Moving beyond the binaries: Adam Jowett in conversation with Martin Milton

Jowett, A.

Author post-print (accepted) deposited in CURVE May 2016

Original citation & hyperlink:

Jowett, A. (2016) Moving beyond the binaries: Adam Jowett in conversation with Martin Milton. Psychology of Sexualities Review, volume 7 (1).

http://shop.bps.org.uk/publications/psychology-of-sexualities-review-vol-7-no-1-spring-2016.html

Publisher statement: This is a pre-publication version of the following article: Jowett, A. (2016) Moving beyond the binaries: Adam Jowett in conversation with Martin Milton. *Psychology of Sexualities Review*, volume 7 (1).

Copyright © and Moral Rights are retained by the author(s) and/ or other copyright owners. A copy can be downloaded for personal non-commercial research or study, without prior permission or charge. This item cannot be reproduced or quoted extensively from without first obtaining permission in writing from the copyright holder(s). The content must not be changed in any way or sold commercially in any format or medium without the formal permission of the copyright holders.

This document is the author's post-print version, incorporating any revisions agreed during the peer-review process. Some differences between the published version and this version may remain and you are advised to consult the published version if you wish to cite from it.

CURVE is the Institutional Repository for Coventry University http://curve.coventry.ac.uk/open

Interview

Moving Beyond the Binaries

Adam Jowett in conversation with Martin Milton

Martin is a Professor of Counselling Psychology at Regent's University London and also works in independent practice as a Chartered Counselling Psychologist and psychotherapist. Martin has previously served on the inaugural Committee of the Section when it was first established as the Lesbian and Gay Psychology Section and was keynote speaker at our 2015 AGM event. He is also a former Chair of the British Psychological Society (BPS) Division of Counselling Psychology. In 2012 Martin received the BPS Award for the promoting of equality of opportunity. He has published widely on the topic of sexuality in the context of counselling and psychotherapy and his most recent book was titled 'Sexuality: Existential perspectives' (Milton, 2014). I interviewed Martin in January 2016 about how he became involved in the Section, his career as both an academic and practitioner and the relationship between homophobia and mental health. What follows is an edited version of our conversation – Adam Jowett

AJ: Thank you for taking the time to speak with me. Can you tell me a little bit about how you first became involved in the Section, because you were on the inaugural committee of the Section weren't you?

MM: Yes. At the time I was in the midst of my own doctoral work which was on the meaning of gay affirmative therapy; I had also previously undertaken a study on psychotherapy with lesbians and gay men, for the Division of Counselling Psychology. I was working at the University of Surrey and my office was one or two doors down from Adrian Coyle. Through Adrian I met Ian (Rivers), Celia (Kitzinger) and Sue (Wilkinson) and others who were attempting to set up a Lesbian and Gay Psychology Section. So I came on board. As well as attending some of the BPS meetings that were involved I remember a lot of it was practical, mailing things out to members and doing some of the publicity around it. All this was pre-Twitter so everything that we might now do digitally had to be done via stuffing hand written envelopes. I imagine a lot of people are aware of the

history of the attempts to get the Section established which Sue (Wilkinson, 1999) has written about elsewhere (see also the interview with Elizabeth Peel in the previous issue). I have to say I was completely shocked by some of the responses we got which were quite nasty. I mean there was a lot of support as well but there were some very personal nasty responses.

AJ: So what kind of things were people taking issue with?

MM: Oh it was horrible. It wasn't just anti what we were trying to do for the discipline it was very personalized and hateful. People had crossed out lesbian and gay and had written 'shirtlifters', that kind of thing. And I wasn't expecting that any of that would have happened. Remember it was only BPS members it was going to, not just random members of the public or readers of some far right rag. These were people you would think of as colleagues. It made me realize that I was in my own little liberal bubble. I had expected that bureaucracy might get in the way of us setting up the Section but I didn't expect the hate. It really proved that such a Section was needed.

AJ: So what was the impetus for you getting involved personally at that early stage?

MM: Well I had been a bit disappointed when I joined the profession, as it wasn't the safe home I thought it would be. Then I thought that I couldn't just be disappointed and leave it up to other people to tackle, that wasn't the way to make things change. I also wanted to get involved so that the practitioner perspective was present and not just left to the academic psychologists who can sometimes be dismissive of a range of psychotherapies. As I said, I knew Adrian Coyle and then others so there was also a social aspect to it as well. It was a mix of things I suppose. So I was part of the successful attempt to get the Section established and then we had to do something about it. So I joined the committee and Adrian and I were the first co-editors of the Section's Newsletter (*The Lesbian and Gay Psychology Section Newsletter*) which then subsequently became the *Lesbian & Gay Psychology Review* and now the *Psychology of Sexualities Review*. So I was involved in that part of it.

AJ: And do you think the function of the Section has changed since then?

MM: I'm sure its function has changed and will change over time. But I do still think its just as necessary as before. When it was first established it functioned as a symbol that brought attention to the field and the issues that needed attention. Now what's nice to see is that we've got an established body of evidence so we can now be more critical and move the agenda on. I think Trans issues are increasingly recognized as very important and I think that's right. And it's about the problems inherent in our binarized system of thinking whether that's around sexuality, gender, ecology or anything else.

AJ: You have both academic and practitioner roles don't you? Which came first?

MM: I've always done a bit of both. To begin with I did a bit of teaching as a visiting lecturer to top-up my work in practice but I don't think I have ever worked full-time in either academia or practice. The most I ever did was 0.8 FTE in the NHS or as an academic. I just don't think I could, it would just wear me out I think. Although juggling two paymasters can be difficult because they want as much of you as they can have and sometimes you have to say no.

AJ: And how do you balance those two roles as academic and practitioner?

MM: I don't think I do balance things. I think you *manage* your commitment to both, you *struggle* with both but I don't think its possible to have a balance. I think both academics and practitioner psychologists in the public sector are being bled dry. Not by ill-meaning managers but by the systems we work in; they are built on faulty visions of what is feasible and what it is to be human. You do what you have to do and then you almost spend as much time explaining to someone what you've done so they can scrutinise it and tell you what you should have done. It's telling that no one tells you 'Well done, you've done some good work there'. I think it's a real problem and we're seeing people streaming out of the academy and it's the same in the NHS in terms of psychological staff. I think I would burnout if I was doing one exclusively. On a more positive note my academic work enriches my practice and vice versa, they feed off each other really well.

AJ: How does working for the NHS compare with private practice?

MM: With the NHS, as with universities, there is a bit of a panopticon. You are always wondering whether you'll be seen to be doing everything right and if someone is scrutinizing you. And I think the tsunami of targets can be a problem. But the collaboration I've had with colleagues in the NHS was a real joy and something that I miss. You know, being able to knock on the door and bounce ideas off each other naturally. It's much harder to get that in private practice. A lot of my self-referrals will be around LGBT questions where people don't want to go and talk about it to their doctor but its not as if that was absent within the NHS either.

AJ: The theme for this year's International Day Against Homophobia, Transphobia and Biphobia (17th May) is 'mental health and well-being'. Could you say a little about your thoughts on the relationship between prejudice and mental health?

MM: I think it's a fundamental relationship and one that we're really bad at recognising, both in terms of negativity towards sexuality and negativity towards a lot of other things. For example, I think overt and covert racism is still causing all kinds of mental health problems. We're still not recognising that the construction of gender in our society sets men and women up for all kinds of mental health problems. And I think it's the same for all those other so-called phobias that you mention. It would be stupid to think that we can just leave this up to mental health services - we've got to change the culture too. The notion that you can 'fix' people and then send them back out there into discriminatory contexts is stupid. So I think its great that there's more attention to it now and awareness that homonegativity is part and parcel of these problems but I don't think politically we have a great structure to tackle it.

AJ: You said, these 'so-called phobias' and have also referred to it as homonegativity, do you think the way we conceptualise prejudice is problematic?

MM: Yes. We often talk about negativity towards sexuality as a phobia and that has some problematic associations. I think we can learn a lot from anti-racist work and the way in which it has been linked with political work too. They have helped us recognize that we're very good at saying 'I'm not racist' but that doesn't help us pull out the way that we, both individually and as a society, are wrapped up in racism. And I think it's the same with homophobia, biphobia, transphobia and so on. Its too easy to say 'oh no I'm not homophobic' but that isn't the same as being well-attuned and engaged. The idea that all we need to do is not hate people and not beat them up is simplistic. People just become very clever at being racist, sexist, homophobic, ableist etc. This is a problem because people only thrive when they are understood and the space is safe for them to be who they want to be. So I think we need a different kind of conversation, in schools or within families or within society at large. We need to engage with prejudice in a thoughtful way. So the question is not am I homophobic or am I not but when am I and how do I recognise when I am and how do I take responsibility for that. Having said that I think it can be useful shorthand to call it homophobia, biphobia and transphobia so we can draw attention to it.

AJ: Yes, so there is a risk that campaigns against homophobia turn homophobia into a taboo so people avoid saying certain things and deny they are prejudiced rather than reflecting on how they are complicit with heterosexism.

MM: Yes. So I think its true that many people are not being homophobic in terms of violence and slurs but I have seen another problematic; that's the over compensatory elevation of your sexuality into something positive which I think of as an exoticisation. Where people comment on your sexuality in a positive way when you didn't realize it was relevant, where you are 'the gay best friend' but when it has nothing to do with where I am or what I'm doing. Of course, its nicer than someone swearing at you but that positivity also smacks of discomfort to me and shows we've got a way to go I think.

AJ: And are clients more aware of the link between homophobia and mental health these days? Do they come to therapy with lay psychological theories that make links between homophobia and their mental state?

MM: Some do and they want to explore that possibility in their therapy. Sadly, some haven't spotted the link. So they come feeling depressed and you hear the story that they were bullied at school, that their parents kicked them out etc and they feel that's all because they're gay and they'll say 'I want to be normal'. That still happens a lot. You don't go in with a sociological critique at that point but it is worth noting the external negativity. Sometimes it's also important to normalise that and say to clients that 'that gets reported a lot'. And then you explore with them how they're going to tackle that and how much importance are they going to give to other people's opinions. I think it's important that we don't view therapy as being about the self-contained individual, clients also explore the world 'out there' in their therapy.

AJ: And do you think therapists are adequately trained around issues of sexuality these days or is that still a problem?

MM: Well I think there's huge variation and one of the struggles as academics is that you can write it into an accreditation criteria - awareness of diversity, ability to work with different populations etc - but these courses are so full that you know that it can be a struggle to fit everything in. And so courses may just offer *a* workshop. I think the theme from the very beginning should be that as practitioners you're going to work with a lot of diverse people, start thinking about how you are going to *be* in order to work with this diversity. There are certainly people who I think are brilliant and there are certainly people who don't have a clue. I remember I was at a conference where more gay affirmative formulations of sexuality were being discussed and you had people saying things like "Well I'm not sure I need all this because I've worked with a homosexual and it was fine" and you think 'you're so out of touch'. And to be so out of touch and not even know you're out of touch is problematic. So some people are good and some people are much less so.

AJ: Well speaking of policy, at the BPS Annual Conference last year Dr Markus Bidell and yourself were calling for the development of international lesbian, gay, bisexual and transgender psychology and psychotherapy standards. Can you tell me a little more about that?

MM: Yes, so I realise I've just been saying that there is a part of me that doubts the efficacy of standards anyway, however I still think you need them as a baseline. So my colleague Markus developed the Sexual Orientation Counselor Competency Scale (SOCCS) (Bidell, 2005). He works in a US context but many of the issues are the same as here. So the curricula are very full and trainees become okay at not being overtly homophobic or homonegative but that's not the same as being competent, we need to find ways to be develop competence. So he came over as a Fulbright scholar to Regent's University and we got talking. And then I attended and presented at the World Congress of Psychotherapy in South Africa and came away quite shocked. I had thought that 'all' I was doing was talking about the book (Milton, 2014) really and about efforts to be more ethical in our engagement with LGBT people. In the UK this currently wouldn't be overly controversial but at the World Congress I got heckled by this international audience. Some Russian delegates interrupted me at one point to say if they took this line of reasoning seriously it would undermine the basic fabric of society. And I mean obviously I watch the news and I'm aware of Putin's policies towards LGBT people but this really brought it home to me in a personal way. Markus had attended the first International Conference in LGBT Psychology in Lisbon where the organisers had read out letters from Russian delegates who had planned to attend but days before the conference had written to say it was too risky for them to attend but that they really need our support. So it's not just a Western imposition, people there are saying this is really problematic. And so we need to not only think about these issues here (in the UK) but also globally. And it also becomes an issue in this country because we have people fleeing to the UK and needing refuge here on the basis of their sexual identity and who they want to be in a relationship with. In other parts of the world you've got people being imprisoned, lashed publically and even the death penalty. So this is also a social justice and human rights issue. As we talked about earlier, even if

people are not recipients of such overt negativity, it is still damaging from a psychological point of view; people don't thrive under those conditions.

AJ: Well my understanding is that the International Psychology Network for Lesbian, Gay, Bisexual, Transgender and Intersex issues (IPSYNET) is in the process of drafting a statement which its members, including our Section, will sign up to. And we'll be keeping members updated on that in future issues of PoSR.

MM: That's good to hear. They could really help. Domestically, I really like the BPS (2012a) position statement on efforts to change sexual orientation and the BPS (2012b) guidelines for working therapeutically with sexual and gender minority clients. As a tutor they're always on my reading lists. They're really helpful, they always generate a lot of discussion and they get people thinking and they realise that these issues are more complicated than they'd previously thought.

AJ: Yes. So in addition to the Society position statement on conversion therapy, which was prepared by Section members, the Society has recently signed up to a consensus statement with other psychological and therapy professional bodies and is also a signatory of a memorandum of understanding on conversion therapy. There has also been some debate within the media about whether the Government should step in and ban conversion therapy, what's your take on that?

MM: Well I think so. If it were a drug that had such a range of concern they wouldn't limit it to a memorandum of understanding, they wouldn't allow its use. And as there is a memorandum of understanding against conversion therapy supported by the Department of Health and all these professional organisations then yes I think it shouldn't be allowed. I think some States in the US are going down that route of seeking to make it illegal.

AJ: On your online staff profile it mentions that you're interested in political dimensions of therapeutic practice. Can you say a little about what you mean by that?

MM: Well it relates to what I was saying earlier about making sure that the broader political context is included in one's formulation about an individual's psychological state and distress. So its not just about what is going on internally but also what's going on externally in terms of poverty, race, gender, sexuality and so on. It's clear in therapy how individuals' concerns relate to the big political issues of the day. I also think we could do more both as a Society and as individual practitioners by way of responding to Government consultations on issues that have a psychological dimension to them. So I think we could be more aware politically and aware of the wider contribution we can make. I think sometimes in the past the BPS has missed the boat and not put out statements about LGBT issues such as when the equal age of consent was being debated. Other professions managed it much better. So hopefully the Society has learned lessons and moved on from then.

AJ: Yes. And you mentioned your book *Sexuality: Existential Perspectives* (Milton, 2014) earlier. Would you like to tell us a bit more about that? (see Brennan, 2015 for a review of the book)

MM: Yes so I've been trained by existential practitioners and I think it's a most useful view of the world for therapists. But the thinking about sexuality within this field has been dispersed so isn't always easy to find. So I wanted to bring the ideas together and knew enough good people to make something that would be worthwhile writing and reading. So it's a compilation of chapters written by some great people. We've got Ernesto (Spinelli) and Hans (Cohn) writing about that what we even mean by this thing we call 'sexuality'. We've got Marc Medina who argues that we should allow our clients to be fixed if that's what they wish, 'the freedom to be fixed' he calls it. Because we do train therapists to be critical and reflexive and to view the sense of self as fluid but then you get clients who experience themselves as more static, you know 'can I just be a homosexual please'. We've got different perspectives on gay affirmative therapy written by Simon du Plock and Darren Langdridge; Simon's chapter explores concerns about some formulations of gay affirmative therapy while Darren's is quite overtly politically informed. And I like that, seeing different ideas side by side. I think that's how it should be because the reality is when you're a practitioner

and working with lots of people it is silly to think there is *a* way to be with clients so having a dialogue about what each finds problematic about the other's approach I think is a real strength of the book. Spinelli writes about childhood and sexuality, which could be seen as controversial; we often associate childhood sexuality with abuse and exploitation but he's talking beyond that. We've also got Meg Barker writing about non-monogamies and Christina Richards considering trans from an existential-phenomenological perspective. We've got another controversial chapter by Marcia Gamsu who writes about what you do when its clear that you and your client have a sexual attraction towards each other, in terms of how you think about it and understand it and how do you communicate about it. Obviously you don't enact it, but this kind of thing really scares many therapists and when a client makes a comment like 'I wish you were my boyfriend' its very tempting to just ignore it and move the conversation on to something else and that's not always helpful. So I think that chapter is very useful. There are also chapters about sex therapy and group therapy. So it's a really nice compilation and it's upfront about arguments and I'm very pleased with it. I think the mention of 'existential' in the title risks shutting down a bunch of people because some people assume it'll be too difficult to understand but some of the contributors are really light with it. I'm now working on a book that looks at the fundamental underlying problem of binary thinking and how that relates to an array of problems we have around gender, sexuality and other issues.

AJ: And what other books would you recommend for those starting out in psychotherapy or counselling with an interest in issues around sexuality? MM: They're quite old now but I still think the *Pink Therapy* series of books (e.g. Davies & Neal, 1996; 2000; Neal & Davies, 2000) are really good. They're structured really nicely and walk you through what the issues are, so I think they're a must have for anyone early on. I also really like *Sexuality and Gender for Mental Health Professionals* (Richards & Barker, 2013). It's written in such a nice way and is so straightforward and tackles sensitive issues in a very accommodating way and my students seem to engage with it well.

AJ: You're also interested in the restorative power of the natural world and Eco psychology aren't you? How did that interest develop?

MM: Well as you can see (Martin's kitten [Jessie] is perched on his shoulder) I've always had animals around and I grew up in South Africa, we have spent a lot of time in the bush and I just think it's in my blood. The personal intersects with professional concerns in that the other area of social justice that distresses me enormously is in terms of conservation and climate change. I think psychologists have much more of a contribution to make to this.

AJ: Ok, well that you for taking time speaking with me

MM: You're very welcome.

References

- Bidell, M. P. (2005). The sexual orientation counselor competency scale:

 Assessing attitudes, skills, and knowledge of counselors working with lesbian, gay, and bisexual clients. *Counselor Education and Supervision*, 44(4), 267.
- Brennan, T. (2015) Review of the book *Sexuality: Existential perspectives*, edited by M Milton. *Psychology of Sexualities Review*, 6(1), 116-120.
- British Psychological Society (2012a). *Position Statement: Therapies Attempting to Change Sexual Orientation*. Leicester: British Psychological Society.
- British Psychological Society (2012b). *Guidelines and Literature Review for Psychologists Working Therapeutically with Sexual and Gender Minority Clients.* Leicester: British Psychological Society.
- Davies, D. & Neal, C. (Eds.) (1996). *Pink Therapy: A guide for counsellors and therapists working with lesbian, gay and bisexual clients.* Buckingham: Oxford University Press.
- Davies, D. & Neal, C. (Eds.) (2000). *Pink Therapy 2: Therapeutic perspectives on working with lesbian, gay and bisexual clients*. Buckingham: Oxford University Press.
- Milton, M. (Ed) (2014) *Sexuality: Existential perspectives*. Ross-on-Wye: PCCS Books.

- Neal, C. & Davies, D. (Eds.) (2000). *Pink Therapy 3: Issues in therapy with lesbian, gay, bisexual and transgender clients*. Buckingham: Oxford University Press.
- Wilkinson, S (1999). The struggle to found the lesbian and gay psychology section. *Lesbian & Gay Psychology Section Newsletter*, 1(2): 3-5.