Lesbian, gay, and bisexual (LGB) individuals are a neglected segment of the population whose health has only recently been investigated systematically. The health of LGB individuals requires attention, given reports of poor mental and physical health. This course will examine the mental and physical health of LGB individuals. It will aim to understand potential determinants of their poor as well as good health. In addition, sex, ethnicity, and other sociodemographic characteristics will be examined with respect to the protection or vulnerability they confer on LGB individuals. The role of time will be considered both developmentally (i.e., age) and historically (i.e., cohorts). This course should be of interest to anyone concerned with the health of LGB individuals. By the end of this course, the student should have a solid grasp of the biopsychosocial exigencies and health of LGB individuals.

Requirements
Each student will select a substantive area to investigate in detail and to summarize for the seminar by means of an oral presentation. The student will generate a final paper, no more than 15, double-spaced and single-sided copied pages, that further elaborates on the area of interest or that addresses another area of concern in the health of LGB individuals. The term paper will be due at the last meeting of the seminar. It must adhere to APA style.

The first half of most weekly meetings will be devoted to review and discussion of the assigned readings, and the remaining half to a student’s oral presentation. For both parts of the weekly gathering, the assigned readings and oral presentations, critical evaluation of the literature and originality of ideas will be rewarded, as will class participation.

Required Texts

Note. I presume you have Freud’s celebrated papers. But, just in case, make sure you have the papers assigned for October 6.

Recommended Texts


Note. Read the required readings in the order listed. Recommended readings are identified by an asterisk. All articles have been uploaded to Blackboard.

September 1: Course Introduction and Definitions and Considerations about Sexual Orientation


**Note.** Methodological concerns exist in identifying the sexual-minority population. For a sample of the concerns, see:


**September 8: Mood Disorders, Substance Use, and Eating Disorders (or Eating Problems)**


**Note.** For a general article about relations between early vs. later age of sexual activity and mental health, see:


**September 15: No classes, per CUNY**

**September 22: No classes, per CUNY**

**September 25: This is Friday, but CUNY considers it a Tuesday. Thus, we will meet on the 22nd or 25th. Choose!**

**September 22nd or 25th: STIs and Other Physical Diseases or Symptoms**


**September 29: Biology**


*Note*. The biological basis of sexual orientation is a rapidly developing, but complicated research area. Your assigned reading reviews the concepts, theories, and research in this area. It will allow you to tackle the empirical literature. Below are some recommended readings primarily centered on the link between sexual orientation and brain activation and asymmetry.


**October 6: Psychoanalysis**


*Lippa, R.A. (2007). The relation between sex drive and sexual attraction to men and women: A cross-national study of heterosexual, bisexual, and homosexual men and women. Archives of Sexual Behavior, 36, 209-222. (Although not a psychoanalytic paper, the article is relevant.)

---Psychoanalysis (cont): Insufficient time dictates this session is to be covered on your own, when convenient.


October 13: Sex and Sexual Orientation


October 20: Gender and Sexual Orientation


*Note. For more basic issues about gender atypicality or nonconformity, see the following:


**October 27: Sexual Identity Development (The Coming-Out Process)**


**November 3: No class; professor at a conference**

**November 10: Gay-Related or Minority Stress**

Meyer, I.H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. *Psychological Bulletin, 129*, 674-697. (Note. Just read pp. 674-682. Everything after p.682 refers to his meta-analysis, which is dated. You have already covered more recent findings and meta-analyses on health disparities by sexual orientation during the first few weeks of this course.)


*Note. For more basic issues, with many implications to ponder, see the following articles and texts:


**November 17: Attachment and Social Support**


**November 24: Bisexuality**


**December 1:** No class; professor at grant meeting

**December 8:** Race and Ethnicity


Pedulla, D.S. (2014). The positive consequences of negative stereotypes: Race, sexual orientation, and the job application


Note. For more basic issues, see:

We cannot possibly cover everything in this course. Below are two major issues for you to explore on your own.

1. What Don’t We Know About LGB Health, But Should?

We cannot possibly cover everything in this course. Below are two major issues for you to explore on your own.

1. What Don’t We Know About LGB Health, But Should?

2. Clinical Matters

Friedman, R.C., & Downey, J.I. (2002). Sexual orientation and psychoanalysis: Sexual science and clinical practice. New York: Columbia University Press. Read chapters 9 on internalized homophobia and negative therapeutic reaction (pp. 167-193), 10 on internalized homophobia and grief and sexual risk behaviors (pp. 194-204), and 11 on internalized homophobia and gender-related self-esteem/condemnation (pp. 205-217). When you have time, read the remaining chapters in the clinical section of the book. As you have inferred, you should get this book.


