

Symposium | Nerodiversity : [Symposium 111] LGBTQ+ and mental health

📅 Sun. Sep 28, 2025 4:30 PM - 6:00 PM JST | Sun. Sep 28, 2025 7:30 AM - 9:00 AM UTC 🏛️ Session Room 4 (Large Hall B)

[Symposium 111] LGBTQ+ and mental health

Moderator: Katsuki Harima (Harima Mental Clinic)

[SY-111]

LGBTQ+ and mental health

Katsuki Harima¹, Kazuyoshi Yamamoto, McKay Euan, Philip Morris (1. Harima Mental Clinic (Japan))

[SY-111-01]

Social changes towards LGBT in Japan and the role of psychiatrists

*Katsuki Harima¹ (1. Harima Mental Clinic (Japan))

[SY-111-02]

LGBTQ+and Mental Health in the Japanese Workplace

*Kazuyoshi Yamamoto¹ (1. Yamamoto Clinic EAP Institute of Stress Reserch (Japan))

[SY-111-03]

What can Japanese universities do for sexual minority students? A mixed-methods study of student and faculty experiences on Japanese campuses

*Euan McKay¹, Kim Jihye², Ryosuke Kobayashi³, Kei Dazai², Saho Kajiwara² (1. Nagoya University (Japan), 2. University of Tokyo (Japan), 3. Ichimiya Mental Clinic (Japan))

[SY-111-04]

Developing a Balanced, Caring, Compassionate, Cautious and Evidence-based Guide to Gender Dysphoria

*Philip Leo Morris AM^{1,2} (1. Dr PL Morris AM (Australia), 2. Bond University (Australia))

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[SY-111] LGBTQ+ and mental health

Katsuki Harima¹, Kazuyoshi Yamamoto, McKay Euan, Philip Morris (1. Harima Mental Clinic (Japan))

Keywords : Lesbian、Gay、Bisexual、Transgender、Questioning

LGBTQ+ is an acronym for Lesbian, Gay, Bisexual, Transgender and Questioning, and is a general term for sexual minorities in terms of sexual orientation and gender identity. Homosexuality was once considered a mental illness, but it was removed from the list of mental illnesses after discussions in the psychiatric community following a movement by homosexuals. Homosexuals began to refer to themselves as gays and lesbians, rather than the psychiatric term "homosexual". People whose gender identity does not match their physical gender have been treated as mental disorder, known as transsexualism or gender identity disorder. However, in ICD-11, it was moved to the "Conditions Related to Sexual Health" section under the name Gender Incongruence, rather than a mental disorder. In terms of mental health care for LGBTQ+ people, there has been a shift in paradigm from the former "treating abnormal sexuality to normalize" to "respecting and supporting diverse sexualities." Currently, those involved in mental health are required to be aware of this and to contribute to the spread of this understanding. In this symposium, four speakers will present their in dealing with mental health issues for LGBTQ+ people from their respective perspectives. Through discussions from multiple perspectives, we hope to clarify the universal elements of mental health issues for LGBTQ+ people.

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[SY-111-01] Social changes towards LGBT in Japan and the role of psychiatrists

*Katsuki Harima¹ (1. Harima Mental Clinic (Japan))

Keywords : TRANSGENDER、 Sexual Orientation、 Gender Identity

Before the 1990s, Japanese society and the medical community did not show much interest in LGBT people. In the 1990s, medical efforts to treat gender identity disorder began. In 1996, the Japanese Society of Psychiatry and Neurology (JPSN) established a special committee on gender identity disorder. In 1997, this committee developed guidelines for the treatment and diagnosis of gender identity disorder. Then treatment for gender identity disorder has begun. "Act on Special Cases in Handling Gender Status for Persons with Gender Identity Disorder" was enacted in 2003. As a result of this act, approximately 12,000 transgender people have changed their registered gender by the end of 2022. In the 2010s, the LGBT movement became active in Japan. Tokyo LGBT parade now attracts hundreds of thousands of people. Medical journals have also begun to include special features on LGBT issues. "Act on Promotion of Public Understanding of Diversity in Sexual Orientation and Gender Identity" was enacted in 2023. This act aims to promote public understanding of LGBT issues. Psychiatrists and other specialists are expected to play a role in achieving this goal. Regarding "Act on Special Cases in Handling Gender Status for Persons with Gender Identity Disorder", the sterilization requirement was ruled by the Supreme Court to be unconstitutional in October 2023. As a result of this unconstitutional ruling, the importance of a psychiatrist's diagnosis will likely increase in family registration change procedures. I have described the changes in Japanese society regarding LGBT people over the past 30 years. Psychiatrists will continue to play an important role in not only providing psychological support people but also promoting social understanding for LGBT people

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[SY-111-02] LGBTQ+ and Mental Health in the Japanese Workplace

*Kazuyoshi Yamamoto¹ (1. Yamamoto Clinic EAP Institute of Stress Reserch (Japan))

Keywords : Trasgender、Gender incongruence、Gender transition、Workplace

Among the 738 patients who visited Yamamoto Clinic seeking gender transition, 500 were from Okinawa Prefecture. Based on birth statistics, it is estimated that 1 in 400 females and 1 in 2600 males have gender incongruence. Additionally, among the 738 people, 59 (8.0%) had comorbidities such as depression, schizophrenia, and other mental disorders. According to ReBit's 2025 survey, 27.3% of LGBTQ+ individuals experienced difficulties or harassment during the hiring process, while the figure was 74.0% for transgender individuals. Among LGBTQ+, transgender individuals are more likely to be visible due to their gender transition. This can lead to conflicts with cisgender staff regarding issues such as clothing and restroom usage, making them vulnerable to bullying and harassment, and they are also more likely to experience mental health crises. In a well-known court case, the right of a transgender woman to use the restroom that corresponds to her identified gender was finally recognized by the Supreme Court after a long battle. In Japan, the SOGI Understanding Promotion Act was finally enacted and promulgated in June 2023 after seven years controversy. Although it was insufficient and did not meet the expectations of many stakeholders due to the lack of provisions prohibiting discrimination, it stipulates that as part of their role, employers must take necessary measures such as providing information in the workplace, conducting training, and establishing consultation systems regarding the work environment, and commit to efforts to enhance workers' understanding. In order to protect and promote the mental health of LGBTQ+ individuals in the workplace, it seems important to continuously utilize the SOGI understanding promotion Act and to raise the momentum for its revision. In this symposium, I would like to discuss in detail measures to protect the mental health of LGBTQ+ individuals, particularly those with gender incongruence, in the workplace.

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[SY-111-03] What can Japanese universities do for sexual minority students? A mixed-methods study of student and faculty experiences on Japanese campuses

*Euan McKay¹, Kim Jihye², Ryosuke Kobayashi³, Kei Dazai², Saho Kajiwar² (1. Nagoya University (Japan), 2. University of Tokyo (Japan), 3. Ichimiya Mental Clinic (Japan))

Keywords : LGBTQ+ in higher education、 Sexual minority students、 Campus climate and inclusion、 Faculty disclosure and identity management、 Japanese university context

Sexual minorities have long faced stigmatization and discrimination for non-normative orientations and gender identities. While visibility and legal protection have advanced globally, university environments often remain heteronormative. This study examined the experiences of sexual minority students and faculty on Japanese campuses using a mixed-methods design. A national survey (n=1,699 students; 494 sexual minorities) explored harassment, support systems, and perceptions of campus climate and academic performance. Qualitative interviews with 12 faculty and 21 students further illuminated coping strategies and institutional challenges. Quantitative research reveals clear disparities: 83% of sexual minority students experience microaggressions and only 18.6% have disclosed their identity on campus, while those who have come out are more likely to report microaggressions. Sexual minority students rate campus climate significantly lower (3.69 vs 3.96, $p<0.001$) and report lower academic performance (3.01 vs 3.35, n.s.). Multiple minority statuses, including psychological, cognitive and physical disability, result in even lower campus climate scores ($p<0.001$). Qualitative research shows that students adopt passive coping strategies such as avoidance and feel that they do not 'belong' on campus. Their 'soft' needs include increased faculty understanding, while 'hard' needs include gender-free toilets and safer spaces. Faculty adopt selective disclosure of their identities and seek community off-campus, but this selective approach is also a source of stress as they struggle to manage diverse institutional relationships. Faculty fear the impact of coming out on their career progression, while students fear the impact on their academic evaluation. Both students and faculty members share a common need for universities to improve understanding. Finally, we suggest some basic actions Japanese universities can take to improve campus inclusivity. Of note is the need for specialist campus mental health services and counsellors trained in supporting sexual minority students in particular.

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[SY-111-04] Developing a Balanced, Caring, Compassionate, Cautious and Evidence-based Guide to Gender Dysphoria

*Philip Leo Morris AM^{1,2} (1. Dr PL Morris AM (Australia), 2. Bond University (Australia))

Keywords : Gender Dysphoria、Youth、Guideline

Background: The treatment of gender dysphoria in children and adolescents is a highly controversial topic within the medical community. Gender dysphoria is a condition where an individual experiences significant distress due to a mismatch between their gender identity and their biological sex. Objectives: This presentation describes the development of a balanced, respectful, compassionate, cautious, evidence-based and practical guide to caring for children and adolescents with gender dysphoria. Methods: The presentation describes the key features of the approach to treating gender dysphoria in children and adolescents. Findings: The guide provides a clear pathway for a thorough evaluation of each patient's individual circumstances, considering their age, maturity, and other medical and psychological factors, as well as and family circumstances, to deliver treatment that is both safe and effective. Conclusions: The Guide offers a model of care entirely consistent with the United Kingdom Cass Review Report approach to gender dysphoria in children and adolescents. Conflicts of interest: None.