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How can counselling training courses better prepare their trainee therapists to work with LGBTQ+ clients?

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Abstract

Aim: The purpose of this study was to explore the clinical and training experiences of recently qualified, LGBTQ+ identifying therapists who work with sexuality and gender diverse clients, in order to discover ways in which counselling training organisations might better prepare their trainees to work competently with this particular client group.

Method: One-to-one, semistructured interviews with five therapists were conducted. Data collected from these interviews were subsequently analysed using the seven steps of interpretative phenomenological analysis.

Findings: The analysis revealed six superordinate themes: Enhance tutors' LGBTQ+ knowledge and cultural awareness; Provide students with adequate supervision; Teach a range of LGBTQ+ topics; Integrate LGBTQ cultural competence training throughout the curriculum; Invite LGBTQ+ specialists; and Signpost students to additional resources.

Conclusions: Participants felt unprepared by their entry-level counselling training to work with LGBTQ+ clients. The perceived lack of LGBTQ+ knowledge and understanding of their tutors was regarded as a contributing factor to the limited time and depth of LGBTQ cultural competence training received. Several suggestions to improve training in this area were offered.

Recommendations: Entry-level counselling training courses should integrate LGBTQ cultural competence training throughout their curriculums in order to adequately prepare their trainees to work competently with LGBTQ+ clients. Additionally, it is important that counselling educators maintain their own LGBTQ+ knowledge, understanding and skills.

KEYWORDS

counselling training, cultural competence, LGBTQ, novice counsellors

1 | INTRODUCTION

Research has repeatedly demonstrated that lesbian, gay, bisexual, transgender and queer/questioning (LGBTQ+) individuals experience

mental health issues at higher rates than their heterosexual and cisgender counterparts (e.g., Israel, Gorcheva, Burnes, & Walther, 2008; Pachankis, 2018). King et al. (2008), for example, found that lesbian, gay and bisexual (LGB) participants were at least twice as likely to

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experience anxiety, depression and suicidal ideation. Additionally, Livingston, Berke, Scholl, Ruben, and Shipherd (2020) report a prevalence rate of post-traumatic stress disorder (PTSD) of up to 47% amongst LGBTQ+ individuals, in comparison with just eight per cent of the general population.

Given that LGBTQ+ individuals are more likely to experience mental health issues, it seems hardly surprising that their rate of therapy usage is higher than that of the heterosexual population (Godfrey, Haddock, Fisher, & Lund, 2006; Rutter, Estrada, Ferguson, & Diggs, 2008). However, LGBTQ+ clients report mixed experiences of counselling. Whilst many who have worked with affirming therapists have felt understood and encouraged to achieve their therapeutic goals, clients who experience judgement from their counsellors often leave therapy feeling dejected and dissatisfied (Berke, Maples-Keller, & Richards, 2016; Israel et al., 2008; Robinson-Wood, 2017).

Several researchers (e.g., Biaggio, Orchard, Larson, Petrino, & Mihara, 2003; Croteau, Bieschke, Phillips, & Lark, 1998; Rutter et al., 2008) attribute the dissatisfaction experienced by many LGBTQ+ clients to the inadequate LGBTQ cultural competence training provided by counselling educators, which aims to develop therapists' attitudes, knowledge and skills, in order to help them to provide appropriate and effective support to their LGBTQ+ clients (Bishop, Crisp, & Scholz, 2022; Boroughs, Bedoya, O'Cleirigh, & Safren, 2015; Sue et al., 1982). Alderson (2004) found that counselling training organisations spend, on average, 3h providing LGBTQ cultural competence training and argues that this is an insufficient amount of time. Moreover, he reports that the majority of institutions provide this training in a separate class or module. Research by Bidell (2014) supports these findings and provides additional insights. For example, the results of his survey, which explored the counselling training experiences of 286 counselling students, found that a one-off class is insufficient to adequately provide the necessary knowledge and skills for therapists to work competently with sexual minority clients.

The research findings of other studies also suggest that counselling training courses do not adequately prepare their trainees to work with LGBTQ+ clients. For example, in their interviews with six heterosexual student counsellors, Lynch, Bruhn, and Henriksen (2013) found that five interviewees felt ill-prepared by their training to work competently with this client group. Moreover, the majority of students described how most of their knowledge of LGBTQ+ issues was obtained from outside their courses, through personal relationships with sexual and gender diverse friends and family members. Similarly, 15 of the 16 recently qualified therapists interviewed by Owen-Pugh and Baines (2014) reported having to draw upon personal experiences with sexual and gender diverse individuals to assist them in their work with LGBTQ+ clients, due to a lack of LGBTQ cultural competence training provided to them by their counselling educators.

Davies (2021) understands that the lived experiences of LGBTQ+ therapists can play an important role in their LGBTQ+ client work. However, he also emphasises the need for additional training to ensure that therapists obtain a deep level of knowledge

Implications for practice and policy

- The findings from this study suggest that LGBTQ cultural competence training is essential for trainee therapists to work competently with LGBTQ+ clients.
- By spending a sufficient amount of time teaching students about LGBTQ+ topics, counselling educators could help their trainees to feel more at ease and confident in their LGBTQ+ client work. However, in order to achieve this, it is important that counselling tutors and supervisors take responsibility to develop and maintain their own LGBTQ+ knowledge and skillset, so that they can provide students with appropriate support.
- Moreover, by integrating LGBTQ cultural competence training throughout the curriculum, tutors can help their trainees to become familiar with the nuances of client issues, helping them to view their LGBTQ+ client work from a queer angle.
- Inviting LGBTQ+ specialists to provide lecture-discussions with trainees could help students to challenge their heterosexist attitudes and provide deeper levels of empathy and unconditional positive regard to their LGBTQ+ clients. It could also be useful for counselling educators to provide additional and/or external LGBTQ+ specific resources to students, to help them to increase their LGBTQ+ knowledge and cultural awareness. This could be particularly useful for training courses with a limited amount of teaching time available.
- Finally, professional bodies for counsellors and psychotherapists could use the results of this study to implement changes to training policy. For instance, counselling membership bodies and awarding organisations could mandate that their accredited courses include LGBTQ cultural competence training. This would help to ensure that newly qualified therapists leave their courses with at least the basic tools needed to adequately support their LGBTQ+ clients.

and understanding of sexuality and gender diversity to help them to work proficiently with LGBTQ+ clients. Graham (2009) agrees and additionally points out that most trainee therapists are heterosexual and that some have little or no experience of LGBTQ+ individuals and so depend solely on their counselling training courses to prepare them to work with clients of different sexual orientations and gender identities. In not preparing trainees to work competently with LGBTQ-specific issues, counselling training courses are doing a great disservice to both LGBTQ+ clients and the many therapists who feel lost and alone in trying to support them (Davies, 2021; Godfrey et al., 2006; Owen-Pugh & Baines, 2014).

The main aim of this research project was to provide answers to the question, "How can counselling training courses better prepare their trainee therapists to work with LGBTQ+ clients?" To achieve this aim, interviews were conducted with five recently qualified, LGBTQ+ identifying therapists to explore their clinical and training experiences, as well as their views regarding the components that they believe to be fundamental for therapists to work competently with LGBTQ+ clients. Transcripts from these interviews were then analysed using the seven steps of interpretative phenomenological analysis (IPA), as described below.

2 | METHOD

2.1 | Participants and setting

Given that the main objective of this research project was to explore the experiences of recently qualified LGBTQ+ therapists, participants were required to meet the following criteria: (i) identify as LGBTQ+; (ii) have qualified as a counsellor/psychotherapist within the past 5 years; (iii) have experience working with LGBTQ+ clients; and (iv) be based in the UK. This helped to ensure that interviewees could provide in-depth, relevant information regarding the research topic (Braun & Clarke, 2013).

After recruiting two participants from our professional network, the remaining three participants were recruited via the *Pink Therapy Group*, a private Facebook group aimed at therapists who work with LGBTQ+ clients. The five participants interviewed varied in terms of age (35–46 years), gender (one woman, two men, one non-binary and one transmasc), sexual orientation (three bisexual, two gay and one queer), level of study (three further education, one undergraduate and one postgraduate), length of time qualified (8–60 months) and therapeutic modality (three integrative and two person-centred). All participants were White (four White British and one White European) and one considered themselves to have a disability.

At the pre-agreed date and time, one-to-one interviews were conducted with participants online via Zoom. Considerations for engaging with participants online included convenience, flexibility, and time- and cost-efficiency, due to participants' lack of travel requirements (Gray, Wong-Wylie, Rempel, & Cook, 2020; Smith, Flowers, & Larkin, 2021). Additionally, British therapists who work online are generally familiar with Zoom (Hale, 2020).

2.2 | Ethics considerations

Ethics approval was granted by Bath Spa University. Guidelines of the British Educational Research Association (BERA, 2018), the British Association for Counselling and Psychotherapy (BACP, 2018) and the General Data Protection Regulation (GDPR) were also adhered to at all stages of the research process.

Participants were provided copies of a participant information sheet and consent form, helping them to give informed consent to partake in the study. Additionally, one neurodivergent participant requested a list of sample questions prior to the interview, explaining that they often experience difficulties recalling information when feeling unprepared. They were sent a copy of the interview guide, in an attempt to help reduce their levels of stress and anxiety brought about by unexpected research tasks (Gowen et al., 2019).

As well as obtaining participants' written consent to take part in the study, their oral consent was requested before commencing interview recordings. Participants were also reminded that they could withdraw from the research, without explanation or consequence, at any point up to the commencement of data analysis.

Lastly, to maintain participant confidentiality, pseudonyms were created, names (e.g., of organisations, colleagues and locations) removed from interview transcripts and identifiable information omitted when storing participant data.

2.3 | Data collection

Semistructured interviews, which are often regarded as the most appropriate data collection method for IPA studies (Braun & Clarke, 2013; Smith et al., 2021), were used to gather data from participants. Furthermore, the creation of an interview guide assisted in the design of appropriate, non-leading, open-ended questions and prompts to encourage participants to reflect on their experiences of counselling training and LGBTQ+ client work. For example, interviewees were asked how well-prepared by their counselling training they felt to work with LGBTQ+ clients, what changes they would make to their training organisation's curriculum and training materials, how they felt when working with their first LGBTQ+ clients and how well-supported they felt in their LGBTQ+ client work.

The interview guide was tested during a pilot interview with "Zion," who met all but one of the aforementioned participant criteria (they are currently a trainee therapist). This proved to be a useful and productive exercise, and helped to ensure that questions were comprehensible and capable of generating rich, relevant data (Sullivan & Forrester, 2019). The pilot interview also provided an opportunity to perform a dry run of the data analysis steps (Coe, Waring, Hedges, & Arthur, 2017; Vossler & Moller, 2015) and identify valuable data to include in the research findings (Morrison, Clement, Nestel, & Brown, 2016).

All participants agreed to provide optional demographic data (Table 1). This was requested verbally at the start of each interview as a way to help prepare participants for the subsequent, more indepth questions. Interviews were audio-recorded and lasted between 45 and 80 min, and Author 1 (MC) acted as interviewer.

2.4 | Data analysis

In IPA studies, the transcription of interview data is a key task before data analysis can begin (Pietkiewicz & Smith, 2014). Manual transcription took several hours to complete; however, it allowed the immersion of data, which helped to increase awareness of important aspects of participants' accounts (Smith et al., 2021).



TABLE 1 Participant demographic information.

	Primary research participants	Pilot interview participant
Age	Range 35-46 years	39 years
Gender	1×woman	Transmasc
	2×man	
	1×non-binary	
	1×transmasc	
Sexual orientation	3×bisexual	Queer
	$2 \times gay$	
	1×queer	
Ethnicity	4×White British	White non-British
	1×White European	
Disability	1×yes	Yes
	4×no	
Length of time qualified	Range 8-60 months	N/A
Level of study	$3 \times$ further education	Further education
	$1 \times$ undergraduate	
	$1 \times$ postgraduate	
Therapeutic modality	$3 \times \text{integrative}$	Pluralistic
	2×person-centred	

Whilst data analysis in qualitative research is generally a complex and time-consuming activity (Cohen, Manion, & Morrison, 2018), following the flexible guidelines of IPA data analysis by Smith et al. (2021) helped to streamline this process. This involved reviewing each transcript, noting significant aspects of the interview and identifying developing themes. After analysing all transcripts, a cross-comparison of the developing themes was performed, which revealed six superordinate themes relating to the training elements that participants believe could help prepare trainee therapists to work competently with LGBTQ+ clients. The superordinate themes are as follows: Enhance tutors' LGBTQ+ knowledge and cultural awareness; Provide students with adequate supervision; Teach a range of LGBTQ+ topics; Integrate LGBTQ cultural competence training throughout the curriculum; Invite LGBTQ+ specialists; and Signpost students to additional resources. Furthermore, two subordinate themes were identified for each superordinate theme (Table 2).

3 | FINDINGS

Notably, all participants described feeling conflicted about how much time counselling educators should spend delivering LGBTQ cultural competence training to their trainee therapists. Whilst all participants agreed that they received an insufficient amount of teaching in this area, they understood that this was, in part, due to the limited number of guided learning hours available throughout their counselling training.

TABLE 2 Superordinate and subordinate themes.

Enhance tutors' LGBTQ+ knowledge and cultural awareness

- Tutors' demographic and perceived lack of LGBTQ+ knowledge and cultural awareness.
- Students' sense of responsibility to educate tutors and peers. Provide students with adequate supervision
- Supervisors' perceived lack of LGBTQ+ knowledge and cultural awareness.
- A safe space needed to explore LGBTQ+ client issues.

Teach a range of LGBTQ+ topics

- Key LGBTQ+ themes and issues.
- Useful tools and approaches.

Integrate LGBTQ cultural competence training throughout the curriculum

- · Move away from heteronormativity.
- Emphasise how theories and issues apply differently to LGBTQ+ individuals

Invite LGBTQ+ specialists

- Learn about LGBTQ+ issues and appropriate therapeutic approaches.
- Demographic of LGBTQ+ specialists. Signpost students to additional resources
- Deepen knowledge and understanding.
- Types of useful resources.

Furthermore, whilst some participants discussed feeling prepared to work with certain groups of LGBTQ+ clients (e.g., sexuality diverse clients), this was largely due to lived experience and additional autonomous learning. Nevertheless, each participant identified a range of potential improvements to their course, which they felt could have better prepared themselves and their peers to work with LGBTQ+ clients, as discussed below.

3.1 | Enhance tutors' LGBTQ+ knowledge and cultural awareness

3.1.1 | Tutors' demographic and perceived lack of LGBTQ+ knowledge and cultural awareness

Several participants described their counselling educators as predominantly "white, middle-class" ("Zion"), "straight" ("Anna"), "[cisgender] women of a certain age" ("Drew") and linked their tutors' lack of lived experience of being LGBTQ+ to a lack of LGBTQ+ knowledge and cultural awareness.

Based on the demographic of their tutors and the limited amount of LGBTQ cultural competence training received throughout their counselling education, one participant believed that their tutors "didn't have the [LGBTQ+] knowledge themselves to pass onto us" ("Anna"), which was perceived to negatively impact the depth and quality of the training provided.

Whilst participants did not necessarily expect their counselling educators to have lived experience of being LGBTQ+, all felt that it was important for tutors to maintain their LGBTQ+ knowledge and understanding, in order to provide students with adequate LGBTQ cultural competence training.

3.1.2 | Students' sense of responsibility to educate tutors and peers

Further reflecting on their tutors' lack of LGBTQ+ knowledge and cultural awareness, two participants described having felt responsible to educate peers and tutors about LGBTQ+ issues during their own counselling training. One interviewee spoke about how this was "really reductive of my experience because... I felt like I had to be the educator in the room and I was there to learn" ("Ellis"), whereas the other participant enjoyed engaging in "shared learning and bringing a lot of my experience to the group" (Charlie).

Charlie and Ellis seem to have experienced their tutors' lack of LGBTQ+ knowledge and cultural awareness to differing degrees. Whilst Ellis describes the burden of "having to be" the person to impart LGBTQ+ knowledge on their course, Charlie appears to talk positively about "sharing" knowledge with his training group.

Another participant, Drew, seemingly agrees with Charlie, recognising that LGBTQ+ students might have a greater depth of cultural awareness than their tutors, but that this "shouldn't be seen as a criticism, it should be welcomed and a change should be made" ("Drew"). Drew's reference to "a change needing to be made" implies a belief that counselling educators should take responsibility to enhance their own LGBTQ+ knowledge and understanding, rather than relying on their students for this.

3.2 Provide students with adequate supervision

3.2.1 | Supervisors' perceived lack of LGBTQ+ knowledge and cultural awareness

Many participants also experienced their supervisors as lacking LGBTQ+ knowledge and cultural awareness, with one participant describing how this resulted in them "missing exploring [their LGBTQ+ client work] from a queer angle" ("Anna") and thus preventing them from fully understanding the experiences of their LGBTQ+ clients.

For another interviewee, conversely, their supervisor's lack of LGBTQ+ knowledge encouraged them to discuss their clients' issues in more detail, which they find "really helpful because I realise the bits that I'm overlaying as my experience and bits that are assumptions" ("Charlie").

Whilst the needs of Anna and Charlie differ regarding their supervisors' level of LGBTQ+ knowledge and cultural awareness, it is important for both therapists that their supervisors can support them in gaining deeper insight into their LGBTQ+ client work.

3.2.2 | A safe space needed to explore LGBTQ+ client issues

Two participants, who were assigned supervisors by their training institutions, described feeling misunderstood and unsupported in their LGBTQ+ client work. For Ellis, this negatively impacted their "trust"

in the supervisor and the supervision space, and resulted in them "complain[ing] about the supervisor to the course director" ("Ellis"). Similarly, Blas "didn't feel understood, or seen, or connected to [my supervisor]... And so, I had to ask for support from my training institution about a supervisor who would understand me better" ("Blas").

The need for a safe supervision space was essential for both participants to feel supported in their work with LGBTQ+ clients whilst completing their counselling training. Moreover, this safe space continues to be crucial for Blas and Ellis, who since qualifying have sought support from supervisors with LGBTQ+ knowledge and cultural awareness, and feel much more supported in their LGBTQ+ client work. Ellis reflected, "because it was so absent during my training, I've put in a really robust support network... I believe in having really strong supervision in my LGBTQ+ client work. [Now], I'm amazingly supported" (Ellis).

3.3 | Teach a range of LGBTQ+ topics

3.3.1 | Key LGBTQ+ themes and issues

Several participants described feeling ill-equipped to work with transgender clients early on in their clinical work and linked this to a lack of teaching around gender identity during their initial counselling training. Anna, for example, reflected on feeling "inexperienced" and "afraid" before working with her first transgender client. She elaborated, "I felt it was a whole world that I didn't understand... Although I'd had a little bit of taster information, it didn't actually prepare me to work with a transgender client" ("Anna"). Similarly, Charlie discussed how "[the transgender population is] such a complex group to work with, I wish I'd felt better prepared to deal with that... that's where I felt most out of my depth" ("Charlie"). There is a sense from both Anna and Charlie that more knowledge and understanding of transgender issues would have helped better prepare them to work with gender diverse clients.

Other LGBTQ+ issues that participants felt it important to understand include internalised homophobia, minority stress, body issues and shame. Intersectionality, particularly a combination of LGBTQ+ status, neurodiversity and/or race, was also highlighted by several participants. Zion, for instance, reflected on how "being sensitive around the crossovers and intersectionalities of things like autism, gender diversity and queerness has been something that I've had to [learn] on my own because intersectionality is not generally taught on [counselling training] courses" ("Zion").

3.3.2 | Useful tools and approaches

As well as providing training on LGBTQ+ client issues, participants also expressed a desire for counselling educators to teach trainees about useful therapeutic tools and approaches for LGBTQ+ clients.

Ellis, for instance, discussed how "powerful" self-disclosure has been in their LGBTQ+ client work, despite having been taught by

their tutors that "you don't disclose anything, ever to your clients" ("Ellis"). The therapist elaborated that they often use self-disclosure in their work with LGBTQ+ individuals as a way to let these clients know that "I'm a safe space" ("Ellis").

Other participants described differences in their therapeutic approach when working with LGBTQ+ clients. For example, Blas discussed his view that LGBTQ+ clients often benefit from an "extra layer" of unconditional positive regard, due to "the judgements that they have experienced their whole lives, which makes it more difficult for them to feel that they are generally accepted" ("Blas"). Similarly, Charlie reflected on the importance of "embodying a nonshaming attitude around sex," ("Charlie") and Drew spoke about the value of "talking positively about people's identity and queer culture" ("Drew").

It is unclear whether the therapists learnt about these approaches during their core counselling training. However, it seems evident that an understanding of appropriate therapeutic approaches to use with LGBTQ+ clients has been vital in their work with this client group.

3.4 | Integrate LGBTQ cultural competence training throughout the curriculum

3.4.1 | Move away from heteronormativity

With the exception of one participant, whose counselling educators provided zero hours of LGBTQ cultural competence training, others reported having received such training within a designated module on "difference" ("Charlie"), "diversity" ("Drew") or "transcultural counselling" ("Blas").

This separation of LGBTQ cultural competence training was experienced by some participants as "othering," and suggestions were made to integrate it throughout the curriculum, instead. Drew, for example, reflected, "I would take [LGBTQ cultural competence training] out of the diversity module because that says 'This is an add on'... I would just weave it into every single bit of the course... [That way], you kind of move away from that assumed cis- and heteronormativity" ("Drew"). Zion appeared to agree and explained that "having specific sections on queerness still keeps queerness outside of the norm, instead of integrating it" ("Zion").

And so, the integration of LGBTQ cultural competence training across the curriculum was seen as a way to help counselling educators move away from cis- and heteronormativity, and towards a more inclusive and diverse training approach.

3.4.2 | Emphasise how theories and issues apply differently to LGBTQ+ individuals

To integrate LGBTQ cultural competence training into the curriculum, two participants explained that this could be achieved by highlighting how certain theories and issues apply differently to LGBTQ+

clients. One participant, for example, reflected, "Whether we [explored] attachment theory or trauma... I would just weave [LGBTQ cultural competence training] into every single bit of the course" ("Drew"). Blas outlined a similar approach and suggested that, when exploring trauma, counselling training groups could discuss the "different sources or roots" of this issue for LGBTQ+ individuals in comparison with the non-LGBTQ+ population ("Blas").

Furthermore, for Blas, one of the important reasons to highlight these differences is to help counselling educators to provide students with a more rounded world view, in order to "show what is [happening in] the real world outside. Because [otherwise] you're basically just showing one part" ("Blas"). Like Blas, Anna perceived her counselling training course to lack a range of perspectives from which to explore LGBTQ+ client issues, explaining that "the training was very flat in terms of what perspectives we learned from" ("Anna").

There is a sense of disappointment from both Blas and Anna here regarding the narrow viewpoints of their counselling training courses, as well as a perception that this negatively impacted their training experiences. Moreover, their responses imply that the exploration of clinical issues from a wider range of perspectives could have helped better prepare them to work with more diverse client populations.

3.5 | Invite LGBTQ+ specialists

3.5.1 | Learn about LGBTQ+ issues and appropriate therapeutic approaches

The majority of participants suggested that another way in which counselling training courses could better support trainees in their LGBTQ+ client work is to invite LGBTQ+ specialists to speak with students. This, according to one participant, could provide a "really useful" way of gaining "real insight" into the clinical and lived experiences of LGBTQ+ therapists ("Anna"). Elaborating further, Anna explained that this experience might have helped to increase her awareness of LGBTQ+ client issues, as well as appropriate therapeutic approaches and interventions to utilise with her LGBTQ+ clients.

Participants also discussed how LGBTQ+ specialist speakers could be invited from external organisations, "unless the main tutors already have this specialist knowledge themselves" ("Drew"). However, none of the participants deemed their counselling educators to have this specialist knowledge and, therefore, all could have benefitted from their training institutions inviting external LGBTQ+ guest speakers onto their courses.

3.5.2 | Demographic of LGBTQ+ specialists

Furthermore, participants felt it is important that guest speakers invited to talk with students about LGBTQ+ issues identify as LGBTQ+ themselves. For one interviewee, this was a "personal preference" ("Drew"); however, another participant discussed how hearing from

a range of LGBTQ+ guest speakers could help to challenge the view that "transness, or queerness, or gayness... is a universal experience" ("Zion").

As well as supporting students to challenge their perceptions of LGBTQ+ individuals, the clinical and lived experience of LGBTQ+ guest speakers was seen as a useful way for students to understand the nuances and complexities of LGBTQ+ issues and to increase their levels of empathy when working with LGBTQ+ clients.

3.6 | Signpost students to additional resources

3.6.1 Deepen knowledge and understanding

Lastly, all participants discussed the value of having accessed additional LGBTQ+ resources outside their training courses as a way to fill knowledge gaps and to deepen knowledge and understanding. Anna, for instance, reflected on having read an "informative" book on counselling transgender teenagers, which helped her to obtain information that was "missing" from the content of her counselling training course ("Anna"). Similarly, Drew chose to listen to an audiobook on asexuality as a way to deepen their "knowledge and understanding of different identities and experiences" ("Drew").

Whilst the majority of participants would like to have obtained additional LGBTQ+ knowledge directly from their counselling educators, there was a general appreciation that a limited amount of teaching time prevented this from occurring. However, one participant suggested that training organisations could compensate for this by signposting students to additional resources to further their own learning.

3.6.2 | Types of useful resources

Several participants discussed the types of resources that they have found particularly beneficial in their LGBTQ+ client work. Drew, for example, discussed having made use of audiobooks, podcasts, websites and documentary films, such as "Disclosure" ("Drew"); Charlie uses Twitter "to keep abreast of research and... on top of the LGBTQ conversation" ("Charlie"); and Blas watches YouTube videos of LGBTQ+ therapists and engages with fellow counsellors in the "Pink Therapy" Facebook group ("Blas").

This suggests that there is a range of useful additional resources which counselling educators could point out to students to support them in further developing their LGBTQ+ knowledge and cultural awareness.

4 | DISCUSSION

The findings of our research project are consistent with those of existing studies (e.g., Graham, 2009; Lynch et al., 2013; Owen-Pugh & Baines, 2014), which suggest that counselling training courses do not

currently prepare their trainee therapists to work competently with LGBTQ+ clients. Our interview questions encouraged participants to reflect on their LGBTQ+ client work and counselling training experiences and suggest ways in which counselling training courses could make improvements to their existing curriculums.

Regarding their early LGBTQ+ client work, a common experience amongst several participants was of feeling out of their depth when working with transgender and gender diverse (TGD) clients. One interviewee described the fear and anxiety they experienced due to a lack of knowledge around issues that affect TGD individuals, whilst another explained that part of their gender diversity education came from their first transgender client. Such experiences led to participants seeking additional knowledge and information—including terminology and experiences of TGD individuals—from books and external training courses. Unfortunately, according to Nichols (2021), this experience is not uncommon. The writer describes a lack of teaching around gender identity on counselling training courses, resulting in trainees feeling ill-equipped to work with gender dysphoric clients.

One research participant opined that external, specialist training is required for therapists to work with transgender issues, implying that therapists without such training could not work competently with TGD clients. However, research (e.g., Boroughs et al., 2015; Wynn & West-Olatunji, 2009) suggests that counselling training courses that include sufficient LGBTQ cultural competence training can provide trainees with the knowledge, understanding and skills to work effectively with TGD clients, a high proportion of whom seek therapy for support with their difficulties (Livingston et al., 2020; Pachankis, 2018).

Whilst reflecting on their LGBTQ+ client work experience, one participant discussed having worked with relationship diverse clients, such as those in open, polyamorous or "monogamish" relationships. It is perhaps surprising that only one participant explored the topic of relationship diversity, given that LGBTQ+ individuals are more likely than their heterosexual and cisgender counterparts to be in some form of nonmonogamous relationship (Anderson, Scoats, & McCormack, 2015; Mohr & Jackson, 2016; Ramirez & Brown, 2010). However, participants were not specifically asked about their experiences of working with relationship diverse clients, and so it is possible that others had this experience but did not reflect on it during their interviews.

Mirroring the findings of Alderson (2004) and Sherry, Whilde, and Patton (2005), most of our participants who received LGBTQ cultural competence training explained that this was delivered to them in a one-off "difference," "diversity" or "transcultural counselling" module. However, what appears to be a novel contribution to the current literature is the fact that the separation of LGBTQ cultural competence training was perceived by several participants as "othering." Specifically, three participants felt that separating LGBTQ cultural competence training from other course content implies that LGBTQ+ experiences are outside the norm. To move away from a heteronormative teaching approach, several participants suggested that counselling educators integrate LGBTQ cultural

competence training throughout their curriculums. This recommendation is supported by Godfrey et al. (2006), who propose LGBTQ cultural competence training to be interwoven into various aspects of counselling training courses, such as in-class activities, therapist self-reflection and clinical supervision. Rutter et al. (2008) also suggest the integration of LGBTQ cultural competence training across the syllabus, arguing that this is essential to improving the therapist's ability to support LGBTQ+ clients.

Another suggestion from participants regarding improvements to their initial counselling training courses was to invite LGBTQ+ guest speakers to lead lecture-discussions. Several participants felt that this could be a useful way for trainees to understand LGBTQ+ issues and learn about appropriate therapeutic approaches to use in their LGBTQ+ client work. Additionally, one interviewee explained that gaining insight into the lives of LGBTQ+ individuals could support students to challenge their biases. These recommendations appear to align with those of Alderson (2004) and Godfrey et al. (2006), who maintain that personal interactions with LGBTQ+ people are vital to reduce heterosexism and are useful for trainee therapists to understand experiences that are different from their own.

Moreover, whilst research findings by Grove (2009) suggest that in-class role-plays can provide trainees with opportunities to challenge their heterosexist attitudes, this topic was not addressed by our participants, which could imply that direct engagement with LGBTQ+ individuals is a preferred way to develop LGBTQ+ knowledge and understanding. However, role-plays could allow students to practise affirmative skills, as well as develop self-awareness, and increase their empathy towards LGBTQ+ individuals (Kocarek & Pelling, 2003). Therefore, making use of role-plays and inviting LGBTQ+ specialist speakers could help counselling educators to support their trainees to develop their LGBTQ+ knowledge, understanding and skills, and so better prepare them to work with LGBTQ+ clients.

5 | LIMITATIONS

The primary reason for recruiting recently qualified therapists was to interview participants who could share their experiences of contemporary counselling training. In turn, this allowed the research to support the findings of other studies (e.g., Graham, 2009; Lynch et al., 2013; Owen-Pugh & Baines, 2014), which suggest that counselling training courses do not currently prepare their trainees to work competently with LGBTQ+ clients. However, a limitation of our sample is that participants likely have less LGBTQ+ client work experience than some of their more seasoned colleagues. Therefore, interviews with more experienced therapists could have provided deeper insights, resulting in the recommendation of additional elements of LGBTQ cultural competence training that could be useful for counselling educators to include in their curriculums.

Another possible limitation of our sample relates to its size. Whilst several authors (e.g., Braun & Clarke, 2013; Smith et al., 2021; Vossler & Moller, 2015) suggest recruiting up to six participants for an IPA study, our sample size of five is regarded as small for a qualitative research project. Braun and Clarke (2013), for instance, recommend that qualitative researchers recruit 15–30 participants, whereas Cohen et al. (2018) encourage researchers to interview as many participants as needed in order to obtain a sufficient amount and depth of research data. An enhancement to our sample could have involved recruiting additional therapists with more LGBTQ+client work experience, counsellors of differing theoretical orientations and non-White participants, providing the opportunity for a wider range of experiences to be explored.

6 | IMPLICATIONS FOR PRACTICE AND POLICY

The findings from this study suggest that LGBTQ cultural competence training is essential for trainee therapists to work competently with LGBTQ+ clients.

First, by spending a sufficient amount of time teaching students about LGBTQ+ topics, counselling educators could help their trainees to feel more at ease and confident in their LGBTQ+ client work. However, in order to achieve this, it is important that counselling tutors and supervisors take responsibility to develop and maintain their own LGBTQ+ knowledge and skill set so that they can provide students with appropriate support.

Moreover, by integrating LGBTQ cultural competence training throughout the curriculum, tutors can help their trainees to become familiar with the nuances of client issues, helping them to view their LGBTQ+ client work from a queer angle. For example, when exploring trauma with students, it could be useful for tutors to discuss the impacts of minority stress on LGBTQ+ individuals (Meyer, 2013; Pachankis, 2018).

Additionally, inviting LGBTQ+ specialists to provide lecture-discussions with trainees could help students to challenge their heterosexist attitudes and provide deeper levels of empathy and unconditional positive regard to their LGBTQ+ clients. It could also be useful for counselling educators to provide additional and/or external LGBTQ+-specific resources to students, to help them to increase their LGBTQ+ knowledge and cultural awareness. This could be particularly useful for training courses with a limited amount of teaching time available.

Finally, professional bodies for counsellors and psychotherapists could use the results of this study to implement changes in training policy. For instance, counselling membership bodies and awarding organisations could mandate that their accredited courses include LGBTQ cultural competence training. This would help to ensure that newly qualified therapists leave their courses with at least the basic tools needed to adequately support their LGBTQ+ clients.

7 | DIRECTIONS FOR FURTHER RESEARCH

As previously discussed, research suggests that LGBTQ+ individuals are more likely than their heterosexual and cisgender counterparts to be involved in nonmonogamous relationships. The topic of relationship diversity was not explored as part of the current study; however, future research could investigate the extent to which therapists feel equipped by their initial training to work with relationship diverse clients, as well as the specific issues faced by this particular client group. In so doing, potential improvements to counselling training courses could be identified, allowing educators to make appropriate amendments to their curriculums.

Furthermore, by taking into consideration the limitations of our sample—by recruiting therapist participants with a wider range of LGBTQ+ client work experience, theoretical orientations and ethnicities, for example—future research could provide the opportunity for a greater variety of experiences to be explored (Braun & Clarke, 2013; Renert, Russell-Mayhew, & Arthur, 2013).

Additionally, such further research could be conducted using a "mixed-methods" approach. For instance, as well as exploring therapists' clinical work and training experiences using qualitative interviews, researchers could also utilise quantitative tools—such as Dillon and Worthington's (2003) LGB-affirmative counselling self-efficacy inventory (LGB-CSI)—to provide an additional way of identifying specific LGBTQ-affirmative skills of participants that require further development. McLeod (2015), who advocates this "mixed-methods" approach to counselling and psychotherapy research, recognises that qualitative and quantitative methods offer complementary perspectives and argues that a combination of both methods is essential in order to help better inform counselling and psychotherapy practice.

8 | CONCLUSION

The main aim of the current study was to identify ways in which counselling training courses could better prepare their trainees to work with LGBTQ+ clients. Based on the analysis of data obtained from interviews with five recently qualified, LGBTQ+ identifying therapists who have experience working with this particular client group, several suggestions are offered.

First, participants consider it vital that counselling educators and supervisors maintain their own LGBTQ competence training. This is so that they can pass on the necessary knowledge and skills to their students and supervisees, support therapists in their LGBTQ+ clinical work, and, ultimately, help to ensure that LGBTQ+ clients receive appropriate and effective support.

Next, participants feel that it is important for counselling educators to teach students about LGBTQ+ client issues, as well as appropriate therapeutic tools and approaches to use with LGBTQ+ individuals. Of particular importance was training around gender diversity, without which several interviewees initially felt anxious and out of depth when working with TGD clients. Knowledge of such

issues was perceived by participants as helpful for increasing the confidence levels of therapists to work with LGBTQ+ clients.

Another recommendation is for LGBTQ competence training to be integrated throughout the curriculum, rather than be included in a stand-alone "difference" or "diversity" module, as a way to help counselling educators move away from cis- and heteronormativity, and towards a more inclusive and diverse training approach.

Furthermore, tutors who have a limited number of guided learning hours available could signpost trainees to additional resources, to help them further develop their LGBTQ+ knowledge and cultural awareness.

Finally, participants recommend that counselling educators invite LGBTQ+ specialists onto their courses to speak with students, with the aim of helping them to challenge their biases, reduce heterosexism and increase their levels of empathy towards the LGBTQ+ population.

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CONFLICT OF INTEREST STATEMENT

The authors declare that there are no conflicts of interest.

DATA AVAILABILITY STATEMENT

The data that support the findings of this study are stored in accordance with the Research Data Policy of Bath Spa University. The data, available upon request from Michael Carrington (MC), are not publicly available due to their containing information that could compromise the privacy of research participants.

PATIENT CONSENT STATEMENT

The authors obtained written consent to participate and consent to publish from all research participants.

PERMISSION TO REPRODUCE MATERIAL FROM OTHER SOURCES

The authors confirm that their article does not make use of any previously published material.

CLINICAL TRIAL REGISTRATION

The authors confirm that this work did not involve a clinical trial. Therefore, clinical trial registration was not required.

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REFERENCES

Alderson, K. G. (2004). A different kind of outing: Training counsellors to work with sexual minority clients. *Canadian Journal of Counselling*, 38(3), 193–210.

Anderson, E., Scoats, R., & McCormack, M. (2015). Metropolitan bisexual Men's relationships: Evidence of a cohort effect. *Journal of Bisexuality*, 15(1), 21–39.

Berke, D. S., Maples-Keller, J. L., & Richards, P. (2016). LGBTQ perceptions of psychotherapy: A consensual qualitative analysis. *Professional Psychology: Research and Practice*, 47(6), 373–382.

- Biaggio, M., Orchard, S., Larson, J., Petrino, K., & Mihara, R. (2003). Guidelines for gay/lesbian/bisexual-affirmative educational practices in graduate psychology programs. Professional Psychology: Research and Practice, 34(5), 548–554.
- Bidell, M. P. (2014). Are multicultural courses addressing disparities? Exploring multicultural and affirmative lesbian, gay, and bisexual competencies of counseling and psychology students. *Journal of Multicultural Counseling and Development*, 42(3), 132–146.
- Bishop, J., Crisp, D., & Scholz, B. (2022). "We are better and happier if we are inclusive." therapist perspectives on the importance of LGB cultural competence in a mental health setting. Counselling and Psychotherapy Research, 1–10. https://doi.org/10.1002/capr.12586
- Boroughs, M., Bedoya, C., O'Cleirigh, C., & Safren, S. (2015). Toward defining, measuring, and evaluating LGBT cultural competence for psychologists. Clinical Psychology: Science and Practice, 22(2), 151–171.
- Braun, V., & Clarke, V. (2013). Successful qualitative research: A practical guide for beginners. Sage.
- British Association for Counselling and Psychotherapy. (2018). Ethical framework for the counselling professions. Available from: https://www.bacp.co.uk/events-and-resources/ethics-and-standards/ethical-framework-for-the-counselling-professions
- British Educational Research Association. (2018). Ethical guidelines for educational research. Available from: https://www.bera.ac.uk/publication/ethical-guidelines-for-educational-research-2018-online
- Coe, R., Waring, M., Hedges, L. V., & Arthur, J. (2017). Research methods and methodologies in education (2nd ed.). Sage.
- Cohen, L., Manion, L., & Morrison, K. (2018). Research methods in education (8th ed.). Routledge.
- Croteau, J. M., Bieschke, K. J., Phillips, J. C., & Lark, J. S. (1998). Moving beyond pioneering: Empirical and theoretical perspectives on lesbian, gay, and bisexual affirmative training. *The Counseling Psychologist*, 26(5), 707–711.
- Davies, D. (2021). Foundation certificate in gender, Sex and Relationship Diversity (GSRD) Therapy. Available at: https://pinktherapy.org/foundation/
- Dillon, F., & Worthington, R. L. (2003). The lesbian, gay and bisexual affirmative counseling self-efficacy inventory (LGB-CSI): Development, validation, and training implications. *Journal of Counseling Psychology*, 50(2), 235–251.
- Godfrey, K., Haddock, S. A., Fisher, A., & Lund, L. (2006). Essential components of curricula for preparing therapists to work effectively with lesbian, gay, and bisexual clients: A Delphi study. *Journal of Marital and Family Therapy*, 32(4), 491–504.
- Gowen, E., et al. (2019). Guidelines for conducting research studies with the autism community. *Autism Policy and Practice*, 2(1), 29–45.
- Graham, S. R. (2009). Counseling competency with lesbian, gay, and bisexual clients: Perceptions of counseling graduate students. PhD thesis. Auburn University. Available at: https://www.proquest.com/openview/44d977192b6ed2d257b6b9dc5475e527/1
- Gray, L. M., Wong-Wylie, G., Rempel, G. R., & Cook, K. (2020). Expanding qualitative research interviewing strategies: Zoom video communications. *The Qualitative Report*, 25(5), 1292–1301.
- Grove, J. (2009). How competent are trainee and newly qualified counsellors to work with lesbian, gay, and bisexual clients and what do they perceive as their Most effective learning experiences? Counselling and Psychotherapy Research, 9(2), 78–85.
- Hale, J. (2020). To zoom and Back. Private Practice, (September). Available from: https://www.bacp.co.uk/bacp-journals/private-practice/september-2020/articles/to-zoom-and-back/
- Israel, T., Gorcheva, R., Burnes, T. R., & Walther, W. A. (2008). Helpful and unhelpful therapy experiences of LGBT clients. *Psychotherapy Research*, 18(3), 294–305.
- King, M., Semlyen, J., Tai, S. S., Killaspy, H., Osborn, D., Popelyuk, D., & Nazareth, I. (2008). A systematic review of mental disorder, suicide, and deliberate self harm in lesbian, gay and bisexual people. BMC Psychiatry, 8(1), 1–17.

- Kocarek, C. E., & Pelling, N. J. (2003). Beyond knowledge and awareness: Enhancing counselor skills for work with gay, lesbian, and bisexual clients. Journal of Multicultural Counseling and Development, 31(2), 99–112.
- Livingston, N. A., Berke, D., Scholl, J., Ruben, M., & Shipherd, J. C. (2020). Addressing diversity in PTSD treatment: Clinical considerations and guidance for the treatment of PTSD in LGBTQ populations. *Current Treatment Options in Psychiatry*, 7(2), 53–69.
- Lynch, S. L., Bruhn, R. A., & Henriksen, R. C. (2013). Influences of training and personal experiences on counselor Trainees' GLBT ally development: A case study. *The Qualitative Report*, 18, article number 7. Available at: https://nsuworks.nova.edu/tqr/vol18/iss4/1/
- McLeod, J. (2015). Doing research in counselling and psychotherapy (3rd ed.). Sage.
- Meyer, I. H. (2013). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. *Psychology of Sexual Orientation and Gender Diversity*, 1, 3–26.
- Mohr, J., & Jackson, S. (2016). Same-sex romantic attachment. In J. Cassidy & P. R. Shaver (Eds.), Handbook of attachment: Theory, research, and clinical applications (3rd ed., pp. 484–506). The Guilford Press.
- Morrison, J., Clement, T., Nestel, D., & Brown, J. (2016). "Underdiscussed, underused and underreported": Pilot work in team-based qualitative research. *Qualitative Research Journal*, 16(4), 314–330.
- Nichols, M. (2021). The modern Clinician's guide to working with LGBTQ+ clients: The inclusive psychotherapist. Routledge.
- Owen-Pugh, V., & Baines, L. (2014). Exploring the clinical experiences of novice counsellors working with LGBT clients: Implications for training. Counselling and Psychotherapy Research, 14(1), 19–28.
- Pachankis, J. E. (2018). The scientific pursuit of sexual and gender minority mental health treatments: Toward evidence-based affirmative practice. *American Psychologist*, 73(9), 1207–1219.
- Pietkiewicz, I., & Smith, J. A. (2014). A practical guide to using interpretative phenomenological analysis in qualitative research psychology. *Psychological Journal*, 20(1), 7–14.
- Ramirez, O. M., & Brown, J. (2010). Attachment style, rules regarding sex, and couple satisfaction: A study of gay male couples. *The Australian and New Zealand Journal of Family Therapy*, 31(2), 202–213.
- Renert, H., Russell-Mayhew, S., & Arthur, N. (2013). Recruiting ethnically diverse participants into qualitative Health Research: Lessons learned. *The Qualitative Report*, 18, Article Number 12. https://doi.org/10.46743/2160-3715/2013.1542
- Robinson-Wood, T. (2017). The convergence of race, ethnicity, and gender: Multiple identities in counseling (5th ed.). Sage.
- Rutter, P. A., Estrada, D., Ferguson, L. K., & Diggs, G. A. (2008). Sexual orientation and counselor competency: The impact of training on enhancing awareness, knowledge and skills. *Journal of LGBT Issues* in Counseling, 2(2), 109–125.
- Sherry, A., Whilde, M. R., & Patton, J. (2005). Gay, lesbian, and bisexual training competencies in American Psychological Association accredited graduate programs. *Psychotherapy: Theory, Research, Practice, Training, 42*(1), 116–120.
- Smith, J. A., Flowers, P., & Larkin, M. (2021). Interpretative phenomenological analysis: Theory, method and research (2nd ed.). Sage.
- Sue, D. W., Bernier, J. E., Durran, A., Feinberg, L., Pedersen, P., Smith, E. J., & Vasquez-Nuttall, E. (1982). Position paper: Cross-cultural counseling competencies. *The Counseling Psychologist*, 10(2), 45–52.
- Sullivan, C., & Forrester, M. A. (2019). Doing qualitative research in psychology: A practical guide (2nd ed.). Sage.
- Vossler, A., & Moller, N. (2015). The counselling and psychotherapy research handbook. Sage.
- Wynn, R., & West-Olatunji, C. (2009). Use of culture-centered counseling theory with ethnically diverse LGBT clients. *Journal of LGBT Issues in Counseling*, 3(3–4), 198–214.

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