DESCRIPTION OF LGBTQQ-AFFIRMATIVE COUNSELING

Lesbian, gay, bisexual, transgender, queer, and questioning (LGBTQQ)-affirmative counseling embraces and validates clients’ diverse sexual and gender identities and proactively addresses the impact of heterosexism and transgender oppression on LGBTQQ clients’ lives (Rock, Carlson, & McGeorge, 2010). As stated in Standard A.4.a. of the American Counseling Association’s Code of Ethics (ACA, 2005), professional counselors have an obligation to, “avoid harming their clients, trainees and research participants and to minimize or to remedy unavoidable or unanticipated harm.” Further, the ACA (1999) opposes the practice of conversion therapy, deeming it unethical and without scientific or empirical merit and warns of its potential harm. In order to provide LGBTQQ-affirmative counseling, counselors should be familiar with the terms commonly used, prevalence, lifespan, multicultural, and social justice considerations. Counselors should also be familiar with intervention and prevention strategies, as well as how to establish LGBTQQ-affirmative counseling environments. This ACA Practice Brief on LGBTQQ-affirmative counseling provides an overview for professional counselors on each of these topics. Counseling competencies have also been developed to detail LGBTQQ-affirmative counseling (see www.algbtic.org).

LGBTQQ-Affirmative Terms and Definitions

Sexual orientation refers to an individual’s sexual attraction to a particular gender(s). Often used interchangeably with sexual orientation, affectional orientation is the emotional and/or romantic attraction to one or more gender, regardless of sexual desire. The terms lesbian, gay, and bisexual refer to sexual or affectional orientation while transgender relates to gender identity and expression. Specifically, a lesbian is a woman who is sexually and/or affectionally attracted to other women; gay refers to an individual (either male or female) who is sexually and/or affectionally attracted to someone of the same gender; and a bisexual person is sexually and/or affectionally attracted to both men and women. Often regarded as an umbrella term, transgender describes those who identify with a gender different from the one assigned to them at birth and/or whose gender expression falls outside the male/female gender binary. Queer is a term that has been re-appropriated by those whose identities challenge gender and sexuality norms. Questioning refers to those who are in the process of exploring their sexual orientation or gender identity. Intersex refers to a variety of conditions in which an individual’s sex chromosomes, secondary sex characteristics, and/or genitalia do not fit the standard definition for “male” or “female.” For additional American Counseling Association documents and resources that may be useful when working with LGBTQQ clients, refer to The Association for Lesbian, Gay, Bisexual & Transgender Issues in Counseling (ALGBITC) website at http://www.algbtic.org/resources.

LGBTQQ Demographics

A recent Gallup study estimated the numbers of LGBTQQ people to vary from state to state (e.g., 10% in District of Columbia and 1.7% in North Dakota), noting a U.S. average of 3.5% (Gates & Norton, 2013). Although many reports of prevalence exist, the data used in prevalence estimates are often inaccurate because LGBTQQ people may not disclose their LGBTQQ identity.

LGBTQQ-AFFIRMATIVE COUNSELING: MULTICULTURAL AND SOCIAL JUSTICE CONSIDERATIONS

Professional counselors should be aware of the immense multicultural diversity that is embedded within the LGBTQQ community. For instance, a queer youth of color may have very different presenting issues and counseling
needs from a White, transgendered, older adult. It is important, therefore, to use an intersectional approach in counseling with LGBTQQQ people in order to understand how their racial/ethnic, class, gender, religion/spiritual affiliation, and disability status, along with many other considerations, influences their mental health, coping, and overall well-being (Singh, 2012). LGBTQQ-affirmative counselors assess and support clients’ identity development as these developmental processes influence barriers and support clients’ resilience. Effective LGBTQQ-affirmative counseling requires multicultural competence across identity groups (Singh, 2010), particularly because the vast majority of professional counselors are White, middle class, heterosexual, and cisgender (Chen-Hayes, 2001; Reynolds & Pope, 1991). Professional counselors should engage in critical self-reflection to assess their biases, recognize their privileged identities and more comprehensively understand the structural and sociocultural inequities with which their clients must contend (Rock et al., 2010). Professional counselors can attend professional development trainings and workshops aimed at enhancing LGBTQQ competence, and stay current with LGBTQQ counseling research. More information related to the intersections of race, class, and immigration with sexual orientation and gender identity can be found at the Human Rights Campaign website (www.hrc.org), or the National Gay and Lesbian Task Force website (www.thetaskforce.org). For specific information regarding religion and spirituality and LGBTQQQ identity, refer to Soulforce at www.soulforce.org.

In addition, professional counselors should understand that LGBTQQQ clients of all ages face individual and institutional discrimination that may impede personal development and affect overall quality of life. A growing body of literature indicates that students who identify or are perceived to be LGBTQQQ experience a more hostile school climate than those who do not (Gay Lesbian & Straight Education Network, 2012). A negative perception of school climate related to anti-LGBTQQ bullying and harassment has been shown to have a negative impact on LGBTQQQ students’ academic performance and psychosocial well-being (Eccles & Gootman, 2002), including higher rates of depression, illegal drug use, and attempted suicide (D’Augelli, Pilkington, & Hershberger, 2002; Garofalo, Wolf, Kessel, Palfrey, & DuRant, 1998). As they age, LGBTQQQ older adults are confronted with an array of challenges including financial security, adequate and appropriate healthcare, and a lack of social support and community engagement (Services & Advocacy for Gay, Lesbian, Bisexual & Transgender Elders, 2010). Despite the challenges faced by LGBTQQQ students and adults, many remain resilient in the face of adversity (Griffin & Ouellett, 2003; Singh, 2012). Fostering self-advocacy skills will assist LGBTQQQ clients in navigating individual and structural barriers. Additional information about the work of GLSEN and SAGE can be found on their websites: www.glsen.org and www.sageusa.org, respectively.

LGBTQQ clients often face legislative inequities that may limit their rights to personal autonomy, freedom of expression and equal participation in society, including: employment and housing discrimination at the state and federal level; statewide laws prohibiting same-sex couples from adopting or fostering children; state and federal laws banning same-sex marriage; and anti-bullying and harassment laws and policies that exclude enumerated protections for LGBTQQQ students. In addition, transgender and gender nonconforming clients may lack access to adequate, multiculturally competent healthcare providers and often face difficulty in obtaining government-issued identity documents that affirm their gender identity. For more information related to the legal and structural challenges faced by transgender and gender nonconforming people, refer to the National Center for Transgender Equality (www.ncte.org) or Trans Youth and Family Allies (www.ityaf.org).

**CREATING A LGBTQQ-AFFIRMATIVE COUNSELING ENVIRONMENT**

In order to provide an LGBTQQ-affirmative counseling environment, professional counselors should foster a supportive counseling space where clients feel safe and empowered to authentically discuss their sexual and gender identities (ACA, 2010). Strategies to cultivate such an environment include providing LGBTQQ-affirming reading material in the waiting room or school counseling office, ensuring that additional LGBTQQ-related resources are readily available, and making visible one’s support for LGBTQQ issues through LGBTQQ-affirming posters, stickers and other displays (Singh, 2010).

Affirming and inclusive language should be included on all paperwork and assessments (ACA, 2010). For instance, intake forms that ask about relationship status should have an option for domestic partnerships. Additionally, questions
regarding gender should be inclusive of transgender clients. LGBTQQ-affirmative counselors should refer to clients by their chosen name and use pronouns that affirm their gender identity (Singh, 2012). Professional counselors should avoid making assumptions about a client’s gender and/or sexual orientation (Griffin & Ouellett, 2003).

**INTERVENTION STRATEGIES**

LGBTQQ-affirmative counselors are prepared and knowledgeable about how to deliver counseling intervention strategies that foster client empowerment, resilience, and well-being (ACA, 2010). Typical presenting concerns for LGBTQQ clients may include those that relate to family acceptance and/or rejection struggles, and disclosure of sexual orientation and/or gender identity (often termed “coming out”) in different realms of their lives (e.g., immediate and extended family, work, community settings). Because heterosexism and transprejudice are pervasive in society, LGBTQQ clients may feel isolated (Singh, 2010). Professional counselors can assist clients in accessing LGBTQQ-affirmative online and community resources to counter this isolation. LGBTQQ-affirmative counselors also are aware that the presenting issues that LGBTQQ clients have are not solely about their sexual orientation and/or gender identity and gender expression. Because of the societal oppression this population faces, counselors should ensure they conduct a thorough trauma assessment, and they should explore any internalized negative beliefs about being LGBTQQ (Singh, 2012). Professional counselors should also conduct thorough assessments of depression, anxiety, substance use, self-injury, and suicide.

LGBTQQ-affirmative counseling modalities primarily include individual counseling, group counseling, support groups, and psycho-education groups. A central component of each of these modalities should be a focus on LGBTQQ-empowerment where clients have the support they need to question societal oppression and identify coping strategies, social support networks, and other sources of resilience that enhance their well-being.

**PREVENTION STRATEGIES**

In addition to counseling intervention strategies, LGBTQQ-affirmative counselors can engage in prevention strategies that counter heterosexism and transgender oppression. As outlined in the ACA Advocacy Competencies (Lewis, Arnold, House, & Toporek, 2003), counselors are expected to advocate for and with LGBTQQ clients at the micro-, meso-, and macro-levels. Professional counselors who engage in advocacy at the micro or client/student level use direct counseling to empower LGBTQQ clients and serve as advocates who address issues of internalized homophobia and transprejudice and foster self-advocacy skills (Ratts & Hutchins, 2009). The meso- or school/community level of advocacy underscores collaborative advocacy and systemic engagement (Lopez-Baez & Paylo, 2009). Professional counselors involved with community-level advocacy often collaborate with LGBTQQ-affirmative organizations to create awareness about a variety of issues and motivate broad-based positive change. At the macro- or public arena level, counselors inform the public about institutional barriers that impede client development and address issues of public policy. Further, the LGBTQQ-affirmative counselor should engage in efforts to address inequities at the community public arena levels by supporting existing LGBTQQ-rights organizations, collaborating with allied members of the community, and lobbying for legislative and policy change (Lewis et al., 2002). For example, professional school counselors who engage in macro-level advocacy might push for a district-wide enumerated anti-bullying and harassment policy that includes explicit protections for sexual orientation and gender identity/expression, among other marginalized categories most often targeted by bullying. Information related to advocacy strategies for use by school counselors in K-12 settings can be found on the Gay-Straight Alliance Network’s website (www.gsanetwork.org) and on the National Youth Advocacy Coalition’s website (www.nyacyouth.org).

The LGBTQQ-affirmative counselor views advocacy as an ongoing journey rather than a fixed destination, and seeks opportunities for continued professional development and collaboration. The LGBTQQ-affirmative counselor stays informed about empirical research related to LGBTQQ people and issues as well as culturally relevant changes in public opinion, policy and legislation.
ONLINE RESOURCES

GSA Network: www.gsanetwork.org
Gay, Lesbian & Straight Education Network: www.glsen.org
Human Rights Campaign: www.hrc.org
National Center for Transgender Equality: www.ncte.org
National Gay and Lesbian Task Force: www.thetaskforce.org
National Youth Advocacy Coalition: www.nyacyouth.org
Services & Advocacy for Gay, Lesbian, Bisexual & Transgender Elders: www.sageusa.org
Soulforce: www.soulforce.org
Trans Youth and Family Allies: www.ityaf.org

REFERENCES