The Salve and the Sting of Religion/ Spirituality in Queer and Transgender BIPOC



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For some lesbian, gay, bisexual, transgender, and queer (LGBTQ+) individuals, their concept of religion/spirituality is a source of strength, refuge, peace, fellowship, and meaning. It can also be a source of marginalization, trauma, and pain. Clay Cane's 2015 documentary Holler if You Hear Me: Black and Gay in The Church gives accounts of several queer Black men and women who view The Black church as both their refuge and as a traumatic experience. Similarly, many Muslim LGBTQ+ individuals, coming out to family members and their religious communities can cause anxiety (Burke, 2019). Burke further states that young Muslims who are queer may receive threats from family or are afraid to reveal their affectional orientation. Religious spaces can be alienating, and some are not comfortable attending a mosque; if they do, they remain deeply closeted (Burke, 2019). For Jewish members of the LGBTO+ community, views on same-sex relationships have shifted (My Jewish Learning, n.d.-a, n.d.-b). While Orthodox congregations may reject samesex behavior, Conservative and Reform congregations have adopted a more liberal and inclusive stance regarding same-sex relationships. For LGBTO+ individuals who are Buddhist, LGBTQ+ individuals experience compassion and inclusion in Buddhist communities (Cheng, 2018). This chapter discusses the role that religion/ spirituality play in the lives of LGBTQ+ individuals. The author will discuss the perspectives of LGBTQ+ Black people in The Black Church, Catholicism, in The Muslim Faith, in the Jewish Faith, and in the Buddhist Faith. The author will also discuss LGBTQ+ individuals who have Indigenous spiritualities and Pagan identities or who are atheist/agnostic (Fig. 1).

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Fig. 1 Two students volunteering at the LGBTQ Scholars of Color National Conference. Photo Courtesy of Riya Ortiz/Red Papillon Photography

2 LGBTQ+ in Spiritual/Religious Traditions

2.1 The Black Church and the LGBTQ+ Community

Robertson and Avent (2016) posited that most Black people consider religion important and the culture of the Black Church influences their worldview and perspective. They further state that 59% of Black Americans are members of predominantly Black congregations. Douglas (2006) refers to the amalgamation of Black congregations as "The Black Church." According to Douglas, the Black Church is

a multitudinous community of churches, diversified in origin, denomination, doctrine, worshiping culture, spiritual expression, class, size, and no doubt other less obvious factors. Though disparate, Black churches share a unique history, culture, and role in Black life that attest to their collective identity as the Black Church. (p. 1301).

The Black Church provides social bonding and fictive kinship (Robertson & Avent, 2016). Church members refer to each other as family and they share in each other's successes and may feel disappointment and vulnerability when a member goes against social mores (Robertson & Avant, 2016). As such, many consider The Black Church as "the cornerstone of the Black community." Robertson and Avant go on to say that Black churches have been prominent and influential in advocacy and social justice efforts in the Black community. Their legacy of fighting oppression has made The Black Church integral in The Civil Rights movement. The Black

Church has championed causes like voting rights and education inequality (Robertson & Avent, 2016).

According to Greer (2016), like gay nightclubs, Black churches give those who attend something other institutions cannot—a place where attendees can be themselves, especially when the outside world feels hostile. For LGBTO+ members, The Black Church serves as the same refuge and place of inspiration and social gathering. Black men in the LGBTQ+ community attend church for the same reasons other Black people do (Pitt, 2010). Pitt further says Black churches fulfill social roles, are spiritual resources, and allow them to use their talents to serve the Black community (2010). The Black Church would not survive without gay people (Cane, 2015). Black men have consistently high levels of involvement in The Black Church, like that of heterosexual women (Pitt, 2010). The same can be said for other Black members of the LGBTO+ community. Members of the LGBTO+ community pay tithes, teach Sunday school, and head the music ministry. People will come to a church if they know that the music is good and often someone who is gay is over the music. They are playing the instruments, directing choir, and in the pulpit. Some LGBTQ+ members of The Black Church are closeted while some are out. Nonetheless, they are serving, and they are called to ministry. Members of the LGBTQ+ community have been faithfully serving, attending, and supporting The Black Church since there was a Black Church (Cane, 2015; Pitt, 2010). Black members of the LGBTQ+ community are integral to the survival and thriving of The Black Church.

The Black Church has marginalized members of the LGBTQ+ community and assails them with anti-gay rhetoric (Pitt, 2010). This marginalization can and does lead to *church hurt* or the pain inflicted by churches that distances people from their communities and from God (Zauzmer, 2017). For members of the LGBTQ+ community, church hurt results from not being received by their churches, hearing anti-LGBTQ+ messages, and not being allowed to be their full, authentic selves while worshipping and leading worship. For some Black members of the LGBTQ+ community, Black churches present one of the most oppressive environments they encounter (Pitt, 2010; Robertson & Avent, 2016).

While Black members of the LGBTQ+ community have been integral to The Black Church, they have not been afforded the privilege of being their authentic selves or have been afforded full membership (Cane, 2015). The concept of "love the sin but hate the sinner" may present some Black churches to as welcoming to LGBTQ+ members, but still posits same-sex attraction as sinful or deviant and can be cured (Quinn & Dickson-Gomez, 2014). Even though The Black Church has a history of fighting oppression and advocating for equality, many Black congregations work against antidiscrimination efforts for LGBTQ+ communities (Robertson & Avent, 2016). Some Black churches may join and/or ally with other conservative religious groups to condemn same-sex attractions, which could further alienate members of the LGBTQ+ community. Maxwell (2013) posited that because of the anti-LGBTQ+ messages in The Black Church, Black members of the LGBTQ+ community have denied their affectional orientation resulting in the Black families breaking down and the rise of HIV/AIDS in the Black community. The Black

Church could not confront AIDS in Black communities because it could not confront homosexuality and sexuality (Harris, 2009). Black men in the LGBTQ+ community who are HIV positive receive AIDS-phobic messages that increase feelings of stigma and castigation in the Black Church (Miller, 2007). As such, Black churches, although claiming to be welcoming to all and using LGBTQ+ members for their gifts and their financial contributions, continue to bring trauma and be a source of church hurt for the Black people in the LGBTQ+ community.

Despite the church hurt, many Black members of the LGBTO+ community choose to remain in their churches. The Black Church is important and is like a pseudo-family for some Black people. Because of this importance, leaving a church abruptly because of religious homophobia is just as difficult as disconnecting from your family despite familial incidents of homophobia (V. Allen, personal communication, August 31, 2020). Staying true to their religious/spiritual beliefs can cause anxiety among members of the LGBTQ+ community. As such, they may employ one of three strategies to work through this anxiety (Pitt, 2010). They may reject their religious identity. Black members of the LGBTO+ community are less likely to utilize this strategy because of the connection they feel from their membership in The Black Church. In fact, they will involve themselves more deeply into their church work by actively participating and attending services. Secondly, they may affiliate with gay-affirming religious institutions or those that are gay-tolerant and silent on gay issues. For many Black members of the LGBTO+ community, these places of worship are predominately White and may not be compatible with their own cultural experiences. They prefer the homophobia of The Black Church over the racism of predominately White gay-affirming congregations (Griffin, 2006). For Black LGBTO+ people, the third strategy, attacking the stigma, involves restructuring their beliefs about what being gay means and replacing negative religious rhetoric with neutral or positive beliefs. They focus on the illegitimacy of the messenger rather than the message. The fault lies in the speaker's interpretation of God's message, not in God or the message (Pitt, 2010). These strategies could explain why Black members of the LGBTO+ community still attend and are active in The Black Church.

2.2 Catholicism and the LGBTQ+ Community

The Roman Catholic Church is the largest denomination in the US and has welcomed celibate members of the LGBTQ+ community but has become increasingly more intolerant of this population (Human Rights Campaign, n.d.). Many LGBTQ+ people from various ethnocultural backgrounds (i.e., Latin American countries, Philippines) have been raised in The Roman Catholic Church, whether in the U.S. or in their countries of origin, and may have attended catechism (religious instruction within the church) or Catholic schools. Many cultural festivities are tied to religious festivities, making the Catholic religion very present in people's lives.

The Roman Catholic Church views same sex acts as intrinsically immoral and contrary to natural law and calls same sex tendencies objectively disorder. Same-sex affectional orientation is not sinful (which is a break from other more fundamentalist Christian traditions), but The Roman Catholic Church views it negatively. Same sex affectional orientation is commonly seen as an intrinsic moral evil. Because The Roman Catholic Church does not view same sex affectional orientation as sinful, it has not officially approved of conversion therapy. The Roman Catholic Church states that members of the LGBTQ+ community are called to chastity and they must be accepted with respect and sensitivity. The Catholic Church has been called to avoid every sign of unjust discrimination (Human Rights Campaign, n.d.). Horowitz (2020) posited that Pope Francis, in a break from previous popes, expressed support for same-sex civil union. He views members of the LGBTQ+ community as children of God. Internal and external advocates for members of the LGBTQ+ community within the Catholic Church believe this community should be accepted—not excommunicated, shunned, or stigmatized—and have a right to form a family.

2.3 Judaism and the LGBTQ+ Community

Jewish members of the LGBTQ+ community may also find refuge and trauma in religious communities. According to Beagan and Hattie (2014), Judaism, Aboriginal traditions, Buddhism, and Hinduism tend to be the most welcoming for members of the LGBTQ+ community. Jewish views toward the LGBTQ+ community have evolved, but these views differ depending on the denomination (My Jewish Learning, n.d.-a, n.d.-b). Orthodox communities believe *The Torah's* inflexible rejection of same-sex acts. Orthodox rabbis use Levitical law as the foundation of their prohibition of same-sex acts and label them an abomination. Like Christians' view of "hate the sin, love the sinner," Orthodox Rabbis believe Levitical law does not reject LGBTQ+ individuals, but the same-sex acts. In 2010, Orthodox rabbis wrote and signed a statement fully welcoming Jews who were gay into synagogue life while reiterating traditional Orthodox opposition to same-sex acts and same-sex marriage. There are numerous grassroots for LGBTQ+ Orthodox Jews and their families (My Jewish Learning, n.d.-a, n.d.-b).

Ultra-Orthodox Jews (which include the Hasidic and Yeshivish traditions) adhere to traditional and rigid gender roles and norms where men and women study in separate schools that focus on studying *The Torah* (Nove, 2018; Shapiro Sanfran, 2013). Studying in secular institutions is discouraged. Known as *shidduchim*, marriage is often arranged through facilitated dating (Shapiro Sanfran, 2013). In the documentary *Trembling Before G-d* (DuBowski, 2001), LGBTQ+ members of the Ultra-Orthodox tradition are conflicted and must reconcile their affectional orientation with their religious beliefs. Many of the people featured in the documentary had to have their identities hidden and voices disguised for fear of the repercussions if their identities were revealed. One subject had been expelled from two Yeshivas for his affectional orientation, contracted HIV, decided to re-embrace The Orthodoxy,

blamed his expulsion for contracting HIV, and wanted to relearn his Torah. A lesbian couple, who were high-school sweethearts at an Ultra-Orthodox all-girl's school, were disowned by their families. Many members of Ultra-Orthodox communities cannot live their authentic lives and resort to celibacy or living in heterosexual relationships (DuBowski, 2001).

There are resources for Orthodox Jews in the LGBTQ+ community. Eshel seeks to create a future for Orthodox LGBTQ+ individuals and their families ("Eshel Online," n.d.). Eshel supports members in this community and opens hearts, minds, and doors in Orthodox communities through its innovative and culturally sensitive programming. Eshel has twelve locations for in-person meetups in the US and two in Canada. They also have three national virtual/phone-in groups. Their website (www.eshelonline.org/resources-2/lgbtq-organizations/) provides resources for LGBTQ+ Jewish organizations in North America and in Israel ("Eshel Online," n.d.)

The Reform Movement, the first of the major denominations to have liberal views towards members of the LGBTQ+ community, began advocating for the LGBTQ+ community in 1965 and adopted the first of many resolutions support the community in 1977 (My Jewish Learning, n.d.-a, n.d.-b; ReformJudaism.org, n.d.). This denomination's rabbis endorsed same-sex marriage in 1996 and the congregations did in 1997. According to ReformJudaism.org (n.d.), Reform Jews are committed to LGBTQ+ civil rights and believe that all human beings are created in the Divine image. They believe that Levitical law prohibits promiscuous relations but does not directly address loving, monogamous same-sex couple. The Reform Jewish Movement passed resolutions calling for the inclusion of LGB individuals in the rabbinate and the cantorate and supported marriage equality. In 2015, members of the Reform Jewish Movement released a "Trans Inclusion Guide" that helped members of this denomination include transgender and gender non-conforming individuals and their family into the synagogue (ReformJudaism.org, n.d.).

In 2006, the Conservative movement adopted two contradicting opinions regarding the LGBTQ+ community: one upholds the movement's previous rejection of same-sex relationship and another upholding *The Torah's* prohibition of anal sex between men but allowing other forms of same-sex sexual intimacy (My Jewish Learning, n.d.-a, n.d.-b). Those in the latter opinion endorsed ordaining LGB members as rabbis and cantors. Both opinions are equally valid and rabbis in Conservative denominations may choose which opinion to follow (Fig. 2).

2.4 Islam and the LGBTQ+ Community

According to Beagan and Hattie (2014), Islam and Christianity were the least welcoming to LGBTQ+ individuals. While some debate exists regarding the extent to which Islam condemns same-sex acts between men, it is highly intolerant towards homosexuality culturally and legally (Beagan & Hattie, 2015). The lack of research in this area indicates that LGBTQ+ individuals who are Muslim experience tremendous identity conflict because of the religious and cultural condemnation. The group



Fig. 2 Dr. David Ford (far right) with other participants at the 2015 LGBTQ Scholars of Color National Conference. Photo Courtesy of Riya Ortiz/Red Papillon Photography

Muslims for Progressive Values has created eight inclusive communities in the United States (Burke, 2019).

Muslims for Progressive Values (MPV) provides a progressive Muslim voice on contemporary issues and voices its perspectives with policy briefs and through civil discourse ("Muslims for Progressive Values," n.d.). MPV advocates for human rights, social justice, and inclusion in the US and globally. MPV is guided by ten principles rooted in Islam: collective identity, equality, separation of religious and state authorities, freedom of speech, universal human rights, gender quality, LGBTQI inclusion, critical analysis and interpretation, compassion, and diversity. Some of the main issues that MPV tackles are interfaith families, LGBTQI, race and racism, Sharia Law, Women's rights, and sexual diversity ("Muslims for Progressive Values," n.d.).

2.5 Hinduism and Buddhism and the LGBTQ+ Community

Buddhism and Hinduism are seemingly more welcoming to members of the LGBTQ+ community than some other religious/spiritual traditions (Beagan & Hattie, 2014). Cheng (2018) posited that Buddhist culture cultivates compassion towards the LGBTQ+ community. Buddhists that are LGBTQ+ can cultivate self-acceptance through Buddhist teachings like clarification of nature and

manifestation, Buddhist equality, and proper interpretation of Buddhist precepts. Buddhist teachings also encourage inclusiveness. Hinduism does not explicitly forbid same-sex activity, but cultural norms could mean the Hindus who are LGBTQ+ fear the loss of family and community (Cheng, 2018).

Hijra are transgender people in the Hindu tradition that are neither male nor female and experience social exclusion (Khan et al, 2009). In Bangladesh, hijra are extremely excluded with no sociopolitical space where they can lead a life with dignity. Their exclusion is based in not being recognized as a separate gender beyond the male-female dichotomy. Because they live on the extreme margin of exclusion, they cannot hold space in the greater society with human potential and security. They experience physical, verbal, and sexual abuse and because of their social exclusion, they experience diminished self-esteem and sense of social responsibility. Khan et al. (2009) suggest that hijra should be recognized within the gender continuum and are a part of Bangladesh's diversity and have gender, sexual, and citizenship rights that should be protected.

2.6 Paganism and Atheism/Agnosticism and the LGBTQ+ Community

Pagan spiritual traditions are typically accepting of gender and sexual diversity and some LGBTQ+ youth have left nonaccepting religious traditions to become Pagan (Higa et al, 2014). Like Pagan traditions, those who are nonreligious (Atheist/Agnostic) are typically accepting of members of the LGBTQ+ community. According to the Pew Research Center (2020a), 2020b), 94% of Atheists and Agnostics believe same-sex acts should be accepted. For LGBTQ+ BIPOC, while leaving their non-accepting religious/spiritual traditions is an option, many choose to remain in their respective traditions because the benefits outweigh the anxiety caused by anti-LGBTQ+ messages (Pitt, 2010; Robertson & Avent, 2016).

2.7 Indigenous Traditions and the LGBTQ+ Community

According to Picq and Tikuna (2019), sexual diversity has been the norm among indigenous communities and native terminologies referring to same-sex acts and non-binary and gender fluid identities existed long before LGBTQ+ frameworks. In the Juchitán District of Mexico, the Zapotec society recognizes *muxes*, people who are biologically male but embody a third gender that is neither male nor female, as a blessing from the gods. The *muxes* are biologically male and who refuse to be translated as transvestite. Alternative genders exist in several indigenous cultures and are viewed as sacred or have spiritual powers (Picq & Tikuna, 2019).

Two-Spirit refers to non-binary definitions of gender and affectional orientation in Native American traditions (Davis-Young, 2019). Terminology in the Obijwe language used for men who don women's roles in society and women who don men's roles in society inspires the Two-Spirit identity. Many of North American indigenous traditions include a non-binary/fluid idea of gender but hundreds of years of forced assimilation have erased many of their traditions and customs. Two-Spirit powwows are a way to challenge rigid notions of gender and sexuality, which are the unfortunate remnants of colonization. Navajo traditions have at least four genders. The powwows are a way to learn about and celebrate these traditions and not be bound by rigid gender roles (Davis-Young, 2019).

3 Mental Health Applications

The Multicultural and Social Justice Counseling Competencies (MSJCC) (Ratts et al, 2016), provide a framework that mental health professionals can use to guide their work with LGBTO+ individuals experiencing church hurt from their respective faith-based institutions. The first step is becoming aware of your own biases, prejudices, and assumptions. When working with LGBTO+ BIPOC with strong religious/spiritual views, mental health professionals should become aware of their biases regarding race/ethnicity, regarding LGBTQ+ individuals, and regarding religion/spirituality. Doing so would assist the professional with building a strong relationship with the client and not letting those biases impede that relationship. Next, the mental health professional understands the client's worldview. Worldview includes how the client views the world and how the client believes the world views them. When working with this population, the mental health professional must understand the worldview regarding the client's desire to retain their religious/spiritual views, what those views mean to them, and the desire to remain in their respective places of worship. The professional must also understand how the client believes their religious/spiritual community views them, especially if the client is receiving anti-LGBTQ messages from their spiritual leader and/or cannot be their full authentic selves (Ratts et al, 2016).

The next domain in the MSJCC is the counseling relationship (Ratts et al, 2016). The mental health professional, in collaboration with the client, must determine what culturally responsive interventions and strategies need to be implemented. One such strategy is cultural broaching. Day-Vines et al. (2007) describes cultural broaching as the counselor's ability to consider how race and other sociopolitical factors influence the client's counseling concerns. Broaching culture facilitates client's empowerment, strengthens the counseling relationship, and enhances counseling outcomes. Broaching begins at the onset of the therapeutic relationship and is a consistent, ongoing process (Day-Vines et al.). Mental health professionals counseling this population must broach at the onset of the relationship so that the clients will feel comfortable presenting their authentic selves. When broaching, the professional should pay special attention to concepts of race/ethnicity, affectional

orientation and gender identity/expression, and religion/spirituality in the client. Professionals must also work through any discomfort they may have with discussing these concepts.

The final domain is counseling and advocacy interventions. Once the client and professional collaboratively develop culturally responsive interventions, these interventions can be implemented. These interventions include learning about the client's religion and religious/spiritual rituals, learning about the client's place of worship, finding information about open and affirming congregations in the client's tradition, or in other traditions. As the professional, you should not suggest the client leave their faith-based community, but if the client asks for those resources, the professional will already have them. Another intervention is assisting clients in attacking the stigma (Griffin, 2006) by empowering the client and helping them to reframe their relationship with their higher power. Doing so will help them place more emphasis on the message they receive from their higher power and less emphasis on the message interpreted through the lens of their spiritual leader (Griffin, 2006).

4 Conversion "Therapy"

The premise of conversion "therapy" is that LGBT affectional orientation is a mental illness and is an unhealthy deviation from accepted social norms (McGeorge et al, 2015), and thus, needs to be changed. Conversion "therapy" is erroneously supported by the notion that LGBT affectional orientation is immoral based on the religious belief that heterosexual affectional orientation is the only acceptable orientation and any deviation from this norm is sin. This intervention approach strives to eliminate unwanted same-sex attraction by allegedly helping individuals develop their heterosexual potential. Central to conversion "therapy" is the premise that LGBT affectional orientation is not a true orientation but is a lifestyle choice or set of sexual attractions able to be changed or controlled using behavioral therapy (McGeorge et al, 2015). Individuals may seek conversion "therapy" because of their religious orientation and internalized homophobia (Tozer & Hayes, 2004). Oftentimes, it is family members and/or church communities who push LGBTQ+people (including minors) to attend practitioners who peddle this practice.

Conversion "therapy" is harmful, unethical, and lacks empirical evidence regarding its efficacy (McGeorge et al, 2015; Tozer & Hayes, 2004); therefore, the description of this approach as "therapy" is inaccurate and misleading. According to the American Medical Association (AMA, 2019), 18 states and the District of Columbia have banned conversion "therapy" and all mental health professional organizations have issued statements opposing this intervention approach. Conversion "therapy" is in direct violation of the ethical imperative of all mental health professions called "nonmaleficence" or "do no harm" (McGeorge et al, 2015). In 2018, The American Psychiatric Association (APA) reaffirmed its recommendation that attempts to

change an individual's affectional orientation are unethical, and encouraged legislation that would prohibit conversion "therapy" (APA, 2018a). The APA further states that affectional orientation is something that should not and need not be changed, and efforts to do so are significantly harmful.

Subjecting LGBTO+ individuals to forms of treatment that are not scientifically supported and that have been documented to cause harm, severely impacts the physical, mental, emotional, and spiritual well-being of whoever is subjected to this practice. There is no credible evidence that any mental health intervention can reliably and safely change affectional orientation; nor, from a mental health perspective does affectional orientation need to be changed (APA, 2018b). The American Psychological Association (APA) concluded that there is insufficient evidence supporting conversion "therapy" and mental health professionals should avoid misrepresenting the efficacy of this intervention approach (Anton, 2010). The American Counseling Association (ACA) opposes promoting conversion "therapy" as a cure for LGBTO+ individuals, and further stated that conversion therapy is ineffectual, causes harm, violates fraud-protection law, and is a significant and serious violation of its ethical code (ACA, 2017). The National Association of Social Workers (NASW) states that conversion "therapy" harms an individual's mental health and cannot/will not change affectional orientation or gender identity (NASW, 2015). NASW (2015) further states that conversion "therapy" violates their code of ethics. The AMA (2019) stated that conversion "therapy" lacks evidence supporting its efficacy and may cause significant psychological distress.

Conversion therapy may also increase suicidal behaviors in this population, where suicide is already disproportionally prevalent. Conversion "therapy" is in violation of ethical codes (AMA, 2019). The American Association of Marriage and Family Therapists (AAMFT) posited that same-sex attraction is not a disorder that requires treatment and thus sees no need for any intervention that attempts to do so (McGeorge et al. 2015). Like other medical and mental health organizations, the American Mental Health Counselors Association (AMHCA, 2014) purported that conversion "therapy" has no scientific evidence supporting its use. AMHCA further stated that conversion "therapy" poses critical health risks like depression, shame, lower self-esteem, social withdrawal, substance abuse, risky behavior, and suicidal ideation. Conversion "therapy" reinforces homonegativity and increases stress by reaffirming stigma (AMHCA, 2014). The Substance Abuse and Mental Health Services Administration (SAMHSA, 2015) issued a statement about ending conversion "therapy" in LGBTQ youth and posited that conversion therapy is not evidenced-based, has no scientific support, and perpetuates antiquated views of gender and homonegativity. In sum, all major health and mental health professional organizations agree that (1) there is no scientific evidence that conversion approaches can change affective orientation; (2) there is no need to change affective/sexual orientation or gender identity; (3) that this practice is harmful to physical, emotional, and mental health of those who are subjected to it; (4) that this practice is in violation of their code ethics; and (5) support a ban on this harmful practice (Fig. 3).



Fig. 3 Two community members at an LGBTQ community event. Photo Courtesy of Riya Ortiz/Red Papillon Photography

5 Case Study

Diontré is a multiethnic, 25-year-old, same-gender-loving (SGL) cisgender man. His mother is White, and his father is Black. Phenotypically, he is Black and selfidentifies as Black. He has developed a strong Black identity and is a member of a historically Black Greek-letter Organization. He attended a prestigious Southeastern Predominantly White Institution (PWI) for his undergraduate and graduate degrees. All throughout his life, he has felt isolated. Other Black people have questioned his Blackness, especially with him being SGL and out. He has been the subject of bigotry from White people. He has experienced homophobia from all ethnic groups. He has experienced this ostracism and bigotry in college and in the workplace. Diontré is very active in his church. He attends a strict Pentecostal church with very traditional views, especially regarding same-sex feelings, acts, and relationships. He has always been active in his church, especially with the music ministry. He sings in the choir and has been told he has the voice of an angel. He is also the choir director. Even though his pastor constantly preaches against homosexuality, he still attends his church, loves his church, and loves his music ministry. Lately, he has experienced depression because of these experiences and has started using crystal meth to fit in with a community and to address his feelings of isolation. One evening after partying and using, he was sexually assaulted by someone at the party who is also a fellow church member. A few weeks later, he developed flu-like symptoms and noticed his lymph nodes were swollen. He went to the clinic and found out he was HIV positive.

In working with Diontré, a mental health professional may consider using the Multicultural and Social Justice Counseling Competencies (MSJCC) (Ratts et al, 2016). First, they must identify how their biases, prejudices, or assumptions would affect their work with him. How have their past experiences influenced their experiences with Black same-gender-loving men, as well as people living with HIV/ AIDS? Next, the practitioner would need to understand the client's worldview. They would need to explore with him how his Pentacostal religion, his Blackness, his sexuality, and all of his experiences affect the ways that he sees and interprets the world. In doing so, the practitioner may need to assist Diontré in unpacking any of the negative messages he has learned about all of his identities, especially his historically marginalized identities (i.e., his Black and SGL identities). Specific to religion, the practitioner may assist Diontré in examining any anti-LGBTQ messages that have been learned by preachers or other religious leaders, and how that may have affected his perceptions of his own sexuality and his own relationships. Further, in developing counseling and advocacy interventions, the practitioner may be mindful of a number of factors—including Diontré's love for his church, as well as the conflict that this commitment may cause. Finally, the practitioner must keep all of these cultural and social justice factors in mind, while also monitoring Diontré's, depressive symptoms and his ability to function, particularly as he comes to terms with his HIV diagnosis. Perhaps it would be helpful to refer him to support groups or organizations of other queer Black men (or men of color) living with HIV, or to brainstorm people and spaces who csn be helpful in serving as social support as he adjusts to his new serostatus and the experiences that come with it.

6 Conclusion

Religion and spirituality continue to be important to LGBTQ BIPOC and mental health professionals must be culturally sensitive to the needs of this community, especially when they have experienced trauma and marginalization in their faith communities. Mental health professionals must educate themselves about the history and rituals of various religious/spiritual traditions, educate themselves about the stigma, trauma, and marginalization that LGBTQ BIPOC experience in their faith communities, and be able to provide resources for members of this community. They must also advocate for affirmative counseling interventions and join/initiate efforts to ban conversion therapy. The Multicultural and Social Justice Counseling Competencies (MSJCC) (Ratts et al, 2016), cultural broaching (Day-Vines et al, 2007), and attacking the stigma (Griffin, 2006) provide mental health professionals with the tools to intervene while honoring the client's autonomy. The preceding case study will allow you to implement these interventions.

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