

Hong Kong Psychological Society

(Brief Version) - January 2024

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Introduction

This position paper outlines the Hong Kong Psychological Society's (HKPS) revised positioning for psychologists currently providing services, in training, or aspiring to support the mental health and wellbeing of gender and sexually diverse individuals.

In solidarity with international psychology and mental health-related authorities, the HKPS's revised positioning has been conceptually grounded through a lens of:

- Affirmative psychological practice, which views gender and sexual diversity as natural and nonpathological (Pachankis, 2018; Pachankis et al., 2015; Pachankis et al., 2019; Parrish, 2017)
- Minority stress theory, acknowledging the impact of structural, societal and interpersonal prejudice and stigma on gender and sexually diverse individuals' mental health and wellbeing (Flentje et al., 2020; Frost et al., 2015; Meyer, 2003; Meyer et al., 2017)

Positioning statements have also been informed with various sources of evidence:

- The past decade's proliferation of local and international research efforts which have informed knowledge and practice related to gender and sexually diverse populations (Chan & Mak, 2018a, 2018b, 2018c; Chan & Mak, 2021; Hatzenbuehler, 2014; Hatzenbuehler, 2016; Hatzenbuehler & Link, 2014; Kwok, 2016; Kwok & Wu, 2015; Suen, Chan, & Wong, 2020; Suen et al., 2021a).
- A staged and consultative review process, integrating the expertise, views and perspectives of researchers and professional psychologists across various specialisations.
- Psychologists' duty to 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).

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 psychologists' commitment to upholding evidence-based interventions, which protect and safeguard the welfare of the individuals they serve.

Positioning statements are clustered across six subsections to ensure relevance across various contexts of psychological practice and specialisation in Hong Kong.

For references and appendices, please refer to the full English version of this position paper.

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 Psychological 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).
- 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.
- 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 wellbeing 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.

2.2

HKPS Position: Research and Public Education

Psychologists should act to ensure that the public is accurately informed about sexual orientation and gender identity¹ 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).

¹ 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; Soulliard 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.
- 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).
- 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 workplace² 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).
- 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).

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² 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).
- 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 parents (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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