation. In Y.-K. Kim (ed.). *Handbook of Behaviour Genetics*. pp. 269-279.

The primary focus of this chapter is to provide an overview of the evidence to date on the quantitative genetics of sexual orientation, including family and twin studies. The bulk of the available evidence suggests moderate heritability for male sexual orientation. Female sexual orientation has been studied much less extensively, but current studies are consistent with a genetic contribution for women as well. Familial aggregation has been reported in several family studies of both male and female homosexuality, although the genetic and environmental influences on this familial clustering have not been clearly defined by the largest twin studies published thus far, which have produced contradictory results. Recent molecular genetic studies will also be reviewed, including the two main strategies that have been used to date – linkage and association analysis. The authors also discuss the implications of recent advances in molecular genetic studies.

Bailey, M. J. and Pillard, R. C. (1995). Genetics of Human Sexual Orientation. *Annual Review of Sex Research*, 6 (1), 126-150

Is homosexuality genetic? This question has been posed many times during the past decade, in both scientific and political contexts. The scientific impetus for the question is that for the first time, in recent years, a reasonable amount of relevant data has become available. In this context, the question primarily concerns the adequacy of the studies and what they show, cumulatively. Politically, many people believe that the question of genetic, or more broadly innate, influences on sexual orientation has

profound implications for the treatment of gay and lesbian individuals, a belief that is mostly mistaken. The authors' purpose here is mainly to review the scientific literature regarding genetics and sexual orientation. However, because 'genetic' has several connotations that can be misleading to varying degrees, the authors begin by explicating the meaning we intend and also by delineating what we do not mean.

11. Empirical Studies on Conversion Therapy

Currently, there is a broad consensus that there is little, if any, evidence to support claims that same-sex sexual orientation can be changed through conversion or reparative therapy. Multiple studies have demonstrated that such therapies cause long-term psychological harm, including depression, anxiety, suicidality, low self-esteem, self-hatred, sexual dysfunction, relationship conflicts and social withdrawal. Research studies that claim conversion therapies are efficacious have been heavily criticised for their significant methodological limitations. The methodological limitations of these studies include: (1) absence of randomised control designs; (2) lack of a multivariate measurement of sexual orientation (i.e. no differentiation made between sexual behaviour, sexual identity and sexual attraction); (3) lack of longitudinal design and follow-up; (4) restrictive samples consisting predominantly of white men over 18 years old, thus producing results with very little applicability to women, non-whites and adolescents; (5) sample attrition with high drop-out rates; (6) excessive use of retrospective pre-tests; and (7) overreliance on self-report measures especially in more recent studies.

Fjelstrom, J. (2013). Sexual orientation change efforts and the search for authenticity. *Journal of Homosexuality*, 60 (6), 801-827.

This article is based on structured interviews of a sample of 15 former participants in sexual orientation change efforts (SOCE), who currently identify as gay or lesbian. The primary research question for this study was: 'What was the experience of self-identified gay men and lesbians who went through some type of SOCE and eventually asserted themselves as gay or lesbian?'. The research concludes that participants sometimes identified as heterosexual during SOCE, but never changed their underlying homosexual orientation, and that suppression, disconnection, and a sense of inauthenticity were significant phenomena of this process.

Panozzo, D. (2013). Advocating for an end to reparative therapy: methodological grounding and blueprint for change. *Journal of Gay and Lesbian Social Services*, 25 (3), 362-377.

Despite the ethical and methodological concerns surrounding reparative therapy (RT), a 2011 journal published a study claiming that lesbian, gay, and bisexual persons can 'change' their sexual orientation. While much has been written about the deleterious effects of RT it continues to be researched and practiced, and, therefore, continues to cause harm. This article reviews methodological and ethical problems of RT and factors associated with it and suggests steps to decrease and eventually end its practice as an aspect of social work's mission, which is to protect vulnerable populations, including lesbians and gay men.

Beckstead, A. L. (2012). Can we change sexual orientation? *Archives of Sexual Behaviour*, 41, 21-134.

The self-reports of individuals who claim that they have changed their sexual orientation are either dismissed as false or relied upon to promote sexual orientation change efforts. However, these reactions do not capture the complexity of the sexual reorientation phenomenon. This article provides an overview regarding the promise and effort of sexual reorientation and how this knowledge may inform our current understanding of human sexuality. A multivariate model of sexuality and sexual orientation, including scales of attraction and aversion, will be proposed based upon current understanding of sexuality and the distinctions found in sexual reorientation research. In the end, a therapeutic framework will be highlighted that may be used (and researched) to help those distressed by their sexual orientation.

American Psychological Association (APA) Task Force on Appropriate Therapeutic Responses to Sexual Orientation (2009). Report of the Task Force on Appropriate Therapeutic Responses to Sexual Orientation. Washington, DC: American Psychological Association.

The Task Force conducted a systematic review of the peer-reviewed journal literature on sexual orientation change efforts (SOCE) and concluded that efforts to change sexual orientation are unlikely to be successful and involve some risk of harm, contrary to the claims of SOCE practitioners and advocates. Research and clinical literature demonstrate that same-sex sexual and romantic attractions, feelings, and behaviours are normal and positive variations of human sexuality. The appropriate affirmative therapeutic interventions for those who seek SOCE involves therapist acceptance, support, and understanding of clients and the facilitation of clients' active coping, social support, and identity exploration and development, without imposing a specific sexual orientation identity outcome.

Cramer, R. J., Golom, F. D., LoPresto, C. T. and Kirkley, S. M. (2008). Weighing the evidence: empirical assessment and ethical implications of conversion therapy. *Ethics and Behaviour*, 18 (1), 93-114.

In this discussion, the limited evidence regarding the efficacy and effects of conversion therapy is surveyed, particularly in the context of empirically supported treatment criteria summarised by Division 12 (clinical psychology) of the APA. The authors consider the resulting ethical considerations in performing conversion therapy and propose alternative uses of affirmative therapy on the basis of ethical standards defined by APA. Finally, options for treating LGB individuals who are coming to terms with their sexual orientations are discussed.

Serovich, J. M., Craft, S. M., Toviessi, P., Gangamma, R., McDowell, T. and Graftsky, E. L. (2008). A systematic review of the research base on sexual reorientation therapies. *Journal of Marital and Family Therapy*, 34 (2), 227-238.

The purpose of this article is to review, critique, and synthesise the scientific rigour of the literature base underpinning sexual reorientation therapy research. Using a systematic narrative analysis approach, twenty-eight empirically based, peer-reviewed articles meeting eligibility criteria were coded for sample characteristics and demographics as well as numerous methodology descriptors. Results indicate the literature base is full of omissions which threaten the validity of interpreting available data.

Beckstead, A. L. (2002). Cures versus choices: agendas in sexual reorientation therapy. *Journal of Gay and Lesbian Psychotherapy*, 5 (3-4), 87-115.

The perspectives of 20 individuals (2 women, 18 men) who reported benefiting from reparative or conversion therapy are described. In contrast to previous imprecise claims of change, a more complex conceptual framework is presented regarding the definitions of a successful outcome from such treatments. Research and political implications are discussed as well as the need for more effective clinical strategies that integrate conservative social identities with same-sex attractions.

Haldeman, D. C. (2002). Gay rights, patient rights: the Implications of sexual orientation conversion therapy. *Professional Psychology: Research and Practice*, 33 (3), 260-264.

Therapies designed to change sexual orientation have come under increasing scrutiny from the profession and the public. The proposition that sexual orientation can be changed therapeutically is widely questioned, and there is concern that such therapies reinforce social devaluation of homosexuality and bisexuality. At the same time, conservative religious individuals wish to seek treatment appropriate to them, which may include attempting to change or control sexual orientation. The ethical

questions and clinical and social implications of this complex issue are discussed. Guidance to practitioners interested in this issue is offered, including references to policies of the APA.

Haldeman, D. C. (2002). Therapeutic antidotes: helping gay and bisexual men recover from conversion therapies. *Journal of Gay and Lesbian Psychotherapy*, 5(3-4), 117-130.

Studies of sexual orientation conversion therapies have focused on the efficacy, or lack thereof, of treatments designed to change sexual orientation. Recently, given the typically low success rate achieved in most conversion therapy studies, some researchers have examined the potential for such treatments to harm patients. It is the author's impression, after twenty years' clinical work with individuals who have undergone some form of conversion therapy, that these treatments can indeed be harmful. This article identifies the various problems commonly presented by patients following an unsuccessful therapeutic attempt to change sexual orientation. Such problems include poor self-esteem and depression, social withdrawal, and sexual dysfunction. Case material illustrates these concerns, and therapeutic approaches to address them are suggested. Directions for future study are identified.

Schroeder, M. and Shidlo, A. (2002). Ethical issues in sexual orientation conversion therapies: an empirical study of consumers. *Journal of Gay and Lesbian Psychotherapy*, 5 (3-4), 131-166.

This study uses interviews with 150 consumers of sexual orientation conversion therapies to identify critical incidents of poor practice and ethical violations. We found that some licensed conversion therapists may be practicing in a manner inconsistent with the APA Ethics Code, similar professional codes, and recent guidelines on treatment of lesbians and gay men. Areas of ethical violations identified include informed consent, confidentiality, coercion, pre-termination counselling, and provision of referrals after treatment failure.

Shidlo, A. and Schroeder, M. (2002). Changing sexual orientation: a consumers' report. *Professional Psychology: Research and Practice*, 33 (3), 249-259.

What motivates individuals to pursue conversion therapy and ex-gay groups? How do they perceive its harmfulness and helpfulness? In this study, 202 consumers of sexual orientation conversion interventions were interviewed to answer these questions. The results indicated that a majority failed to change sexual orientation, and many reported that they associated harm with conversion interventions. A minority reported feeling helped, although not necessarily with their original goal of changing sexual orientation. A developmental model that describes the various pathways of individuals who attempt to change their sexual orientation is presented.

12. Clinical Attitudes Studies on Same-sex Sexual Orientation

Several clinical attitudes studies have been conducted to measure the views of psychotherapists and mental health professionals working therapeutically with the LGBTQIA+ community. The studies included in this section provide an overview of this research area. Overall, the studies indicate that therapeutic attempts to change the sexual orientation of LGBTQIA+ patients clients persist, despite the lack of evidence for the efficacy of such treatments (see section 11).

Lingiardi, V., Nardelli, N. and Tripodi, E. (2015). Reparative attitudes of Italian psychologists towards lesbian and gay clients: theoretical, clinical and social implications. *Professional Psychology: Research and Practice*, 46,132-139.

This report aims to study the 'reparative attitudes' (RA) of Italian licensed psychologists (n = 3,135) through the use of an anonymised Internet-based questionnaire. The analysis of the frequencies showed that RA affected 58% of the participants. In addition, RA was predicted by variables representing demographic, sociocultural and professional characteristics, as well as by some theoretical assumptions about homosexuality.

Bartlett, A., Smith, G. and King, M. (2009). The response of mental health professionals to clients seeking help to change or redirect same-sex sexual orientation. *BMC Psychiatry*, 9, 11.

The researchers sent postal questions to mental health professionals across the UK. Participants were asked to give their views about treatments to change homosexual desires and describe up to five patients each, whom they have treated in this way. Of 1848 practitioners contacted, 1406 questionnaires were returned and 1328 could be analysed. A significant minority of mental health professionals (17%) are attempting to help their LGB clients to become heterosexual.

Kilgore, H., Sideman, L., Amin, K., Baca, L. and Bohanske, B. (2005). Psychologists' attitudes and therapeutic approaches toward gay, lesbian, and bisexual issues continue to improve: an update. *Psychotherapy: Theory/Research/Practice/Training*, 42 (3), 395-400.

Psychologists' attitudes and approaches toward the LGB lifestyle continue to change, on the basis of results from 437 responding members of the American Psychological Association. Psychologists are more likely to view an active LGB lifestyle-identity as acceptable and non-pathological, more likely to support gay-affirmative therapy, and much less likely to support changing sexual orientation through psychotherapy.

Lingiardi, V. and Capozzi, P. (2004). Psychoanalytic attitudes towards homosexuality: an empirical research. *International Journal of Psychoanalysis*, 85,137-158.

The authors present the results of empirical research conducted in the Italian psychoanalytic community on the attitudes of psychoanalysts towards homosexuality and the implications for cultural, theoretical and institutional issues. A questionnaire was sent to 600 psychoanalysts (206 of which responded), members of the five main Italian psychoanalytic institutions. First, analysts' personal characteristics and preferred theoretical models were investigated. Second, the respondents responded to statements eliciting their theoretical and clinical approach towards homosexuality. Results indicate that: (a) cultural and theoretical background influences the analysts' attitudes towards homosexuality more than gender; (b) there is a discrepancy between analysts' theoretical position and their clinical practice; and (c) IPA institutes are more discriminatory towards homosexual colleagues than are Jungian ones.

Bartlett, A., King, M. and Phillips, P. (2001). Straight talking: an investigation of the attitudes and practice of psychoanalysts and psychotherapists in relation to gays and lesbians. *British Journal of Psychiatry*, 179, 545-549.

A random sample of individuals listed as working with adults in the British Confederation of Psychotherapists' register were sent postal questionnaires. Data are available from 274 (69%) of 395 questionnaires. Only one of 218 respondents said that he/she was homosexual. One-third said that gay and lesbian patients had a right to a gay or lesbian therapist. A total of 179 (82% of 218) respondents described work with gay and lesbian clients, and in the majority of cases sexual orientation was an important aspect of the work. Evidence from this study indicates that lesbian and gay clients may encounter overt or covert bias, including the pathologisation of homosexuality per se.

Phillips, P., Bartlett, A. and King, M. (2001). Psychotherapists' approaches to gay and lesbian patients/clients: a qualitative study. *British Journal of Medical Psychology*, 74, 73-84.

The researchers used qualitative research methods to examine the core issues relating to the approaches of psychodynamic and psychoanalytic psychotherapists to gay and lesbian clients. The paper begins with a review of the psychoanalytic approaches to gay and lesbian sexuality and continues with material of a clinical nature, providing information about the experience of lesbians and gay men in psychotherapy. It explores the attitudes of therapists towards gay and lesbian sexuality by discussing a range of psychoanalytic theories and their application to clinical work with patients and clients.

Jordon, K. M. and Deluty, R. H. (1995). Clinical interventions by psychologists with lesbians and gay men. *Journal of Clinical Psychology*, 51 (3), 448-456.

A questionnaire that assesses methods of intervention with, and attitudes toward, lesbians and gay men was completed by 139 clinical psychologists. None claimed to use aversion techniques to change sexual orientation. Eleven percent reported use of alternative methods (e.g., psychoanalytic techniques) to change sexual orientation, whereas 5.8% supported the use of aversion therapy for this purpose. Viewing homosexuality as "unacceptable" predicted both the use of alternative therapies and support of aversion therapy to change sexual orientation.

Lilling, A. H. and Friedman, R. C. (1995). Bias towards gay patients by psychoanalytic clinicians: an empirical investigation. *Archives of Sexual Behaviour*, 24 (5), 563-570.

Results of an empirical investigation of psychoanalysts' attitudes towards and clinical assessment of gay patients are reported. The study employed matched-vignette methodology; analysts rated their reactions on the Semantic Differential to homosexual and heterosexual patients with identical histories. They also rated degree of impairment in psychological functioning on the Global Assessment of Functioning and made DSM-III-R diagnoses. Results indicate that psychoanalysts maintain a subtle but significant negative bias towards homosexual patients, particularly those that have serious psychopathology.

MacIntosh, H. (1994). Attitudes and experiences of psychoanalysts in analysing homosexual patients. *Journal of the American Psychoanalytic Association*, 42, 1183-1205.

In response to a survey, 285 psychoanalysts reported having analysed 1215 homosexual patients, resulting in 23% changing to heterosexuality and 84% receiving significant therapeutic benefit. Various statistics and individual comments are reported. Virtually all of the respondents rejected the idea that a homosexual patient in analysis 'can and should' change to heterosexuality, although 17 percent had

changed their opinion during the last 10 years. Over a third believed that most other psychoanalysts hold this opinion even though they themselves do not.

Garnets, L., Hancock, K. A., Cochran, S. D., Goodchilds, J. and Peplau, L. A. (1991). Issues in psychotherapy with lesbians and gay men: a survey of psychologists. *American Psychologist*, 46 (9), 964-972.

A large and diverse sample of psychologists were surveyed to elicit information about specific instances of respondent-defined biased and sensitive psychotherapy practice with lesbian and gay clients. Open-ended responses were used to separately identify major themes of biased and sensitive practice and to illustrate each with concrete examples. Results suggest that psychologists vary widely in their adherence to a standard of unbiased practice with gay men and lesbians. To bring individual practice into accord with APA policy will require continued and expanded efforts to educate practitioners about sexual orientation.

13. Clinical Guidelines for Work with Gender, Sexuality and Relationship Diverse Patients and Clients

This section focuses particularly on existing guidelines from other organisations, such as the American Psychological Association (APA), the British Association of Counselling and Psychotherapy (BACP) and the British Psychological Society (BPS), that are generally thought to address some of the most up-to-date clinical good practice for work with LGBTQIA+ patients and clients. These guidelines provide practical information to trainees and qualified therapists about LGBTQIA+ lives, norms and issues, particularly the ways in which social stigma and internalised homophobia/biphobia pose a risk to LGBTQIA+ patients and clients and their mental health.

British Psychological Society (2019). *Guidelines for Psychologists Working with Gender, Sexuality and Relationship Diversity*.

These clinical guidelines are aimed at professionals working with gender, sexuality and relationship diverse (GSRD) clients within psychology, counselling, psychotherapy, psychiatry, medicine and social work. Includes sections on the socio-political context, GSRD identities and practices, intersectionality and development over the lifespan.

Kort J. (2018). *LGBTQ Clients in Therapy: Clinical Issues and Treatment Strategies*. London: W.W. Norton and Company.

Gay, lesbian, bisexual, transgender and queer clients have specific needs that require their own knowledge base. This book offers up-to-date information for clinicians treating LGBTQ clients, including new chapters on bisexual, transgender, sexually fluid and gender nonconforming clients. Includes chapters on the 'coming out' process, internalised homophobia, experiences of growing up as LGBTQ and LGBTQ-specific developmental issues.

British Association for Counselling and Psychotherapy (2017). *Good Practice across the Counselling Professions: Gender, Sexuality and Relationship Diversity*.

This resource was commissioned by BACP to enable members and other counselling and psychotherapy professionals to develop good practice in the field of gender, sexual and relationship diversity. Includes sections on cisgender identities, non-binary gender identities, intersexuality, asexuality, BDSM, kink, consent, solo-ness and singledom, monogamy, non-monogamy, aromantic experience and sex work.

Clarke, V., Ellis, S. J., Peel, E. and Riggs, D. W. (2016). *Lesbian, Gay, Bisexual, Trans and Queer Psychology: An Introduction* (3rd ed.). Cambridge: Cambridge University Press.

This textbook introduces students to the psychology of lesbian, gay, bisexual, trans and queer lives and experiences. It covers a broad range of topics including diversity, prejudice, health, relationships, parenting and lifespan experiences from youth to old age. Key issues and debates are discussed throughout the book. There are extensive links to further resources and information, as well as 'gaps and absences' sections, indicating major limitations of research in a particular area.

American Psychological Association (2015). *Guidelines for psychological practice with transgender and gender non-conforming people. American Psychologist, 70 (9), 832-864.*

The purpose of these guidelines is to assist psychologists and psychotherapists in the provision of culturally competent, developmentally appropriate, and trans-affirmative psychological practice with transgender and gender non-conforming (TGNC) people. Trans-affirmative practice is the provision of care that is respectful, aware, and

supportive of the identities and life experiences of TGNC people. The guidelines address the strengths of TGNC people, the challenges they face, ethical and legal issues, life span considerations, research, education, training, and health care. Because issues of gender identity are often conflated with issues of gender expression or sexual orientation, psychological practice with the TGNC population warrants the acquisition of specific knowledge about concerns unique to TGNC people.

Pachankis, J. E. and Goldfried, M. R. (2013). Clinical issues in working with lesbian, gay, and bisexual clients. *Psychology of Sexual Orientation and Gender Diversity*, 1 (S), 45-58.

After a discussion of the biases that can influence psychotherapy, guidelines are given for conducting LGB-affirmative therapy that avoids these biases. Issues that therapists need to be familiar with in working with LGB clients include: LGB identity development; couple relationships and parenting; LGB individuals as members of families; the unique stressors faced by individuals who are underrepresented in the LGB research literature (e.g. older LGB individuals, ethnic minorities, religious LGB individuals, bisexual individuals); and legal and workplace issues. An examination of the published literature is offered with particular emphasis given to the available empirical research.

Richards, C. and Barker, M. (2013). *Sexuality and Gender for Mental Health Professionals: A Practical Guide*. London: Sage.

Questions of sexuality and gender affect everyone and therefore have an inevitable relevance in the consulting room. Yet with interpretations and manifestations of both varying greatly from person to person, understanding the inherent complexities of sexuality and gender can be a daunting task for the health professional. Breaking down these complexities, this practical guide familiarises the reader with all of the common and many of the less common sexualities, genders and relationship forms, and explains experiences and issues relating to each. The book contains: (1) explanations of various forms of sexuality, gender and relationship structures, (2) common concerns relating to specific groups, (3) key practises relating to specific groups, (4), the treatment of specific groups in contemporary Western society, (5) details of some norms that are commonly found within specific groups; and (6) suggestions for professional practice with these groups.

American Psychological Association (2012). Guidelines for psychological practice with lesbian, gay and bisexual clients. *American Psychologist*, 67 (1), 10-42.

These guidelines provide psychologists and psychotherapists with a frame of reference for the treatment of lesbian, gay, and bisexual client and basic information and further references in the areas of assessment, intervention, identity, relationships, diversity, education, training, and research. Each of the 21 guidelines provides an update of the psychological literature supporting it, includes sections on rationale and application, and covers areas such as religion and spirituality, the differentiation of gender identity and sexual orientation, socioeconomic and workplace issues, and the use and dissemination of research on lesbian, gay, and bisexual issues.

Downey, J. I. and Friedman, R. C. (2008). Homosexuality: psychotherapeutic issues. *British Journal of Psychotherapy*, 24 (4), 429-468

In this article, the authors draw on their experience as researchers and clinicians to discuss common clinical problems in psychotherapeutic work with non-heterosexual patients including: assessment; homophobia; internalised homophobia; gender difference between patient and analyst; the ageing patient; orientation of the therapist; and transference/countertransference.

Mallon, G. P. (2008). *Social Work Practice with Lesbian, Gay, Bisexual and Transgender People*. London: Routledge.

Chapters focus on important topics such as: (1) social work and queer theory, (2) LGBT and race - heterosexism, racism, and sexism; (3) applying the life model and the stress-coping process; (4) practice with bisexual, transgender, and gender non-conforming persons; (5) relationship building between lesbian partners; (6) the impact of creating family for lesbian couples; (7) internalised homophobia, heterocentrism, and gay identity; (8) group work practice with the LGBTQ community; (9) clinical assessment for families where sexual orientation is an issue; and (10) LGBT parenting.

Drescher, J., D'Ercole, A. and Schoenberg, E. (2003). *Psychotherapy with Gay Men and Lesbians: Contemporary Dynamic Approaches*. Harrington Park Press/The Haworth Press.

The book includes discussion of case reports that deal with: (1) gay therapists treating gay patients; (2) countertransferential enactments of sex and gender in treatment; (3) rethinking the meanings of homosexuality; (4) psychotherapeutic treatment of gay male patients with AIDS, and more. This book is intended to be a resource for psychiatrists, psychologists, social work therapists, psychoanalysts, and anyone interested in today's psychoanalytic approaches to homosexuality.

14. Transference and Countertransference Dynamics

Before the 1980s, therapists paid very little attention to the impact of their own emotional responses to LGBTQIA+ clients in therapeutic work. Increasingly, however, therapists are more willing to discuss and write about their reactions when working with the LGBTQIA+ client group. This section presents a range of papers that focus specifically on work in the transference and countertransference with LGBTQIA+ patients and clients. It should be noted that there are several seminal papers addressing this issue in many of the books recommended in other sections.

Baumann, E. F., Ryu, D., and Harney, P. (2020). Listening to identity: transference, countertransference, and therapist disclosure in psychotherapy with sexual and gender minority clients. *Practice Innovations*, 5 (3), 246-256

This article has two goals. First, the authors introduce the particular manifestations of transference and countertransference in treatments with sexual and gender minority (SMG) clients. Second, through the use of self-disclosure and case studies, the authors uncover the ways in which SGM-identified clinicians' therapeutic relationships can take on and - often necessarily subvert - traditional notions of therapist disclosure, transference, and countertransference. When and how a therapist chooses to use transference and countertransference in the treatment is a very large and complex topic. Case studies of SGM clients in psychotherapy will be presented, paying particular attention to dynamics of the therapist-patient dyad including countertransference and therapist self-disclosure, and the ways in which the management of these clinical phenomena facilitate the evidence-based relationship variables of empathy and genuineness

Russell J. D., Jones, R. A., Barclay, K. and Anderson, M. (2008). Managing transference and countertransference in the treatment of gay, lesbian and bisexual survivors of childhood sexual abuse. *Journal of Gay and Lesbian Mental Health*, 12 (3), 227-243.

Gay, lesbian and bisexual (GLB) survivors of childhood sexual abuse must endure the detrimental intrapsychic and interpersonal effects of the traumatic abuse as well as societal intolerance and discrimination related to their core identity. The adverse psychological effects of the sexual abuse and specific developmental issues related to a homosexual orientation may be additive in terms of the deleterious impact on the survivor's interpersonal functioning. Issues such as shame, trust, and boundaries are some of the clinical themes that may be particularly relevant with this population of survivors. The authors suggest some therapeutic intervention within the context of potential transference-countertransference paradigms.

Flower, S. (2007). On the slopes of Brokeback Mountain: countertransference impediments to an analytic attitude in work with gay men. *British Journal of Psychotherapy*, 23, 431-443.

There have been many debates about psychoanalytic and Jungian views of homosexuality. As part of these it has often been recognised that analysts have appeared reluctant to comment on their own countertransference responses to gay patients. Yet these responses must inevitably have a significant bearing on the way the work is conceptualised and undertaken. This paper highlights ways in which homophobia and related countertransference difficulties influenced the author's ability to engage with one male patient. It traces the process by which the analyst became aware of his own discomfort and the nature of his struggle to find a more helpful and reflective position in the analytic work. The process was prompted by a dream which depicted some of the difficulties the analytic pair was experiencing and by a heightened scrutiny of the countertransference. The progress of the work is marked by three further dreams which trace the development of the analytic relationship.

Herlands, N. (2006). Gay patient, gay analyst: Is it all about sex? Clinical case notes from a contemporary Freudian view. *Journal of Gay and Lesbian Psychotherapy*, 10 (1), 95-108.

This paper charts a portion of the psychoanalytic therapy of a gay male patient with a gay male analyst. The therapist discloses his sexual identity at the time of referral but otherwise works within a contemporary neutral framework. The case material shows how a patient uses the disclosure of the analyst's sexuality to fortify stereotypical views of what it means to be a gay man, and to avoid the potentially traumatising exploration of their differences. Analysis of the patient's defence strategies eventually allows him to accept a more complex view of himself, of his relationships and of what it means to be a gay man.

Milton, M., Coyle, A. and Legg, C. (2005). Countertransference issues in psychotherapy with lesbian and gay clients. *European Journal of Psychotherapy & Counselling*, 7 (3), 181-197.

This article briefly reviews literature on responses towards same-sex (lesbian and gay) sexualities from psychoanalytic and 'lesbian and gay affirmative' psychotherapeutic perspectives. An analysis is presented of reports of countertransferential reactions to lesbian and gay clients, obtained from interviews with 14 psychotherapists who work in a lesbian and gay affirmative manner and 18 clients who had received affirmative psychotherapy. Data were subjected to grounded analysis. Participants consistently attended to the thoughts, feelings and values that therapists held in relation to lesbian and gay clients and how these affected the meanings and practices available to them. These were linked with the therapist's sexual identity among other factors. Negative countertransferential reactions were regarded as potentially occurring among heterosexual and lesbian and gay therapists and were seen as arising from therapists' conscious and unconscious fears about same-sex sexualities. These findings indicate a need to continue debating these issues more widely in the professional arena.

Igartua, K. J. and Des Rosiers, P. (2004). Transference and countertransference in therapy with lesbian patients. *Journal of Lesbian Studies*, 8 (1-2), 123-141.

Like gender, sexual orientation is an important determinant of one's perception of human relationships, therefore influencing the therapeutic process. Through a framework derived from cross-cultural therapy literature, this article explores how lesbian patients' transferences are influenced by their perception of their therapists' sexual orientations and how therapists' countertransference differ according to their sexual orientations. This analysis took shape through dialogue with heterosexual and lesbian therapists working in a variety of settings, some generic mental health settings and some lesbian, gay, and bisexual identified.

Sherman, E. (2002). Homoerotic countertransference. The love that dare not speak its name? *Psychoanalytic Dialogues*, 12 (4), 649-666.

Despite the recent interest in erotic countertransference and self-disclosure, little has been written about these phenomena when both analyst and patient are the same gender. Since homoerotic feelings can surface in any treatment, regardless of the participants' sexual orientation, this may well be a phobic avoidance that restricts many treatments, as well as our profession. The author proposes that the analyst's awareness of homoerotic feelings in the countertransference - including struggling with ways to express them - ultimately can create an atmosphere of safety.

Lewes, K. (2000). Unspoken questions: unsayable answers. *Journal of Gay and Lesbian Psychotherapy*, 3 (1), 33-44.

This is a discussion of a case in which the therapy operated largely by unconscious transference feelings. Its apparent beneficial results came about through the transmutative effect of a benevolent transference relationship rather than through any particular set of interpretations or reconstructions. The discussion of the case focuses on the patient's dreams during the treatment. An intimacy develops between therapist and patient in large part through the shared process of associating to material, whether dreams, events or memories. It is entirely appropriate for the therapist to reveal his own associations, provided he does so discreetly and modestly, as it is a way of establishing the dialogue of unconsciousness that provides the basis for real therapeutic relationships. The need for more details of the patient's history is emphasised. A patient's feelings about his sexuality need to be explored since no gay person is ever free of a huge burden of guilt about his sexual orientation.

Schwartz, D. (1993). Heterophilia - the love that dare not speak its aim, commentary on Trop and Stolorow's "defense analysis in self psychology: a developmental view." *Psychoanalytic Dialogues*, 3 (4), 643-652.

This paper comments on R. D. Stolorow's and J. L. Trop's presentation of a case in which same-sex desire is prominent and treated as pathological, and their apparent decision to maintain their point of view without actually discussing it. The author shows that heterophilia, the overvaluing of intimate relations between different-sexed partners, manifests itself in Stolorow's and Trop's case report and how it tends to immunise their ideological commitments against articulation and scrutiny. As an artifact of heterophilia, same-sex desire is necessarily denigrated. It is posited that the particular sexual ideology of heterophilia and its discursive practices detours psychoanalytic work from its expansive and liberatory aims.

15. Therapist Self-Disclosure of Sexual Orientation

Should LGBTQIA+ therapists self-disclose their sexual orientation to their LGBTQIA+ patients and clients? This is a growing debate within the therapeutic profession. This section offers a range of perspectives on this issue. Historically, the main objection to self-disclosure is that it may impede the development of the transference relationship or lead to a shift in therapeutic focus away from the patient/client towards the therapist. More contemporary perspectives emphasise the potential therapeutic benefits of LGBTQIA+ therapists' self-disclosing their sexual orientation to LGBTQIA+ patients and clients. There are papers on self-disclosure included in many of the volumes recommended in other sections.

Danzer, G. S. (2019). Sexuality. In: G. S. Danzer (ed.), *Therapist Self-Disclosure: An Evidence Based Guide for Practitioners*. Oxon: Routledge, pp. 71-81.

The chapter selected is on therapists' self-disclosure of sexual orientation and reviews the literature on this sensitive and complicated issue. It gives clinicians professional and practical guidance on how and when to self-disclose in therapy with LGBTQ+ clients and weaves together theory, research and case studies to examine the timing, factors and dynamics of this type of self-disclosure in therapy.

Porter, J., Hulbert-Williams, L. and Chadwick, D. (2015). Sexuality in the therapeutic relationship: an interpretative phenomenological analysis of the experiences of gay therapists, *Journal of Gay and Lesbian Mental Health*, 19 (2), 165-183.

Lesbian, gay, bisexual, transgender, and queer (LGBTQ) clients have reported experiencing heterosexist/homophobic attitudes from heterosexual therapists, but this has seldom been discussed for gay therapists. Such experiences could impact the therapeutic process and a gay therapist's willingness to self-disclose their sexuality. Self-disclosure of sexuality can be therapeutically beneficial for LGBTQ or heterosexual clients. Semi-structured interviews were conducted with seven gay male therapists and analysed using Interpretative Phenomenological Analysis. Five themes emerged: (1) affinity for working with LGBTQ+ clients; (2) heterosexual males' resistance to the therapeutic process; (3) the impact of homophobia within the therapeutic relationship; (4) empathy through shared humanity; and (5) utilising therapist sexuality as a tool within the therapeutic relationship.

Kronner, H. W. (2013). Use of self-disclosure for the gay male therapist: The Impact on Gay Males in Therapy. *Journal of Social Service Research*, 39 (1), 78-94.

Using a sample of eight therapist-patient pairs (16 participants), each participant responded to how often the therapist self-disclosed. In addition, each participant completed a measurement inventory to determine how connected each was to the other (patient to therapist or therapist to patient). Findings indicated that self-disclosure occurred often during therapy, and there was a fairly high level of connection between patients and therapists. Patients who perceived that their therapists self-disclosed more often also reported higher levels of connection when compared with those who perceived a lower level of therapist self-disclosure.

Borden, L. A., Lopresto, C. T., Sherman, M. F. and Lyons, H. Z. (2010). Perceptions of self-disclosing counsellors among lesbian, gay, and bisexual individuals. *Journal of LGBT Issues in Counselling*, 4 (2), 54-69.

The present study tested the effect of counsellor self-disclosure on lesbian, gay, and bisexual individuals' perceptions of counsellor expertness, trustworthiness, and attractiveness. A national sample of 275 lesbian, gay, and bisexual university students was recruited for an online survey. Participants were randomly assigned to read a written vignette with varying levels of counsellor self-disclosure. According to an a priori

comparison test, lesbian, gay, and bisexual participants who received professional and personal background disclosure rated the counsellor as significantly more expert, trustworthy, and attractive than participants who received professional background disclosure alone. An overall main effect for therapist self-disclosure was also revealed by multivariate analysis of variance. These findings were consistent with the study's hypotheses and previous research in the area of counsellor self-disclosure.

Guthrie, C. (2006). Disclosing the therapist's sexual orientation: the meaning of disclosure in working with gay, lesbian and bisexual patients. *Journal of Gay and Lesbian Psychotherapy*, 10 (1), 63-77.

This article describes a clinical case in which the issue of disclosing the therapist's sexual orientation played a significant role. An openly gay patient insisted that the therapist not reveal this information, thus maintaining the therapist as a sexual orientation-neutral object. The decision of whether or not to disclose one's sexual orientation should be determined on a case-by-case basis and several questions should be considered.

Mathy, R. M. (2006). Self-disclosure: a dance of the heart and a ballet of the mind. *Journal of Gay and Lesbian Psychotherapy*, 10 (1), 109-121.

This paper discusses guidelines for self-disclosure by an ethnically diverse, lesbian female clinician who is a former male-to-female transsexual. It includes a review of cases in which the clinician both elected to use self-disclosure as well as refrained from doing so. The paper addresses the complexity of disclosing sex and sexual orientation as well as minority ethnicity. The author sees self-disclosure as akin to a ballet of the mind, in which clients' abilities to maintain their balance while learning a new performance may depend upon the clinicians' abilities to do the same.

Russell, G. M. (2006). Different ways of knowing: the complexities of therapist disclosure. *Journal of Gay and Lesbian Psychotherapy*, 10 (1), 79-94.

A case involving a lesbian therapist and a heterosexually married woman with a female lover is described and discussed. The case highlights the distinction between overt and dialogic communications between a client and therapist. It also emphasises how changes in the client's relationship with her therapist intersect with her therapeutic work, including both work specifically related and that only tangentially related to sexual orientation

Knox, S. and Hill, C. E. (2003). Therapist self-disclosure: research-based suggestions for practitioners. *Journal of Clinical Psychology*, 59 (5), 529-539.

After defining therapist self-disclosure, the authors briefly discuss its theoretical foundations. The authors then move to our primary focus of presenting a number of suggestions for effective use of therapist self-disclosure, based on the extant empirical literature.

16. Internalised Homophobia and Internalised Biphobia

Internalised homophobia occurs when gay men and women are unable to accept their sexual orientation as part of their natural identity and unconsciously incorporate hostile and negative attitudes towards themselves. Internalised biphobia is when bisexuals unconsciously internalise negative stereotypes about bisexual people and perpetuate a belief in the superiority of both monosexual people and monosexuality. Both internalised homophobia and internalised biphobia often lead to self-contempt and self-hatred, which in turn permeates all aspects of an individual's sexual and interpersonal functioning. Clinicians increasingly recognise the presence of internalised homophobia and internalised biphobia in the treatment of lesbian, gay and bisexual patients and clients. It should be noted that there are several chapters addressing internalised homophobia and internalised biphobia in many of the books recommended in other sections.

Brady, M. T. (2011). "Sometimes we are prejudiced against ourselves: internalised and external homophobia in treatment of an adolescent boy. *Contemporary Psychoanalysis*, 47, 458-479.

The painful experiences of an adolescent boy treated in analytically oriented psychotherapy are used as a lens through which we can consider the effects of homophobia, their internalisation, and their entanglement with intrapsychic processes. Controversies in the psychoanalytic literature on internalised homophobia are also considered. Homophobia within the developmental literature and the nascent state of conceptualisations of healthy homosexual development are addressed as concerns for treatment and pedagogy. The author examines elements of the countertransference, including an overly cautious attitude toward exploring contradictory or complex aspects of the patient's sexuality due to a concern not to replicate homophobic attitudes.

Hertzmann, L. (2011). Lesbian and gay couple relationships: when internalised homophobia gets in the way of couple creativity. *Psychoanalytic Psychotherapy*, 25 (4), 346-360.

In this paper, Hertzmann uses the concept of the Creative Couple, an idea that has evolved from the Oedipus complex, to underpin her thinking in an exploration of some of the issues facing lesbian and gay couples. Using case examples, she reflects on the challenges that internalised homophobia can present for the therapist when manifested in the transference and countertransference, and the need to be aware of the hidden, pernicious ways in which it can interfere with a couple's creativity.

Rowen, C. J. and Malcolm, J. P. (2003). Correlates of internalised homophobia and homosexual identity formation in a sample of gay men. *Journal of Homosexuality*, 43(2), 77-92.

Eighty-six behaviourally homosexual men, at various stages of homosexual identity formation (HIF), were participants in a study that examined correlates of internalised homophobia (IH) and HIF. Results indicated higher levels of internalised homophobia were correlated with lower stages of HIF. The findings support the theory that suggests internalised homophobia is a major developmental difficulty in gay men.

Moss, D. (2002). Internalised homophobia in men: wanting in the first person singular, hating in the first-person plural. *Psychoanalytic Quarterly*, 71, 21-50.

This paper focuses on the expression of internalised homophobia in men, arguing that the most powerful clinical use of this term depends upon its applicability to any man, without limitation to those whose primary object choice is homosexual. A number of

dynamic situations are described to which the term might apply, elaborated by examples from contemporary culture and clinical practice.

Mulick, P. S. and Wright Jr, L. W. (2002). Examining the existence of biphobia in the heterosexual and homosexual populations. *Journal of Bisexuality*, 2 (4), 45-64.

Biphobia is a psychological construct that is, at present, not well understood. A 30-item instrument, the Biphobia Scale, was developed to measure negative cognitions, affect, and behaviours regarding bisexuality and bisexual individuals. The instrument has provided empirical support for the existence of the construct of biphobia and suggests that it exists in both the heterosexual and homosexual communities. The results support the theory that bisexual individuals are subjected to 'double discrimination.'

Eliason, M. (2001). Bi-negativity: the stigma facing bisexual men. *Journal of Bisexuality*, 1 (2/3), 137-154.

The purpose of this study was to examine the attitudes of heterosexual college students about bisexuality. Although there is considerable information about attitudes toward lesbians and gay men, much less is known about the structure and degree of attitudes about bisexual men and women. This article focuses on the results regarding bisexual men, who were rated more negatively than bisexual women, gay men, or lesbians. Some of the potential reasons for and implications of this finding are discussed.

Allen, D. J. and Olesen, T. (1999). Shame and internalised homophobia in gay men. *Journal of Homosexuality*, 37 (3), 33-34.

This study investigated for the first time the relationship between internalised homophobia and shame in gay men. It also briefly re-examined the relationship between internalised homophobia and self-esteem in gay men. A sample of 100 gay men from a variety of sources responded to three questionnaires and a demographic survey. Findings included a significant positive relationship between shame and internalised homophobia and a significant inverse relationship between internalised homophobia and self- Additional findings included significant correlations between seven variables

Friedman, R. C. and Downey, J. I. (1999). Internalised homophobia and gender-valued self-esteem in the psychoanalysis of gay patients. *Psychoanalytic Review*, 86, 325-347.

The authors discuss the relationship between male self-condemnation for being gay and self-condemnation for feeling unmasculine. The types of patients described are reasonably well-adjusted homosexual males who are comfortable with their gay identity and social roles. Although they recall being labelled as children, the most painful aspects of these experiences are out of conscious awareness. During analysis, as often happens, negative feelings about being homosexual appear. Anti-homosexual feelings and shame about feeling unmasculine have become indissolubly intertwined.

Russell, G. M. and Greenhouse, E.M. (1997). Homophobia in the supervisory relationship: an invisible intruder. *Psychoanalytic Review*, 84, 27-42.

This paper explores manifestations and impacts of homophobia and heterosexism on the practice of supervision, focusing in particular on dyads in which the supervisor is heterosexual and the therapist is a lesbian. Resistances from the supervisor and the therapist are given. The collusion between the supervisor and the therapist concerning sexual orientation and its influence on the supervisory relationship is discussed. A vignette is given that illustrates the integration of sexual orientation into the supervisory relationship. The clinical power that can be gained when sexual orientation is no longer forbidden and concealed is illustrated in another vignette.

Downey, J. I. and Friedman, R. C. (1995). Internalised homophobia in lesbian relationships. *Journal of American Academy of Psychoanalysis and Dynamic Psychiatry*, 23, 435-447.

The authors examined the associations between internalised homophobia, outness, community connectedness, depressive symptoms, and relationship quality among a diverse community sample of 396 lesbian, gay, and bisexual (LGB) individuals. Findings showed that internalised homophobia was associated with greater relationship problems both generally and among coupled participants independent of outness and community connectedness.

Friedman, R. C. and Downey, J. I. (1995). Internalised homophobia and the negative therapeutic reaction. *Journal of American Academy of Psychoanalysis and Dynamic Psychiatry*, 23, 99-113.

The authors discuss the feeling of being different during childhood, the role of late childhood in development of internalised homophobia, the attribution of self-hatred to homoerotic fantasy, differentiation between internalised homophobia and early masochistic dynamics, and negative therapeutic interactions, especially in gay-affirmative therapy. In treating negative therapeutic reactions, therapists should emphasise exploration of meaning and deemphasise direct support and approval. Some expression of symptoms is often necessary before confrontation and interpretation can be effective.

17. Group Analytic Approaches

Group analysis recognises that the internal world of individuals is affected by relationships with others. The following readings address how issues of sexuality and gender might affect group dynamics and relationships, and how these issues may be resolved or understood.

Anderson, D. (2016). (De)constructions of discourse in group analytic perspectives of homosexuality. *Group Analysis*, 49 (3), 201-215.

Group analysis as a discourse of knowledge has much to offer how we construct homosexuality. Yet despite this rich background, group analysis has been slow to construct a clear theory of psychosexuality, and specifically homosexuality. The aim of this article therefore is to consolidate and expand current conceptions of sexuality, through an exploration of homosexuality within group analytic theory using ideas such as discourse analysis, desire, jouissance, the Other and the role of language in the matrix of the group. The article proposes a number of urgent research questions for group analysts around experiences of differing sexualities in a therapeutic group.

Burman, E. (2016). Gender, sexuality and power in groups. *Group Analysis*, 35 (4), 540-559.

In this paper, Burman draws on issues posed by an experiential women's group, first, to explore relations between women in groups and, second, to highlight how gendered institutional dynamics enter into relations of desire and authority between women. Reviewing current literature on women, gender and groups, she discusses the absence of discussion of the erotic (including the homoerotic) within groups, including women's groups and how this connects with questions of agency, power and knowledge.

Nitzgen, D. (2009). The location of sexuality in group analysis. *Group Analysis*, 42 (3), 215-228.

This article addresses the subject of sexuality in group analysis and tries to locate it in a group analytic context. To do so, Foulkes' late paper on the 'Oedipus Conflict and Regression' (1972) is taken as a starting point. It is argued that both Foulkes, and later, de Maré, have convincingly shown that psycho-sexuality cannot be localised in the body, but has to be located in the group. This basic group analytic assumption has an affinity to certain Lacanian key concepts, namely the concepts of desire and of jouissance. Both are discussed and put into perspective.

Weegmann, M. (2007). Group analysis and homosexuality: indifference or hostility? *Group Analysis*, 40 (1), 59-76.

This article explores psychoanalytic attitudes to homosexuality and uses the concept of social unconscious as an aid. Group-analytic silences around the subject are explored and clinical material presented to show a more affirmative stance.

Nitsun, M. (2006). *The Group as an Object of Desire: Exploring Sexuality in Group Therapy*. London: Routledge.

Nitsun argues that desire and sexuality are key components of human experience that have been marginalised in the group psychotherapy literature. Drawing on theory from psychoanalysis, developmental psychology and sociology, while keeping the group firmly in focus, he creates a picture of the potential in group therapy for the most intimate narrative. Highlighting current concerns about sexual identity, boundary transgression and what constitutes effective psychotherapy, detailed clinical illustrations cover areas such as the erotic connection, the dissociation of desire, the group as witness, erotic transference and countertransference

Burman, E. (2005). Contemporary feminist contributions to debates around gender and sexuality: from identity to performance. *Group Analysis*, 38 (1),17-30.

This paper reviews current feminist debates around gender and sexuality in relation to their relevance for group-analytic theory and practice. The long and contested engagement between feminists and (varieties of forms of) psychoanalysis highlights major areas of convergence of theoretical and practical concern: in particular around the attention to and construction of both gender and sexuality, and the relations between these. Group analysis, as a socially situated theory and practice, shares key political and intellectual premises with these feminist analyses, and so has much both to gain and to offer from this engagement

Burman, E. (2001). Engendering authority in the group. *Psychodynamic Counselling*, 7 (3), 347-369.

In this paper. Burman analyses ways of thinking about authority relations in groups Using vignettes from an experiential women's group, she attempts to identify and evaluate available ways of conceiving power relationships between women in groups (sister-sister; mother-daughter; the masquerade, the androgyne, honorary man, the father of whatever sex, and the lesbian). From this the paper calls, first, for a move away from treating gender as the primary organiser of difference in order to address the diverse and intersecting forms of power relations operating within groups and, second, to broaden consideration of women's positions within dyadic and group processes beyond the current (conventionally de-sexualised) maternal metaphor.

18. Sexuality and Gender: Classical Perspectives

Classical therapists tended to theorise same-sex desire as pathology and/or perversion. Classical theories of sexuality and gender were typically based on small, unrepresentative samples of individual gay men and women who were in therapy or who were mentally unwell. Although Freud (1920) himself did not classify same-sex sexuality as an illness or an identity that could or should be changed and defined it rather as 'a certain arrest of sexual development', the first few generations of therapists adopted a strikingly antipodal stance and approach. In clinical work with gay men and lesbians, classical therapists explicitly used a range of reparative techniques to change the same-sex sexual attraction of their patients/clients. This section is organised in a different order from previous sections, to show how ideas developed from Freud's earliest theoretical positions to their elaboration by later theorists.

Freud, S. (1905). *Three Essays on the Theory of Sexuality*. S.E. 7. London: Hogarth.

Freud had mixed views about whether same-sex sexual orientation was perverse. On the one hand, Freud claimed that penis-in-vagina (PIV) intercourse was the most mature expression of adult sexuality and that any deviation from this was a form of perversion. However, this claim was at odds with his theory of polymorphous perversity, which posited that the sexual instinct did not have a natural aim or a natural object.

Freud, S. (1909). *Analysis of a phobia in a five-year-old boy*. S.E.10. London: Hogarth.

Freud hypothesised that, on discovering the mother was penis-less, some young boys experienced an intense castration anxiety, leading them to withdraw their libidinal interest from the mother and to regress to an earlier, narcissistic form of object relations.

Freud, S. (1910). *Leonardo Da Vinci and a memory of his childhood*. S.E.11. London: Hogarth.

Freud speculated that some young boys developed fixations on the mother and became overly identified with her. These young boys subsequently sought out partners of their own sex who they aimed to love in the same way their mothers loved them.

Freud, S. (1911). *Psychoanalytic notes on an autobiographical account of a case of paranoia*. S.E.12. London: Hogarth.

Freud conjectured that paranoia was the outcome of a complex unconscious process, whereby intolerable same-sex impulses and wishes were negated and projected, resulting in (defensive) delusional ideation.

Freud, S. (1918). *From the history of an infantile neurosis*. S.E.17. London: Hogarth.

Freud postulated that, instead of identifying with the father, some young boys took the paternal figure as their sexual object, regressing to anal eroticism and developing a passive, feminine disposition and/or attitude.

Freud, S. (1920). *The psychogenesis of a case of homosexuality in a woman*. S.E.18. London: Hogarth.

Freud's main theoretical and clinical account addressing lesbianism focused on an 18-year-old woman who, on discovering her mother was pregnant, experienced a deep Oedipal disappointment that it was her mother and not her, who was having the father's baby (Freud 1920). In response to this perceived rejection from the father, the young woman refocused her libidinal interest on the mother, reigniting a previously unresolved infantile fixation on the maternal figure. This, in turn, led the young woman to identify with the father and develop a masculine disposition and attitude.

Klein, M. (1932). *The Psychoanalysis of Children*. London: Vintage.

Klein proposed that male and female homosexuality was pre-Oedipal in origin, emerging in the paranoid-schizoid position and characterised by: (1) part-object relating to the breast-penis; (2) destructive phantasies arising from the failure to achieve the depressive position; and (3) the inability to form whole object relationships.

Deutsch, H. (1933). Homosexuality in women. *International Journal of Psychoanalysis*, 14, 34-56.

Deutsch described lesbian sexual activities as predominantly oral in nature, with particular attention to the role of sucking and biting. Deutsch argued that oral activity was pregenital and not a mature expression of sexuality.

Rado, S. (1949). An adaptational view of sexual behaviour. In Hoch, P., and Zubin, J. (eds), *Psychosexual Development in Health and Disease*. New York: Grune and Stratton.

Rado proposes that homosexual men retained heterosexual desires and that homosexuality represented a fearful aversion to heterosexuality and a pathological defence.

Rosenfeld, H. (1949). Remarks on the relation of male homosexuality to paranoia, paranoid anxiety and narcissism. *International Journal of Psychoanalysis*, 30, 36-47.

Rosenfeld emphasised the defensive function of homosexuality against paranoid anxieties and saw homosexuality as an attempt to cover up more serious mental conditions.

Thorner, H. A. (1949). Notes on a case of male homosexuality. *International Journal of Psychoanalysis*, 30, 31-35.

Thorner linked homosexuality with Klein's paranoid schizoid position and proposed that homosexuality was less about choosing a same-sex love object and more about the unconscious, paranoid fantasies that underpin homosexual activity (e.g. women as poisonous and dangerous).

Bacon, C. L. (1956). A developmental theory of female homosexuality. In: S. Lorand and M. Balint (eds.), *Perversions: Psychodynamics and Therapy*. New York: Random House, pp. 131-160.

According to Bacon, lesbian relationships were a phobic avoidance of heterosexuality and represented a defence against entering the Oedipal phase. Bacon perceived lesbianism as perverse and as a turning away from normal and healthy heterosexual female development

Bergler, E. (1956). *Homosexuality: Disease or Way of Life*. New York: Hill and Wang.

Bergler offered a distinction between two types of homosexuality. While 'perverse homosexuality' dated back to oral conflicts in the pre-oedipal phase, 'spurious homosexuality' could be traced to unresolved Oedipal conflicts.

Bieber, I., Dain, H., Dince, P., Drellich, M., Grand, H., Gundlach, R., Kremer, M., Rifkin, A., Wilbur, C. and Bieber, T. (1962). *Homosexuality: A Psychoanalytic Study of Male Homosexuals*. New York, NY: Basic Books.

Bieber et al's empirical study with 106 gay men concluded that homosexuality was a pathological defence against anxieties deriving from specific family dynamics.

Khan, M. (1964). The role of infantile sexuality in early object relations in female homosexuality. In: I. Rosen (ed.), *The Pathology and Treatment of Sexual Perversions*. Oxford: Oxford University Press, pp. 221-292.

Based on a single case study, Khan depicted lesbianism as a pathological condition marked by high levels of castration anxiety, excessive penis envy and body-image distortions. Khan speculated that his one and only lesbian client's pathology was linked to unresolved pre-Oedipal conflicts with her depressed, hypochondriacal mother.

McDougall, J. (1964). Homosexuality in women. In: J. Chasseguet-Smirgel (ed.), *Female Sexuality: New Psychoanalytic Views*. London: Routledge, pp. 171-212.

McDougall posited that lesbianism was a borderline condition, neither psychotic nor Oedipal in structure. McDougall enumerated the severe psychopathology she observed in her lesbian clients, including depersonalisation, bizarre bodily states, deep depression and psychotic rage.

Socarides, C. W. (1968). *The Overt Homosexual*. New York: Grune and Stratton.

Socarides proposed that deficient mothering in the early oral-symbiotic phase led the male infant to develop an ambivalent and anxious pre-Oedipal attachment to the mother, often resulting in the failure to fully separate from her. Instead, the young male child experienced a suffocating and engulfing sense of merger with the mother.

Ovesey, L. (1969). *Homosexuality and Pseudo homosexuality*. New York: Science House.

Ovesey made a distinction between actual homosexuality (which is acted out/manifest) and pseudo-homosexuality (which is latent/unconscious). Pseudo-homosexuality referred to heterosexual men who did not self-identify as homosexual but who unconsciously equated masculine failure with femininity and homosexuality.

Limentani, A. (1979). Clinical types of homosexuality. In: I. Rosen (ed.), *Sexual Deviance*. Oxford: Oxford University Press, pp. 195-205.

Limentani provided a number of classifications for understanding different types of homosexual patients in the clinical situation. Limentani considered the homosexual as being truly perverse if the following clinical manifestations were identified: deep mental disturbance; depression; separation anxiety; fear of disintegration; bizarre acting out; marked identification with the opposite sex; and promiscuity.

Siegel, E. (1988). *Female Homosexuality: Choice without Volition*. Hillsdale, NJ: Analytic Press.

Reviewing clinical work with 12 lesbian clients, Siegal claimed that lesbianism was the result of severe mental illness and she perceived that most of her lesbian patients suffered from disturbing psychiatric problems, such as suicidality, psychosis and confused gender identity.