

## LGBTQIA & Mental Health

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As I sit in Hyderabad, Telangana and start working on this piece of paper about LGBT and mental health from a lay gay person's perspective with no scientific knowledge of mental health there in western India, Goa's Sports and Youth affairs minister Mr. Ramesh Tawadkar makes an announcement on setting up centers LGBT youth to cure them.

Mr. Tawadkar said, "We will make them (LGBT youth) normal. We will have a centre for them. Like Alcoholic Anonymous centres, we will have centres. We will train them and give them medicines too,".

I initially thought that I would try to present here a picture of mental trauma that LGBT people go through in their lifetime and how it is mostly left unnoticed and unaddressed. But this new unpleasant incident reminded me that we still live in the times where the whole debate of looking down upon the sexuality of LGBT people as a mental disorder is very much unsettled. Saying so I would now like to project on two major aspects in this paper, one being "Homosexuality and gender identity as a mental health issue" and the other on "Mental health issues of LGBT people."

Ideas and observations presented in this paper are not based on any specific research, they are purely based on my individual reading/experiences as an open-and-out-queer person and also from the learnings I had from my other queer friends.

The idea of homosexuality as a deviant nature emerged out of religious moralistic understanding which eventually paved its way into the field of medical sciences, got categorised as a disease (one that could be and must be treated and cured), without any proper scientific evidence. This shows the extent to which moral and ethical beliefs of religion had penetrated into the field of science. With the passage of time, there was a shift in the arguments of pathologising of homosexuality. For a good long time it was believed that children with single parents and children with troubled and abusive childhood tend to have these perverse homosexual tendencies. The works of people like Alfred Kinsey and Evelyn Hooker during 1940's to 1960's challenged the notion of considering homosexuality as a disorder. In 1973, American Psychiatric Association had called for voting among the board of directors to remove homosexuality from the list of Diagnostic and Statistical Manual of Mental Disorders (DSM), which was passed by members vote in 1974. Though this was a welcoming move it did not completely end the debate of treating homosexuality. Further it resulted in creation of two categories of homosexuality, ego-syntonic homosexuality and ego-dystonic homosexuality. Though the diagnosis has been completely removed from the DSM, this classification has been adopted by Indian Psychiatric Association and Medical Council of India.

**Ego-dystonic** sexual orientation is a mental disorder where the individual has a great discomfort with his/her sexual orientation and feels/expresses a strong desire to change. In contrast to this **Ego-syntonic** homosexuality is a state where the give individual is absolutely comfortable with his/her sexual orientation.

This classification is a big laugh at the lives of homosexual people, with the kind of stigma, hatred and taboo a queer person is put to live with, would he/she be in a situation of making an independent choice of living life as a happy queer person without a conflict of thought.

With scarce support and inadequate information, most queer people would be in a state of confusion and dilemma in the initial days after realising the difference of their sexuality from that of the so called normal heterosexual crowd, would this be considered as ego-dystonic homosexuality? adding to this, the child rights in this country are still evolving and being discussed at different levels. When a child comes out to his/her parents as gay or lesbian or if parents happen to find out about their child's homosexuality, who would be the decision maker of considering this child homosexuality as ego-dystonic or ego-syntonic?

All these questions would project how this classification has only tried to maintain the existing anti-gay and homophobic status.

"That I have been open and out as a queer person living in Hyderabad. Since my early childhood, I always knew that I was sexually attracted to men unlike others around me. I was never attracted to the opposite sex. I am the only child of my parents. I told my parents about my sexuality when I was 20 and they could never understand it. They thought that I had made a choice to be homosexual. In the past my parents put me through a battery of very traumatic and unscientific therapies (called conversion or reparative therapies) to try to change my sexual orientation.

That at the age of twenty and soon after my graduation exams, I was admitted to a psychiatric home for 8 months and was put through anti-psychotic drugs and Electroconvulsive Therapy (ECT). As these treatments didn't seem to work to my father's satisfaction, he forcibly took me off them very abruptly without allowing time for a reduction of dosage. I suffered two months of severe withdrawal symptoms ranging from intense fear, anxiety, fear of death and trauma."

The above account is that of a trans-woman in Hyderabad who has lived through this psychiatric abuse and violence during her adolescence in late 1990's! This particular individual's story is just one among many such LGBTQ people who survived the inhuman reparative and electro convulsive therapies. Although the LGBT rights movement in India has come a long way, unfortunately the medical fraternity, especially the psychiatric stream, has more or less remained in the same state of offering treatment and cure to homosexuality. Most of the people I meet in the community have been taken to psychiatrists after coming out to their parents about their homosexuality. The fact that should be surprising is not that the parents take their gay children to the psychiatrist, but the assurance that these medical professionals offer about straightening their sexuality. The frequency at which I happen to meet people in the LGBT community who express their distress of being taken to a doctor and be prescribed to have anti-psychotic drugs deeply worries me. Some people go to their psychiatrists to keep their parents content and to avoid taking the prescribed drugs; whereas most of the others are forced to the clinic and are carefully monitored to ensure that they take the drugs, which in turn have various adverse effects.

Despite the clear stand of World Health Organization, APA and many other international bodies that homosexuality is a normal and healthy variant of human sexuality; sadly, the state of affairs in this regard has remained regressive in our country. It's time for the mental health fraternity and set-ups such as Medical Council of India to take a progressive stand and ensure a healthy and safe living to the LGBT people in the country.

Till now I have described the still existing notion of homosexuality as a mental disorder, now let's see where the mental health of LGBT people stands amidst of a situation like this. From the studies of Evelyn Hooker in 1950's till the various present-day studies, many have asserted that there is no psychological difference between heterosexual and homosexual

individuals; like any other people homosexual people also go through stages of distress, depressions, anxiety disorder and also suicidal tendencies. Most of these are regarded as symptoms of homosexuality itself and it is often completely ignored that these are because of the stigma, exclusion and rejection for being a homosexual.

The roots of mental distress and depression among LGBT people can be found from their childhood itself. A majority of the LGBT individuals report, being bullied and harassed as kids in school. Most of this bullying goes very much unnoticed both by teachers and parents, under the opinion that it's okay as this might help the particular child who is being bullied to change and behave more like a boy and more like a girl. The constant effort by peers, parents and teachers in correcting and making children fit in the apt roles of being a boy and girl unavoidably has its implications on the LGBT people and further results in internal homophobia. This continues further as they grown into adults, they are taught about the gender appropriate skills/manner, walk, talk, mannerism, compelling the person to fit into the socially sanctioned, heterosexual behavior. Also the effort that a homosexual people need to put in to fit into the so called normality and being continuously conscious among their peers and family to hide their true sexual identity, makes life no easier.

A large part of this is very much unaddressed, resulting in a great level of depression and anxiety disorder among LGBT people. Depression of an LGBT individual is very much correlated with the social acceptance and personal acceptance that the individual have about his/her sexuality and gender identity. By now there are lot of researches and studies which state that suicidal tendencies among LGBT youth are relatively higher than those among heterosexual youth.

The responsibility of assuring an LGBT person with safe and healthy environment lies not only with family and peers but also with the mental health fraternity. As medical professionals they play a huge role in providing society with rightful scientific information about sexuality and gender related issues, in order to make it an inclusive one. Being Lesbian, Gay, Bisexual, Transgender, Asexual and Queer is not a mental health problem and neither for being so does one deserve to be subjected to a life which in turn affects the mental health adversely.

The basic issue ... is not whether some or many homosexuals can be found to be neurotically disturbed. In a society like ours where homosexuals are uniformly treated with disparagement or contempt—to say nothing about outright hostility—it would be surprising indeed if substantial numbers of them did not suffer from an impaired self-image and some degree of unhappiness with their stigmatized status. ... It is manifestly unwarranted and inaccurate, however, to attribute such neuroticism, when it exists, to intrinsic aspects of homosexuality itself.

---- Marmor J. Epilogue, 1980.