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Where are services regarding sexual minorities and psychological therapies post-COVID in 2024? A mixed-method systematised review

Matt Broadway-Horner

University of Bolton

Abstract

Purpose

Since COVID-19, many services have burgeoned within the UK, but what about sexual minorities? Since the last review, there are appropriate therapies, but there is often inadequate research. The purpose of this mixed-method review synthesis looking into the efficacy of psychological therapies for sexual minorities. Seven studies were found in total.

Design/methodology/approach

A mixed-method review synthesis, three studies looking into the efficacy of psychological therapies for sexual minorities and four studies addressing the experiences of sexual minorities partaking in psychological therapies were identified.

Findings

These included three quantitative and four qualitative studies. The minority stress hypothesis is used to formulate problems, but challenges remain to confidentiality and privacy in this context. Therapists still operate within the heteronormative framework, discounting intersectionality in therapy conversations.

Research limitations/implications

Most studies have had low retention rates since 2021. It shows that minority stress needs to be accounted for at the ethics committee and research delivery levels.

Practical implications

Applying a heteronormative framework to sexual minorities is not working. An alternative progress world view is needed.

Social implications

Health-care clinicians strive for equitable care. Unfortunately, using an equitable health service scale adapted from Levesque *et al.* (2013), the rating is 3 out of 6. More work is needed to improve services.

info@gssconf.org www.gssconf.org

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Originality/value

Some services are reporting much improvement post-pandemic. Sadly, this is not the case for sexual minorities. Individual and systemic barriers remain.

Keywords: Minority stress, MMRS, Progress World View, Progressfutures, systemic barriers

nfo@gssconf.org www.gssconf.org