

SECTION
2.0

POSITION PAPER FOR PSYCHOLOGISTS WORKING WITH GENDER AND SEXUALLY DIVERSE INDIVIDUALS

Intended Audience/Users

This position paper outlines the HKPS positioning for psychologists currently providing services, in training, or aspiring to support the mental health and wellbeing of gender and sexually diverse

individuals. Positioning statements are clustered across sub-sections for inclusivity, relevance and applicability to various contexts of psychological practice in Hong Kong:



Medical, Hospitals and/or Private Practice.



Educational or Schooling Environments.



Corporate Consultancy, Organisations, Institutions, and Social Enterprises.



Academic, Research, and Public Education.

Code of Ethics: Living the Principles and Values Espoused By the HKPS

The HKPS respects that people are entitled to diverse opinions on normative or expected behaviours and preferences based on societal, religious and cultural beliefs and values. However, this does not negate the obligations that HKPS members must uphold in their professional practices to protect and safeguard the welfare of the individuals they serve.

Accordingly, as a key psychological and learned society responsible for public education and public protection, it remains the HKPS's duty to:



Take the lead in the dissemination of information that is underpinned by the latest empirical research and scientific thinking.



Address misconceptions that increase the potential for harm.



Promote the use of evidence-based practices that are in the best interests of individuals' welfare and wellbeing.

(Hong Kong Psychological Society, 2012b).



The HKPS, therefore, expects that all registered psychologists and members uphold the principles and values of the HKPS's professional code of conduct, which guides thinking, decisions, and behaviours in all research and professional practice (Hong Kong Psychological Society, 2012b).

Following the principles and values of the HKPS's professional code of conduct, psychologists working with gender and sexually diverse individuals should:

01

Remain sufficiently self-aware of their own cultural, religious, and moral values or biases during professional practice to not permeate or impose prejudice and discriminatory actions on client relationships, and if experiencing difficulties, seek supervision, and refer out appropriately (Hong Kong Psychological Society, 2012b, Principle A Respect, A1 Standard of General Respect).

02

Respect individuals' human rights and self-determination, including the choice of self-disclosure¹ (Hong Kong Psychological Society, 2012b, Principle A Respect, A4 Standard of Self Determination).

03

Keep abreast of the scientific, ethical, legal, and societal developments in Hong Kong relevant to their professional practice with gender and sexually diverse clients (Hong Kong Psychological Society, 2012b, Principle B Competence, B3 Standard of Recognising Limits of Competence).

04

Take a leadership role in opposing discrimination based on sexual orientation and gender identity (SOGI) and advocate policies that support the equal rights of all individuals² (Hong Kong Psychological Society, 2012b, Principle A Respect, A4 Standard of General Respect & Principle C Responsibility C1 Standard of General Responsibility).

¹ The process of disclosing sexual orientation or gender identity to others verbally or behaviourally by gender and sexually diverse individuals is commonly called as "coming out", a term that has been widely used in the western countries as well as in Asian cultures, such as Hong Kong, Japan, Taiwan, and China (Brainer, 2017; Chow & Cheng, 2010; Wang, 2021). In heteronormative contexts, a normative gender or sexuality is often assumed, unless people "come out" otherwise. It is important to also consider that "coming out" may not necessarily be the most psychologically sound option for all gender and sexually diverse individuals, and can have various implications depending on the intersection of family pressure, cultural, religious, race and legal contexts (Brainer, 2017; Huang & Chan, 2022; Wang, 2021).

² While other forms of practice are not within purview of this publication, content may be useful to other mental health-related or professional associations seeking to draw upon research and evidence to educate and inform on matters relevant to gender and sexually diverse individuals.

Integrating Science with An Affirmative Stance

The current position paper sits in solidarity with international mental health authorities, which have published statements or guidelines communicating affirmative psychology, which considers the role of stigma, discrimination, and marginalisation throughout various aspects of psychological practice. An affirmative stance regards diversities in sexual orientation and gender identity as a normative aspect of human sexuality rather than pathologising gender and sexually diverse individuals (American Psychiatric Association, 2020; American

Psychological Association, 2015, 2021a, 2021c; McLachlan et al., 2019; New Zealand Psychological Society, 2020; New Zealand Psychologists Board, 2019; Psychological Association of the Philippines, 2020a, 2020b; Psychological Society of South Africa, 2013, 2017; Singapore Psychological Society, 2021; Victor & Nel, 2017).

Following principles of affirmative psychology, the HKPS encourages all psychologists to:



Understand that sex, sexuality, and gender are heterogeneous and non-binary, and that variance exists in the experiences, challenges, and strengths within gender and sexually diverse populations (American Psychological Association, 2015, 2021a; Australian Psychological Society, 2014b; Cameron & Stinson, 2019; Flores, 2020; Hyde et al., 2019; Richards et al., 2016).



Remain consciously open, affirming, and inclusive of gender and sexually diverse individuals.



Recognise the influence of dominant and deeply entrenched social ideologies and heteronormative attitudes and behaviours.



Demonstrate respect for individual differences and recognise that imposing change according to preconceived notions and biases is a premise for infringement on professional and ethical practice.

Refer to [Appendix F](#) for more information about application of an affirmative stance across various domains of professional practice.



HKPS Position Statements

Position statements have been clustered for relevance and practicality across domains of professional practice and further supported by scientific literature and research studies.

2.1 HKPS Position: Scientist-Practitioner

Psychologists in professional practice should:

- 2.1.1** Understand that diversity in sexual orientation and gender identity exists as part of the human condition, is not mental illness, implies no impairment in judgement, stability, or social capabilities, and constitutes natural variants of human sexuality (Academy of Science of South Africa, 2015; American Psychiatric Association, 2020; American Psychological Association, 2015, 2021a; Australian Psychological Society, 2014b; Richards et al., 2016; World Medical Association, 2013).
- 2.1.2** Acknowledge the difference between sexual orientation and gender identity, particularly how stereotypical gender conformity or non-conformity does not necessarily reflect an individual's sexual orientation or gender identity (American Psychological Association, 2015, 2021a; Australian Psychological Society, 2014b; Hyde et al., 2019; Richards et al., 2016).
- 2.1.3** Adhere to evidence-based and diverse-affirming frames of reference in mental health assessment and interventions across the lifespan, research and publication, training, education, advocacy and policy (American Psychiatric Association, 2020; American Psychological Association, 2021a; Australian Psychological Society, 2014b; British Association for Counselling and Psychotherapy, 2019; British Psychological Society, 2019a; Fuller & Riggs, 2018; Horne et al., 2019; Huang & Chan, 2022; Nel, 2014; Pillay et al., 2019; Richards et al., 2016; Riggs et al., 2020). **Refer to Appendix F: The Premise for an Affirmative Stance.**
- 2.1.4** Call out institutionalised discrimination and structural stigma, inclusive of legal barriers, social policies, prejudice, bias and unequal opportunities, as minority stressors, evidenced as compromising on the mental health and wellbeing³ of gender and sexually diverse individuals (American Psychiatric Association, 2020; American Psychological Association, 2021a; Chan, Leung, et al., 2022; Chan & Mak, 2018a, 2018b, 2018c; Chan & Mak, 2021; Cochran et al., 2016; Fingerhut & Frost, 2020; Fingerhut et al., 2011; Hatzenbuehler, 2014; Hatzenbuehler, 2016; Hatzenbuehler et al., 2009; Hatzenbuehler & Link, 2014; Hatzenbuehler et al., 2010; Meyer, 1995, 2003; Meyer et al., 2017; Suen et al., 2018; Suen, Chan, & Wong, 2020; Suen et al., 2021a). **Refer to Appendix B** for a summary of legislation and social policy relevant to psychologists working with gender and sexually diverse individuals in Hong Kong.

³ The authors acknowledge that various alternative terminologies, including psychological health, wellbeing, etc., have been employed across the literature due to different operationalisations in research. The positioning states have employed "mental health and wellbeing" as a broad concept encompassing mental, physical, interpersonal/social, and spiritual health.

2.2

HKPS Position: Research and Public Education

Psychologists should act to ensure that the public is accurately informed about sexual orientation and gender identity⁴ through:

- 2.2.1** Addressing misconceptions linked with diversity in sexual orientation and gender identity and disseminating information representing evidence from credible and scientifically peer-reviewed sources to avoid any possible misuse or misrepresentation of these findings (Cameron & Stinson, 2019; Przeworski et al., 2021; Richards et al., 2016).
- 2.2.2** Promoting public knowledge and understanding of minority stressors and risk factors evidenced to impact on the livelihood, welfare, and health disparities of gender and sexually diverse individuals, including marginalisation, bullying, harassment, social policies and other forms of stigmatisation (Academy of Science of South Africa, 2015; American Psychological Association, 2021a, 2021b, 2021c, 2021d; Chan & Mak, 2018a, 2018b, 2018c; Chan & Mak, 2021; Fingerhut & Frost, 2020; Fingerhut et al., 2011; Hatzenbuehler, 2016; Riggs et al., 2020; Riggs et al., 2019; Suen, Chan, & Badgett, 2020; Suen et al., 2018; Suen, Chan, & Wong, 2020; Suen et al., 2021a; Suen et al., 2021b; Suen et al., 2016).
- 2.2.3** Increasing public knowledge and understanding of protective factors (e.g., family support, social acceptance, community connectedness) evidenced to buffer the impact of minority stressors on the mental health and wellbeing of gender and sexually diverse individuals (Chan, 2022; Chan & Mak, 2018a, 2018b, 2018c; Chan & Mak, 2020, 2021; Huang & Chan, 2022; Ioverno et al., 2016; Reczek, 2020).
- 2.2.4** Abiding with rigorous, population-based, observational, and cohort studies of health aimed at expanding scientific knowledge about risk factors or health disparities evidenced across gender and sexually diverse individuals while remaining sensitised to the vulnerabilities of participants through ensuring informed consent, confidentiality, and anonymity (Institute of Medicine, 2011b; Patterson et al., 2017).

⁴ It is important that psychologists recognise potential variability with people's assimilation and understanding of gender and sexual diversity, and it will take ongoing public education, shifts in discourse and time for transitions to take place.

2.3

HKPS Position: Conversion Therapies

As a professional body governing the practice of psychologists in Hong Kong, the Hong Kong Psychological Society (HKPS):

2.3.1 Denounces the use of conversion therapies in light of such practices having been publicly discredited based on priori assumptions not scientifically proven as effective and evidenced as potentially harmful (American Psychiatric Association, 2020; American Psychological Association, 2021c, 2021d; Bhugra et al., 2016; Blosnich et al., 2020; Chan, Leung, et al., 2022; Fish & Russell, 2020; Green et al., 2020; Independent Forensic Expert Group, 2020; Jowett et al., 2021; Madrigal-Borloz, 2020; Przeworski et al., 2021; Substance Abuse and Mental Health Services Administration, 2015; World Medical Association, 2013). **Refer to Appendix D: Background Research: Gender and Sexual Diversity: Moving Away from Change Efforts towards Scientifically Informed Care.**

2.3.2 Declares all practices that attempt to change a person's sexual orientation and gender identity as unethical for professional practice (Academy of Science of South Africa, 2015; American Psychiatric Association, 2018, 2020; American Psychological Association, 2021c, 2021d; Bhugra et al., 2016; Blosnich et al., 2020; Chan, Leung, et al., 2022; Fish & Russell, 2020; Green et al., 2020; Hong Kong College of Psychiatrists, 2011; Independent Forensic Expert Group, 2020; Jowett et al., 2021; Madrigal-Borloz, 2020; World Medical Association, 2013).

2.3.3 Advocates for scientifically informed, ethical and affirmative practices across all work and organisational contexts, which uphold self-determination and remain in clients' best interest (Academy of Science of South Africa, 2015; American Psychological Association, 2015, 2021a; British Psychological Society, 2022; Canadian Psychological Association, 2015; Hong Kong Psychological Society, 2012a, 2012c; Jowett et al., 2021; McLachlan et al., 2019; Pachankis et al., 2019; Pillay et al., 2019; Psychological Association of the Philippines, 2020a; Psychological Society of South Africa, 2013, 2017; Singapore Psychological Society, 2021; Soullard et al., 2021).

The HKPS, therefore, expects that all ethical psychologists:

2.3.4 Avoid discredited and/or potentially harmful interventions, and report other psychologists or licensed professionals observed to be using conversion practices to relevant ethics committees.

2.3.5 Advocate evidence-based, inclusive and affirmative practices which provide a safe space for gender and sexually diverse individuals to explore their identities and sexualities free from coercion. **Refer to Appendix F: The Premise for the Affirmative Stance.**

2.4 HKPS Position: Youth, School, and Education

Psychologists working in school and educational settings in Hong Kong should:

- 2.4.1** Understand how existing legal, social and educational policies potentially impact the welfare, safety, development and psychological health of gender and sexually diverse youth and adolescents, therefore assume leadership to:
- » Condemn discriminatory practices and behaviours, including bias or bullying
 - » Foster acceptance, equality and safety through support services that protect youth and students from discrimination, harassment, and violence (Chan & Mak, 2018b; Hatzenbuehler, 2016; Kwok, 2016; D. K. Kwok & K Kwok, 2021; Kwok & Wu, 2015; McLachlan et al., 2019; National Association of School Psychologists, 2014, 2017). Refer to **Appendix B** for a summary of legislation and social policy relevant to psychologists working with gender and sexually diverse individuals in Hong Kong.
- 2.4.2** Draw upon empirical data and scientifically peer-reviewed sources to better understand risk factors impacting the development, mental health and wellbeing of gender and sexually diverse youth and adolescents (Kosciw et al., 2018; Reczek, 2020; Ryan, 2021; The Boys and Girls' Clubs Association of Hong Kong, 2009; The Boys' and Girls' Clubs Association of Hong Kong, 2020a, 2020b; The Trevor Project, 2021).
- 2.4.3** Pledge the importance of social inclusion and perceived connectedness with parents and/or family of origin as protective factors for the development, mental health and wellbeing of gender and sexually diverse youth and adolescents (Bebes et al., 2013; Chan & Mak, 2018b; Health & Medicine, 2013; D. K. Kwok & K Kwok, 2021; Reczek, 2020; Ryan, 2021; The Boys' and Girls' Clubs Association of Hong Kong, 2020a, 2020b).
- 2.4.4** Recognise that sexual orientation and gender identity and expression may develop and evolve over time, and therefore advocate for:
- » Affirmative practices, education and regular training on issues and topics relevant to gender and sexual diversities during adolescence for parents, teaching staff, social workers, and students
 - » Safe spaces where youth and adolescents can access counselling support as well as explore identity and feelings without coercion or preconceived labels (Chan & Mak, 2018a, 2018b, 2018c; Chan, Wong, et al., 2022; Health & Medicine, 2013; Kwok & Wu, 2015; The Boys' and Girls' Clubs Association of Hong Kong, 2020a, 2020b; The Trevor Project, 2021).

2.5

HKPS Position: Fostering Safe and Inclusive Workplace Practices

Psychologists consulting into and/or working within workplace⁵ settings should:

- 2.5.1** Understand how existing legal and social policies potentially impact opportunities, human rights, and mental health and wellbeing of gender and sexually diverse individuals across workplaces (Barrow, 2020; Hatzenbuehler, 2016; Tang & Stephanie, 2019). **Refer to [Appendix B](#)** for a summary of legislation and social policy relevant to psychologists working with gender and sexually diverse individuals in Hong Kong.
- 2.5.2** Acknowledge that reliance upon a non-legally binding approach to preventing discrimination on the grounds of gender and sexual diversity transfers the onus onto science and education to drive safe and inclusive workplace policies, business cases and initiatives (Barrow, 2020; Colgan et al., 2007; Constitutional and Mainland Affairs Bureau Hong Kong, 2014; Equal Opportunities Commission, 2021; Suen et al., 2016).
- 2.5.3** Condemn any forms of discrimination or stigma, inclusive but not limited to incivility, bullying or unequal workplace practices, as minority stressors empirically linked with compromised mental health and wellbeing outcomes of gender and sexually diverse individuals (Chan & Mak, 2018b; Chan & Mak, 2021; Colgan et al., 2007; Colgan & Wright, 2011; Constitutional and Mainland Affairs Bureau Hong Kong, 2015; Lau & Stotzer, 2011; McLachlan et al., 2019; Meyer, 1995, 2003; Nel, 2014; Suen et al., 2021a; Victor & Nel, 2017).
- 2.5.4** Advocate for inclusion policies through an empirical approach, which affirms how recognition, social acceptance, and equality impact the mental health and wellbeing of gender and sexually diverse individuals (Association of World Citizens Hong Kong China, 2020; Barrow, 2020; Chan & Mak, 2018b; Colgan et al., 2007; Community Business Limited, 2012; Constitutional and Mainland Affairs Bureau Hong Kong, 2015; Equal Opportunities Commission, 2021; Lau & Stotzer, 2011; Lloren & Parini, 2016; Longarino, 2019; Meyer, 1995, 2003; Suen, Chan, & Wong, 2020; Suen et al., 2021a; Suen et al., 2016).

⁵ Workplaces has been employed as an umbrella term to cover all employment settings, including paid and unpaid employment, multinational and local entities, professional services, and consulting, small to medium enterprise, start-ups, and family-owned businesses.

2.6

HKPS Position: Diversity in Family and Relationship Systems

Psychologists researching or in professional practice with gender and sexually diverse couples and family systems should:

- 2.6.1** Remain abreast of existing and evolving legal and social policies in Hong Kong which impact the livelihood, aspirations, mental health and wellbeing of gender and sexually diverse individuals and their families and relationship systems. **Refer to Appendix B** for a summary of legislation and social policy relevant to psychologists working with gender and sexually diverse individuals in Hong Kong.
- 2.6.2** Understand the changing landscape of family composition and respect various forms of partnerships or relationships that are not necessarily heteronormative-based, legally recognised or biologically related (American Psychological Association, 2021a; British Psychological Society, 2019b; Chapman et al., 2012; McLachlan et al., 2019; Papernow, 2018; Teska et al., 2018).
- 2.6.3** Recognise the influence of diversity and complexities of relationships on the livelihood, mental health and wellbeing of sexually and gender diverse individuals, their children, families of origin and other people in their support networks (American Psychological Association, 2021a; Chan, Wong, et al., 2022; McLachlan et al., 2019; Psychological Society of South Africa, 2013; Teska et al., 2018).
- 2.6.4** Acknowledge that gender and sexually diverse parents could be equally competent as their heterosexual and cis-gender counterparts, considering the evidence base that has affirmed that family constellation is not an important factor contributing to children's wellbeing and healthy development (Bos et al., 2018; Bos & van Balen, 2008; Bos et al., 2007; Crouch et al., 2015; Flaks et al., 1995; Gates, 2015; Mallon, 2014; Prickett et al., 2015; Reczek, 2020; Short et al., 2007).
- 2.6.5** Pledge unequal or discriminatory social policies and perceived social stigma as key factors empirically associated with the compromised mental health and wellbeing of children and adolescents of gender and sexually diverse parents⁶ (Crouch et al., 2015; Knight et al., 2017; Tabor, 2019).

Please refer to the full version of the position paper for all references and appendices.

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⁶ A breadth of peer reviewed studies has reported no significant differences in development, adaptability, or overall wellbeing between children raised by lesbian or gay parents and children of heterosexual parents. In fact, studies have found that unequal or discriminatory social policies and perceived social stigma are key factors empirically associated with the compromised mental health and psychological wellbeing of children and adolescents of gender and sexually diverse parents.