

LGBTQ-Affirmative Psychotherapy Process Scale (LGBTQ-APPS): Scoring Manual

General Instructions:

The LGBTQ-Affirmative Psychotherapy Process Scale (LGBTQ-APPS) is an instrument designed to assess LGBTQ-affirmative therapist activity, process, and techniques used in a psychotherapy session. The rater's task is to search for evidence that a particular therapist action has occurred in the session. The goal of the LGBTQ-APPS is to describe LGBTQ-affirmative activity in the session as accurately and objectively as possible. Each of the 10 items is given a score of 0 or 1, based on whether the therapist did not deliver the technique or activity at all (0) or did so at least once (1). The total score on the LGBTQ-APPS thus ranges from 0-10.

Note that in order to receive a score of “1” on an item, the intervention needs to be delivered in a manner that is clearly free of explicit heterocentrist or homophobic content, as per APA guidelines.

The term LGBTQ is used in some of the items below for the sake of brevity, and refers to both sexual and gender minorities. The term LGBTQ Minority Stress is used to refer to any stressor or difficulty that relates to one's experiences as LGBTQ, such as discrimination, rejection, or negative impact on relationships with family or friends.

It is expected that items will receive a rating of 0 if the behavior or action was not present in the session. In order to receive a score of 1, the behavior or action must occur at least once during the session. In order to get a “1” on an item the therapist needs to be at least slightly active and not just respond with a quick word or two to something brought up by patient. However, a score of 1 should not take on a magical quality, to be reserved for only those who perform treatment perfectly. That is, a score of 1 can range from a shorter attempt on the part of the therapist to engage in the particular item's behavior or action with limited or no follow up, through a behavior or action that is addressed on separate occasions with some follow up exploration, to continued efforts by the therapist to exhibit the behavior or action indicated by the item with sustained follow up. The rater of the LGBTQ-APPS should make decisions based on the individual item guidelines provided in this manual.

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Item Descriptions:

1. **The therapist focuses discussion on the patient's sexual orientation or gender identity.** A score of 1 should be given if the therapist encourages discussion or asks questions relating to an aspect of the patient's LGBTQ identity. If the therapist makes no references into the patient's sexual orientation or gender identity, score a 0 on this item. Note that in order to receive a score of "1" on this item, the reference to an LGBTQ identity needs to be delivered in a manner that is clearly free of explicit heterocentrist or homophobic content. To receive a score of 1, the therapist should explicitly refer to the patient's LGBTQ identity.

Examples:

- "How old were you when you first realized you were pansexual?"
 - "How would you say you define your gender identity today?"
 - "Can you tell me more about how coming to terms with your sexuality has impacted you as a person?"
 - "What was it like for you when you fell in love with someone of the same gender for the first time?"
2. **The therapist focuses discussion on the patient's romantic or sexual experiences.** A score of 1 should be given if the therapist focuses discussion on the patient's romantic or sexual experiences. If the therapist makes no references into the patient's sexual or romantic experiences, score a 0 on this item. Note that in order to receive a score of "1" on this item, the reference to romantic and sexual experiences needs to be delivered in a manner that is clearly free of explicit heterocentrist or homophobic content. If the therapist encourages discussion of patient's ideas about hypothetical romantic or sexual experiences, a score of 1 should be given as well.

Examples:

- "It sounds like things have been rocky between you and your partner lately. Tell me more about the feelings that are coming up for you as we're discussing this topic."
 - "What kind of things do you value in romantic relationships?"
 - "What have things been like sexually between you and your partner?"
 - "You've mentioned using dating apps more frequently lately. What's that been like for you?"
3. **The therapist shows openness to exploring issues related to their own sexuality or gender (therapist self-disclosure qualifies but is not required).** A score of 1 should be given if the therapist verbally expresses openness to exploring issues related to their own sexuality or gender. If the therapist does not actively show such openness in the session, score a 0 on this item. Note that in order to receive a score of "1" on this item, this openness needs to be expressed in a manner that is clearly free of explicit heterocentrist or homophobic content. If the therapist refers to "our community" referring to the LGBTQ community as something that the therapist is a part of as well, it implies disclosure and can qualify for a "1" coding; however, the statement has to be delivered in the context of a discussion of the LGBTQ community to get a score of 1.

Examples:

- “What would it mean to you if you knew I were queer too?”
 - “Yeah that makes sense that you feel scared about holding hands with someone in public. As LGBT people, people in *our community* often express that fear.”
4. **The therapist expresses or promotes an open and non-judgmental approach to any safe and consensual sexual behavior or fantasy.** A score of 1 should be given if the therapist verbally expresses or promotes an open and non-judgmental approach to any safe and consensual sexual behavior or fantasy. If the therapist does not actively promote such approach in the session, score a 0 on this item. Note that in order to receive a score of “1” on this item, this needs to be expressed in a manner that is clearly free of explicit heterocentrist or homophobic content. The therapist nodding or not expressing disapproval does not count as promoting openness. The therapist needs to actively approve of the sexual thought, fantasy, or consensual behavior.

Examples:

- “On our recent session you mentioned something about being afraid that I’m secretly judging you about the sexual fantasy that you shared with me. I just wanted you to know I believe that there’s nothing wrong with that. But I’m curious what it’s like for you to talk about this stuff with me?”
 - “I want you to know that I really do believe that any sexual activity between consenting adults is legitimate. I want this to feel like a space where we can explore your sexuality without judgement.”
5. **The therapist focuses discussion on LGBTQ minority stress as potentially related to psychological distress or negative/uncomfortable feelings.** A score of 1 should be given if the therapist focuses discussion on the patient’s experiences as LGBTQ as potentially related to psychological distress or negative/uncomfortable feelings. If the therapist does not focus on this area in the session, score a 0 on this item. Note that in order to receive a score of “1” on this item, this needs to be expressed in a manner that is clearly free of explicit heterocentrist or homophobic content. The therapist discussing difficult aspects of being LGBTQ without explicitly naming minority stress can count as a reference to minority stress, as long as the actual reference to the potential psychological impact of minority stress (such as psychological distress, an emotional struggle, or mental illness) is clearly stated. Discussing and making a connection between distress due to fear of illness, health consequences, or dying, related to their experiences as LGBTQ, should be given a score of 1 for this item.

Examples:

- “It sounds like some of your experiences in high school related to being contributed to a lot of the hopelessness and sleeping problems that you were having at the time. Does that sound accurate?”
 - “You know, as your therapist I think it is also important that I share with that there is research suggesting that the higher rates of mental illness among sexual and gender minorities are related to the ongoing daily exposure to ‘minority stress’ stressors. So, you are not alone in experiencing this distress.”
6. **The therapist focuses discussion on LGBTQ minority stress as potentially related to the patient’s beliefs about themselves, the world, or the future.** A score of 1 should be given if the therapist focuses discussion on the patient’s experiences as LGBTQ as potentially related to the

patient's beliefs about themselves, the world, or the future. If the therapist does not focus on this area in the session, score a 0 on this item. Note that in order to receive a score of "1" on this item, this needs to be expressed in a manner that is clearly free of explicit heterocentrist or homophobic content. The therapist discussing difficult aspects of being LGBTQ without explicitly naming minority stress can count as a reference to minority stress, as long as the actual reference to the potential psychological impact of minority stress (such as beliefs about the self, one's future, or the world) is clearly stated. Discussing and making a connection between the patient's beliefs about their chances of having negative health consequences in the future or dying early related to their experiences as LGBTQ, should be given a score of 1 for this item.

Examples:

- "When you say that you don't believe your worthy of being loved, I wonder if part of that is related to your experiences as a queer woman."
- "I notice that right after we started talking about being bisexual, your mind went to a hopeless mindset in thinking about your future life. Are the two things connected for you in any way?"

7. **The therapist focuses discussion on LGBTQ minority stress as potentially related to the patient's recurrent patterns in relationships.** A score of 1 should be given if the therapist focuses discussion on the patient's experiences as LGBTQ as potentially related to the patient's recurrent patterns in relationships. If the therapist does not focus on this area in the session, score a 0 on this item. Note that in order to receive a score of "1" on this item, this needs to be expressed in a manner that is clearly free of explicit heterocentrist or homophobic content. The therapist discussing difficult aspects of being LGBTQ without explicitly naming minority stress can count as a reference to minority stress, as long as the actual reference to the potential psychological impact of minority stress (such as unhealthy relationship patterns) is clearly stated.

Example:

- "After you had come out as trans to your best friend, he suddenly became distant. This painful experience might be related to how difficult it is for you to trust others."

8. **The therapist focuses discussion on the patient's strength or resilience in coping with LGBTQ minority stress experiences.** A score of 1 should be given if the therapist focuses discussion on the patient's strength or resilience in coping with experiences related to being LGBTQ. If the therapist does not focus on this area in the session, score a 0 on this item. Note that in order to receive a score of "1" on this item, this needs to be expressed in a manner that is clearly free of explicit heterocentrist or homophobic content. The therapist discussing the patient's strength or resilience in coping with being LGBTQ without explicitly naming minority stress can count as a reference to minority stress, as long as the actual reference to the patient's psychological resources/resilience is clearly stated. This is a supportive psychotherapy technique that has to be clearly tied to experiences related to the patient's LGBTQ identity.

Example:

- "Hiding who you are while you were serving in the army must have been so hard, caring that secret with you all that time. It's amazing to me how far you've come and how resilient you have been in dealing with such difficult things."

9. **The therapist offers to provide the patient with information about LGBTQ social groups or LGBTQ mental health/medical/other health-related resources.** A score of 1 should be given if the therapist offers to provide the patient with information about LGBTQ social groups or LGBTQ mental health/medical/other health-related resources. If the therapist does engage in this activity in the session, score a 0 on this item. Note that in order to receive a score of “1” on this item, this needs to be expressed in a manner that is clearly free of explicit heterocentrist or homophobic content. A score of 1 should be given only if the LGBTQ aspect of referral source is explicitly stated or implied in the conversation between therapist-patient, and not based on the rater's knowledge that a certain referral place is LGBTQ oriented. The therapist referring to medical clinics, such as an HIV-clinic, can count but only if reference to an additional LGBTQ-affirmative aspect of the clinic or referral is clearly stated by the therapist.

Examples:

- “I have just learned that there’s a group of lesbian and bisexual cis/trans women that meets every week to watch 80’s movie classics. I thought you might be interested since you told me last week that you are looking to socialize more.”
- “Are you interested in group therapy? I know of some LGBTQ oriented psychotherapy groups that meet once a week on campus, if that sounds appealing to you.”

10. **The therapist focuses discussion and/or expresses support in a behavior, thought, or feeling of the patient that implies self-acceptance of an LGBTQ identity, to include discussion of coming out experiences (past, present, or future).** A score of 1 should be given if the therapist focuses discussion and/or expresses support in a behavior, thought, or feeling of the patient that implies self-acceptance of an LGBTQ identity, to include discussion of coming out experiences (past, present, or future). If the therapist does engage in this activity in the session, score a 0 on this item. Note that in order to receive a score of “1” on this item, this needs to be expressed in a manner that is clearly free of explicit heterocentrist or homophobic content.

Examples:

- “When you told me about holding your girlfriend’s hands during the local farmers’ market, I felt impressed by your courage. Sounds like that must have been really hard for you to do in that setting.”
- “It sounds like coming out to your father this weekend gave you such a big relief, after planning it this whole year. I was really happy for you for making that step. How are you feeling now?”
- “It sounds like attending the 40’s and 50’s LGBTQ book club has really been enjoyable to you. I bet it feels nice to build connections and possibly make friendships within the community.”

LGBTQ-Affirmative Psychotherapy Process Scale (Rater Version)

Therapist _____

Session # _____

Patient ID _____

Rater _____

Total Score (0-10): _____

Instructions: Using the scale provided below, please rate for each statement whether the therapist did not use at all (0) or did use at least once (1) the following interventions during the session coded. Use the “sum” row to calculate a total score on the scale ranging from 0 to 10. Note that in order to receive a score of “1” on an item, the intervention needs to be delivered in a manner that is *clearly free of explicit heterocentrist or homophobic content*.

The term LGBTQ is used in some of the items below for the sake of brevity, and refers to both sexual and gender minorities. The term LGBTQ Minority Stress is used to refer to any stressor or difficulty that relates to one’s experiences as LGBTQ, including discrimination, rejection, or negative impact on relationships with family or friends.

Scale:

		0	1
1	The therapist focuses discussion on the patient’s sexual orientation or gender identity		
2	The therapist focuses discussion on the patient’s romantic or sexual experiences		
3	The therapist shows openness to exploring issues related to their own sexuality or gender (therapist self-disclosure qualifies but is not required)		
4	The therapist expresses or promotes an open and non-judgmental approach to any safe and consensual sexual behavior or fantasy		
5	The therapist focuses discussion on LGBTQ minority stress as potentially related to psychological distress or negative/uncomfortable feelings		
6	The therapist focuses discussion on LGBTQ minority stress as potentially related to the patient’s beliefs about themselves, the world, or the future		
7	The therapist focuses discussion on LGBTQ minority stress as potentially related to the patient’s recurrent patterns in relationships		
8	The therapist focuses discussion on the patient’s strength or resilience in coping with LGBTQ minority stress experiences		
9	The therapist offers to provide the patient with information about LGBTQ social groups or LGBTQ mental health/medical/other health-related resources		
10	The therapist focuses discussion and/or expresses support in a behavior, thought, or feeling of the patient that implies self-acceptance of an LGBTQ identity, to include discussion of coming out experiences (past, present, or future)		

LGBTQ-Affirmative Psychotherapy Process Scale (Patient Version)

Therapist _____

Session # _____

Patient ID _____

Rater _____

Total Score (0-10): _____

Instructions: Using the scale provided below, please rate for each statement whether your therapist did not use at all (0) or did use at least once (1) the following interventions during your most recent session. **Score “1” only if your therapist did so in a manner that you felt was clearly free of explicit heterocentrist or homophobic content.** The term LGBTQ is used in some of the items below for the sake of brevity, and refers to both sexual and gender minorities.

Scale:

		0	1
1	My therapist focused discussion on my sexual orientation or gender identity		
2	My therapist focused discussion on my romantic or sexual experiences		
3	My therapist showed openness to exploring with me issues related to their own sexuality or gender (if you therapist self-disclosed it qualifies as well)		
4	My therapist expressed or promoted an open and non-judgmental approach to any safe and consensual sexual behavior or fantasy		
5	My therapist focused discussion on my experiences as LGBTQ as potentially related to psychological distress or negative/uncomfortable feelings		
6	My therapist focuses discussion on my experiences as LGBTQ as potentially related to my beliefs about myself, the world, or the future		
7	My therapist focused discussion on my experiences a LGBTQ as potentially related to my recurrent patterns in relationships		
8	My therapist focused discussion on my strength or resilience in coping with my experiences as LGBTQ		
9	My therapist offered to provide me with information about LGBTQ social groups or LGBTQ mental health/medical/other health-related resources		
10	My therapist focused discussion and/or expressed support in a behavior, thought, or feeling of mine that implies self-acceptance of my LGBTQ identity, including discussion of coming out experiences (past, present, or hypothetical/future)		

LGBTQ-Affirmative Psychotherapy Process Scale (Therapist Version)

Therapist _____

Session # _____

Patient ID _____

Rater _____

Total Score (0-10): _____

Instructions: Using the scale provided below, please rate for each statement whether you did not use at all (0) or did use at least once (1) the following interventions during your most recent session with the patient. **Score “1” only if you feel that you did so in a manner that you felt was clearly free of explicit heterocentrism or homophobic content.** The term LGBTQ is used in some of the items below for the sake of brevity, and refers to both sexual and gender minorities.

Scale:

		0	1
1	I focused discussion on the patient’s sexual orientation or gender identity		
2	I focused discussion on the patient’s romantic or sexual experiences		
3	I showed openness to exploring with the patient issues related to my own sexuality or gender (self-disclosure qualifies as well)		
4	I expressed or promoted an open and non-judgmental approach to any safe and consensual sexual behavior or fantasy		
5	I focused discussion on the patient’s experiences as LGBTQ as potentially related to psychological distress or negative/uncomfortable feelings		
6	I focused discussion on the patient’s experiences as LGBTQ as potentially related to their beliefs about themselves, the world, or the future		
7	I focused discussion on the patient’s experiences as LGBTQ as potentially related to their recurrent patterns in relationships		
8	I focused discussion on the patient’s strength or resilience in coping with their experiences as LGBTQ		
9	I offered to provide the patient with information about LGBTQ social groups or LGBTQ mental health/medical/other health-related resources		
10	I focused discussion and/or expressed support in a behavior, thought, or feeling of the patient that implies self-acceptance of their LGBTQ identity, including discussion of coming out experiences (past, present, or hypothetical/future)		