
AMERICAN PSYCHOLOGICAL ASSOCIATION

Society of Military Psychology (Division 19)
&
Society for the Psychological Study of
Lesbian, Gay, & Bisexual Issues (Division 44)

Joint Task Force on Sexual Orientation &
Military Service

FINAL REPORT

Accepted by the APA Council of Representatives February 2009

Report of the APA Society of Military Psychology (Division 19) & APA Society for the Psychological Study of Lesbian, Gay, and Bisexual Issues (Division 44) Joint Divisional Task Force on Sexual Orientation and Military Service

<http://www.apa.org/pi/lgbc/publications/militaryhomepage.html>

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APA reports synthesize current psychological knowledge in a given area and may offer recommendations for future action. They do not constitute APA policy or commit APA to the activities described therein. This particular report originated with the APA Society of Military Psychology (Division 19) & APA Society for the Psychological Study of Lesbian, Gay, and Bisexual Issues (Division 44) Joint Divisional Task Force on Sexual Orientation and Military Service.

**Society of Military Psychology (Division 19)
&
Society for the Psychological Study of Lesbian, Gay, and Bisexual Issues
(Division 44)**

Joint Divisional Task Force on Sexual Orientation and Military Service

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In 2005, the American Psychological Association Society of Military Psychology (Division 19) and Society for the Psychological Study of Lesbian, Gay, and Bisexual Issues (Division 44) established the Joint Divisional Task Force on Sexual Orientation and Military Service. The Task Force was charged with developing a plan for implementing the 2004 APA Resolution on Sexual Orientation and Military Service (Appendix A) and other recommendations of the APA Task Force on Sexual Orientation and Military Service (Appendix B). The Joint Divisional Task Force operated from 2005 – 2007 with funding from the two Divisions, the Committee on Division/APA Relations, the Board of Directors, and the Council of Representatives.

The Task Force completed its Final Report in 2008. It has been approved by the Executive Committees of both Divisions, and received by the APA Council of Representatives.

Areas of Activity

● **Advocacy**

In the 2004 Resolution on Sexual Orientation and Military Service (Appendix A), APA resolved to take a leadership role among national organizations in seeking to eliminate discrimination in and by the military based on sexual orientation through federal advocacy and all other appropriate means. The 2004 APA Task Force further recommended that the APA assess opportunities for advocacy to eliminate discrimination in the military based on sexual orientation, especially opportunities for coalitions with other professional organizations and/or civil rights advocacy organizations (Appendix B).

As part of the APA assessment of advocacy opportunities, in 2005 as the Task Force began its work, Clinton W. Anderson, PhD, Director, Lesbian, Gay, Bisexual, and Transgender Concerns Office, contacted the Service Members' Legal Defense Network, the American Civil Liberties Union, and the National Gay and Lesbian Task Force to seek information about their interest and activities in this area and to seek their recommendations for APA advocacy.

Three areas of advocacy were identified in these consultations:

- (1) Repeal by Congress of Title X, United States Code, Section 654 (Appendix B4), the law that requires that all persons who engage in homosexual conduct be separated from the U.S. armed services, and adoption by Congress of laws that prohibit sexual orientation discrimination in the U.S. military;
- (2) Overturning Title X, United States Code, Section 654, in the Courts;
- (3) Psychotherapy privilege for sexual orientation within the U.S. military system.

Repeal. In the last two Congresses, Rep. Martin Meehan (D-MA) introduced The Military Readiness Enhancement Act (Appendix C), which aims to amend Title 10, United States Code to replace the current policy concerning homosexuality in the Armed Forces with a policy of nondiscrimination on the basis of sexual orientation. So far, there has been no equivalent bill introduced in the Senate. APA Government Relations staff Heather O'Beime Kelly, PhD, and Jeff McIntyre, have been monitoring the bill for APA. Rep. Meehan has retired and Rep. Ellen O. Tauscher (D-CA) has indicated interest in leadership on the bill. A hearing on the bill was held on July 23, 2008, by the House Armed Services Committee Military Personnel Subcommittee, Susan A. Davis (D-CA), Chair. APA has developed a briefing sheet supporting the adoption of the Military Readiness Enhancement Act, which has been published on the APA's website as a resource for APA members to use in advocacy (Appendix D).

Amicus briefs. APA has not been contacted by parties to military cases requesting that we file an amicus brief in any case, but if such a case does come before the U.S. Supreme Court, APA would be very likely to consider filing a brief, because of its clear policy position on the issues, because of its history of filing similar briefs in earlier military cases, and because of the strong body of research relevant to the issues.

Psychotherapy privilege. The APA Office of the General Counsel, in collaboration with the Lesbian, Gay, Bisexual, and Transgender Concerns Office, developed a request for rule-making that was sent to the Department of Defense on December 17, 2007 (Appendix E). In its letter, the APA requested that the Department amend the administrative separation policy to prevent statements about sexual orientation made within the psychotherapist-patient context from being used for the purpose of administrative separation for homosexual conduct. APA received a response dated April 3, 2008, that indicated a willingness on the part of the Department to consider policy change (Appendix F).

● **Data Collection**

The 2004 APA Task Force further recommended that the APA facilitate the collection of data from military psychologists who are mental health providers about the implementation of the U.S. law on homosexuality in the armed services and the impact of the law on mental health services provision.

The Task Force developed a questionnaire to collect information from military clinical psychologists about the implementation of the U.S. law on homosexuality in the armed services and the impact of the law on mental health services provision. Initially, the Task Force hoped to gain access through the Department of Defense to military clinical psychologists, but informal contacts with the Department indicated clearly that such access would be very unlikely to be granted. As an alternative, the Task Force decided to use the questionnaire to survey approximately 600 active and retired military-related practitioners who were subscribed to the Division 19 practice list-serve. In collaboration with the APA Center for Work Force Analysis and Research, the Lesbian, Gay, Bisexual, and Transgender Concerns Office implemented the online survey in fall 2007 using Survey Gizmo. During a period of four weeks from September 27 to October 29, 2007, several email messages were posted on the list by the list administrator requesting subscribers' participation in the survey and directing them to the internet site at which the questionnaire could be completed. Data were collected anonymously and analyzed exclusively by staff members of the APA Lesbian, Gay, Bisexual and Transgender Concerns Office. No data were shared with anyone outside the APA. Seventy-five respondents completed the survey (approximately 12.5% of the list subscribers). The survey and the summary of the results are included as Appendix G.

In its deliberations, the Task Force also considered the potential benefits of research on military service personnel, but decided that the challenges to accessing lesbian, gay, and bisexual military personnel for research would be beyond the resources of the Task Force.

As a proxy for survey data on lesbian, gay, and bisexual service members, Kimberly F. Balsam, PhD, provided a summary of the results of research she conducted with several colleagues on lesbian, gay, and bisexual veterans (Appendix H).

Professional Education

In the 2004 Resolution on Sexual Orientation and Military Service (Appendix A), APA resolved to act to ameliorate the negative effects of the current law through the training and education of psychologists. The 2004 APA Task Force further recommended that the APA develop educational materials with the goal of improving the capability of military psychologists to provide effective services and to help consumers of these services understand the limits of confidentiality.

With regard to the development of educational materials, the APA Task Force in its report envisioned that the materials could be developed through a collaborative effort of Divisions 19 and 44, APAGS, and the APA Ethics Office and might include the following:

- A professional journal article on confidentiality and other issues related to providing psychological services to military personnel under the current law;
- Informational materials (e.g., pamphlet, webpage) summarizing issues relevant to sexual orientation and the provision of services by military psychologists; and
- Informational materials for service members addressing general issues of confidentiality in all psychological services in the U.S. military.

Workshop. Robin A. Buhrke, PhD, and Brad Johnson, PhD, collaborated on the development of a workshop for military clinical psychologists designed to highlight appropriate and ethical strategies for addressing the needs of GLB clients in military settings. This workshop was originally planned to be offered as a CE workshop at the 2006 APA Convention in New Orleans. Members of the Division 44 Executive Committee viewed and approved the proposed workshop. At the March 2006 meeting, Robin Buhrke noted in her update that a workshop of this kind would not be offered at the 2006 APA convention, but may be offered for 2007. The Task Force planned a two-hour symposium during the normal program for the 2007 convention with one hour contributed by Divisions 19 and 44. A workshop for military clinical psychologists designed to highlight appropriate and ethical strategies for addressing the needs of GLB

clients in military settings was planned and conducted at the annual APA convention in 2007. The workshop blueprint will be made available to others to facilitate a broader impact. A joint symposium was also conducted at the convention.

● **Publications**

An article by Brad Johnson (United States Naval Academy) and Robin Buhrke (Duke University) entitled "Service Delivery in a 'Don't Ask, Don't Tell' World: Ethical Care of Gay, Lesbian, and Bisexual Military Personnel" was accepted for publication in *Professional Psychology: Research and Practice*.

Gregory Herek (University of California, Davis) and Aaron Belkin (University of California, Santa Barbara) authored a chapter on "Sexual Orientation and Military Service: Prospects for Organizational and Individual Change in the United States" to appear in A.B. Adler, T.W. Britt, & C.A. Castro (Eds.), *Studies in Military Psychology*.

Kimberly Balsam (University of Washington) and colleagues are preparing several manuscripts for publication based on the data they collected from 445 GLBT military veterans.

● **Public and Member Information about Sexual Orientation and Military Service**

The APA Lesbian, Gay, Bisexual, and Transgender Concerns Office has published content related the sexual orientation and military service on the APA website
<http://www.apa.org/pi/lgbt/publications/militaryhomepage.html>

● **Inter-divisional Collaboration**

In addition to the Joint Divisional Task Force, during the period of the Task Force's operation in 2005-2007, Divisions 19 and 44 have each sent representatives to the other's mid-winter executive committee meetings, in order to facilitate collaboration. This commitment has been renewed for 2008-2010.

Summary of Outcomes

- A workshop for military clinical psychologists designed to highlight appropriate and ethical strategies for addressing the needs of GLB clients in military settings was planned and conducted at the annual APA convention in 2007. The workshop blueprint will be made available to others to facilitate a broader impact. A joint symposium was also conducted at the convention.
- Several professional publications, one practitioner-oriented article, and one contemporary research review of sexual orientation and military service, have been published.
- Public service information for military personnel on sexual orientation, current federal law in this area, resources for advocacy, support, and clinical assistance was developed and distributed.
- The Task Force developed procedures to enable APA to take a leadership role among national organizations to eliminate discrimination based on sexual orientation in military service.
- In order to ameliorate effects of current law, APA has requested that the Department of Defense address existing regulations explaining the rules of confidentiality which apply when military personnel receive psychological diagnostic and treatment services.
- The Task Force, with the assistance of the APA research office, has developed, administered and analyzed a survey to collect data from active duty, retired and civilian military psychologists who are mental health providers, about the implementation of the U.S. law on homosexuality in the armed services and the impact of the law on mental health services provision.
- The Task Force worked with the APA Government Relations Staff to develop an APA Fact Sheet based on a research summary by Greg Herek and Aaron Belkin to be used when contacting Congressional Staff and members of Congress.
- 2007 APA president, Sharon Brehm, wrote Secretary of Defense Robert M. Gates to request the establishment of policy by the Department of Defense regarding psychotherapist-patient privilege in administrative separation proceedings on the basis of homosexual conduct.

Task Force Recommendations

The Task Force has completed developing a Strategic Plan to implement the APA Council's Resolution on Sexual Orientation and Military Service, but much work remains to be done. In order to complete the planned actions described above, the Task Force makes the following recommendations:

- Funding to send liaison representatives for the next three years to the mid-year meetings of the respective divisions should be provided by the divisions. The Executive Committees of Division 19 and Division 44 have approved the funding and have appointed two liaisons (Brad Johnson (19)/Jim Fitzgerald (44)). They will take the lead in the follow-up of remaining issues in the six areas. The Executive Committees should consider appointing an ad-hoc joint committee between 19/44 with the liaisons co-chairing the joint committee to continue the work.
- Liaisons should continue working with Clinton Anderson (Office of LGBT Concerns) and Public Interest Government Relations Staff.
- Active Legislative Advocacy
- Monitor legal cases in anticipation of considering filing a brief
- Executive advocacy to follow up on request for rule-making.

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APPENDIX A

Sexual Orientation and Military Service

WHEREAS the American Psychological Association (APA) has long opposed discrimination on the basis of sexual orientation; and

WHEREAS the “Don’t Ask, Don’t Tell, Don’t Pursue” policy as mandated by Title 10 of the U.S. Code (Section 654) discriminates on the basis of sexual orientation, and has caused many qualified personnel to be involuntarily separated from military service solely because of their sexual orientation; and

WHEREAS in light of the enactment of 10 USC § 654 in 1994, APA’s 1991 resolution U.S Department of Defense Policy on Sexual Orientation and Advertising in APA Publications needs to be revised; and

WHEREAS there is a long history of collaboration between psychology and the military (Dunivin, 1994; Yerkes, 1921); and

WHEREAS the law creates ethical dilemmas for military psychologists and it is APA’s responsibility to address these concerns (American Psychological Association, 2002); and

WHEREAS empirical evidence fails to show that sexual orientation is germane to any aspect of military effectiveness including unit cohesion, morale, recruitment and retention (Belkin, 2003; Belkin & Bateman, 2003; Herek, Jobe, & Carney, 1996; MacCoun, 1996; National Defense Research Institute, 1993); and

WHEREAS comparative data from foreign militaries and domestic police and fire departments show that when lesbians, gay men and bisexuals are allowed to serve openly there is no evidence of disruption or loss of mission effectiveness (Belkin & McNichol, 2000-2001; Gade, Segal, & Johnson, 1996; Koegel, 1996); and

WHEREAS when openly gay, lesbian and bisexual individuals have been allowed to serve in the U.S. Armed Forces,¹ there has been no evidence of disruption or loss of mission effectiveness; and

WHEREAS the U.S. military is capable of integrating members of groups historically excluded from its ranks, as demonstrated by its success in reducing both racial and gender discrimination (Binkin & Bach, 1977; Binkin, Eitelberg, Schexnider, & Smith, 1982; Kauth & Landis, 1996; Landis, Hope, & Day, 1984; Thomas & Thomas, 1996);

THEREFORE BE IT RESOLVED that APA reaffirms its opposition to discrimination based on sexual orientation; and

BE IT FURTHER RESOLVED that APA reaffirms its support for our men and women in uniform and its dedication to promoting their health and well-being; and

BE IT FURTHER RESOLVED that APA recognizes and abhors the many detrimental effects that the law has had on individual service members, the military, and American society since its enactment in 1994; and

BE IT FURTHER RESOLVED that APA take a leadership role among national organizations in seeking to eliminate discrimination in and by the military based on sexual orientation through federal advocacy and all other appropriate means; and

¹ Cammermeyer v. Aspin, 850 F. Supp. 910. (W. D. Wash, 1994). Cammermeyer served in the National Guard for over three years prior to dismissal after stating that she was a lesbian. She was reinstated after a lawsuit. *Watkins v. United States Army*, 875 F.2d 699 (9th Cir. 1989), cert. denied, *United States Army v. Watkins*, 498 U.S. 957 (1990). Army was estopped from denying reenlistment to Watkins, an openly gay man, because it had repeatedly permitted him to reenlist with full knowledge of his homosexuality.

BE IT FURTHER RESOLVED that APA act to ameliorate the negative effects of the current law through the training and education of psychologists; and

BE IT FURTHER RESOLVED that APA disseminate scientific knowledge and professional expertise relevant to implementing this resolution; and

BE IT FURTHER RESOLVED that this resolution replaces the 1991 resolution "U.S. Department of Defense Policy on Sexual Orientation and Advertising in APA Publications;" and

BE IT FURTHER RESOLVED that APA reaffirms its strong commitment to removing the stigma of mental illness that has long been associated with homosexual and bisexual behavior and orientations; promoting the health and well-being of lesbian, gay, and bisexual adults and youth; eliminating violence against lesbian, gay, and bisexual service members; and working to ensure the equality of lesbian, gay, and bisexual people, both as individuals and members of committed same-sex relationships, in such areas as employment, housing, public accommodation, licensing, parenting, and access to legal benefits.

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APPENDIX B

American Psychological Association

Report of the Task Force on Sexual Orientation and Military Service

January 16-18, 2004

The Board of Directors established the Task Force on Sexual Orientation and Military Service in October 2003. Board of Directors Member Barry Anton, PhD, was appointed Task Force chair. The Board charged the Task Force to consider issues of common concern between the Division of Military Psychology (Division 19) and the Society for the Psychological Study of Lesbian, Gay, and Bisexual Issues (Division 44), including the APA ban on advertising by the U.S. military in APA publications. Then APA President Robert Sternberg solicited nominations for the Task Force from the presidents of Divisions 19 & 44 and from the chair of APAGS. Dr. Sternberg appointed Debra Dunivin, PhD, Judith Glassgold, PsyD, Douglas Haldeman, PhD, Gregory Herek, PhD, Robert Nichols, PhD, Jessica Percodani, and Henry Taylor, PhD, to the Task Force. APA President Diane Halpern, PhD, appointed Robin Buhrke, PhD, to the Task Force, when Dr. Glassgold became unable to participate for health reasons. Dr. Dunivin, an active duty military officer, attended the Task Force meeting and consulted with the Task Force concerning the effect of the advertising ban, but otherwise rescued herself from Task Force deliberations and decision making. The roster of the Task Force is attached as Appendix B1.

During its meeting, the Task Force reviewed APA's current policy on sexual orientation and military service. The policy is embodied both in APA's advocacy against sexual orientation discrimination by the U.S. military (e.g., amicus briefs, Congressional testimony), which began in 1988 and continued until 1995 (Appendix B2), and in the policy resolution *U.S. Department of Defense Policy on Sexual Orientation and Advertising in APA Publications* (Appendix B3), which was adopted by the Council of Representatives in 1991.

The Task Force considered issues of common concern about the negative effects of the current U.S. statute that establishes the *Policy Concerning Homosexuality in the Armed Forces* (Appendix B4) and of the Department of Defense regulations that implement the statute, popularly known as "Don't Ask, Don't Tell." The issues of common concern that were identified by the Task Force included the following:

- Confidentiality for military service members within mental health services;
- The training of service members;
- The training of military psychologists;
- Consultation with military mental health providers; and
- The Department of Defense implementation of the *Policy Concerning Homosexuality in the Armed Forces* and "Don't Ask, Don't Tell."

The Task Force consulted with Stephen Behnke, PhD, Director of the APA Ethics Office, regarding the ethical issues that might arise for military psychologists. The Task Force discussed with Dr. Behnke the possibility of collaboration among the Ethics Committee, Divisions 19 and 44, and APAGS in the development of educational resources to address the ethical issues for military psychologists. An item will be placed on the Spring Meeting agenda of the Ethics Committee to assess the Committee's interest in such collaboration.

The Task Force also consulted with Rhea Farberman, Executive Director for Public and Member Communications, and James McHugh, APA Senior Counsel, regarding the nature of the APA advertising

policy. Ms. Farberman and Mr. McHugh clarified for the Task Force that APA advertising policy requires that all discriminatory employers include within their ads a statement about the nature of the discrimination. For example, the advertisements that APA publishes for the federal Bureau of Prisons state that the Bureau is legally permitted to discriminate by age in its recruitment. Thus, if the APA's specific policy prohibiting military advertisements were eliminated, ads submitted by the military would have to state the provisions of the U.S. law that prohibits service members from engaging in homosexual acts and prohibits lesbian, gay, or bisexual service members from stating their sexual orientation.

The Task Force on Sexual Orientation and Military Service developed the following recommendations for APA action.

- That the APA adopt a new policy resolution to be titled *Sexual Orientation and Military Service* (Appendix B5); the resolution would replace the 1991 policy resolution; the fundamental implications of the proposed policy resolution are to reaffirm existing APA policy resolutions on lesbian, gay, and bisexual concerns; update, elaborate and strengthen the APA policy on sexual orientation and military service; and eliminate APA's prohibition on advertisements from the Department of Defense.²
- That the APA assess opportunities for advocacy to eliminate discrimination in the military based on sexual orientation, especially opportunities for coalitions with other professional organizations and/or civil rights advocacy organizations.
- That the APA facilitate the collection of data from military psychologists who are mental health providers about the implementation of the U.S. law on homosexuality in the armed services and the impact of the law on mental health services provision.
- That the APA develop educational materials with the goal of improving the capability of military psychologists to provide effective services and to help consumers of these services understand the limits of confidentiality.

With regard to the development of educational materials, the Task Force envisioned that the materials could be developed through a collaborative effort of Divisions 19 and 44, APAGS, and the APA Ethics Office. Such materials might include the following:

- A professional journal article on confidentiality and other issues related to providing psychological services to military personnel under the current law;
- Informational materials (e.g., pamphlet, webpage) summarizing issues relevant to sexual orientation and the provision of services by military psychologists; and
- Informational materials for service members addressing general issues of confidentiality in all psychological services in the U.S. military.

Division 19 and Division 44 plan to send representatives to each other's mid-winter executive committee meetings in order to explore further collaboration. The Ethics Committee will be asked to consider collaborating on educational materials during its Spring Meeting.

² If the APA's specific policy prohibiting military advertisements were eliminated, ads submitted by the military would have to state the provisions of the U.S. law that prohibits service members from engaging in homosexual acts and prohibits lesbian, gay, or bisexual service members from stating their sexual orientation.

Appendix B1

**Report of the Task Force on Sexual Orientation and Military Service
January 16-18, 2004
Roster of the Task Force on Sexual Orientation and Military Service**

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Appendix B2

Report of the Task Force on Sexual Orientation and Military Service

January 16-18, 2004

Sexual Orientation Discrimination in the U.S. Military

A Chronology of APA Activities

- 1988 Filed Watkins brief
- 1989 Filed Ben Shalom brief
 - Joined Military Freedom Project
 - Advocated GAO Report
- 1990 Joint letter to Secretary of Defense with A Psychiatric A, NASW, ANA
- 1991 Responded to GAO inquiry
 - Convention symposium and invited address
 - Adopted policy
- 1992 Lobbying and grass roots advocacy
 - Sponsored Congressional briefing
- 1993 Created National Organizations Responding to Discrimination on the Basis of Sexual Orientation in the Military
 - Grassroots advocacy
 - House and Senate Armed Services Committee testimony
 - Convention Symposium
- 1994 Blaesing letter
 - Division 19 & 44 Continuing Education Workshop
 - Convention Symposium on Rand Report
- 1995 Meeting with DoD Deputy General Counsel
 - Division 19 newsletter article

Appendix B3

Report of the Task Force on Sexual Orientation and Military Service

January 16-18, 2004

APA Policy Resolution

**U.S. Department of Defense Policy on Sexual Orientation
and**

Advertising in APA Publications

[Adopted by the American Psychological Association Council of Representatives, August 18, 1991.]

WHEREAS, the American Psychological Association (APA) deplors discrimination on the basis of sexual orientation; and

WHEREAS, APA will not let its publications, as advertising media, be used by others in support of discriminatory employment practices; and

WHEREAS, the U.S. Department of Defense (DoD) maintains a policy that homosexual orientation is "incompatible with military service"; and

WHEREAS, the DoD will not knowingly admit bisexual, lesbian or gay individuals to military service, including research and clinical internship programs in psychology; and

WHEREAS, an average of 1,500 men and women are unfairly discharged from military service each year because their sexual orientation becomes known;

THEREFORE BE IT RESOLVED that the APA opposes the DoD policy which finds homosexual orientation "incompatible with military service"; and

BE IT FURTHER RESOLVED that APA take a leadership role among national organizations in seeking to change this discriminatory DoD policy; and

BE IT FURTHER RESOLVED that APA will not permit its publications, as advertising media, to be used by the DoD after December 31, 1992, unless the DoD policy that homosexual orientation "is incompatible with military service" has been rescinded by that date. (Fox, 1992, p. 927).

Reference

Fox, R. E. (1992). Proceedings of the American Psychological Association, Incorporated, for the year 1991: Minutes of the annual meeting of the Council of Representatives. *American Psychologist*, 47, 893-934.

Appendix B4

Report of the Task Force on Sexual Orientation and Military Service

January 16-18, 2004

10 United States Code §654

Policy Concerning Homosexuality In The Armed Forces

10 United States Code

§ 654. Policy concerning homosexuality in the armed forces

(a) Findings. Congress makes the following findings:

(1) Section 8 of article I of the Constitution of the United States commits exclusively to the Congress the powers to raise and support armies, provide and maintain a Navy, and make rules for the government and regulation of the land and naval forces.

(2) There is no constitutional right to serve in the armed forces.

(3) Pursuant to the powers conferred by section 8 of article I of the Constitution of the United States, it lies within the discretion of the Congress to establish qualifications for and conditions of service in the armed forces.

(4) The primary purpose of the armed forces is to prepare for and to prevail in combat should the need arise.

(5) The conduct of military operations requires members of the armed forces to make extraordinary sacrifices, including the ultimate sacrifice, in order to provide for the common defense.

(6) Success in combat requires military units that are characterized by high morale, good order and discipline, and unit cohesion.

(7) One of the most critical elements in combat capability is unit cohesion, that is, the bonds of trust among individual service members that make the combat effectiveness of a military unit greater than the sum of the combat effectiveness of the individual unit members.

(8) Military life is fundamentally different from civilian life in that --

(A) the extraordinary responsibilities of the armed forces, the unique conditions of military service, and the critical role of unit cohesion, require that the military community, while subject to civilian control, exist as a specialized society; and

(B) the military society is characterized by its own laws, rules, customs, and traditions, including numerous restrictions on personal behavior, that would not be acceptable in civilian society.

(9) The standards of conduct for members of the armed forces regulate a member's life for 24 hours each day beginning at the moment the member enters military status and not ending until that person is discharged or otherwise separated from the armed forces.

(10) Those standards of conduct, including the Uniform Code of Military Justice, apply to a member of the armed forces at all times that the member has a military status, whether the member is on base or off

base, and whether the member is on duty or off duty.

(11) The pervasive application of the standards of conduct is necessary because members of the armed forces must be ready at all times for worldwide deployment to a combat environment.

(12) The worldwide deployment of United States military forces, the international responsibilities of the United States, and the potential for involvement of the armed forces in actual combat routinely make it necessary for members of the armed forces involuntarily to accept living conditions and working conditions that are often Spartan, primitive, and characterized by forced intimacy with little or no privacy.

(13) The prohibition against homosexual conduct is a longstanding element of military law that continues to be necessary in the unique circumstances of military service.

(14) The armed forces must maintain personnel policies that exclude persons whose presence in the armed forces would create an unacceptable risk to the armed forces' high standards of morale, good order and discipline, and unit cohesion that are the essence of military capability.

(15) The presence in the armed forces of persons who demonstrate a propensity or intent to engage in homosexual acts would create an unacceptable risk to the high standards of morale, good order and discipline, and unit cohesion that are the essence of military capability.

(b) Policy. A member of the armed forces shall be separated from the armed forces under regulations prescribed by the Secretary of Defense if one or more of the following findings is made and approved in accordance with procedures set forth in such regulations:

(1) That the member has engaged in, attempted to engage in, or solicited another to engage in a homosexual act or acts unless there are further findings, made and approved in accordance with procedures set forth in such regulations, that the member has demonstrated that-

(A) such conduct is a departure from the member's usual and customary behavior;

(B) such conduct, under all the circumstances, is unlikely to recur:

(C) such conduct was not accomplished by use of force, coercion, or intimidation:

(D) under the particular circumstances of the case, the member's continued presence in the armed forces is consistent with the interests of the armed forces in proper discipline, good order, and morale; and

(E) the member does not have a propensity or intent to engage in homosexual acts.

(2) That the member has stated that he or she is a homosexual or bisexual, or words to that effect, unless there is a further finding, made and approved in accordance with procedures set forth in the regulations, that the member has demonstrated that he or she is not a person who engages in, attempts to engage in, has a propensity to engage in, or intends to engage in homosexual acts.

(3) That the member has married or attempted to marry a person known to be of the same biological sex.

(c) Entry standards and documents.

(1) The Secretary of Defense shall ensure that the standards for enlistment and appointment of members of the armed forces reflect the policies set forth in subsection (b).

(2) The documents used to effectuate the enlistment or appointment of a person as a member of the armed forces shall set forth the provisions of subsection (b).

(d) Required briefings. The briefings that members of the armed forces receive upon entry into the armed

forces and periodically thereafter under section 937 of this title (article 137 of the Uniform Code of Military Justice) shall include a detailed explanation of the applicable laws and regulations governing sexual conduct by members of the armed forces, including the policies prescribed under subsection (b).

(e) Rule of construction. Nothing in subsection (b) shall be construed to require that a member of the armed forces be processed for separation from the armed forces when a determination is made in accordance with regulations prescribed by the Secretary of Defense that --

- (1) the member engaged in conduct or made statements avoiding or terminating military service; and
- (2) separation of the member would not be in the best forces.

(f) Definitions. In this section:

(1) The term "homosexual" means a person, regardless of sex, who engages in, attempts to engage in, has a propensity to engage in, or intends to engage in homosexual acts, and includes the terms "gay" and "lesbian".

(2) The term "bisexual" means a person who engages in, attempts to engage in, has a propensity to engage in, or intends to engage in homosexual and heterosexual acts.

(3) The term "homosexual act" means-

(A) any bodily contact, actively undertaken or passively permitted, between members of the same sex for the purpose of satisfying sexual desires; and

(B) any bodily contact which a reasonable person would understand to demonstrate a propensity or intent to engage in an act described in subparagraph (A).

Appendix B5

Report of the Task Force on Sexual Orientation and Military Service

January 16-18, 2004

Proposed APA Policy Resolution

Sexual Orientation and Military Service

- WHEREAS, the American Psychological Association (APA) has long opposed discrimination on the basis of sexual orientation; and
- WHEREAS, the “Don’t Ask, Don’t Tell, Don’t Pursue” policy as mandated by Title 10 of the U.S. Code (Section 654) discriminates on the basis of sexual orientation, and has caused many qualified personnel to be involuntarily separated from military service solely because of their sexual orientation; and
- WHEREAS, there is a long history of collaboration between psychology and the military (Dunivin, 1994; Yerkes, 1921); and
- WHEREAS, the law creates ethical dilemmas for military psychologists and it is APA’s responsibility to address these concerns (American Psychological Association, 2002); and
- WHEREAS, empirical evidence fails to show that sexual orientation is germane to any aspect of military effectiveness including unit cohesion, morale, recruitment and retention (Belkin, 2003; Belkin & Bateman, 2003; Herek, Jobe, & Carney, 1996; MacCoun, 1996; National Defense Research Institute, 1993); and
- WHEREAS, comparative data from foreign militaries and domestic police and fire departments show that when lesbians, gay men and bisexuals are allowed to serve openly there is no disruption or loss of mission effectiveness (Belkin & McNichol, 2000-2001; Gade, Segal, & Johnson, 1996; Koegel, 1996); and
- WHEREAS, when openly gay, lesbian and bisexual individuals have been allowed to serve in the U.S. Armed Forces there has been no disruption or loss of mission effectiveness (citations pending); and
- WHEREAS, the U.S. military is capable of integrating members of groups historically excluded from its ranks, as demonstrated by its success in reducing both racial and gender discrimination (Binkin & Bach, 1977; Binkin, Eitelberg, Schexnider, & Smith, 1982; Kauth & Landis, 1996; Landis, Hope, & Day, 1984; Thomas & Thomas, 1996);
- THEREFORE BE IT RESOLVED that APA reaffirms its opposition to discrimination based on sexual orientation; and
- BE IT FURTHER RESOLVED that APA reaffirms its support for our men and women in uniform and its dedication to promoting their health and well-being; and
- BE IT FURTHER RESOLVED that APA recognizes and abhors the many detrimental effects that the law has had on individual service members, the military, and American society since its enactment in 1994; and
- BE IT FURTHER RESOLVED that APA take a leadership role among national organizations in seeking to eliminate discrimination in and by the military based on sexual orientation through federal advocacy and all other appropriate means; and
- BE IT FURTHER RESOLVED that APA act to ameliorate the negative effects of the current law through the training and education of psychologists; and
- BE IT FURTHER RESOLVED that APA disseminate scientific knowledge and professional expertise relevant to implementing this resolution; and
- BE IT FURTHER RESOLVED that this resolution replaces the 1991 resolution “U.S. Department of Defense Policy on Sexual Orientation and Advertising in APA Publications;” and
- BE IT FURTHER RESOLVED that APA reaffirms its strong commitment to removing the stigma of mental illness that has long been associated with homosexual and bisexual behavior and

orientations; promoting the health and well-being of lesbian, gay, and bisexual adults and youth; and working to ensure the equality of lesbian, gay, and bisexual people, both as individuals and members of committed same-sex relationships, in such areas as employment, housing, public accommodation, licensing, parenting, and access to legal benefits.

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APPENDIX C

HR 1246 IH

110th CONGRESS
1st Session
H. R. 1246

To amend title 10, United States Code, to enhance the readiness of the Armed Forces by replacing the current policy concerning homosexuality in the Armed Forces, referred to as 'Don't Ask, Don't Tell', with a policy of nondiscrimination on the basis of sexual orientation.

IN THE HOUSE OF REPRESENTATIVES

February 28, 2007

Mr. MEEHAN (for himself, Mr. SMITH of Washington, Mr. WYNN, Mr. HASTINGS of Florida, Ms. SCHWARTZ, Mr. WEINER, Ms. LEE, Mr. FRANK of Massachusetts, Ms. MCCOLLUM of Minnesota, Mr. PASCARELL, Mr. FILNER, Mrs. MALONEY of New York, Mr. FATTAH, Mr. RANGEL, Mr. SHAYS, Mr. VAN HOLLEN, Ms. CORRINE BROWN of Florida, Mr. DAVIS of Illinois, Mr. WU, Ms. WASSERMAN SCHULTZ, Mr. KUCINICH, Ms. WATSON, Mr. PAYNE, Ms. MATSUI, Mr. BLUMENAUER, Mr. PASTOR, Ms. EDDIE BERNICE JOHNSON of Texas, Mr. TOWNS, Mr. MARKEY, Ms. NORTON, Mr. CUMMINGS, Mr. ENGEL, Mrs. TAUSCHER, Mr. CLEAVER, Mr. PALLONE, Mr. ACKERMAN, Mr. GEORGE MILLER of California, Mrs. NAPOLITANO, Mr. MEEKS of New York, Ms. MOORE of Wisconsin, Mr. JOHNSON of Georgia, Mr. WAXMAN, Ms. SOLIS, Mr. BERMAN, Ms. ROS-LEHTINEN, Mr. LANGEVIN, Mr. MORAN of Virginia, Mr. OBERSTAR, Ms. SCHAKOWSKY, Ms. HARMAN, Mr. INSLEE, Mr. NADLER, Mr. MCDERMOTT, Mr. MCGOVERN, Mr. DINGELL, Mr. LARSON of Connecticut, Mr. LEWIS of Georgia, Mr. OLVER, Mr. TIERNEY, Mr. SERRANO, Mr. CROWLEY, Ms. CARSON, Ms. CASTOR, Mr. ELLISON, Ms. LINDA T. SANCHEZ of California, Mrs. CAPPAS, Ms. SLAUGHTER, Ms. ROYBAL-ALLARD, Mr. GUTIERREZ, Ms. WOOLSEY, Mr. UDALL of Colorado, Mr. HINCHEY, Ms. WATERS, Ms. HIRONO, Mr. CAPUANO, Mr. DOYLE, Mr. HONDA, Mr. MICHAUD, Mr. ABERCROMBIE, Mrs. LOWEY, Ms. VELAZQUEZ, Mr. KENNEDY, Mr. STARK, Mr. DEFAZIO, Mr. WELCH of Vermont, Mr. HARE, Mr. EMANUEL, Mr. GRIJALVA, Mr. NEAL of Massachusetts, Mr. BRADY of Pennsylvania, Mr. WEXLER, Ms. DELAURO, Mr. HOLT, Mr. FARR, Ms. JACKSON-LEE of Texas, Ms. BERKLEY, Mrs. JONES of Ohio, Mr. LYNCH, Mr. COHEN, Mr. ISRAEL, Mr. ROTHMAN, Mrs. DAVIS of California, Ms. BALDWIN, Mr. ALLEN, Mr. LANTOS, Mr. GILCHREST, Mr. DELAHUNT, Mr. CLAY, Mr. BECERRA, and Ms. ZOE LOFGREN of California) introduced the following bill; which was referred to the Committee on Armed Services

A BILL

To amend title 10, United States Code, to enhance the readiness of the Armed Forces by replacing the current policy concerning homosexuality in the Armed Forces, referred to as 'Don't Ask, Don't Tell', with a policy of nondiscrimination on the basis of sexual orientation.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the 'Military Readiness Enhancement Act of 2007'.

SEC. 2. PURPOSE.

The purpose of this Act is to institute in the Armed Forces a policy of nondiscrimination based on sexual orientation.

SEC. 3. REPEAL OF 1993 POLICY CONCERNING HOMOSEXUALITY IN THE ARMED FORCES.

The following provisions of law are repealed:

- (1) Section 654 of title 10, United States Code.
- (2) Subsections (b), (c), and (d) of section 571 of the National Defense Authorization Act for Fiscal Year 1994 (10 U.S.C. 654 note).

SEC. 4. ESTABLISHMENT OF POLICY OF NONDISCRIMINATION BASED ON SEXUAL ORIENTATION IN THE ARMED FORCES.

(a) Establishment of Policy- (1) Chapter 37 of title 10, United States Code, is amended by adding at the end the following new section:

Sec. 656. Policy of nondiscrimination based on sexual orientation

(a) Policy- The Secretary of Defense, and the Secretary of Homeland Security with respect to the Coast Guard when it is not operating as a service in the Navy, may not discriminate on the basis of sexual orientation against any member of the armed forces or against any person seeking to become a member of the armed forces.

(b) Discrimination on Basis of Sexual Orientation- For purposes of this section, discrimination on the basis of sexual orientation is--

(1) in the case of a member of the armed forces, the taking of any personnel or administrative action (including any action relating to promotion, demotion, evaluation, selection for an award, selection for a duty assignment, transfer, or separation) in whole or in part on the basis of sexual orientation; and

(2) in the case of a person seeking to become a member of the armed forces, denial of accession into the armed forces in whole or in part on the basis of sexual orientation.

(c) Personnel and Administrative Policies and Action- The Secretary of Defense, and the Secretary of Homeland Security with respect to the Coast Guard when it is not operating as a service in the Navy, may not establish, implement, or apply any personnel or administrative policy, or take any personnel or administrative action (including any policy or action relating to promotions, demotions, evaluations, selections for awards, selections for duty assignments, transfers, or separations) in whole or in part on the basis of sexual orientation.

(d) Rules and Policies Regarding Conduct- Nothing in this section prohibits the Secretary of Defense, and the Secretary of Homeland Security with respect to the Coast Guard when it is not operating as a service in the Navy, from prescribing or enforcing regulations governing the conduct of members of the armed forces if the regulations are designed and applied without regard to sexual orientation.

(e) Re-Accession of Otherwise Qualified Persons Permitted- Any person separated from the armed forces for homosexuality, bisexuality, or homosexual conduct in accordance with laws and regulations in effect before the date of the enactment of this section, if otherwise qualified for re-accession into the armed forces, shall not be prohibited from re-accession into the armed forces on the sole basis of such separation.

(f) Sexual Orientation- In this section, the term 'sexual orientation' means heterosexuality, homosexuality, or bisexuality, whether the orientation is real or perceived, and includes statements and consensual sexual conduct manifesting heterosexuality, homosexuality, or bisexuality.'

(2) The table of sections at the beginning of such chapter is amended--

(A) by striking the item relating to section 654; and

(B) by adding at the end the following new item:

'656. Policy of nondiscrimination based on sexual orientation in the armed forces.'

(b) Conforming Amendments- Title 10, United States Code, is amended as follows:

- (1) Section 481 is amended--
 - (A) In subsection (a)(2), by inserting `, including sexual orientation discrimination,' after `discrimination' in subparagraphs (C) and (D); and
 - (B) in subsection (c), by inserting `and sexual orientation-based' after `gender-based' both places it appears.
- (2) Section 983(a)(1) is amended by striking `(in accordance with section 654 of this title and other applicable Federal laws)'.
- (3) Section 1034(i)(3) is amended by inserting `sexual orientation,' after `sex,'.

SEC. 5. BENEFITS.

Nothing in this Act, or the amendments made by this Act, shall be construed to require the furnishing of dependent benefits in violation of section 7 of title 1, United States Code (relating to the definitions of `marriage' and `spouse' and referred to as the `Defense of Marriage Act').

SEC. 6. NO PRIVATE CAUSE OF ACTION FOR DAMAGES.

Nothing in this Act, or the amendments made by this Act, shall be construed to create a private cause of action for damages.

SEC. 7. REGULATIONS.

(a) In General- Not later than 90 days after the date of the enactment of this Act, the Secretary of Defense shall revise Department of Defense regulations, and shall issue such new regulations as may be necessary, to implement section 656 of title 10, United States Code, as added by section 4(a). The Secretary of Defense shall further direct the Secretary of each military department to revise regulations of that military department in accordance with section 656 of title 10, United States Code, as added by section 4(a), not later than 180 days after the date of the enactment of this Act. Such revisions shall include the following:

- (1) Revision of all equal opportunity and human relations regulations, directives, and instructions to add sexual orientation nondiscrimination to the Department of Defense Equal Opportunity policy and to related human relations training programs.
- (2) Revision of Department of Defense and military department personnel regulations to eliminate procedures for involuntary discharges based on sexual orientation.
- (3) Revision of Department of Defense and military department regulations governing victims' advocacy programs to include sexual orientation discrimination among the forms of discrimination for which members of the Armed Forces and their families may seek assistance.

(b) Regulation of Conduct- The Secretary of Defense, and the Secretary of Homeland Security with respect to the Coast Guard when it is not operating as a service in the Navy, shall ensure that regulations governing the personal conduct of members of the Armed Forces shall be written and enforced without regard to sexual orientation.

(c) Definition- In this section, the term `sexual orientation' has the meaning given that term in section 656(f) of title 10, United States Code, as added by section 4(a).

APPENDIX D

American Psychological Association

Briefing Sheet

Sexual Orientation and Military Service

The American Psychological Association (APA) opposes the current U.S. policy of discrimination against lesbian, gay, and bisexual persons in military service. This stance reflects the APA Policy Statement on Sexual Orientation and Military Service, adopted by the APA Council of Representatives in July 2004. In this policy statement, the association reaffirmed its opposition to discrimination based on sexual orientation and its commitment to disseminating scientific knowledge to ameliorate the negative effects of the current law through training and education.

The APA strongly recommends the enactment of the Military Readiness Enhancement Act of 2007 (H.R. 1246).

This legislation would:

Repeal the current “Policy Concerning Homosexuality in the Armed Forces” (10 U.S.C. § 654), which mandates administrative discharges:

If “the service member has engaged in, attempted to engage in, or solicited another to engage in a homosexual act or acts”;

If “the member has stated that he or she is a homosexual or bisexual, or words to that effect”;

If “the member has married or attempted to marry a person known to be of the same biological sex”.

Institute a U.S. military policy of nondiscrimination based on sexual orientation in accession, recognition, promotion, and any other administrative actions based on sexual orientation, consistent with non-discrimination policies regarding race, gender and disability status.

Allow qualified gay, lesbian, and bisexual individuals who have been involuntarily discharged based on sexual orientation to resume military service.

Why the current U.S. policy on sexual orientation and military service should be repealed

Military success does not depend on service members’ sexual orientation. America’s allies, including the United Kingdom, Canada, Israel, and Australia, allow openly gay, lesbian, and bisexual persons to serve in the military, and this has no adverse effect on military readiness or discipline (Belkin, 2001, 2003; Belkin & Bateman, 2003; Belkin & Levitt, 2001; Belkin & McNichol, 2001). In contrast to the 24 countries around the globe that officially welcome gay, lesbian, and bisexual military service members, the U.S. is now in the minority, even in NATO, where only Turkey and Greece have similar prohibition policies.

Some openly gay or lesbian service members have served in the U.S. military with no ill *effects*. *In fact, a stop-loss policy during the Persian Gulf War prevented discharges for homosexuality*, strongly suggesting that the U.S. military believed that service by openly gay or lesbian people during wartime was no threat to military effectiveness. Most experts believe that military effectiveness is related to military service members’ shared commitment to a common goal that motivates them to work together to achieve the goal (MacCoun, Kier, & Belkin, 2006; MacCoun, 1996). Leadership of the group is also considered crucial. Sexual orientation is irrelevant to task cohesion, the only type of cohesion that critically predicts the team’s military readiness and success (c.f. Herek & Belkin, 2005).

The policy is costly. No useful purpose is served by spending millions of dollars each year to investigate

and discharge qualified and patriotic Americans who wish to serve their country. Since the U.S. military enacted the “Don’t Ask, Don’t Tell” (DADT) policy in 1993, about 12,000 lesbian, gay, and bisexual military personnel have been involuntarily discharged solely because of their sexual orientation, at least 8% of whom had mission-critical skills. In a 2005 U.S. Government Accountability Office (GAO) report, implementing the DADT policy was estimated to cost U.S. taxpayers at least 200 million dollars (GAO-05-299, 2005). However, a 2006 Blue Ribbon Commission that included former Secretary of Defense, William Perry, corrected several calculation errors in this estimate and concluded that the financial cost associated with the DADT policy implementation was much higher than previously estimated, i.e. at least \$364 million during its first decade (Blue Ribbon Commission Report, 2006).

Repealing the policy would improve mental health in the military. The military can be a highly stressful environment, especially in wartime. It is important to encourage military personnel to seek mental health services when appropriate in order to promote their well-being and effectiveness. The DADT policy, however, works against effective mental health access for gay, lesbian and bisexual military personnel for at least three reasons. First, workplaces that are not supportive of non-heterosexual orientations are strongly correlated with stress and depression (Smith & Ingram, 2004). Second, since disclosure of sexual orientation is officially prohibited, gay, lesbian, and bisexual service members are liable to avoid accessing mental health services when they need them (Johnson & Buhrke, 2006). Third, it is reasonable to assume that forced secrecy and the fear of being exposed as gay, lesbian or bisexual are likely to disproportionately increase anxiety and disrupt optimal performance.

Women and young service members are harmed disproportionately by the policy. Armed forces personnel between 18 and 25 of age, as well as women, are discharged at much higher rates than their respective percentages in the Military. In 2005, 30% of all persons discharged as a result of the DADT policy were women, despite the fact that only 14% of military staff is female (Servicemembers Legal Defense Network, 2004). During the year of 2002, 83% of all DADT-related dismissals by the Air Force affected service members below 25 years old, although the staff percentages of this young age group amount to only 35% (Servicemembers Legal Defense Network, 2003).

Why repealing the policy is unlikely to pose a problem for the military

Knowing lesbian, gay or bisexual service members is linked to reduced prejudice toward them. Consistent with a long-standing body of social psychology research based on Allport’s (1954) *contact hypothesis*, scientists have repeatedly found evidence for reduced prejudice levels toward gay, lesbian or bisexual people among heterosexuals who are acquainted with openly gay, lesbian or bisexual members of society (e.g., Herek & Capitano, 1996; Herek & Glunt, 1993; Schneider & Lewis, 1984).

The authors of a comprehensive recent meta-analysis of the last six decades of research in this area demonstrate that the correlation of contact between heterosexuals and gay and lesbian persons with lower levels of sexual prejudice is significantly higher than prejudice reduction linked to contact with any other target group, e.g. differing in race or age (Pettigrew & Tropp, 2006).

This is reflected in a representative recent survey of military personnel, in which 23% of respondents stated they were certain they worked with a gay or lesbian individual in their military unit. Out of these, 64% reported no adverse consequences for their military unit’s morale and 66% stated that their personal morale was not affected in any way either (Zogby, Bruce, Wittman, & Rogers, 2006).

The majority of people in the public, and in the Military, support gay, lesbian and bisexual people in the military. Public opinion polls in recent years have consistently shown that two-thirds of the public, on average, believe that gay, lesbian, and bisexual service members should be allowed to serve openly in the U.S. military (CNN, 2007; Greenberger, 2005). The percentage of military service members strongly opposed to allowing gay and lesbian persons serve in the military has declined considerably over the last decade, with only 5% of personnel in the military in a 2006 poll stating that they are “very uncomfortable” interacting with gay and lesbian persons in the military, contrasted with 73% who were somewhat or very

comfortable in this regard (Zogby et al., 2006). In 2007, 28 retired generals and admirals issued a letter to Congress, requesting the repeal of the DADT policy, and this perspective is also shared by current Joint Chiefs chairman Adm. Mike Mullen (Knickerbocker, 2007).

The U.S. military is capable of successfully implementing a change of this sort. The military has proved itself willing, able, and effective in attacking prejudice and stereotypes within its ranks based on race and gender. This experience can and should inform efforts to eliminate barriers based on sexual orientation. Likewise, the Central Intelligence Agency (CIA), the Federal Bureau of Investigation (FBI), and the National Security Agency (NSA) do not discriminate against gay, lesbian or bisexual persons. The experience of these federal agencies and of those American police and fire departments that hire lesbian, bisexual, and gay officers can be drawn upon in implementing the change.

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APPENDIX E

Request for Rule Making on Sexual Orientation Disclosures in Psychotherapy

December 17, 2007

The Honorable Robert M. Gates
Office of the Secretary
U.S. Department of Defense
1000 Defense Pentagon
Washington, D.C. 20301-1000

Dear Dr. Gates:

I write on behalf of the American Psychological Association and its more than 148,000 members and affiliates to request the establishment of policy by the Department of Defense regarding psychotherapist-patient privilege in administrative separation proceedings on the basis of homosexual conduct. On October 7, 1999, the White House issued Executive Order 13140, which called for the Manual for Courts-Martial to be amended to add, among other items, the following provision:

Rule 513. Psychotherapist-patient privilege

(a) General rule of privilege. A patient has a privilege to refuse to disclose and to prevent any other person from disclosing a confidential communication made between the patient and a psychotherapist or an assistant to the psychotherapist, in a case arising under the UCMJ, if such communication was made for the purpose of facilitating diagnosis or treatment of the patient's mental or emotional condition.

We request that the Department of Defense amend the administrative separation policies on the basis of homosexual conduct (including, but not limited to, those in DEP'T OF DEFENSE DIRECTIVE 1332.14, Enlisted Administrative Separations, and DEP'T OF DEFENSE DIRECTIVE 1332.40, Separation Procedures of Regular and Reserve Commissioned Officers) to apply this rule, and its accompanying definitions, to administrative separation proceedings on the basis of homosexual conduct, as well as Courts-Martial proceedings. Evidence revealed during confidential communication between a patient and her or his mental health provider is no more appropriate in an administrative proceeding than in a criminal proceeding, and use of such evidence is a violation of the clearly recognized right to a psychotherapist-patient privilege.

This recommended change and clarification in policy is not unprecedented; several comparable policies are already in place. For example, the Department has a policy holding that statements about sexual orientation made in personnel security interviews may not be used for the purposes of administrative separation (*See, e.g.* MEMORANDUM FOR SECRETARIES OF THE MILITARY DEPARTMENTS ASSISTANT SECRETARY OF DEFENSE FOR COMMAND, CONTROL, COMMUNICATIONS AND INTELLIGENCE, Subject: Implementation of "Policy Guidelines on Homosexual Conduct in the Armed Forces" in Personnel Security Investigation and Adjudication, para. 4; EXECUTIVE ORDER 12968, part 3 section 3.1). In addition, other privileges such as attorney/client (*See, e.g.* ARMY REGULATION 27-26, Legal Services, Rules of Professional Conduct for Lawyers, Rule 1.6), and clergy/penitent (*See, e.g.*, AIR FORCE MANUAL 52-103, *Chaplain Service Readiness Manual*, attachment 10; Manual for Courts Martial, part III, para. 503(b)(2)) have been extended to the administrative context. The Department also has policies to protect information regarding HIV status gathered during epidemiologic assessment interviews (*see, e.g.*, DEP'T OF DEFENSE INSTRUCTION 6485.01, para. 6.5) and information provided in the psychotherapeutic context by victims of sexual assault (*See, e.g.*, DEP'T OF DEFENSE MEMORANDUM FOR SECRETARIES OF THE MILITARY DEPARTMENTS, ET AL., March 16, 2005, Subject: Confidentiality Policy for Victims of Sexual Assault (JTF-SAPR-009); DEP'T OF DEFENSE DIRECTIVE 6495.01, para. 4.6).

In addition, confusion exists as to the role of psychologists in enforcement of the Departmental policy on

homosexual conduct. In April 1998, the Department issued a report entitled *Review of the Effectiveness of the Application and Enforcement of the Department of Defense's Policy on Homosexual Conduct in the Military*, which said that "We found that none of the Services require health care professionals to report information provided by their patients unless, in the judgment of the health care professional, it is necessary to do so...." However, reports abound of psychotherapists who are unclear on their rights and responsibilities, with some believing they are required to report such disclosures, while others understand that they are required to keep them confidential. We recommend that the Department clarify its policies (including administrative separation policies) to make clear that psychologists and their assistants are barred by a psychotherapist-patient privilege from disclosing statements about sexual orientation made in health and mental health settings. Possible language that the Department could consider is as follows:

A patient has a privilege to refuse to disclose and to prevent any other person from disclosing a confidential communication made between the patient and a psychotherapist or an assistant to the psychotherapist, if such communication was made for the purpose of facilitating diagnosis or treatment of the patient's mental or emotional condition. Therefore, psychotherapists or an assistant to the psychotherapist shall not report information obtained in the context of a health care relationship about a service member's sexual orientation to the command, or for purposes of initiating administrative separation.

The perception of confidentiality between patients and mental health professionals is crucial to a climate in the military that encourages service members to seek appropriate health and mental health treatment. This change would improve access to mental health services for all service members. Under current policy, service members may be afraid to discuss their sexual orientation with their therapist or the therapist may be afraid to ask the client about his or her sexuality, thus impeding the provision of basic health care to service members.

Furthermore, the establishment of the policies recommended above would alleviate ethical and professional conflicts for psychologists and other professionals. Private, confidential conversations between a health care provider and a patient are not conversations that the law on homosexuality and military service were designed to prevent. However, an unclear policy puts psychologists in jeopardy of severe ethical dilemmas that will hamper their professional performance.

Thank you for your consideration of this issue. The American Psychological Association looks forward to working with you to ensure the adoption of these changes that are critically necessary to the effective provision of mental health services to our service men and women. Please do not hesitate to contact Dr. Clinton Anderson with our APA Public Interest Directorate at (202) 336-6037 or canderson@apa.org, if you have any questions or would like any additional information.

Sincerely,

Sharon Stephens Brehm, PhD
President

CC:

The Honorable David S. C. Chu, PhD
Under Secretary for Personnel and Readiness

The Honorable Michael L. Dominguez
Principal Deputy Under Secretary for Personnel and Readiness

APPENDIX F



OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE
WASHINGTON, DC 20301-1200

APR 07 2008

HEALTH AFFAIRS

APR 03 2008

Sharon Stephens Brehm, PhD
President, American Psychological Association
750 First Street, NE
Washington, DC 20002-4242

Dear Dr. Brehm:

I am writing to you in response to your letter of December 17, 2007, to Secretary Gates regarding mental health practice in the Department of Defense (DoD). I have been asked to respond on his behalf. We appreciate the continuous support the American Psychological Association provides to the Department of Defense, especially to our psychology professionals. We also appreciate your attention to such matters as patient-therapist privilege as it applies in military circumstances, including administrative separations.

While we are not aware of instances in which psychotherapists violated the confidence of their therapeutic relationship by reporting the sexual orientation of their patients, we understand your recommendation that eliminating any confusion in this regard is important for our mental health professionals.

We will raise this policy issue to the Under Secretary of Defense for Personnel and Readiness to recommend clarification of guidance as it applies to administrative separations.

Thank you for your ongoing support and thoughtful suggestions for continuous improvement and consistency in our DoD policies, as well as for the health and welfare of our Service members.

DATE: 4.7.08
REFER TO: Ellen Garrison
FROM: J. STRASSBURGER, EXECUTIVE DIRECTOR
 YOUR ACTION
(PLEASE COPY ME ON RESPONSE)
 PREPARATION OF REPLY FOR THE PRESIDENT'S SIGNATURE AND RETURN TO THE FLAG WITH ORIGINAL LETTER
 INFORMATION ONLY
 YOUR FILES

Sincerely,

Joseph E. Kelley, MD
Deputy Assistant Secretary of Defense
Clinical and Program Policy

APPENDIX G

Psychological Services Access for Lesbian, Gay, and Bisexual Military Service Members: Results of a Survey of Military Clinical Psychologists

American Psychological Association
Society of Military Psychology (Division 19)
and
Society for the Psychological Study of Lesbian, Gay, and Bisexual Issues (Division 44)
Joint Task Force on Sexual Orientation and Military Service

One of the recommendations of the 2004 American Psychological Association (APA) Task Force on Sexual Orientation and Military Service was “that the APA facilitate the collection of data from military psychologists who are mental health providers about the implementation of the U.S. law on homosexuality in the armed services and the impact of the law on mental health services provision” (APA Task Force on Sexual Orientation and Military Service, 2004, p. 2) To implement this recommendation, an online survey was conducted by the Society of Military Psychology (Division 19) and Society for the Psychological Study of Lesbian, Gay, and Bisexual Issues (Division 44) Joint Task Force on Sexual Orientation and Military Service, with the assistance of the APA Lesbian, Gay, Bisexual and Transgender Concerns Office and the APA Center for Work Force Analysis and Research. The survey results were intended to be used in support of APA's advocacy, consistent with the APA's 2004 Resolution on Sexual Orientation and Military Service (Paige, 2005).

The survey population was subscribers to the Division 19 practice listserv--approximately six hundred active and retired military-related practitioners. The survey was implemented in SurveyGizmo, a software package that APA is using to conduct self-administered questionnaires. During a period of four weeks from September 27 to October 29, 2007, several email messages were posted on the list by the list administrator requesting subscribers' participation in the survey and directing them to the internet site at which the questionnaire could be completed. Data were collected anonymously and analyzed exclusively by staff members of the APA Lesbian, Gay, Bisexual and Transgender Concerns Office. No data were shared with anyone outside the APA.

Summary of results

Seventy-five respondents completed the survey (approximately 12.5% of the list subscribers).

Service provider demographics:

75% of the respondents were currently active uniformed psychologists.

54% of the respondents were associated with the Army.

69% of the respondents were male.

Client population demographics:

More than 80% of respondents had served personnel in the Army (99%), the Reserve (95%), the Air Force (95%), the Navy (88%), the Marines (87%), or the National Guard (85%).

Self-assessment of understanding of professional responsibility toward LGB military staff:

A majority of respondents indicated that they understood their professional responsibilities towards LGB military service members “very well”, but their ratings were higher for understanding according to ethical

and professional practice guidelines than for understanding according to military regulations and expectations.

75% selected the APA Ethics code as having provided guidance to their understanding of professional responsibilities in providing psychological services to LGB personnel in the military and 44% selected military regulations.

Self-reported options regarding sexual disclosure:

84% of respondents selected “maintaining the client’s confidentiality during treatment” as an option regarding lesbian, gay, or bisexual service members' disclosure of their sexual orientation.

Approximately 20% of respondents selected other options:

“If service member discloses sexual orientation, report to commander” (22%);

“Refer service member to non-military mental health services if sexual orientation disclosed” (23%);

“Warn service member in consent form that sexual orientation should not be disclosed in treatment” (22%);

“Establish clear boundaries with service member that sexual orientation should not be disclosed” (20%).

Providing mental health services to LGB military personnel:

91% of respondents had at some point served LGB military service members.

80% of respondents indicated they did not have any concerns about providing mental health services to LGB persons in the military.

Actions recommended to APA regarding Sexual Orientation and Military Service:

More than half of all respondents (independent of whether they had previously reported any concerns or not) shared their recommendations regarding sexual orientation and military service when presented with the opportunity to do so.

Although these recommendations constitute a range of opinions, the two largest opinion groups represent the polar ends of the spectrum. The following results from a preliminary content analysis of the recommendations illustrate this point:

About one third of those recommending further APA action on the subject (i.e. 37%, or 14 individuals out of the 38 persons who made such a recommendation) suggested more lobbying efforts to halt sexual discrimination, while exactly the same number of survey participants (14 individuals, or 38% of the 37 persons who indicated that no further APA action was necessary) suggested this to be a “non-issue”. According to this latter group, the system of mental health services for LGB military service members was working well.

In a similar vein, 19 individuals provided final comments at the end of the survey. These comments varied widely in content, and only two response themes could be discerned. They can be categorized as “thanks for working on this important issue”, and “this is not an important issue and the APA should not spend more time dealing with it”.

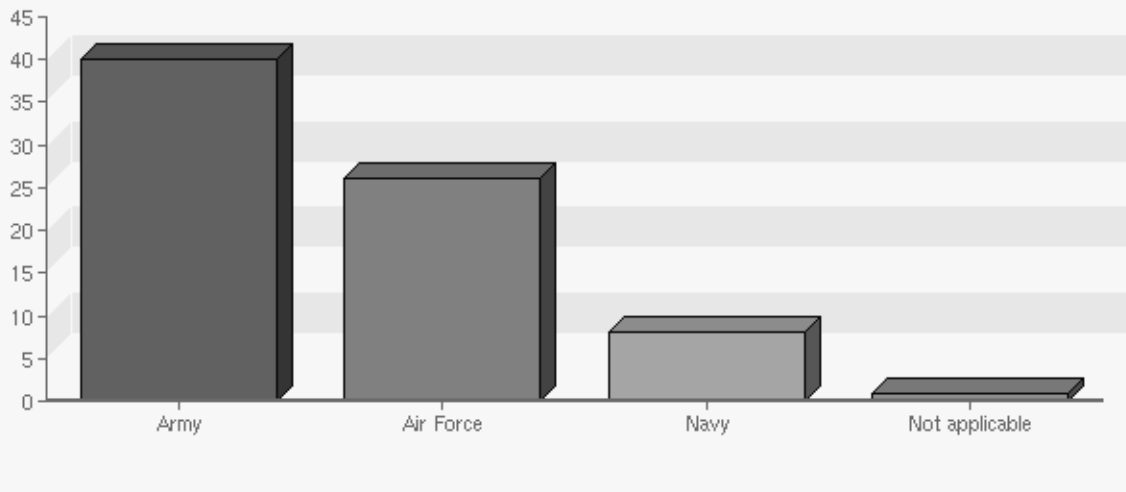
Detailed Results

Please note that due to a technical design limitation in SurveyGizmo, respondents could not be forced to

answer specific follow-up questions based on their prior answers. We attempted to encourage such responding but not all respondents provided follow-up answers to questions that had been designed to have follow-ups.

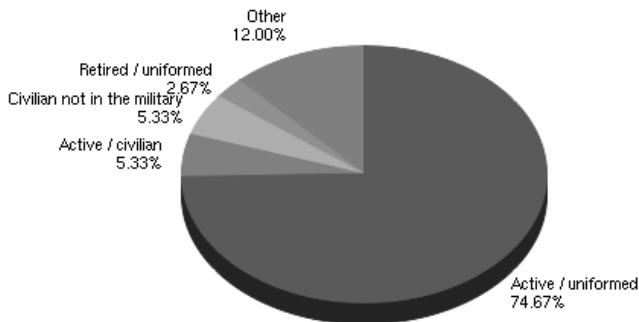
Response percentages were rounded to the nearest whole number.

With which military service are you currently or formerly associated?



The majority of respondents, i.e. 41 individuals (54%), were associated with the Army. Twenty-six persons, i.e. 35% of respondents, were psychologists serving the U.S. Air Force, and eight individuals, or 10% of respondents, were Navy psychologists.

What is your current status?



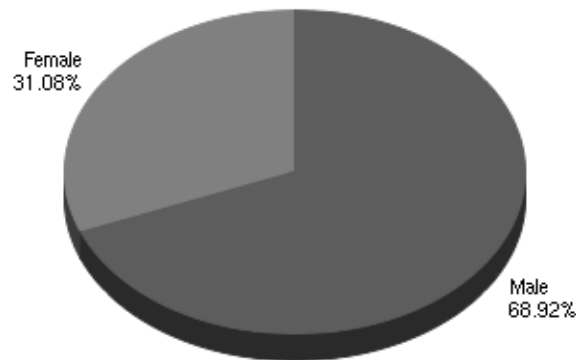
The majority of respondents were uniformed psychologists in active service (56 individuals or 74% of respondents).

Optional: If not U.S., what is your nationality?

Only seven persons responded to this optional question, and the responses seem to indicate that the question was not entirely understood. This is because six of the seven free-format responses relate to the United States of America, and the 7th response read 'black'.

However, the results suggest that all survey participants were U.S. citizens.

Optional: What is your gender?



Seventy-four persons responded to this optional question, two thirds of whom (69%) indicated that they were male.

Which type (or types) of military populations have you served?

This question requested a response for each client population listed below. The percentages reflect multiple answers per respondent.

Client population	Breakdown of responses
Army	99%, or 74 individuals
Reserve	95%, or 71 individuals
Air Force	95%, or 71 individuals
Navy	88%, or 66 individuals
Marine	87%, or 65 individuals
National Guard	85%, or 64 individuals
Public Health Service	20%, or 20 individuals
National Oceanic & Atmospheric Administration	5%, or 4 individuals
Homeland Security	4%, or 3 individuals

Most service providers had served personnel in the Army (99%), the Reserve (95%), and the Air Force (95%).

In what capacity have you served these military populations?

As in the previous question, multiple answers per option were possible.

Service provider function	Breakdown of responses
Active/uniformed	96%, or 72 individuals
Intern	77%, or 58 individuals
Civilian not in the military	23%, or 17 individuals
Graduate Student	21%, or 16 individuals
Active / civilian	12%, or 9 individuals
Retired / uniformed	7%, or 5 individuals
Retired / civilian	4%, or 3 individuals

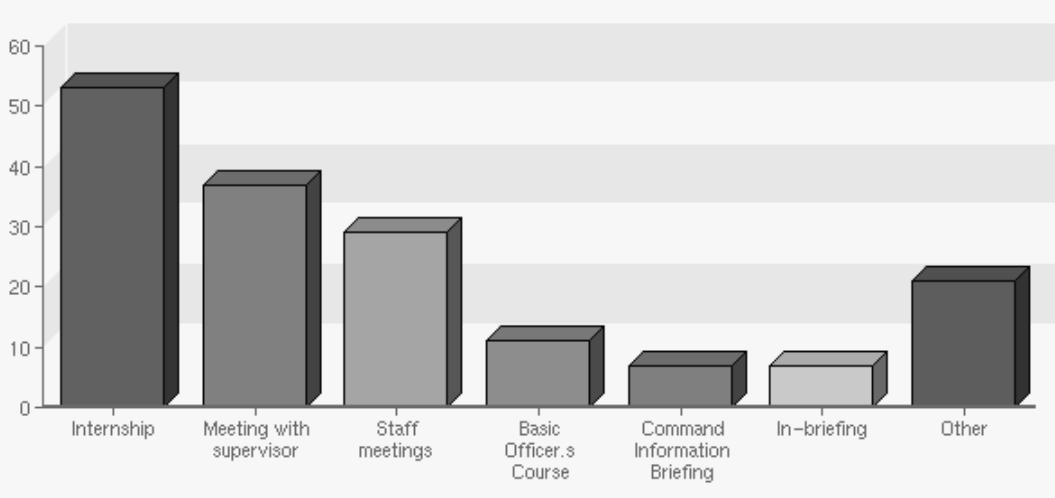
The overwhelming majority of respondents had served on active duty as a uniformed psychologist (i.e. 96%), and about three quarters had also served military personnel during an internship (i.e. 77%).

How well do you understand your professional responsibilities in providing psychological services to lesbian, gay, and bisexual (LGB) personnel in the military?

Respondents were asked “how well do you understand your professional responsibilities in providing psychological services to lesbian, gay, and bisexual personnel in the military” on two scales: (1) “according to ethical and professional practice guidelines and (2) “according to military regulations and expectations.” Most respondents rated their understanding “very well” from both perspectives. Fewer respondents rated their understanding “very well” “according to military regulations and expectations” (60%) than “according to ethical and professional practice guidelines” (71%). More respondents rated their understanding “adequate, very little, or not at all” “according to military regulations and expectations” (19%) than “according to ethical and professional practice guidelines” (5%).

	Not at all	Very little	Adequate	Fairly well	Very well	N.a.
According to ethical and professional practice guidelines		3% (2 resp.)	4% (3 resp.)	19% (14 r.)	71% (53 r.)	4% (3)
According to military regulations and expectations	1% (1)	5% (4 resp.)	13% (10 resp.)	20% (15 r.)	60% (45 r.)	

In which situation (or situations) were you given information on your professional responsibilities about providing psychological services to LGB military personnel? *(Please check all that apply)*



Most respondents were provided information during an internship (54 individuals, or 72%), and half reported having been briefed during a meeting with a supervisor (38 persons, or 50%). Slightly more than one third (i.e. 40% or 30 individuals) indicated that information on providing services to LGB military personnel was provided during staff meetings.

As a follow-up question on the same screen, respondents were asked to rate the usefulness and accuracy of the information they had received during the respective interactions, on a scale from 1 to 5, with 1 being “low” and 5 considered “high”. Multiple responses were possible.

Overall, it appears that when information on professional responsibilities about psychological services to LGB military personnel was provided, this information was rated as both useful and accurate.

Concerning information provided during an internship, most respondents (i.e. 79% and 85%, respectively)

selected the value of “4” or “5” to assess the information’s usefulness and accuracy, respectively.

Concerning information provided during a meeting with a supervisor, most respondents (i.e. 84% and 90%, respectively) selected the value of “4” or “5” to assess the information’s usefulness and accuracy, respectively.

Concerning information provided during a staff meeting, most respondents (i.e. 90% and 93%, respectively) selected the value of “4” or “5” to assess the information’s usefulness and accuracy, respectively

What options have you had regarding LGB service members' disclosure of their sexual orientation?

An answer was requested for each of five options:

84% selected “Maintaining confidentiality of sexual orientation during treatment”;

23% selected “Refer service member to non-military mental health services if sexual orientation disclosed”;

22% selected “If service member discloses sexual orientation, report to commander;”

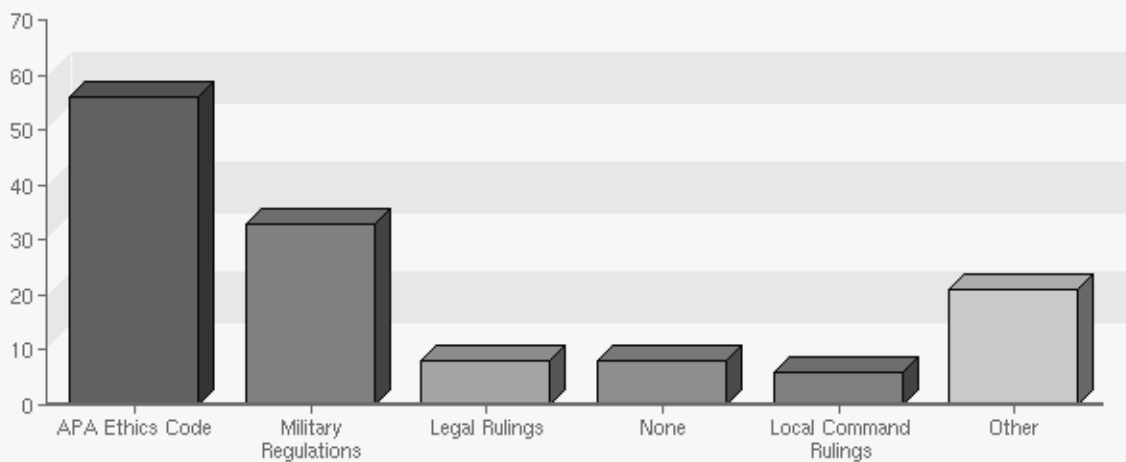
22% selected “Warn service member in consent form that sexual orientation should not be disclosed in treatment”;

20% selected “Establish clear boundaries with service member that sexual orientation should not be disclosed.”

Twenty-two respondents provided other options. Six reported confusion as to what this question meant and six reported that they maintained confidentiality during treatment. The remainder of responses was heterogeneous (*see Appendix*).

Which of the resources below have provided guidance to your understanding of your professional responsibilities in providing psychological services to LGB personnel in the military?

A large majority, i.e. 75% (56 respondents) selected the APA Ethics Code as having provided guidance to their understanding of their professional responsibilities in providing psychological services to LGB military personnel and 44% selected Military Regulations.



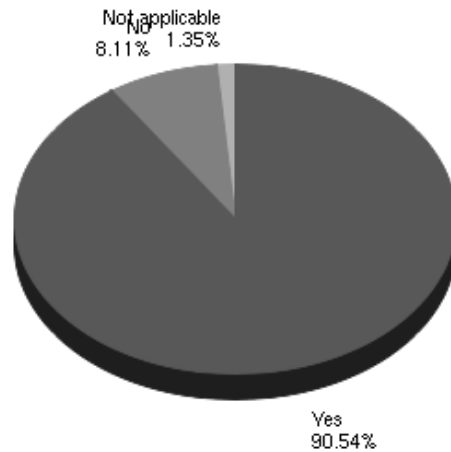
The questions invited participants to “indicate specifics” about the particular resources that provided

guidance (see Appendix for a complete set of responses).

Thirty of the 56 respondents who had indicated that the APA Ethics Code provided guidance to their understanding of how to provide mental health services to LGB military service members mentioned confidentiality as the particular element of the APA Ethics code that informed their knowledge of the issue.

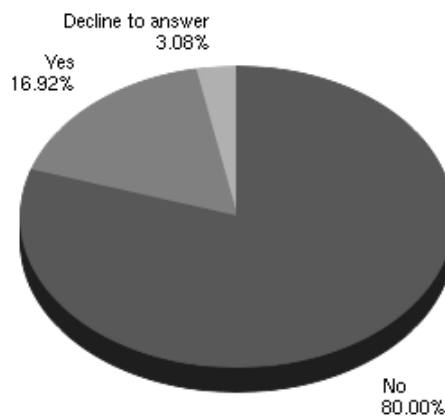
Out of the 17 respondents who suggested that 'other' sources provided guidance to their professional understanding, 8 persons reported that consultations with other professionals had been helpful, and 6 mentioned that their personal ethics code provided guidance.

Have you ever provided psychological services to gay, lesbian, or bisexual personnel in the military?³



Ninety per cent of the respondents reported that they had provided psychological services to LGB military personnel in the past. Those respondents were asked the following follow-up question:

Did you have any concerns about providing psychological services to gay, lesbian, or bisexual personnel in the military?



³ This question has only 74 responses, unlike all other mandatory questions in the survey. This is because of a technical issue specific to the design of this question before the question was launched. It resulted in one participant (most likely accidentally) not responding to the question.

Most service providers (80% of those who responded to the follow-up question) did not have any concerns. If respondents had indicated that they did have concerns with providing mental health services to LGB persons in the military, they were invited to respond to another follow-up question:

What concerns did you have?

Eleven persons provided comments in response to this follow-up question, with responses ranging from concerns about balancing responsibilities (3 individuals), protecting the LGB individual (2 persons), to fears about their own careers (2 respondents).

The specific comments are listed below:

Balancing doing the right thing for the pt and military regulations

Protecting the privacy of the person(s). Protecting the person(s) career opportunity.

What are the specific guidelines of the military? As a civilian, to whom do I report--if I even have a legal right or responsibility to report? What action can be taken against a service person if their sexual orientation is exposed? What legal issues confront a psychologist involved in the treatment of LGB servicepersons? My actions are clear (to me) in the event of disclosure of predatory sexual behavior for either heterosexual or LGB individuals--what are my actions in the event of consenting individuals?

If I'm caught, my career is over. If I can't protect client confidentiality, their careers are over.

Wondering about whether at some point I might need to report. Questions about how to best document sessions to maintain confidentiality.

I was concerned for myself if the member disclosed his/her status to a commander and informed command that he/she had previously informed me.

If the member needs to disclose their sexuality for their therapeutic progress, despite our discussions of boundaries of confidentiality and reporting requirements, they will probably lose their job and no longer be able to continue in therapy.

If further disclosure on their part would necessitate reporting to the command.

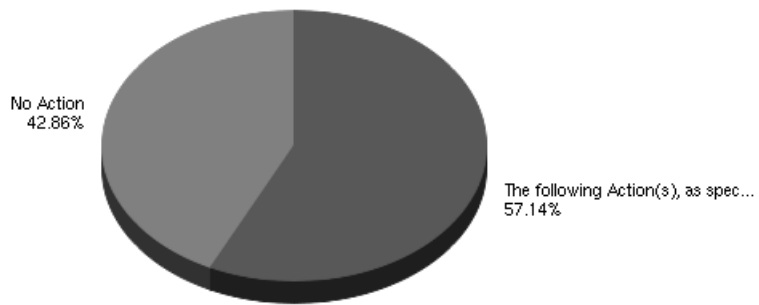
They are violating don't ask don't tell policy

Privacy of the information; my need to not document specific sexual orientation issues.

I'm not sure what you mean by "concerns"--ethical concerns, personal concerns, do I view myself as having appropriately provided therapy concerns (answers--some, no, mostly I think but because have not treated anyone wanting for example sexual re-orientation therapy)? Do you mean ANY psychological services to a patient who happens to be GLB or services specifically focused on sexual orientation issues (e.g., I'm living heterosexual life but think I might be gay or I have homosexual attractions but want to live as heterosexual)? The latter--no I haven't as a primary focus of therapy.

What actions would you like to see APA, Division 19, and Division 44 take to address your concerns about providing psychological services to gay, lesbian, or bisexual personnel in the military?

This question was only displayed if a respondent had previously indicated that they had concerns about providing psychological services to LGB military personnel. 14 persons answered this question, and eight of these (i.e. 57%) suggested specific actions, as outlined below. Six respondents (i.e. 43%) did not



suggest any action.

Specific actions suggested by survey respondents were varied. Four individuals suggested that more training and guidelines would be helpful, and two persons recommended more lobbying to counter sexual discrimination.

The specific comments are listed below:

I would like the APA Division 19 to act as an information clearing-house for all psychologists who have a question in this area. I would like the APA Division 19 to designate a person or group of persons who act as consultants and who act as go-betweens (interpreters?) of military directives. In other words, rather than trying to find the correct military person, office, or agent, I would like to be able to consult an APA Division that is aware of at least three things: My ethico-legal mandates as a member of the profession; my ethico-legal requirements as a service provider to our military personnel; and which of the previous two requirements supersedes the other and in which circumstances.

Continue lobbying and public education activities to end prohibitions to military service by gays. Lobby for policy protecting therapists from retribution for treating gays. Lobby for end to requirement for therapists to report gay behavior.

More specific guidelines, training to civilian & active duty mental health providers

Provide more military specific training and/or guidance, particularly to either active-duty or those working predominantly with an active-duty population.

Clarification within the military system (perhaps a new instruction eventually) of psychologists' responsibilities with regard to reporting (or not reporting) disclosures of homosexual acts (orientation should not be reportable regardless).

This is in regard to question 11. I didn't have the ability to include it there: I do not know whether I have seen GLB members or not as an AD AF psychological provider, no one has disclosed their sexual orientation to me while I have been in the AF and I haven't asked. Not because of UCMJ, but because it hasn't come up as a focus of therapy. My suggested action for divisions 19 and 44 on this issue is to stop looking at and teaching the issue as if every member with GLB orientation that has a desire to seek mental health treatment does so with a NEED to address sexual orientation issues. I have worked with many GLB clients outside the military that sexual orientation was never an issue addressed in therapy. Even if it is a desired focus of therapy, I hear very little of empirically based therapies for helping someone adjusting with issues related to their sexual orientation. So future concerns could be addressed at promoting such literature.

APA to actively work with military leadership to change policies.

Clarification of roles, appropriate therapies (distinguishing more mental health issues from patients

specifically wanting therapy for sexual orientation (acceptance or "changing" it).

Why not?

This follow-up question on the same screen was displayed to the six respondents who had expressed concerns about providing mental health services to LGB military service members, yet who did not suggest any further action on the topic. Five individuals responded, and their answers were all different, with one particular comment suggesting "sexual orientation is not a psychological condition- it isn't the APA's lane".

The specific comments are listed below:

I think that this issue is being actively worked by boots on the ground psychologists. There is clarity in that they can discuss sexual orientation as long as they do not discuss/admit actual sex acts with same sex individual.

To me it is a non-issue. We need all the good Soldiers we can get and retain. I do not care about a person's sexual orientation as long as they are good Soldiers.

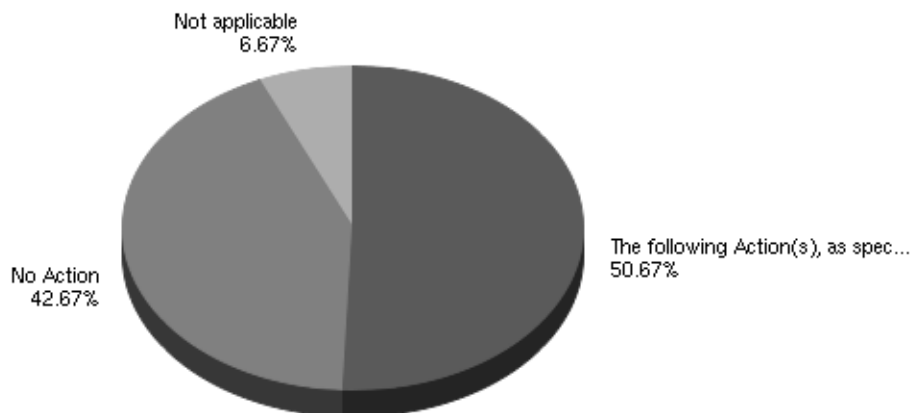
I don't know what has already been done

I am not certain what would be helpful--this is military requirement

Sexual orientation is not a psychological condition- it isn't the APA's lane

13. What actions, if any, do you recommend that APA, Division 19, and Division 44 take on issues related to sexual orientation and military service?

All respondents were asked to provide recommendations. Thirty-eight respondents (51%) suggested that the APA should take further action on this topic, as outlined below. In contrast, 37 individuals, or 49%, suggested that no further action was needed.



Suggested Action (please specify whether APA, Division 19, or Division 44)

This question was posed if a respondent recommended further APA action on the topic.

A preliminary content analysis of the 38 free-format recommendations to the APA revealed that the most common theme that could be discerned was "more lobbying against sexual discrimination". Fourteen

respondents (or 37% out of the 38 individuals who suggested further action) made comments that can be classified in this category. Six respondents suggested further education in this domain.

One particular respondent suggested:

"First, recognize that military providers are not biased by virtue of their service. Secondly, don't hold the military responsible for legal mandates from Congress. Like any issue faced by psychologists where there is a delicate balance between the legal and the ethical, the provider bears the brunt of the responsibility and then gets criticized for operating and/or maneuvering through those issues. Don't mix politics and treatment issues; or to ignore that military providers were being blamed when the law was the issue."

Five individuals wrote comments that can be classified as a recommendation for no further action as *recommended action* for the APA. For this reason, these five comments were added to the group of responses by those who suggested that no further action was needed (see paragraph below).

Why not?

This question was posed if a respondent suggested that no further action was required. 18 individuals provided comments here.

In total, nine individuals' comments can be classified according to the theme "the system works fine; this is a non-issue". Taken together with the five comments above (i.e. those respondents indicating "no action" under the section 'Suggested Action'), which also suggest that no further APA action is needed on this topic, this indicates that fourteen respondents (or 38% out of the 37 individuals who suggested "no action") share this opinion.

An interesting comment in this section was:

"The military is a closed system, they do not respond to outsiders pushing their beliefs. Historically, the military is far more progressive than the mainstream. But are resistant to outsiders attempting to push values on them. Gays have always been in t"

The survey is now complete.

If you have any additional comments or concerns, please indicate these below:

The text above was displayed at the end of the survey. 19 individuals provided further comments, which were heterogeneous in nature. As indicated in the summary section above, only two response themes could be discerned, shared by three individuals respectively, and categorized as "thanks for working on this important issue", and "this is not an important issue and the APA should not spend more time dealing with it".

Feedback about the survey itself

Six respondents indicated confusion about the meaning of question 9.

The following email communication was received by the Division 19 listserv manager, on Tuesday, October 02, 2007 1:21 PM:

"Will,

I gave my best shot at completing the survey, but abandoned the effort without completing it, and I have no intention to return to the task. Problems:

Ambiguity in some items. E.g. what the heck is the difference between "active civilian" and "civilian non military"?

Item 9. Options available

Options according to military regulations, lawyers, or as actually practiced?

Ambiguity again in some options. e.g. "Maintain confidentiality ...during treatment." Assuming that I should answer as to how practice is actually done, the answer would depend on whether the member was seeking treatment for issues directly related to LGB question, or whether discovery of LGB possibilities were peripheral to the reason the person was being seen and whether the treatment plan required getting further into those areas or not.

Answering Item 10 requires looking up several military regs, consulting documents that may or may not be handy at the moment, and re- reading the ethical guidelines to be sure that the answers were citing exact reg numbers, wordings, etc. I don't know of many psychologists in or out of the military who would have the time to do that just to respond to a survey. I do it when I must face issues in practice, or teaching - but for a survey?? Despite the importance of the topic, I have neither the time nor inclination to pull out and pore over all those documents.

With all of these ambiguities and other problems, I fear that what input I may have given would be subject to being massively misconstrued, and reflect not at all the information as I intended it to be communicated. This issue is too important for me to take that risk.

I'm sorry to be a curmudgeon. I'm disappointed that I feel forced to abstain."

The comment below was recorded as one of the 'final comments' at the end of the survey:

"I understand this is an important issue, but the way some of questionnaire is worded will affect the results I think (see prior comments). My personal opinion is that orientation in and of itself is not a MH diagnosis, if the patient wants to press the issue (e.g., shouldn't be in military) they need to take it to command. If they want help with mood problems, relationship issues, living healthy lifestyle, goals, etc, I try to help same as with other patients."

References

Paige, R. U. (2005). Proceedings of the American Psychological Association, Incorporated, for the legislative year 2004. Minutes of the meeting of the Council of Representatives July 28 & 30, 2004, Honolulu, HI. Retrieved November 18, 2004, from the World Wide Web <http://www.apa.org/governance/>. (To be published in Volume 60, Issue Number 5 of the American Psychologist.)

APPENDIX H

Summary of the results of research with GLB veterans

Military and health-related experiences of lesbian, gay, bisexual, and transgender veterans:
Results from a national survey

This research was conducted by Kimberly Balsam, University of Washington; Bryan Cochran, University of Montana; and Tracy Simpson, University of Washington. Partial funding was provided by the Center for the Study of Sexual Orientation in the Military. This report was presented by Kimberly Balsam, Ph.D., to the APA Task Force on Sexual Orientation and Military Service on August 16, 2005.

Introduction and background

A robust body of research literature addresses the military experiences, mental health, psychosocial functioning, and service utilization patterns of veterans of the United States Armed Forces. However, virtually no research exists addressing these issues specifically among lesbian, gay, bisexual and transgender (LGBT) veterans. Indeed, studies of veterans do not assess sexual orientation, which likely reflects the military's current and past policies regarding same-sex relationships and behavior. In spite of these policies, anecdotal and clinical experiences indicate that many veterans do identify as LGBT and may have had unique military experiences that are associated with health needs and barriers to service utilization.

This report summarizes the results of the first U.S. study to investigate the experiences of LGBT veterans. Our purpose was to gather descriptive data on the military experiences of these veterans, as well as to assess their current mental health, physical health, general functioning, LGBT identity development, health service needs and service utilization patterns.

Methods

We collected data using a web-based survey from May 2004 through January 2005. Participants were recruited via websites and email list serves that specifically target LGBT veterans as well as similar sites and list serves that target the LGBT community more broadly. Advertisements were also placed in national and regional LGBT periodicals across the U.S. Potential participants were directed to an online consent form and to a survey that was completed anonymously online. Participants responded to questions regarding their demographic information, sexual orientation and identity development, military service and experiences while in the military, experiences of verbal, physical, and sexual victimization while in the military, and VA service utilization. Participants also completed standardized measures of PTSD symptoms, health and mental health symptoms, and substance use.

Results

Demographics and sexual orientation: A total of 445 eligible participants completed the survey. Participants ranged in age from 19 to 83 years, with a mean age of 45.4 years ($SD=13.5$). Most (64.7%) participants were male, with 27.2% female and 8.1% self-identified as transgender or "other." The sample was predominantly European American (87.6%) but included 2.0% African American/Black, 3.6% Latino/Hispanic, 1.1% Native American/American Indian, 1.1% Asian American/Pacific Islander, and 4.5% biracial or multiracial participants. The sample represented veterans from all five branches of military service and 44 U.S. states as well as the District of Columbia and Puerto Rico. Nearly half of participants lived in cities with populations of 250,000 or greater, with 25% in cities of at least one million; however, 16% of participants reported living in rural areas or in towns with populations less than 20,000. Overall, participants were well-educated, with 61.1% reporting at least a four-year college degree and 31.3% reporting a graduate or professional degree. The mean household income reported by participants was between \$50 and \$75K annually.

The majority of participants identified as lesbian or gay (88.7%), with 7.2% identifying as bisexual, 1.2% as heterosexual, and 2.9% as “other.” Forty four percent of participants were currently in a relationship with a same-sex partner, with more women (53.7%) than men (41.3%) reporting a current same-sex relationship. Twenty three percent of women and 14.6% of men reported a prior heterosexual marriage that was motivated by the desire to avoid military scrutiny of their sexual orientation. Nearly 27% of participants were parents, with more women (32.4%) than men (21.8%) reporting that they had children.

On average, participants were first aware of their sexual orientation in adolescence. Men reported first awareness of same-sex attraction around age 12, while women reported this awareness around age 15. On average, participants first thought of themselves as being LGBT around age 20. Women first disclosed their LGBT identity two years earlier (mean age = 21.8 years) than men (mean age = 23.8 years). Currently, participants are fairly “out,” with the majority reporting that most people in their life are probably or definitely aware of their sexual orientation (mean outness score = 4.8 on a 1 to 7 scale). Participants reported a comparable level of current outness to their veteran friends (mean = 4.5), but a markedly lower level of outness to VA staff (mean = 3.1).

Military experiences: Although the survey was advertised as being for veterans, 53 participants (11.9% of the entire sample) were still in the military in some way. Of these participants, 35 (64%) reported that they were currently in the reserves. On average, participants entered the military at age 20 ($SD = 3.0$), with an average period of military service spanning seven years. Participants' year of entry into the military spanned from 1943 to 2003. Chronologically, men in the sample entered the military earlier (Mean year = 1977) than women (Mean year = 1984). The majority of participants enlisted voluntarily (80.0% of women and 71.9% of men). Eight percent of male participants were drafted. Thirteen percent of male and female participants entered the military as officers. Thirty five percent of participants reported exposure to a war zone during their military service; this was more common among male participants (39.0%) than among female participants (24.8%).

Participants indicated mixed reactions to their experiences in the military; whereas a majority (68.3%) reported having some fond memories of their time in the service, 58.3% thought that their experiences in the military had been more difficult than their heterosexual peers, and 67.1% reported feeling fear or anxiety about having their LGBT identity revealed while in the service. Eighteen percent of participants reported that they initially joined the military in hopes of overcoming their sexual orientation.

Discrimination and victimization in the military: Many participants reported discriminatory experiences related to their sexual orientation while in the military. Thirty six percent were subject to an investigation of their sexual orientation during their period of military service. Eleven percent of all participants were “outed” to family or friends during the course of such an investigation. More women (47.9%) than men (32.6%) reported being investigated. Fifteen percent of all participants were physically isolated from their unit due to their sexual orientation. Twelve percent were forced to undergo a psychiatric evaluation due to their sexual orientation. Thirteen percent were threatened with discharge if they did not “out” other LGBT service members. LGBT status was responsible for separation from military service for some participants. Sixteen percent reported that they were forced to separate due to their sexual orientation, while 19.6% left voluntarily because they could not be open about being LGBT while in the military.

Nearly half (47.2%) of participants reported at least one incident of verbal, physical, or sexual victimization due to their sexual orientation during their period of military service. Ethnic minority participants were significantly more likely (60.0%) to have experienced sexual orientation-related victimization while in the military than their European American counterparts (44.5%). The most frequent types of victimization were verbal attacks (33.9%) and threats of physical violence (19.3%). Eight percent reported being physically assaulted and eight percent reported being sexually assaulted due to their sexual orientation while in the military.

Table 1 shows the overall frequency of reported verbal, physical, or sexual victimization while in the military for men and for women. For each type of victimization, the percentage of participants who believe that the victimization was due to their sexual orientation is shown. As is seen in the table, few gender differences were found, with the exception of sexual assault and unwanted sexual experiences.

Women were more likely to experience sexual victimization; however, men were more likely than women to believe that their sexual victimization was due to their sexual orientation.

Health status: With respect to mental health, participants completed standardized screening checklists. Although we did not use diagnostic instruments, results indicate that 7.0 % of participants screened positive for probable current Major Depressive Syndrome. Eighteen percent screened positive for probable current Posttraumatic Stress Disorder. More than half (57.1%) of participants reported a history of suicidal ideation, and nearly a third (28.9%) reported an actual suicide attempt. Eleven percent screened positive for probable current alcohol use problems. Overall, 22.3% of participants reported that they were bothered “quite a lot” or “extremely” by emotional problems over the past four weeks.

With respect to physical health, 80.9% of participants rated their physical health as “good”, “very good” or “excellent” over the past four weeks. However, more than a quarter (26.2%) of participants reported current health problems that limit their physical activity, and 39.8% reported at least some difficulty doing daily work because of their physical health. One quarter of participants reported moderate to severe bodily pain over the past four weeks.

VA healthcare utilization: Nearly half (45.3%) of participants have received medical services from the VA at some time in their life, and 28.3% are currently doing so. Twenty seven percent of participants report that they have avoided using at least one type of VA medical service because of the perceived treatment of LGBT people at the VA. More specifically, 10.1% would like to receive primary medical care services at the VA and 11.9% would like to receive individual mental health treatment at the VA but do not do so because of being LGBT. Only 6 participants (1.4%) reported that they are currently participating in an LGBT-oriented group at a VA. However, 52.8% of participants reported that they would be “somewhat” or “very” interested in participating in such a group if it were available to them.

Conclusions

This was the first U.S. study to specifically examine experiences of lesbian, gay, bisexual, and transgender veterans of the U.S. armed forces. The results indicate that this group is diverse in terms of age cohort, demographics, geography, and military service. The majority of participants entered the military voluntarily, even though they were already aware of their sexual orientation. While in the military, participants encountered a wide range of negative experiences related to being LGBT, including discrimination, investigation, victimization, and involuntary separation from military service. While these experiences caused distress for participants, the majority still look back on their time in the military with positive regard. A number of participants have current mental or physical health problems. While many use VA services, the perception of bias against LGBT people at the VA presents a barrier for some who may need services.

Interpretation of the results of this study should take into account that this sample is not probability-based and thus may not adequately generalize to the entire population of LGBT veterans in the U.S. Furthermore, the lack of representation of ethnic minority participants limits our ability to generalize to these groups. Future researchers should work collaboratively with ethnic minority communities to over sample LGBT veterans of color.