

Supporting the information needs of GSRD therapists

A portfolio of resources for mental health practitioners

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Portfolio was produced as part of the author's studies for an MA in Library and Information Studies at University College London.

Content warning:

Resources discussed cover the history of marginalized relationship types, including BDSM and sex work.

All resources are appropriate for a professional context. However, some pages in the Bishopsgate Institute Archives Guides include sexually explicit images and frank discussions of sexual relationships.

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Introduction

Mental health practitioners undertaking training in Gender, Sexuality and Relationship Diversity (GSRD) therapy have unique information needs. As part of the core competencies for GSRD therapy (1), they need access to both peer-reviewed research into psychotherapy and sexology, as well as primary sources on the history of GSRD communities. This document reviews key resources to support the training of mental health practitioners.

Terminology

The term “LGBT” will be used to refer to people who identify with a marginalized sexuality, gender expression, or are intersex. The articles referenced use a range of related terms, such as GLBT or LGBTQI+. However, for consistency, “LGBT” is used unless quoting directly from a source.

“BDSM”, or “Bondage and Discipline, Dominance and Submission, Sadism, and Masochism” (2), is a relationship dynamic that encompasses elements of consensual restraint, domination, or pain. “Kink” and “Fetish” encompass sexual identities, such as Furies, not represented by BDSM. For consistency, the term “BDSM/Kink” will be used throughout the paper.

GSRD Therapy

Gender, Sex and Relationship Diversity therapy (GSRD therapy) is an emerging form of psychotherapy (3). It centers the experiences of clients¹ who identify with marginalized genders, sex, or relationship dynamics. GSRD encompasses the experiences of LGBT clients, as well as sex workers, those in non-monogamous relationships, and BDSM/Kink relationships (4). Training for GSRD therapy is available through accredited post-qualification diplomas undertaken by mental health professionals (5).

Information behavior

A study of mental health practitioners in Iran mapped the stages of treating a client with the stages of the Kuhlthau model of information seeking (6). It found that professionals without specialist knowledge spent more time in the “exploration” stages of information seeking. Practitioners undertaking GSRD training may also spend more time in the exploration stage, as they are in the process of developing specialist knowledge.

¹ “Client” is used instead of “patient” throughout this paper to be consistent with terminology used by GSRD training providers.

Figure 1: Stages of the Kuhlathau mode (7).

<p>uncertainty – initiation – selection – exploration – formulation – collection formulation/reformulation – resolution</p>
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Advocates for a trans-inclusive practice focus on exploring concepts of gender and sexuality with clients, rather than defining which “category” they fit into (3). This indicates a professional focus on “exploration” and “collection” stages of information seeking.

The internet is the most commonly used tool when researching GSRD communities (8). Searchers may believe they can find everything they need online (9), but online information often has a focus on moral judgements (10). Internet censorship can force communities to use code words (11). Internet “consensus” can conflict with the conclusions of peer-reviewed research (12). However, the internet can connect communities that feel dismissed by health care professionals (13). It can feel like a safer place to undertake research (14) and those interested in GSRD may not trust a library to provide relevant resources (15).

Information barriers

There are several key barriers practitioners face when searching for information about GSRD therapy.

Time

While people undertaking GSRD training have dedicated time for professional development, as a whole mental health practitioners are time poor. A recent study found that 44% of practitioners found their workload unmanageable (16).

Initiating research

Within GSRD communities, there is a perception of “information poverty” (15). People are often unsure where to start their research (14). Practitioners have limited resources for information searching, as they are primarily based in private practices or in the charity sector (17). They are unlikely to have access to peer reviewed articles or academic databases that may support them in initial searches.

Discrimination

One study indicates that parents’ first interactions with the transgender community will be through their children (10). Anecdotal evidence indicates that therapists similarly do not have prior experience with members of GSRD communities (18) and may have faced discrimination when seeking LGBT specific information (19). Practitioners will also need to work through their own prejudices (10) or internalized homophobia (20).

Stress

Lack of knowledge or confidence in specific areas can result in strong negative emotions, particularly stress (6, 18, 21). This in term can have a direct negative impact on the relationship between counsellors and clients (21).

Information needs

GSRD Therapy is defined as having seven key components (1). Those components require therapists to either keep up to date with research or to educate themselves about the experiences of specific marginalized communities.

Component	Name	Information Need	Kuhlathu Model stage
1	Commitment to Social Justice	History of specific communities. Self-reflection resources.	Exploration
2	Demonstration of Cultural Humility and Cultural Competency	Resources on different communities and cultures.	Exploration
3	Understanding the Impact of Oppression on LGBTQIA Mental Health	History of discrimination. Specific therapeutic techniques.	Exploration and Collection
4	Adopting a Trauma-Informed Approach	History of specific communities. Current research on the impact of trauma.	Formulation
5	Embracing Contemporary Sexological Perspectives of Sex Positivity	Current research on sex, sexuality, and sex positivity.	Exploration
6	Utilising Core Affirmative Theory & Research	Current research on stress and integration.	Exploration and Formulation
7	Fostering Joy	Best practice guidelines.	Formulation

The information requirements include both an understanding of current therapeutic practice, and the history of GSRD communities. Practitioners will need to access:

- Peer-reviewed research and grey literature to improve their understanding of current best practice.
- Primary and secondary sources about the experiences of gender, sexuality, and relationship diverse people.

Framework for assessing resources

A bespoke framework for assessing resources can be built from a community's specific information needs (22). Taking into consideration the information behavior, barriers and needs of GSRD practitioners, the following framework can be used to assess the relevance of specific resources.

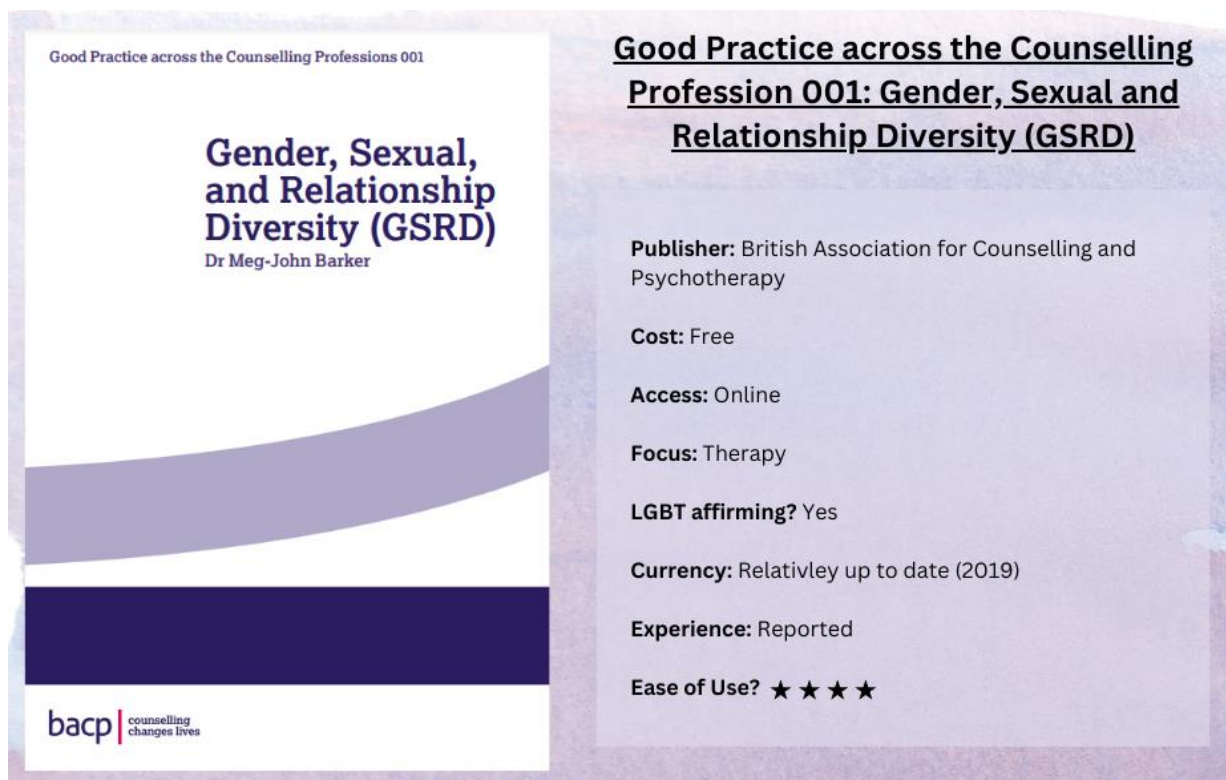
Metric	Definition	Notes
Cost	Is the resource free? And if not, is there a cost-effective way of gaining access?	Free resources will be prioritized over paid-for resources.
Online access or Physical access	Can the resource be accessed from anywhere, or does it require someone to physically travel to access it?	
Therapy focused or community focused	Is the resource about modern therapeutic practice and research? Or is it a tool for understanding a specific GSRD community?	
LGBT affirming	Do the resource providers actively participate in making a space for LGBT communities?	LGBT is used as a metric rather than GSRD as it is easier to measure.
Currency/Date	What time periods or age demographics does this resource represent?	
Reported experience/own experience	Does a resource provide the reported experience of GSRD communities or is it a single person's experience?	Used as an alternative to "accuracy" due to ongoing concerns with bias in research.
Ease-of-use	How easy is a resource to use? Will a user need any specialist knowledge or training?	Rated on a scale of 1 star to 5 stars, with 1 being very difficult to use and 5 being very easy.

Suggested Resources

General Guides

Good Practice across the Counselling Profession 001: Gender, Sexual and Relationship Diversity (GSRD)

Figure 2: "Gender, Sexual and Relationship Diversity" at a glance.



“[Gender, Sexual and Relationship Diversity \(GSRD\)](#)” is a free, online resource provided by the British Association for Counselling and Psychotherapy (BACP) as part of its series of good practice guides (2). Unlike a clinical guideline, the guide is not contractually binding (23). However, it supports members to fulfill their required commitment to the BACP “Ethical Framework for Counselling Professions” (23).

The BACP guide is aimed at mental health professionals and serves as a general introduction to GSRD therapy. It is written in a conversational style, which makes it suitable for all mental health practitioners, regardless of academic training. It is well laid out, with clear subject headings and a table of contents. However, there are intentionally very few in-text citations. This creates problems of reliability when

controversial subjects are discussed. The lengthy reference list at the end of the guide helps, but there are still areas that suffer from the lack of citations.

The guide defines terminology surrounding gender, sexuality, and relationship types. This makes it a useful starting point for identifying potential areas for future exploration. Common misconceptions about gender, sexuality and relationships are also discussed. Sections end with a list of further resources.

The pathologization of GSRD clients by the mental health profession is acknowledged in the BACP guide. Recent changes in how key resources like the DSM² refer to GSRD identities are described. The topic is approached in a sensitive way, without passing judgement on practitioners who may not be aware of recent developments.

The document addresses a range of issues that therapists might face in their practice, such as deciding whether to “come out” to their clients about their own GSRD characteristics. However, its treatment of complicated subjects is very brief, and the lack of in-text citations undermines reliability. While there are different expectations for good practice guidelines, lack of reliability is a known issue for clinical guidelines (24).

The BACP guide ends with a summary of good practice and outlines suggestions for improving therapeutic practice. Several of the suggestions are extremely broad (“Engage in CPD and reading on GSRD if you want to work with GSRD clients”) while others are more specific and achievable. The summary would be useful for practitioners in the “initiation” stage of information behavior.

Definitions provided are broad enough that they are unlikely to become immediately out of date. However, the guide is five years old and there are some dead links throughout. It should be used as a starting off point for research, and not as a single authoritative source.

Related resources

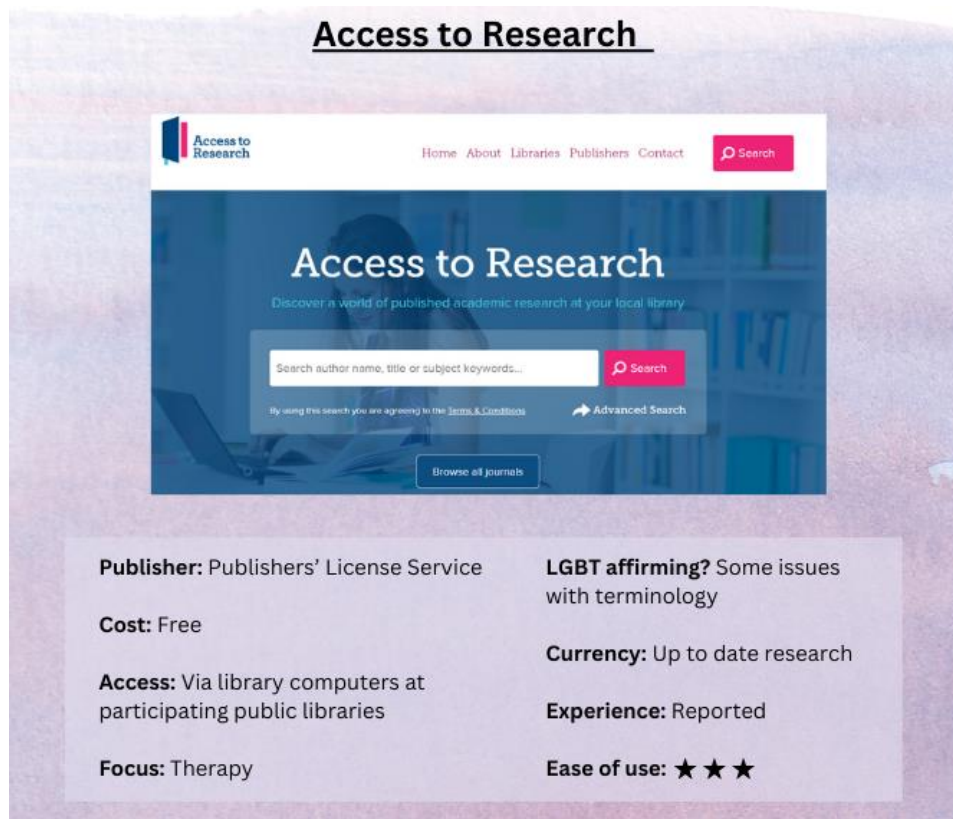
Sage Handbook of Counselling & Psychotherapy, 5th edition.

The *Sage Handbook of Counselling & Psychotherapy* includes a chapter on GSRD therapy (25). It is intended to be a textbook compiling current counselling and psychotherapy practices from across the discipline. It is more recent, so the practices described will be more up to date. However, unlike the BACP Guide it is not freely available online. Worldcat shows that some UK Public Libraries have copies in their collection (26), and an ebook can be purchased for £38 (27). The SAGE Handbook is a useful resource for those who want to deepen their understanding of GSRD Therapy, but it is not as accessible for practitioners at the initiation stages of research.

² DSM stands for Diagnostic and Statistical Manual of Mental Disorders.

Database: Access to Research

Figure 3: Access to Research at a glance



[Access to Research](#) is a database that provides free access to peer-reviewed journals to members of UK public libraries (28). Major academic publishers participate in the scheme, including Elsevier, Emerald, Taylor & Francis, and Wiley (29). As of January 2020, 95% of UK public libraries subscribe to Access to Research (30).

While it is free of charge, practitioners must use a public library computer to use Access to Research. The database can be searched from home, but articles cannot be accessed from home or on personal laptops. This presents a few barriers: lack of convenience, time to travel to a library, and availability of library computers. Additionally, only a single copy of an article can be made, limiting a practitioner's ability to retain and share research.

The database provides access to almost 200 psychology journals. This includes key resources for GSRD practitioners, such as the *Journal of gay & lesbian mental health*, *Journal of sex & marital therapy* and *Sexual and relationship therapy*. The search function utilizes Boolean operators, and there is an option for advanced searching.

Figure 4: Search options for Access to Research

Search Options Clear all ×

What are you searching for?

All Fields ▼ gay men

AND ▼ All Fields ▼ Mental Health +

AND ▼ All Fields ▼ Aging + 🗑️

Publication date

1 Year 3 Years 5 Years 10 Years

29/03/2021 📅 → 29/03/2024 📅 Clear

Content Type ↓ ☰ Discipline ↓ ☰ Fewer search options ^

Content Type Filter 🔍 Discipline Filter 🔍 Language 🔍

Any Type Any Type 🔍 Language Filter 🔍

✓ Selected 3 years ×

🔍 Search

It is not clear how search results are ranked, as top results can include a mixture of recent and older publications. Practitioners may find it useful to either limit the publication date or sort by most recent. However, results tend to be relevant. A search for “gay men AND mental health AND aging” has an estimated average precision of 1.

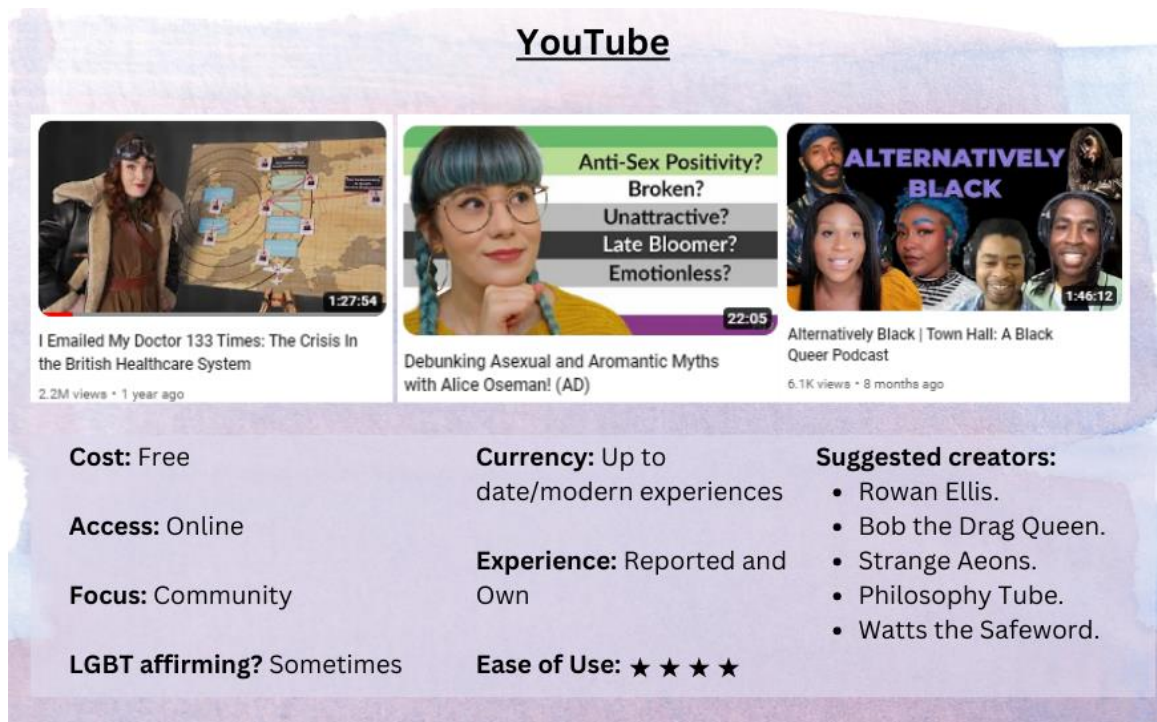
While databases are not explicitly LGBT affirming, journals specifically relevant to GSRD practitioners are categorized as “Sexual Problems.” This may be off putting to researchers who are from a GSRD background (19).

Access to Research has several barriers to access, primarily that it cannot be used remotely. However, it is an invaluable resource for practitioners. GSRD core competencies recommend reliance on peer reviewed research, rather than depending on “pop psychology” (31). Reliance on cultural understandings of marginalized groups can lead to further misinformation. Widespread sexualization of certain identities can result in pornography becoming a common source of information (15, 32). Popular culture often depicts some GSRD members as mentally ill or abusive (32).

A systematic review of research into Gay and Lesbian sexual healthcare shows significant biases and under researched areas, such as the needs of elderly LGBT people (33). This is in part due to the relatively recent removal of homosexuality from lists of mental illnesses (33). However, research in this area is continuing, and access to recent peer-reviewed articles will help practitioners keep up with current scientific guidance.

Audio Visual/Social Media: YouTube

Figure 5: YouTube at a glance



Social media is an essential resource for people who feel marginalized by the medical community (13). YouTube in particular is an accessible platform to start with. It is increasingly becoming a starting point for research, as well as a way to connect with new communities (34).

YouTube is a free, online platform for sharing video content. Practitioners will already have some familiarity with YouTube, as 96% of adults in the UK with internet access use YouTube at least once a month (35). The platform utilizes keyword search, and available filters focus on video length and quality rather than subject. The YouTube algorithm prioritizes responses that are relevant, authoritative and have high levels of engagement (36). While the accuracy of the algorithm requires scrutiny, engagement is useful for understanding what clients are likely to be accessing.

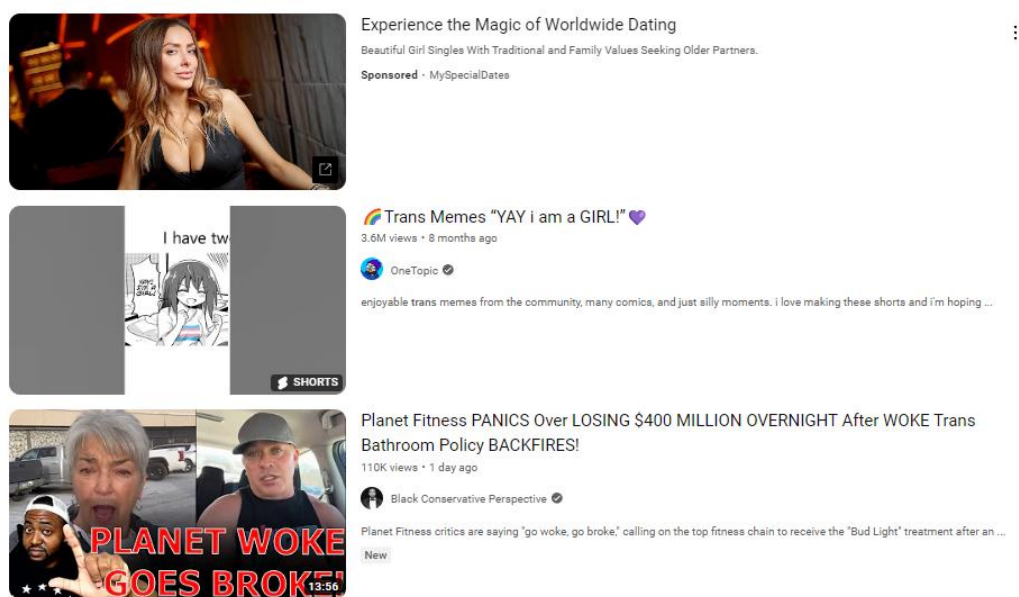
YouTube hosts secondary and primary sources about GSRD communities. Sometimes, different types of resources can be mixed into the same video. For example, [Philosophy Tube](#)'s "I Emailed My Doctor 133 Times" examines challenges transgender people face when navigating the NHS through the lens of the creator's own difficulty accessing gender affirming care (37).

YouTube can also serve as a jumping off point for identifying other platforms for exploration, such as [Strange Aeon](#)'s videos on Tumblr and Fanfiction subcultures (38, 39). Podcasts, like [Town Hall: A Black Queer Podcast](#), will often post recording on multiple platforms, including YouTube. Large creators tend to mention Patreon

accounts or Discord Accounts, all of which can serve as individual social media communities.

There is a huge amount of content on YouTube, there is a huge amount of content, which can be a problem for users who are already unsure where to start their research (14). Content creators focus on having a “right” or “wrong” opinion about GSRD-related topics (10). Anti-GSRD content can sit alongside videos by GSRD creators. For example, a search for “transgender” will bring up videos by trans creators, videos that object to mainstream acceptance of transgender people, and advertisements for dating services or surgeries.

Figure 6: Sample search results for “Transgender” on YouTube



Internet content is subject to censorship, so some communities will use alternative language to disguise their content (11). This can make it more difficult for relevant videos to be discovered. There is no fact checking system on YouTube, so plagiarism or misinformation is often only exposed by other content creators. In December 2023, videos by hbomborguy and Todd in the Shadows exposed systematic issues of plagiarism in the videos of James Somerton, a video essayist who focused on LGBT history (40, 41). hbomborguy’s four-hour video “Plagiarism and You(tube)” gained over 18 million views, resulting in internet discussion of Somerton focusing on his role in spreading misinformation. However, not all videos receive this level of scrutiny.

Creating a list of individual YouTube creators to start with can be useful for practitioners. However, in therapy the role of a practitioner is to “be” with the clients, not lead the client to specific conclusions (3). Clients’ introduction GSRD communities may be through unreliable media sources (32, 42). Engaging with inaccurate, but popular, content could be useful for practitioners – as long as they understand that the

videos may not be reliable representations of GSRD history or therapeutic best practice.

Related resources

Tumblr

Message boards specifically can be places where people from marginalized communities can find support (13). Tumblr is a free social media site which has more of a message board functionality than YouTube does. It has a much smaller userbase (43), which means that practitioners are less likely to have pre-existing knowledge of how to use the site. Exact user age range is difficult to judge, but currently seems to lean towards younger users (43). It is home to developing GSRD communities (38). YouTube may be a good place to start initial exploration of GSRD online communities, but Tumblr may be a better place for deeper exploration of some communities.

Organizations / Institutional Resources: Bishopsgate Institute

Figure 7: Bishopsgate Institute at a glance

Collections: Holds one of the largest LGBTQI+ archive in the UK and the UK Leather and Fetish Archives	LGBT affirming? Yes
Cost: Free	Currency: 1890s - present
Access: In person, with some online access	Experience: Own
Focus: Communities	Ease of use: ★ ★ ★

Three of the seven GSRD core competencies require exploration of specific communities (1). Primary sources, such as those held by archives or special collections libraries, can be invaluable resources for this exploration. However, practitioners may not believe a library can support their information needs (9, 14). Special collections and archives can seem inaccessible (44) and experienced researchers can struggle navigating them (45). Information seekers feel more comfortable in libraries that engage directly with GSRD communities (8).

Bishopsgate Institute is an independent cultural organization in London and a key resource for any practitioner interested in the history of LGBT people and BDSM/Kink

communities. Its library and archive includes one of the largest collections of LGBT archives in the UK (46) and the only archive dedicated to BDSM/Kink communities (47). Collections range from the 1890s to the present day.

Bishopsgate is free to use, however, require visiting the Institute's London building. The library and archive are closed on weekends, though it is open late on Wednesday evenings (48).

The collections are almost entirely “own voice” collections. They consist of primary sources, such as newspaper clippings, letters, diaries, photographs, and videos. Practitioners will need to interpret these documents to understand their relevance to their clients or the history of GSRD identities. However, engaging with archives can help reinforce and deepen learning about the history of marginalized communities (49, 50).

Archives are listed by name. As they are generally named after the subject or donor, practitioners may struggle to navigate the archive lists and identify relevant collections. Each archive subpage provides a description of the collection and the donor, details are not always provided about how the collection is relevant to GSRD history.

Figure 8: Excerpt from a collection subpage

Archives > LGBTQIA+ Archives

Paul Bunting Archive

Administrative/Biographical History

Paul Bunting was born in north London to artistic parents, from whom he inherited a love of music and art. At Wood Green school he excelled himself in various dramatic productions, including performing the lead role in Molière's "Le Bourgeois Gentilhomme", to great acclaim. He also won prizes for his many contributions to the school magazine Compass. After gaining a BSc (Hons) Sociology degree in 1968 at Rutherford College in Newcastle-upon-Tyne, Paul tried his hand at a number of jobs before finding his true calling in the health sector, working for the NHS for most of his life. In 1990 he gained an MSc at Birkbeck, University of London. He held Visiting Lectureships in Health Services Management at South Bank University and Carshalton College. And from 1990 to 1992 he was the Drop-In Centre Manager at the Landmark Day Centre for People Living with HIV and AIDS. Most recently he was responsible for developing clinical audit procedures for sexual health departments.



However, Bishopsgate makes several resources to make collection information more accessible. Selected material from the LGBTQI+ collections have been digitized and are freely available online (51). The organization has published several blog posts to highlight specific archives or themes in their collections (52). It runs events to introduce people to collections, including tours of the LGBTQI+ and BDSM/Kink collections (53, 54).

Archives at Bishopsgate are often intersectional, with some collections such as the Jeremy Magazine including resources on gay sex workers (55). Collecting is ongoing and several areas of the website encourage people to get in touch with their own stories.

However, the website itself struggles to stay up to date. Different listings of digitized LGBT collections are available on the “Our Archives Online” page and the “Our LGBTQI+ Archives Online” page (51, 56). This may be due to financial difficulties (57).

Audio Visual / Oral History: Eastside Community Heritage

Figure 9: Eastside Community Heritage at a glance

Eastside Community Heritage: Hidden Histories

Changing Minds
Mental Health in LGBTQ+ communities
Click [here](#) for project website
Recording the experiences of the LGBTQ+ community on mental health and wellbeing, from growing up to today.

30 Years of Living with HIV
The 'Don't Die of Ignorance' Campaign
Click [here](#) for project website
The impact of the Conservative Government's HIV prevention campaign in the 1980's.

Collections: Oral histories about LGBT life in East London	Access: Online	Currency: 1960s - present
Cost: Free	Focus: Communities	Experience: Own
	LGBT affirming? Yes	Ease of use: ★ ★ ★ ★ ★

Online heritage collections are likely to be more accessible to practitioners. Eastside Community Heritage provides free, online collections of oral histories. It is an independent charity based in Stratford and while its website indicates that it has a physical archive, much of the website is devoted to online collections of photographs, videos, and audio recordings. Collections focus on East London communities and cover a range of topics, including LGBT history.

The website is dated but has a clearly labeled drop-down menu. Links to individual projects are hyperlinked – normally using “Click here” which can cause issues for those using screen readers (58). Individual sites for oral history projects vary in layout, but finding recordings is generally straightforward. Oral histories are often accompanied by slideshows of related images.

While Eastside Community Heritage has a limited scope, its online offering makes it easier for practitioners to access. Oral histories are organized by theme, including a collection about LGBT Mental Health (59). Projects with only a handful of recorded participants, such as “Being Civil in Redbridge”, makes an effort to show LGBT people from a range of backgrounds with both positive and negative coming out experiences (60).

Oral history projects are made in partnership with LGBT organizations and center the experiences of the people interviewed. Despite not being a comprehensive view of GSRD communities, it is a useful resource for any practitioner who wants to better understand British LGBT history.

Individual project websites could disappear as resources age. However, as Eastside also has a physical archive, hopefully the oral histories will remain accessible as technology changes.

Conclusion

A common suggestion for supporting exploration of GSRD topics is to prepare a resources list (8, 42). A resource guide provides practitioners with a starting point (14) and reassures them that there is not as much “information poverty” (15) as they may expect. Providing practitioners with resources will help address feeling of helplessness when faced with situations not covered by their standard training (21). It will also support them in the stages of information behavior that they are likely to spend the most time in (6).

However, it is important that these guides are kept regularly up to date. Databases like Access to Research are dependent on cooperation from publishers, so may disappear. Independent charities can struggle financially, limiting the services they are able to support. Social media sites are subject to censorship and bias, so should be treated with caution.

Appendix 1: Resource list

General Guides

Good Practice across the Counselling Profession 001: Gender, Sexual and Relationship Diversity (GSRD). By Dr. Meg-John Barker. Lutterworth, Leicestershire: British Association for Counselling & Psychotherapy, 2019. [Online access](#).

The SAGE Handbook of Counselling and Psychotherapy. Edited by Terry Hanley and Laura Anne Winter. London: Sage Publications, 2023.

Database

[Access to Research](#). Access via Public Library PCs.

Social Media

[YouTube](#).

Suggested accounts:

- [Rowan Ellis.](#)
- [Bob the Drag Queen.](#)
- [Strange Aeons.](#)
- [Philosophy Tube.](#)
- [Watts the Safeword.](#)

[Tumblr.](#)

Organizations / Institutional Resources

[Bishopsgate Institute Library and Archives.](#)

Audio Visual / Oral History

[Eastside Community Heritage.](#)

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