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Professional Counselors' Lived Experiences of Counseling Gender Diverse Clients

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Veronica M. Kirkland

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Walden University

2018

Abstract

Professional Counselors' Lived Experiences of Counseling Gender Diverse Clients

by

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MA, Liberty University, 2011

BS, Howard University, 2009

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Counselor Education and Supervision

Walden University

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Abstract

Gender diverse individuals experience stigma, discrimination, and transprejudice regularly, in response to daily interactions with society. These negative experiences lead to the development of physical, mental, and emotional instability. Gender diverse individuals experience transprejudice and discriminatory experiences in transphobic counseling environments. Furthermore, current research highlights the need for counselors to increase training and knowledge to work with gender diverse individuals. The purpose of this hermeneutic phenomenological study, grounded in a Heideggerian philosophy, was to illuminate the lived experiences of professional counselors engaging in counseling with gender diverse clients and bridge the gap in the current literature. Data were collected from 7 licensed professional counselors with experience counseling gender diverse clients. using a semistructured interview and followed a structured thematic analysis process incorporating components of interpretive phenomenological analysis, ensuring thematic saturation. The results of this study highlighted 10 major themes and seven subthemes inclusive, but not limited to education and training, understanding gender diversity issues, intentional bias, and professional experience. These study findings provide insight regarding the potential to improve counselor training and preparation. Ultimately increasing knowledge and education may impact and improve the lives for the gender diverse clients by reducing transprejudice, transphobia, and other forms of bias.

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Dedication

This work is dedicated to my mother Linda Maureen Youman-Hemphill, who sacrificed her life so I could live mine. I love you Mommy. Thank you.

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To God; with Him all things are possible!

I want to first acknowledge my cohort of peers. I met you all during my time at residencies two and three. Each of you have tremendously contributed to my successful completion of this process and I thank you all. To my committee, thank you Dr. Geneva Gray for serving as the chair I never knew I needed. As I began engaging in this process I also began a journey towards understanding myself and realizing my needs as a professional. The dissertation process is transformative and I appreciate your help along the journey of becoming my true self. Dr. Corinne Bridges, my committee member and methodologist, you are a light along a path that sometimes appears dark. I am forever grateful for sharing your knowledge, your time, and your humanity with me, especially when I needed it the most. Thank you for serving as my URR Dr. Warren. I appreciate your perspective and imparting your knowledge of the topic. I would also like to acknowledge the host of other faculty and supporters who led me to this point: Dr. Frazier, Dr. Leggett, Dr. Whitman, Dr. Haley, Dr. Peoples, Dr. Sacin, Dr. Logan, and of course Dr. Jayce Patton. Finally, to Dr. Anthony Zazzarino, thank you for our friendship.

To my family and friends, thank you all for supporting me through my journey. I know I haven't been the easiest to handle through all the stress. I love and appreciate you all. To my siblings, Sonya and Eddie, you are the remaining reflections of self I have in the world and I am grateful for you. To my sons, Bryce, Kenyon and, Ayden, I love you and I always will. Thank you for your patience and contribution to my growth as a person. Kisheena, my love, you are my wife and my life.

Table of Contents

List of Tables	v
Chapter 1: Introduction to the Study.....	1
Background.....	2
Problem Statement	11
Purpose of the Study	14
Research Question	14
Conceptual Framework.....	14
Nature of the Study	16
Definitions and Key Concepts	17
Assumptions.....	18
Scope and Delimitations	19
Limitations	21
Significance.....	21
Summary.....	22
Chapter 2: Literature Review	24
Literature Search Strategy.....	25
Research Databases and Scholarly Resources	25
Search Techniques and Strategies.....	25

Conceptual Framework.....	26
Literature Review.....	28
Counseling and Gender Diverse Clients	28
Barriers to Competent Counseling	33
Summary and Conclusion.....	44
Chapter 3: Research Method.....	46
Research Design and Rationale	46
Role of the Researcher	48
Methodology.....	50
Participant Selection	50
Data Collection	52
Data Analysis Plan.....	57
Trustworthiness.....	60
Credibility	60
Transferability.....	61
Dependability	61
Confirmability.....	62
Ethical Procedures	62
Summary.....	63
Chapter 4: Results.....	64

Setting	64
Demographics	66
Data Collection	68
Data Analysis	71
Evidence of Trustworthiness.....	71
Results.....	71
Summary.....	100
Chapter 5: Discussion, Conclusions, and Recommendations	103
Interpretation of the Findings.....	103
Limitations of the Study.....	103
Recommendations.....	103
Implications.....	103
Conclusion	116
References.....	103
Appendix A: Data Collection Email.....	133
Appendix B: Informed Consent.....	133
Appendix C: Interview Protocol.....	136
Appendix D: Demographic Survey.....	133

Appendix E: Data Analysis Process	133
Appendix F: Emergent Themes	141

List of Tables

Table 1. Participant Gender Identity and Gender Expression.....68

Chapter 1: Introduction to the Study

Gender diverse individuals experience prejudice, discrimination, and marginalization, which negatively affects their ability to access education, employment, and housing (Grant et al., 2011). These oppressive circumstances lead gender diverse individuals to seek mental health services to address issues of anxiety, depression, suicidal ideation, and trauma (Mizock & Lundquist, 2016; Nuefeld, 2014). Mental health providers also impose oppression upon gender diverse clients with the use of gatekeeping practices during therapeutic interactions. For instance, transgender clients have reported engaging in counseling with providers who focus on gender more than necessary when gender identity is not the treatment focus (Mizock & Lundquist, 2016). Access to positive mental health services and care is critical to the well-being and functioning of gender diverse individuals experiencing depression, anxiety, substance abuse, suicidality, and other psychological challenges (Grant et al., 2011).

Currently, mental health and medical providers engage in blaming and shaming gender diverse clients, including transgender and gender nonconforming (TGNC) individuals, for “knowing too much” and “not listening” to the all-knowing doctor or counselor (Poteat, German, & Kerrigan, 2013, p. 27). The challenges gender diverse clients experience in counseling have a direct connection to deficiencies in counselor education and training (O’Hara, Dispenza, Brack, & Blood, 2013). In addition, counselors reported low confidence in their capability to work with this population (O’Hara et al., 2013). The provision of affirmative mental health practice with the gender diverse population is imperative to the growth and development of this community as well as the

counseling field (Poteat et al., 2013; Singh & dickey, 2017). Professional counselors are not prepared to respond to the gender diverse client's need for competent and affirmative services (Case & Meier, 2014). Therefore, new standards regarding counselor preparation, for instance training, education, service, and competency with the gender diverse population, are necessary for the advancement of the counseling field in this area (Troutman & Packer-Williams, 2014).

This chapter includes the background information to necessitate the exploration of counselor experiences with gender diverse clients. I will also include the problem statement, purpose of the study, research questions, and the conceptual framework. The nature of the study, definitions, assumptions, delimitations, and limitations are additional features included in this chapter. The chapter will conclude with a brief discussion of the significance of the study.

Background

A qualitative grounded theory study completed by Mizock and Lundquist (2016) brought to light the issues that gender diverse individuals experience in mental health services. Forty-five semistructured interviews provided the experiential data to explore gender diverse individuals' experience of psychotherapy. Although the researchers gathered a diverse participant pool, the participants were predominantly Caucasian, ranging in age from 21 to 71 years. Upon the completion of grounded theory analysis, Mizock and Lundquist (2016) generated 200 codes from which they developed a theory. The codes were cross-checked by each research team member to increase trustworthiness, increasing the strength of the study (Mizock & Lundquist, 2016). The researchers

interpreted the data using triangulation to incorporate each research team member's perspective and ensure the trustworthiness of the study (Mizock & Lundquist, 2016).

The researchers revealed eight missteps in psychotherapy with the gender diverse population. Education burdening, gender inflation, gender narrowing, gender avoidance, gender generalizing, gender repairing, gender pathologizing, and gatekeeping are the challenges gender diverse individuals encounter in psychotherapy with mental health providers (Mizock & Lundquist, 2016). The researchers failed to include the specific information regarding the experiences of the participants, such as the level of experience of the mental health provider and the treatment modality.

Poteat et al. (2013) also completed a qualitative grounded theory study to increase the body of literature concerning challenges gender diverse individuals face during mental health treatment. This research highlighted the transprejudice, or discrimination and prejudice, that the gender diverse community experiences. Poteat et al. (2013) indicated that transprejudice leads to risk of developing a mental or physical illness such as, depression, anxiety, and human immunodeficiency virus (HIV). The researchers also highlighted that the effect of transprejudice in mental health interactions perpetuate the denial of access to positive mental health services (Poteat et al., 2013). Practitioners who engage in blaming and shaming of gender diverse clients is an example of oppressive, nonaffirmative treatment that impedes the civil rights of this group (Poteat et al., 2013). To explore these challenges, researchers completed in-depth interviews with 55 TGNC people and 12 medical personnel (Poteat et al., 2013). The research findings support the notion that uncertainty and ambivalence describe how medical personnel work with

gender diverse individuals because of deficits in their knowledge about the gender diverse population (Poteat et al., 2013). Caring for this population with uncertainty and ambivalence preserves the lack of trust among the gender diverse community regarding health care providers (Poteat et al., 2013).

Based on the data, Poteat et al., (2013) developed a theory to understand how transprejudice is experienced in health care interactions, explained the process of how transprejudice develops within these interactions, and provided insight into the function of these behaviors. For medical providers, balancing the need for power within the doctor-patient relationship is important (Poteat et al., 2013). For example, when gender diverse individuals offer medical personnel information about their experiences and information found via Internet, medical professionals responded negatively and spent most of the time attempting to debunk any perceived myths the individual may have come across (Poteat et al., 2013). Although the authors' desire was to offer information regarding the overt and covert prejudices among healthcare interactions with gender diverse people to elicit change (Poteat et al., 2013), the researchers did not inquire about the gender diverse individual's experiences in mental health treatment or include counselors and other mental health professionals, omitting these health care interactions.

A mixed-methods study done by O'Hara et al. (2013) uncovered the limitations and strengths in counselor education and training regarding the gender diverse population. To begin the study, the researchers did a survey analysis using a 2 x 2 between-subjects factorial ANCOVA. They hypothesized that they would find statistical significance regarding competence of gender diversity issues between novices and

advanced counseling students. Researchers also hypothesized that there is a statically significant difference between students that completed practicum or internship and students that did not, as well as, students with a transgender acquaintance and those without. The participant pool of novice counselors included those ranging in age from 18 to 62 years and included three gender diverse people ($N = 87$).

Using a questionnaire, the researchers gathered demographic information such as age, sex, race, education level, and acquaintance with a transgender individual. The authors adapted the Sexual Orientation Counselor Competency Scale (SOCCS) to assess each participant's competence regarding work with gender diverse individuals (O'Hara et al., 2013). The analysis results were only significantly higher for students who were acquainted with a gender diverse individual (O'Hara et al., 2013). After completing the initial phase of the study, O'Hara et al. (2013) engaged in a transcendental phenomenological inquiry to explore the educational experiences of seven counselors in training to determine the meaning of these experiences in relation to their knowledge.

The researchers engaged the participants in two focus groups and transcribed the recorded interviews (O'Hara et al., 2013). O'Hara et al. (2013) used open-code analysis to identify themes and derive meaning. The researchers uncovered five themes: use of appropriate terminology, sources of information and knowledge, approaches to working with transgender people, counselor in training characteristics, and recommendations (O'Hara et al., 2013). Although the study addresses gender diverse counseling competency of counselors in training, the trainees had not engaged in counseling with gender diverse individuals nor do they have guaranteed future opportunities to engage in

counseling with gender diverse individuals.

Bidell (2013) addressed the mental health disparities and inequities among the lesbian, gay, bisexual, and transgender (LGBT) community by engaging in two repeated measures multivariate analyses of variance (MANOVA) to examine the impact of an affirmative LGBT counseling course. The study participant pool consisted of 23 counseling students registered for a graduate LGBT counseling course. As this is a quantitative study, the ability to generalize the results is of utmost importance. The researchers did not achieve this goal using a minimal sample size. The researchers administered the SOCCS and the Lesbian, Gay, and Bisexual Affirmative Counseling Self-Efficacy Inventory (LGB-CSI) both before and after the course.

An additional cohort of student participants that mirrored the initial group was also given the SOCCS in time intervals identical to the first group (Bidell, 2013). The student scores on each assessment were analyzed and compared. The researcher found that the scores for the students enrolled in the LGBT course had significantly higher scores on the post SOCCS assessment than those not enrolled in the course, Wilks' $L = .163$, $F(1,22) = 112.66$, $p < .001$, $h^2 = .84$. Bidell (2013) implied that the results indicate that student engagement in an LGBT counseling course will result in positive influence on counselor competency and self-efficacy.

Although the participant pool was racially diverse, many of the participants were White and nearly 70% of the participants were female. Bidell (2013) did, however, control for outcome bias by obtaining a comparison group of the same composition. To strengthen internal validity, the researcher also matched each participant's experience,

education level, attendance in LGBT workshops, and the number of LGBT acquaintances (Bidell, 2013). Bidell (2013) administered a pre- and post-SOCCS assessment to the participants in both the experiment and control groups, but only the experimental group received the LGB-CSI, so no comparison of this assessment was possible. Also, although the SOCCS assesses one's self-reported competency in LGBT affirmative counseling, the researchers omitted participant accounts of actual counseling experience with the LGBT clientele post the LGBT course.

In an additional research study, Dispenza and O'Hara (2016) sought to correlate gender diverse counseling competencies and mental health providers. The purpose of the quantitative Hierarchical Regression Analyses was to determine the competencies necessary for affirmative mental health treatment with gender diverse individuals. Researchers hypothesized that mental health service providers with specific demographic identifiers such as ethnic identity, sexual minority (SM), years of experience, and level of education would be positive indicators of one's ability to provide competent counseling with gender diverse individuals (Dispenza & O'Hara, 2016).

Only responses from 102 participants made the study, as researchers did not include 11 responses due to incomplete or missing information (Dispenza & O'Hara, 2016). The participants completed a demographic questionnaire, the Gender Identity Counselor Competency Scale (GICCS), and the Social Desirability Scale-17 (SDS-17). Researchers entered and analyzed the data using SPSS 20.0. The effect sizes were statistically insignificant concerning correlations of self-reported gender diverse counseling competence (Dispenza & O'Hara, 2016).

Dispenza and O'Hara (2016) reported that the results compliment the American Psychological Association (APA) gender diverse competencies. The researchers indicated that specific demographic identifiers of mental health providers correlate to gender diverse competency. Mental health providers who identify as SM, ethnic minority, and have at least 8 years of counseling experience will engage in affirmative counseling with TGNC individuals (Dispenza & O'Hara, 2016). Researchers suggested that the outcomes indicate a hidden pedagogy or psychosocial pattern within mental health providers with these demographic identifiers. A limitation of the study is the omission information regarding each participant's direct experiences with gender diverse counseling (Dispenza & O'Hara, 2016).

In a recent article, Troutman and Packer-Williams (2014) suggested that specific training standards are necessary to address LGBT issues in counselor education. The authors challenge the lack of advocacy language within the Council for Accreditation of Counseling and Related Educational Programs (CACREP) standards regarding counselor training or engagement with LGBT individuals (Troutman & Packer-Williams, 2014). The authors asserted that historically, counseling associations separately express concern about the enhancement of diversity and multicultural competency in the counseling field (Troutman & Packer-Williams, 2014). For example, the Association for Multicultural Counseling and Development (AMCD) includes specific language focusing on the impact of ethnicity but omits language to specify the importance of competency with LGBT individuals. Similarly, the Association for Lesbian, Gay, Bisexual and Transgender Issues in Counseling (ALGBTIC) specifically reference the promotion and awareness of LGBT

issues, yet no mention of ethnicity or race (Troutman & Packer-Williams, 2014).

The authors suggested an intersectional approach to merging the concerns of both associations to include language in standards that inclusive of ethnicity, racial, and LGBT issues (Troutman & Packer-Williams, 2014). In addition, counselor educators must take responsibility for enhancing curricula and experiences that advance the counseling field towards an intersectional approach to multiculturalism. Troutman and Packer-Williams (2014) suggested that counselor education programs push beyond the minimal, nonspecific CACREP standards for training culturally competent counselors. Specific suggestions for counselor education programs are to include, LGBT counseling competency training, particularly confronting transphobia with the use of affirmative language, and forming partnerships with diverse & visibly inclusive training sites (Troutman & Packer-Williams, 2014).

Neufeld (2014) engaged in a qualitative case study to provide an illustration of the value of embedding social justice in gender diverse therapy. The author discussed positive enhancements in society's awareness of gender identity but also acknowledged the disparities that continue to exist in the social landscape concerning injustice among this group (Neufeld, 2014). For example, the typical response to a mixed or ambiguous gender identity is discomfort, often resulting in discrimination or harassment (Neufeld, 2014). Coinciding with these outcomes are increased mental health challenges, such as depression and suicide (Neufeld, 2014). The purpose of the case study was to provide mental health professionals with an understanding of the need for social justice within therapeutic settings that engage transgender clients. The author also provided an example

of transgender advocacy therapy with an inclusion of social justice. Neufeld's (2014) example is that of the story of Sarah, the pseudonym used to protect the identity of a 50-year-old transgender woman, who participated in the study in the hopes of helping other therapists working with gender diverse individuals.

Neufeld (2014) indicated that in North America, specifically Canada, therapists can easily avoid increasing competence with gender diverse clients because it is not an ethical requirement, but only suggested. In addition, limited access to competent services or referral sources creates problems for both gender diverse individuals and therapists (Neufeld, 2014). Social justice and advocacy is present in Neufeld's (2014) interaction with Sarah through supportive and alliance building behaviors. For example, Neufeld supported Sarah in asserting herself in transphobic encounters, encouraged self-advocacy to enhance public awareness of the transgender community, and worked on behalf of Sarah to contact other healthcare providers for assistance. Research exemplifying the usefulness of these affirmative practices encourage providers to use treatment modalities that are culturally appropriate for gender diverse clients.

Rosenberger (2015) abandoned her classical clinical training to employ relational cultural theory (RCT) in her work with clients, as the use of the classic theoretical models struck discord with her clientele. She opted for a genuine, relational approach to therapy that in turn, strengthened the therapeutic relationship, fostering an interactive environment in which both she and the client could grow (Rosenberger, 2015). This example is one account of a social worker's use of RCT in counseling with a client to foster an environment of genuine interaction that was the catalyst for growth. Patton and

Reicherzer (2010) also applied the RCT model in their work with a transgender client to overcome dissonance within the counseling relationship due to the perception of treatment barriers.

In their work, Patton and Reicherzer (2010) used the strengths-based framework of RCT to explore the effects of marginalization on the therapeutic relationship. Specifically, in the course of 1 year, the researchers activated the tenets of RCT within the therapeutic relationship to foster the growth of the relationship and disbar disconnections that were present due to the perception of the barriers representative of marginalization and discrimination (Patton & Reicherzer, 2010). These interactions led to growth-fostering relationships, accounting for growth in both the counselor and the client (Patton & Reicherzer, 2010). The researchers also indicated implications for practice and future research regarding counseling with gender diverse individuals (Patton & Reicherzer, 2010).

In my study, I explored the experiences of professional counselors who engage in counseling with gender diverse clients. This research extends the work of researchers before me by illuminating the phenomenon of counseling with gender diverse clients. Exploring the meaning of this experience for professional counselors adds pertinent information to the field that will hopefully help elevate the competence of counselors and enhance counseling experiences for gender diverse individuals.

Problem Statement

O'Hara et al. (2013) highlighted the connection between the lack of counselor training and disparities in mental health services with gender diverse clients. Specifically,

during training, novice counselors who are given an opportunity to practice counseling with the gender diverse population may shy away from this task due to a perceived lack of self-efficacy to appropriately serve and attend to the needs of these clients (O'Hara et al., 2013). Consequently, Case and Meier (2014) asserted that counselors are ill equipped to respond to the therapeutic needs of gender diverse clients, such as providing competent and affirmative care. The authors also suggested that counselors must serve as advocates, leaders, and allies in the vein of working to eradicate transprejudice and transdiscrimination within communities and among service providers working with this population (Case & Meier, 2014). Specifically, counselors must often serve as the voice for the gender diverse individuals in their care when contacting other providers to collaborate service provision (Nuefeld, 2014).

Given the current issues of lack of training, low self-efficacy, and biases of mental health providers towards gender minorities, the implementation of appropriate standards of care is required for the overall helping profession. More than 70% of mental health providers reported a lack of familiarity with the concerns of the gender diverse population (Campbell & Arkles, 2017). This lack of familiarity and misunderstanding of gender diversity issues perpetuates ignorance regarding the “ intersection of standards of care, ethics, and law that are not applicable in the same way to other populations” (Campbell & Arkles, 2017, p. 96). Mental health providers have a responsibility to provide ethically sound services and increase competence to serve diverse clientele through professional development and affirmative alterations to the standards of care for gender diverse individuals is one way to achieve this goal (Campbell & Arkles, 2017).

The counseling field requires new standards regarding the acquisition of education and training, as well as the application of competencies with gender diverse clients to elevate the standard of care with this population (Moe, Finnerty, Sparkman, & Yates, 2015). In 2010, the American Counseling Association (ACA) published competencies for “ professionally trained counselors who work with transgender individuals, families, groups, or communities” (p. 135). The authors’ hope in creating this document was to strengthen the ability of professional counselors to facilitate and provide affirmative services in safe settings (ACA, 2010). However, recently, researchers examined the competence of school counselors and their ability to work with LGBT students and found that school counselors scored low in self-perceived competence in working with students identifying as LGBT (Shi & Doud, 2017). The authors also found that some of the counselors expressed a belief that identifying as LGBT is immoral and a mental health disorder, thus requiring counseling for the purposes of correcting these issues (Shi & Doud, 2017).

McCulloch et al. (2017) found that affirmative counseling experiences of gender diverse individuals occurred with counselors who either identified as LGBT or who were advocates and allies to the gender diverse community. Creating new education and training standards for counselors who work with gender diverse individuals would likely increase positive outcomes and ensure the mental health and wellness of the gender diverse community (Troutman & Packer-Williams, 2014). The current lack of understanding regarding the lived experiences of counselors who treat this population leaves counselor educators and supervisors ill equipped to implement effective education

and training to prepare counselors to work with the gender diverse population.

Understanding the lived experiences of counselors who engage in counseling with gender diverse individuals illuminated the specific areas of need for these counselors.

Purpose of the Study

The purpose of this hermeneutic phenomenological study was to illuminate the lived experiences of professional counselors engaging in counseling with gender diverse clients and bridge the gap in the current literature. Phenomenology is the process of bringing to life the meaning of the human experience through observation, description, and interpretation (van Manen, 2016). The hermeneutic process allows the researcher to make sense of one's experience based on preexisting values and knowledge (Ho, Chiang, & Leung, 2017). This study provides additional insight regarding counseling with gender diverse individuals by including multiple examples of experiences from the perspective of independently practicing professional counselors already engaging in counseling with gender diverse clients. Interpreting these experiences provided new insights on counseling with the gender diverse population and highlighted implications for future research by answering the question: What are the lived experiences of independently practicing counselors who counsel gender diverse clients?

Research Question

What are the lived experiences of professional counselors engaging in counseling with gender diverse clients?

Conceptual Framework

Heidegger is the founder of hermeneutic phenomenology. He developed this

research approach to explore one's sense of understanding as the interpretation of the current reality based on one's foundational understanding of experience (Ho et al., 2017). Using hermeneutic phenomenology, researchers seek to understand one's knowledge of self, beginning with a preunderstanding of their personal experience of being (Cammell, 2015). Preunderstanding is prior knowledge that evolves with time, experience, and self-inquiry, which helps the researcher develop a new interpretation of a phenomenon (Cammell, 2015). Heidegger explained this self-evolving process as the hermeneutic circle, a process employed by hermeneutic phenomenologists in the quest to understand and interpret the lived experience of participants.

According to Heidegger, phenomenology requires one to understand experience from the lens of the experienced (Wrathall, 2014). To understand how experience occurs, we must remain present and witness to the organic expression of the phenomenon (Wrathall, 2014). In addition, Heidegger believed that to understand the full extent of an experience, we must also consistently remain conscious of and reference our personal history (Wrathall, 2014). Therefore, our understanding of existence is predicated on our experience of being in the world. Heidegger refers to one's being in the world or humanity as *Dasein*, derived from the German language and translated as there-being (Wrathall, 2014). In addition, Heidegger believed humans are beings who are in the world and it is this place in the world from which we function (Wrathall, 2014). For example, as counselors develop a professional identity, they cannot separate from their prior experiences as a student, parent, friend, sibling, and other parts of their being in the world that occurred before they began the experience of functioning as a counselor.

Regarding phenomenology, Heidegger believed we understand and experience phenomena as a *Dasein*, or there-being. *Daseins* behave based on a specific style of being or existence that originates from their being in the world (Wrathall, 2014). Thus, there-beings are responsible for their way of being in the world. In addition, because *Daseins* are present in the world and experiencing phenomena, their way of being can be influenced or altered by this exposure to phenomena (Wrathall, 2014).

Heidegger described this acquisition of new understanding as circular because an individual's interpretation of phenomena is preceded by understanding that is based on prior knowledge (Watts, 2014). It is this unavoidable priori understanding that “inspires, guides and enables *Dasein* to question existence and make interpretations of the world” (Watts, 2014, Chapter 3, Section 14, para. 2). For example, knowledge of the literature on counselors engaging in service provision with gender minorities will inspire the *Dasein* researcher, enabling the ability to question and interpret the meaning of this phenomenon.

Nature of the Study

The goal of this hermeneutic phenomenological inquiry was to interpret the meaning professional counselors ascribe to their experiences of counseling with gender diverse individuals. Hermeneutic phenomenology is the best method as the aim of this study was to explore, interpret, and understand the experiences of the participants (Heidegger, 2013). In phenomenological research, interpretation is a means of understanding experience and is an essential part of the hermeneutical research process (Heidegger, 2013). Specifically, the hermeneutic process requires the researcher to focus on searching for themes, interpreting data, and reducing the extraction of essences for

explaining the occurrence of the phenomenon (Sloan & Bowe, 2014). Heidegger highlighted the importance of the hermeneutic circle as a means of addressing bias as one interprets the experience of others (Gadamer, 2013). The hermeneutic circle is the process of utilizing one's preexisting knowledge to enhance understanding and interpret the meaning of new information (Gadamer, 2013). Using the hermeneutic circular process, I journaled my biases and preexisting knowledge throughout the research process and included these thoughts while interpreting the data.

Definitions and Key Concepts

Ratts (2017) indicated the importance of dismissing umbrella terms such as *LGBT* to encompass multiple groups as these terms exclude the importance of certain subgroups, leading to conflation and misinterpretation of the multilayered experiences of these groups. For example, failure to make the distinction between lesbian, gay, and bisexual (LGB) individuals as sexual minorities and transgender persons as gender diverse individuals is a misidentification that invalidates the unique experiences of each identity (Salisbury & Dentato, 2016). Furthermore, the gender diverse community experiences harmful invalidation when sexual physiology or attraction is used to identify gender; an experience perpetuated with the term *LGBT* (Bauerband & Galupo, 2014).

According to Buck (2016), the term *gender* is defined as a “ unique and personal psychological experience, not something that is necessarily tied to biology or behavior” (p. 467). *Gender identity*, then, is “ the personal psychological experience of one's own gender” (Buck, 2016, p. 465).

In this study, *gender diverse individual* or *client* refers to those who vary in gender identity or expression based on the wide spectrum of gender that exists outside of the rigid gender binaries of male and female (Chang, Singh, & Rossman, 2017; Moe et al., 2015). These identities include transgender, gender nonbinary, GNC, genderqueer, male-to-female (MTF), female-to-male (FTM), androgynous, gender-fluid, gender variant and many other self-identifying terms created by members of this community (ACA, 2010).

Other terms developed by the medical community include *gender transition* or *gender reassignment*. These terms are used to describe the process of physical gender transition that often occurs through a surgical intervention known as gender reassignment surgery, originally termed “sexual change operation” (Reicherzer, 2008, p. 332). Gender transition with the use of medically affirming interventions also include the use of hormone therapy prior to surgical procedures to “masculinize or feminize the body” (Clark, Hughto, & Pachankis, 2017, p. 81).

Assumptions

The assumptions critical to the development of this study included the thought that the lack of counselor training requirements regarding the needs of gender diverse individuals are a detriment to this group. I assumed that the education and training programs currently available do not sufficiently incorporate and apply the ACA competencies regarding treatment with gender diverse individuals. Based on the span of literature featuring the counseling experiences of gender diverse individuals (McCulloch et al., 2017; Mizock & Lundquist, 2016; Poteat et al., 2013; Reicherzer, 2008), I also

assumed that these experiences remain harmful for gender diverse clientele and despite the development of competencies, counselors remain deficient in their ability to provide competent services for this group. Because of this, I assumed that a lack of knowledge regarding the counselor experience of treatment with gender diverse clients perpetuates the identified counselor inadequacies. Thus, I assumed that illuminating the counselor lived experiences with gender diverse clients would provide the information necessary to change the state of counseling for gender diverse individuals.

Scope and Delimitations

Gender diverse individuals experience transprejudice, discrimination, and stigmatization in society that provokes the development of various psychological challenges. These challenges lead the gender diverse community to seek counseling to alleviate the deleterious effects of living in a society where they are not valued. Unfortunately, several researchers concluded that counseling interactions perpetuate the transnegativity gender diverse individuals experience in life for various reasons (Dispenza & O'Hara, 2016; Mizock & Lundquist, 2016; Nuefeld, 2014; Poteat et al., 2013). The experiences of professional counselors were the primary focus of this inquiry to illuminate their strengths, deficiencies, and needs regarding counseling knowledge, skill, and competency when working with gender minorities. Other psychological practitioners such as psychologists, social workers, and psychiatrists were excluded from this study to limit the focus of the inquiry and extend the body of literature regarding the counseling experiences of gender diverse clients. Phenomenological research is a method for gaining a deeper understanding of the essence of lived experience (Husserl, 2013).

Transcendental phenomenology requires a researcher to activate a phenomenological perspective throughout the entire research process with the goal of exploring to discover and describe lived experiences (Husserl, 2013). The essence of meaning will emerge through the description of the participants' experiences (Husserl, 2013). Engaging in transcendental phenomenological would limit the exploration to understand the experiences of professional counselors counseling gender diverse clients to a description. Thus, a hermeneutic approach was the best fit for this inquiry. Hermeneutic phenomenology accentuates the description and interpretation of lived experience to gain a deeper perspective that moves beyond a mere description of the phenomenon, increasing the transferability of the study outcomes. Transferability describes methods for ensuring the trustworthiness of the study findings to other research settings, individuals, and groups (Morse, 2015). Clearly articulating research methods and analytical strategies serves as a means of securing the transferability of the data (Williams & Morrow, 2009).

Qualitative inquiry is considered most beneficial when a detailed description of the methodology used to conduct the study as the description enlightens the reader to the credibility of the data (O'Connor, 2011). One benefit is that other researchers can replicate the study using the research process described (Lee, 2014). Thus, my description of the research process and methodology provides clear examples of the quality of the data collected (Williams & Morrow, 2009). My research plan included a focus on participant selection to ensure the participants met the research-based criterion necessary to glean rich data and satisfy the purpose of the inquiry (Lee, 2014). Use of the

participant's words through in vivo coding, by hand and with software, also served as a means of ensuring the integrity of the data by highlighting the use of each participant's voice to develop meaning regarding the phenomenon (Williams & Morrow, 2009).

Limitations

A limitation of engaging in phenomenological research methods is the lack of hard numbers to describe the needs of a population (Husserl, 2013). While understanding the experiences of a population by interviewing and gleaning themes based on their human experience draws positive insights, most change makers are motivated and driven by the details of numbers and data (Wronka, 2008). Creswell (2014) identified quantitative methodology as the best approach for identifying specific factors that influence an outcome. Professional counselors and gender diverse individuals may benefit from future research that provides concrete numerical data based on the influence of an intervention to stress the needs of each group and the impact of change.

Significance

Currently, the standards that guide preparation and competence in gender minority counseling fail to specifically address disparities in training, such as lack of knowledge, discomfort, and discriminatory practices (Troutman & Packer-Williams, 2014). Understanding professional counselor's counseling experiences with gender diverse clients will offer the knowledge and language necessary for reforming education and training requirements and standards. Subsequently, changes in training standards may alter the future of practice within the profession (Chang & Singh, 2016). Specifically, changes in education and training requirements and standards may induce counselors to

ensure the application of competent practice with gender diverse clients.

It is imperative that counselors work to enhance their skill and knowledge to engage in competent and affirmative practice with gender diverse clients (Bidell, 2013). The limits of a counselor's knowledge, skills, and ability also limit the ability of the client to grow and address their concerns (Neufeld, 2014). With this research, I am attempting to affect social change by providing additional understanding regarding the phenomenon of counseling with gender diverse individuals. It is my hope that these changes will positively enhance the therapeutic relationships between counselors and gender diverse clients to foster growth and change that will reduce the impact of the life challenges gender diverse individuals experience.

Summary

Professional counselors have an ethical responsibility to “advocate to promote changes at the individual, group, institutional, and societal levels that improve the quality of life for individuals and groups and remove potential barriers” (ACA, 2014, p. 8). Experiences of prejudice, discriminatory practices, and stigmatization perpetuate the occurrence of mental health challenges, such as depression and substance abuse. Although competent service provision and advocacy are major responsibilities for counselors, they have been unable to grasp the idea of competent practice with gender minorities due to their lack of knowledge and training (O'Hara et al., 2013). Understanding and interpreting the lived experiences of counselors engaging in counseling with gender diverse clients illuminated rich data pertaining to strengths and areas for growth.

Hopefully, this information will lead to affirmative alterations to the current counseling standards regarding the gender diverse community and appropriate counselor preparation, increasing the competence and self-efficacy of professional counselors' ability to serve the gender diverse population. The next chapter will feature a literature review of current research on the challenges facing gender diverse populations, historical and current trends in counseling with gender diverse populations, a discussion of counselor competencies for treatment with gender diverse clients, and barriers to competent counseling with this population.

Chapter 2: Literature Review

Concluding a recent review of decade-long research on gender diverse individuals, researchers found significant gaps in psychotherapy research on these populations. First, out of hundreds of articles reviewed, less than 3% of the literature focuses on therapeutic interventions and the usefulness of these interventions with gender diverse clients (Budge, Israel, & Merrill, 2017). Second, the literature is missing explanations about the effective application of traditional psychotherapies with gender diverse clients, as well as the effective functions of the therapeutic relationship, including specific characteristics of and techniques used by the therapist (Budge et al., 2017). To fill these gaps in the literature, the authors suggest researchers focus on the treatment process, including how therapy is conducted, how to improve the quality of such interactions, and enhancing the evidence-base of treatment with gender diverse clients (Budge et al., 2017).

Research and literature to support the understanding of counselor experiences in psychotherapy with gender diverse clients is necessary to understand the outcomes of the therapeutic process (Budge et al., 2017). Thus, this study explored the experiences of counselors working with gender diverse clients to fill the gap in the current literature. The literature review for this study features research explaining the challenges gender diverse individuals face that lead to the need for counseling services, the historical and current trends in counseling with diverse populations, including gender diverse individuals, as well as barriers to competent counseling with gender diverse clients.

Literature Search Strategy

Research Databases and Scholarly Resources

The function of a literature review is to become familiar with the body of knowledge that paved the way for the current work (Laureate, 2010c). Ethical conduct standards require that counselor researchers acknowledge the contributions of prior research to avoid plagiarism (ACA, 2014). To complete this task, I searched research databases and scholarly resources to uncover the literary contributions regarding counselor experiences in counseling with gender diverse clients. The research databases I explored were PsychINFO, PsychARTICLES, and LGBT Life to collect current research on my topic. PsychINFO is a database that contains peer-reviewed articles, book chapters, and dissertations on behavioral and mental health issues (Counseling, n.d.). For example, in PsychINFO, I searched for dissertations that are close to my topic to learn how current methodologies were used to explore lived experiences. I used PsychARTICLES to view full-text articles on my topic from a psychological perspective (Counseling, n.d.). Finally, LGBT Life provided global perspectives on the gender diverse community (Counseling, n.d.).

Search Techniques and Strategies

It is challenging to remain abreast of the most current practices and research available in the counseling field (Laureate, 2010a). That said, it is an important ethical responsibility for counselors and counselor educators to remain knowledgeable about evidence-based research that is significant to the growth of the profession (Onwuegbuzie & Frels, 2014). One method for obtaining new information is to conduct a database

search of the most current information on a topic. To gain information on my topic, I engaged in a keyword and Boolean search using the PsychINFO, PsychARTICLES, and LGBT Life databases. Using the keywords *counselor*, *transgender*, *counseling*, and *experience* I completed a keyword search. I entered the keywords into the databases and collected various articles and publications pertinent to my topic (Walden, 2014). Several hundred publications surfaced requiring me to specify my keywords and use a Boolean search to narrow the selection.

The Boolean method for searching in databases is a complex approach for narrowing a search by combining keywords with conjunctions such as AND, OR, or excluding publications using NOT (Walden, 2014). For example, a keyword search using the terms *counselor*, *transgender*, and *experiences* yielded thousands of articles and other publications, but a Boolean search using the keywords and conjunctions *counseling* AND *transgender* AND *experiences* yielded a couple of hundred articles. I narrowed my search further by limiting the request to publications that were published between 2013 and 2018.

Conceptual Framework

Heidegger (2013) inquired about human existence, or being, grounded in the ontological philosophies of his Greek predecessors. Heidegger faults Western philosophy with separating human existence from the concept of being, or attempting to understand the world in which the being exists while, excluding the being from the world (Watts, 2014). According to Heidegger (2013), beings cannot have a blank slate because since the beginning of their existence, the being is in and a part of the world in which they live.

Heidegger believed it is not possible to distance oneself from the experience of phenomena because the being is a part of the phenomenon and creates experience while simultaneously attempting to understand the phenomenon through interpretation (Sloan & Bowe, 2014). Thus, hermeneutic, or interpretive, phenomenology based on Heidegger's philosophy is a qualitative research methodology used to "understand the meaning of experience by searching for themes, engaging with the data interpretively" (Sloan & Bowe, 2014, p. 1297).

The seminal works of Heidegger elude the ordinary line of thinking about being and existence because Western philosophy encourages thought processes that remove the individual from the experience of existence, thus making his writing difficult to understand (Wrathall, 2014). In *Being and Time*, Heidegger (2013) explained that knowledge is a cycle of experience, description, and interpretation. Thus, one's understanding of experience is predicated on one's understanding of their experience of being-there in the world, or *Dasein* (Heidegger, 2013).

Dasein is the term Heidegger (2013) used to describe beings that exist there in the world. According to Heidegger (2013), we are all *Dasein* and it is critical to behave that way. To do this, researchers do not separate themselves from the phenomenon of inquiry, but infuse their experiences of the phenomenon into the study by intertwining preunderstanding with new understanding of the phenomenon based on other *Dasein's* experiences with the phenomenon (Miles, Francis, Chapman, & Taylor, 2013). Heidegger (2013) explained this as human existence, or *Existenz*.

Existenz occurs as an interpretation of how it should be in the world (Heidegger, 2013). For example, there are multiple ways of being-in-the-world and each *Dasein* is responsible for who they are and how they live in the world (Heidegger, 2013). This unique style of being allows *Dasein* the ability to present itself authentically in the world (Miles et al., 2013). Heidegger conflated these thoughts with the assertion that a *Dasein* can only exist in the world, the world can only be understood through the experiences of a *Dasein*, and the world does not exist without a *Dasein* (Heidegger, 2013).

The current inquiry was grounded in hermeneutic phenomenology based on Heidegger's philosophy. As the researcher, I had opportunities to connect with my experience and understanding of the phenomenon as a means of immersing in the experiences of the participants to interpret and build meaning attributable to the phenomenon. My understanding of the phenomenon of counseling with gender diverse clients is considerably based on the knowledge I acquired through a thorough review of the literature on the topic and my clinical experiences engaging with gender diverse clients as a counselor.

Literature Review

Counseling and Gender Diverse Clients

Historical counseling trends. A counselor's lack of awareness regarding the historical context of counseling with minority populations leaves them open to functioning with incompetence and promoting the continuation of the oppressive stances of their predecessors (Moe et al., 2015). In the 1970s, counselors began questioning the challenges minorities, such as women, people of color, and sexual minorities,

experienced in counseling (Brown, 2011). Thus, researchers conducted a slew of research and published literature to reflect the burgeoning therapeutic experiences and needs of these groups (Brown, 2011).

Originally, the biases existing in psychotherapy were the product of the White, male, heterosexual views reflected in Western society and initial concerns of gender and race in counseling were viewed through this tiny lens (Brown, 2011). Eventually, the counseling field infused issues of diversity, however, diversity was considered issues relating to ethnicity and other areas of diversity were ignored (Brown, 2011). When women's issues were integrated into counseling, the focus remained on challenges experienced by the White, heterosexual, young, middle class female (Brown, 2011). Similarly, the introduction of affirmative counseling with sexual minorities in 1982 only included White Americans (Brown, 2011).

Medical and mental health professionals working with gender diverse individuals created a deficit-based model of care that highlighted challenges associated with this identity (Avera, Zholu, Speedlin, Ingram, & Prado, 2015; Singh & Burnes, 2010a). In the mid-1970s, transsexual group therapy became a popular approach for client's who resisted individual therapy (dickey & Loewy, 2010). Group work with this population was also focused on gender repair and reconditioning the psyches of "sissy boys or tomboy girls" (dickey & Loewy, 2010, p. 236). The goal of these groups was to reorient the individual back to his or her original gender determined at birth (dickey & Loewy, 2010). Eventually, peer-led support groups emerged to support the gender diverse

community using a strength-based approach to address their needs (dickey & Loewy, 2010).

Current counseling trends. Minorities, specifically sexual and gender diverse individuals, face social stigmatization, intimidation, ridicule, and threats that regularly challenge their existence (Greene & Britton, 2014). The minority stress model explains the negative psychological influence of societal discrimination and prejudice, which leads to the development of various mental health illnesses (Heck, Flentje, & Cochran, 2013). Thus, the oppressive experiences minorities face perpetuates their need for counseling (Heck et al., 2013). Gender diverse individuals are especially vulnerable regarding the experience of prejudice and discrimination due to their multiple minority statuses, causing distress (Greene & Britton, 2014).

Minority stress is defined as stress that occurs beyond the normal scope of general stressors, chronic stress that is unyielding, and based on societal design (Bidell & Stepleman, 2017; Heck et al., 2013). It is the experience of this level of stress that encourages minorities to seek mental health treatment to develop the necessary coping skills to survive (Heck et al., 2013). Budge, Israel, and Merrill (2017) expanded the description of minority stress to include the anticipation and internalization of societal stigma and negative beliefs. Heck, Flentje, and Cochran (2013) indicated that stigmatization of minorities, specifically sexual minorities, represents the invalidation perpetuated by societal beliefs. Affirmation and validation are crucially important to the provision of competent counseling with sexual and gender diverse populations (Heck et

al., 2013). Safe, supportive, and affirming environments are also the pinnacle of care for sexual and gender diverse clients in counseling (Moe et al., 2015).

To achieve these important tasks in diversity counseling, counselors are encouraged to be deliberate and intentional in their efforts to validate and affirm the experiences of diverse clients (Skerven & Aubin, 2015). Work with sexual diverse clients experiencing internal homonegativity must include a validation of the experience of the harmful effects of bias, discrimination, and stigmatization, as well as a normalization and recognition of the intersection of the multiple identities of the individual (Skerven & Aubin, 2015). Affirmative counseling includes recognition of the challenges of living as a minority in this society; admiration for working to develop the coping skills necessary to manage high levels of stress; appreciation for the positive contribution of diversity; and realization that diverse individuals are invaluable to our society (Heck et al., 2013).

Gender diverse individuals experience higher rates of negative mental health outcomes when compared to their sexual diverse counterparts (Budge et al., 2017). Unfortunately, counseling that is safe, competent, and affirming continues to elude the gender diverse population (Moe et al., 2015). Furthermore, when seeking mental health services to mitigate the challenges of life as gender diverse individuals, they engage in treatment that is ill-equipped to meet their specific needs (Budge et al., 2017). Converse to their counterparts, affirming practitioners understand sexual and gender diverse identity as normal (Heck et al., 2013). Although researchers and practitioners in the field of mental health continue to make positive advancements for diverse populations

regarding affirmative service provision, progress continues to lack for the gender diverse population and individuals with multiple minority statuses (Ratts, 2017).

Affirmative counseling environments include the client in treatment as the expert of “his/her/hir” experience (dickey & Loewy, 2010, p. 238). In addition, affirming counselors utilize intake processes that convey sensitivity that increases the positivity of the therapeutic alliance (Avera et al., 2015; Bidell & Stepleman, 2017; Donatone & Rachlin, 2013). The authors indicated the counselors use of preferred language and awareness of the gender diversity issues creates safety that increase the client’s comfort with the therapeutic relationship (Avera et al., 2015; Bidell & Stepleman, 2017; Donatone & Rachlin, 2013). Avera, Zholu, Speedlin, Ingram, and Prado (2015) introduced the use of a wellness model for treatment with transgender clients as an alternative to deficit-based medical models that are harmful to gender diverse clients. The wellness model incorporates strength-based approaches to “depathologize” gender diverse identities (Avera et al., 2015, p. 282). The authors also suggest the use of the wellness model to rid the counselor of pathologies, biases, and harmful beliefs about gender diversity (Avera et al., 2015).

Counseling with gender diverse individuals is transitioning from harmful, pathologizing, incompetent practice due to a shift in the realization that safe, affirming, and competent practices are key components of positive counseling experiences for this population (Singh & Burnes, 2010b; Avera et al., 2015). The ACA guides the work of counselors using ethical standards for practice (ACA, 2014). These standards, however, conflict with the field’s current desires for professionals to engage in affirmative

counseling with the gender diverse population (Avera et al., 2015). Unfortunately, the mental health profession covertly perpetuates systematic discrimination of this group with contradictions. The current diagnostic marker used to describe gender diverse individuals, gender dysphoria, is an example of continued stigmatization with the use of pathologizing terms (Avera et al., 2015). Yet, ACA guidelines encourage counselors to do no harm and honor the unique diversity of all client populations (ACA, 2014), but diagnosing a gender diverse client with gender dysphoria disorder has deleterious effects that could be irreparable (Avera et al., 2015; Campbell & Arkles, 2017).

Barriers to Competent Counseling

Counseling competencies, guidelines, and standards. The creators of the original Multicultural Counseling Competencies (MCC) helped shape the future of efficacy and competence in counseling with minority populations (Sue, Arredondo, & McDavis, 1992). Specifically, these competencies informed the development of the current *ACA Code of Ethics* (ACA, 2014) and competencies for specific minority groups including sexual and gender diverse populations (Ratts, Singh, Nassar-McMillan, Butler, & McCulloch, 2016). Although standards, guidelines, and competencies exist, many agencies fail to adopt and incorporate them into their organizational policies (Salisbury & Dentato, 2016). Professional counseling competencies, standards, and guidelines must be implemented with efficacy to meet the counseling needs of the changing landscape of the American population (Ratts et al., 2016).

The Multicultural and Social Justice Counseling Competencies (MSJCC) were designed to guide counselor's practice with diverse clients and challenge counselors to

engage in competent counseling and advocacy activities on behalf of diverse clients (Ratts, 2017). The MSJCC offer counselors an opportunity to enhance their competence with diverse populations, but strategies for practical application of these new competencies were just recently introduced to the field (Ratts, 2017). The author admitted that counselors must first engage in training to understand and then gain the ability to implement the competencies effectively. In addition, further investigation is necessary to determine the usefulness and effectiveness of the strategies for practical implementation of the MSJCC (Ratts, 2017).

The Association for Lesbian, Gay, Bisexual, and Transgender Issues in Counseling (ALGBTIC) created competencies to promote and ensure affirmative practice with sexual and gender diverse populations (Moe et al., 2015). The *ACA Competencies for Counseling with Transgender Clients* feature specific counseling competencies for clinical work with the gender diverse population (ACA, 2010). These competencies feature an explicit denouncement of deplorable acts of reparative, reorientation, and other processes incongruent with affirmative therapy (Taskforce et al., 2013). The World Professional Association for Transgender Health Standards of Care (WPATH-SOC) are international standards developed for professionals in all fields working with the gender diverse population (Sangganjanavich & Headley, 2013). After several revisions, the WPATH-SOC remain focused on providing a set of standards and guidelines for professionals to support gender diverse individuals in their efforts to “achieving lasting personal comfort with their gendered selves” (WPATH, 2012, p. 1).

Gender transition is another aspect that reinforces the need for gender diverse individuals to engage in counseling services. The most recent version of the WPATH-SOC were updated to exclude the requirement of engagement in psychotherapy a minimum of three months for gender diverse clients seeking sexual reassignment surgery because it was viewed as a gatekeeping practice with a negative impact on the therapeutic relationship (Avera et al., 2015; Budge et al., 2017). However, during gender transition, individuals experience psychological, social, emotional, and physical changes that impact their psychological well-being (Campbell & Arkles, 2017; Sangganjanavich & Headley, 2013). The multifaceted transition process takes time, sometimes several years, and gender diverse individuals choosing this path may lose social and familial support along the way (Sangganjanavich & Headley, 2013). These losses encourage gender diverse individuals engaging in the transition process to seek professional emotional support, thus competent counselors must be available and accessible for this deserving population (Sangganjanavich & Headley, 2013).

Budge et al. (2017) indicated that current attempts to use traditional therapeutic interventions with sexual and gender diverse populations are based on data acquired through research with other minority groups, including people of color. Clinical skills utilized with sexual and gender diverse groups must be specific to the needs of these populations and based on current ethics, guidelines, and standards developed to ensure competent service provision (Bidell & Stepleman, 2017; Singh & Burnes, 2010b). Researchers criticized this requirement because of the lack of concrete explanation regarding how to competently and practically implement open, safe, and affirming

practice (Moe et al., 2015). For example, competency E. 5. requires competent counselors to utilize “ language, techniques, and interventions that affirm, accept, and support” (Taskforce et al., 2013, p. 16), but there is no mention of the specific language, techniques, or interventions that are effective.

Counselors in training may initially have difficulty recognizing or implementing affirmative actions in counseling with sexual and gender diverse clients (Moe et al., 2015). As a result, counseling trainees are ill-equipped to engage in competent practice with sexual and gender diverse populations (Fredriksen-Doldsen, Hoy-Ellis, Goldsen, Emler, & Hooyman, 2014). The competencies do, however, indicate the need for counselors to continue acquiring education and training to develop the competence necessary to serve sexual and gender diverse populations (Taskforce et al., 2013). To ensure these tasks are attainable, counseling ethical guidelines promote multiple methods to develop necessary competence, including supervision, consultation, and continuing education (Campbell & Arkles, 2017).

The counseling relationship. Counselors who overlook or are unaware of the negative impact of societal oppression gender diverse individuals experience are prone to detach these challenges from the client’s purpose for seeking treatment (Moe et al., 2015). Engagement in affirmative treatment requires counselors to first understand how societal discrimination and stigmatization create negative psychological well-being for sexual and gender diverse populations (Bidell & Stepleman, 2017; Heck et al., 2013). Heck et al. (2013) described these negative experiences as a repetitive occurrence, just because sexual and gender diverse individuals seek to exist in the world. For example, sexual and

gender diverse populations experience an increase of stress resulting from life in regions where barriers exist against civil liberties and legal benefits available to others (Heck et al., 2013). Therapeutic settings must provide a safe space and opportunities for gender diverse clients to experience equality and basic human rights (dickey & Loewy, 2010).

Sexual and gender diverse individuals experience of societal discrimination and stigmatization increases hypervigilance and awareness to signs of bias, especially in the counseling environment (Heck et al., 2013). Gender diverse individuals view counseling as another genderphobic environment, creating hesitation and discouragement in a population that needs such services (Salisbury & Dentato, 2016). Especially when service provision is incorporated into and based on treatment for other minorities, such as people of color and sexual diverse individuals, blatantly disregarding the unique needs of the gender diverse community (Salisbury & Dentato, 2016). Participants reminded researchers that many transgender or gender nonconforming individuals do not identify with or choose to be included with the sexual diverse community (Salisbury & Dentato, 2016). The combining of lesbian, gay, bisexual, and transgender issues is another microaggression and discriminatory act imposed on gender diverse clients in the realm of counseling (Campbell & Arkles, 2017; Salisbury & Dentato, 2016).

At times, sexual and gender diverse clients choose not to disclose their identity at all for fear of oppositional or discriminatory treatment by service providers (Bidell & Stepleman, 2017). To change counseling outcomes for the gender diverse community, counselors must become aware of the challenges this population experiences in therapy, including discrimination and bias in therapeutic interactions that foster feelings of

mistrust, skepticism, and caution regarding the counseling relationship (Avera et al., 2015). The counselor's lack of awareness of gender-based discrimination and gender diversity issues perpetuates a minimization of the gender diverse experience and reduces empathic responses to their needs (Salisbury & Dentato, 2016). When asked, gender diverse clients prioritized what they need from mental health providers as an increased awareness of the community to promote sensitivity, an increase in the availability of competent services and services overall, as well as an increase in affirmative counseling environments and experiences (Salisbury & Dentato, 2016).

The counselor. The increasing number of self-identified gender diverse individuals in the United States and the negative impact of life in a bias, discriminatory, and stigmatizing society signifies the likelihood of gender diverse individuals seeking counseling (Avera et al., 2015; Bidell & Stepleman, 2017; Budge et al., 2017). Thus, counselors are prone to encounter this population in practice at some point in their professional experience (Moe et al., 2015). Nearly a decade ago, dickey and Loewy (2010) encouraged counselors to engage in ongoing training and educative experiences to increase understanding and knowledge necessary to support the mental wellness of the gender diverse population. However, the current lack of awareness, knowledge, and skills exposes the need for the continuing professional development of counselors serving gender diverse populations (Avera et al., 2015; Ratts, 2017).

Counselor bias and personal values. Bidell and Stepleman (2017) highlighted disappointing disparities that exist among mental health practitioners serving sexual and gender diverse populations. While the counseling field has shifted to the creation of

affirmative and inclusive environments for these populations, mental health professionals continue to carry biases, prejudices, and attitudes that reduce their competence with sexual diverse clients (Bidell & Stepleman, 2017). These deeply held biases and beliefs often compel mental health providers to refuse services to sexual diverse individuals and support legislature that limits or removes civil liberties for this population (Bidell & Stepleman, 2017).

Counselor engagement in treatment with gender diverse clients is colored by cultural, historical, and personal contexts (Moe et al., 2015). The authors assert that a counselor's practice with sexual and gender diverse populations either supports or challenges the status quo regarding the lack of competence and awareness of self-fulfilling biases that historically plague the profession (Moe et al., 2015). Biases held by counselors regarding sexual and gender diverse individuals are heteronormative or cisgender biases, respectively (Moe et al., 2015). According to Moe, Finnerty, Sparkman and Yates (2015), heteronormative, or heterosexist biases refer to the beliefs that normal relationships are monogamous interactions between heterosexual partners for the purposes of procreation. Similarly, the authors provide an explanation of gender biases that include the belief that gender is a binary that includes male and female physical, psychological, and personality-based traits that are specific to each gender, only (Campbell & Arkles, 2017; Moe et al., 2015).

Occurrences of sexual or gender identity outside of these beliefs are the result of psychological illness, medical issues, or abnormal (Moe et al., 2015). These biases manifest in overt or covert outputs through societal discrimination or unattended

microaggressions (Moe et al., 2015). Authors Dickey and Loewy (2010) asserted that it is not the gender diverse client who is suffering from illness, rather the challenges lie with society and mental health professionals who rigidly hold on to gender binaries that exclude this population. For example, providers who promote the development of legislation to limit or deny gender diverse individuals access to the same health care afforded to their cisgender counterparts (Campbell & Arkles, 2017). The multiple layers and facets of bias regarding sexual and gender diverse populations require counselors to assess, continually reexamine, and maintain awareness of personal bias regarding these populations to ensure affirmative practice (Ratts, 2017).

Understanding one's self, both personally and professionally, is a critical step in the process of becoming a competent counselor (Ratts et al., 2016). To do this, the authors suggested that counselors survey themselves to determine what values, beliefs, and biases exist; this is an ongoing career and lifelong process to become a competent counselor (Ratts et al., 2016). Several assessments are available for counselors to effectively engage in self-inquiry to gain an understanding of biases that might exist prior to engaging with sexual or gender diverse clients (Moe et al., 2015). Knowledge of how these biases impact the counseling process and influence counseling outcomes is the next important step in developing counseling competence (Ratts et al., 2016).

Counselor knowledge. The act of counseling requires the practitioner to understand the client's perspective and desire for counseling (Collins, Authur, Brown, & Kennedy, 2015). Failing to acquire such understanding about the client, their life, and worldview is detrimental to the client, the counselor, and the therapeutic relationship

(Collins et al., 2015). The acquisition of awareness, knowledge, and skills allows the counselor to interact with minority clients from an informed perspective; understanding the impact of discrimination, stigma, and oppression on the counseling relationship (Ratts et al., 2016). Learning and awareness of one's worldview and cultural perspective allows the counselor to mitigate challenges that arise when cultures collide and cause difficulties in the counseling relationship (Collins et al., 2015). Counselors engaging in the change process with diverse clients must recognize the privilege and power differential embedded within the counselor-client relationship and develop the ability to mitigate these factors (Ratts et al., 2016).

A lack of knowledge inhibits counselors from engaging in competent service provision with gender diverse clients (Avera et al., 2015). A survey of mental health providers revealed that over a quarter of the participants were unfamiliar with the issues and unique mental health needs of the gender diverse population (Campbell & Arkles, 2017). Similarly, other mental health service providers admitted a lack of understanding regarding how to acquire and implement knowledge about the gender diverse community (Salisbury & Dentato, 2016; Singh & Burnes, 2010a). In their study, Salisbury and Dentato (2016) indicated that providers shared a lack of continuity of knowledge regarding how to create a gender-friendly intake process, including the use of affirmative assessments, language, and how to engage in data collection. It is imperative that counselors apply the awareness and knowledge they gain in the process of developing competence in the form of counseling skills (Ratts et al., 2016). The difficulty exists when practitioners attempt to acquire the knowledge necessary to practice competently,

while also engaging in service provision with populations requiring a specialty approach (Campbell & Arkles, 2017).

Counselor education and training. Budge et al. (2017) indicated that current attempts to use traditional therapeutic interventions with sexual and gender diverse populations are based on data acquired through research with other minority groups, including people of color. Clinical skills utilized with sexual and gender diverse clients must be specific to the needs of this population and based on current ethics, guidelines, and standards developed to ensure competent service provision (Bidell & Stepleman, 2017; Singh & Burnes, 2010b). Researchers criticized this requirement because of the lack of concrete explanation regarding how to competently and practically implement open, safe, and affirming practice (Moe et al., 2015). For example, competency E. 5. requires competent counselors to utilize “ language, techniques, and interventions that affirm, accept, and support” (Taskforce et al., 2013, p. 16), but there is no mention of the specific language, techniques, or interventions that are effective.

Counselors in training may initially have difficulty recognizing or implementing affirmative actions in counseling with sexual and gender diverse clients (Moe et al., 2015). As a result, counseling trainees are ill-equipped to engage in competent practice with sexual and gender diverse populations (Fredriksen-Doldsen, Hoy-Ellis, Goldsen, Emler, & Hooyman, 2014). The competencies do, however, indicate the need for counselors to continue acquiring education and training to develop the competence necessary to serve sexual and gender diverse populations (Taskforce et al., 2013). To ensure these tasks are attainable, counseling ethical guidelines promote multiple methods

to develop necessary competence, including supervision, consultation, and continuing education (Campbell & Arkles, 2017). Meeting the unique needs of the gender diverse community requires mental health providers to acquire evidence-based training and guidance (Budge et al., 2017; Campbell & Arkles, 2017).

The absence of evidence-based training and guidance perpetuate a biased, microaggressive, unsafe clinical environment for this group (Budge et al., 2017). In addition, specific standards for education and training to increase competence in practice with sexual and gender diverse populations do not yet exist (Troutman & Packer-Williams, 2014). At present, the existing competencies, research, and literature merely suggest the inclusion of sexual and gender diversity competencies and standards in counselor education and training settings (Avera et al., 2015). The current counselor training standards from CACREP regarding counselor competence with diverse populations does not specify training standards and competency for counselor training on sexual and gender diverse populations (Troutman & Packer-Williams, 2014). The authors encourage counselor educators to use the current standards as a foundational guide, but emphasize counselor education and training as an opportunity to enhance the competence and ability of counselor trainees to work with sexual and gender diverse populations by specifying affirmative strategies and interventions for work with this population (Troutman & Packer-Williams, 2014).

Salisbury and Dentato (2016) queried seven mental health service providers who indicated a desire for education and training to enhance their understanding of sexual and gender diverse populations. The researchers revealed that budgetary challenges for some

agencies led to the hiring of staff without the necessary education or training to engage in counseling at all (Salisbury & Dentato, 2016). The participants admitted that the lack of education and training, specifically focused on the needs of the vulnerable population they serve (Salisbury & Dentato, 2016). When asked, mental health providers working with gender diverse clients prioritized their needs to provide competent services as education and training, increased collaboration with other service providers, and updated policies that include the needs of the gender diverse community (Salisbury & Dentato, 2016). Incorporating the transgender competencies into counselor education and training about the gender diverse population will encourage counselor understanding of issues impacting the gender diverse community, promote learning about affirmative practices, and increase awareness of gender-based biases to enhance the effectiveness of counseling with this group (Avera et al., 2015).

Summary and Conclusion

Overall, the climate of professional counseling with gender diverse clients has evolved past the era of reparative therapies and we are steadily moving towards a time when counselor competence will sufficiently meet the needs of this population. The current literature on this topic features the damaging experiences of gender diverse individuals when engaging in therapeutic interactions. However, the literature has begun shifting to highlight the disconnection between the availability and application of competencies that were developed to ensure the affirmative experiences of the gender diverse population in counseling. A need still exists to understand the lived experiences of professional counselors who serve gender diverse individuals to illuminate this

experience and discover new information to close this gap in the field. In this study, I met this need through the exploration, interpretation, and derivation of the meaning of the phenomenon of counselors engaging in counseling with gender diverse clients.

Chapter 3: Research Method

My purpose in this her meneutic phenomenological study was to illuminate the lived experiences of professional counselors engaging in counseling with gender diverse clients and bridge the gap in the current literature. Phenomenology is the process of bringing to life the meaning of human experience through observation, description, and interpretation (van Manen, 2016). The hermeneutic process allows the researcher to make sense of one's experience based on preexisting values and knowledge (Ho et al., 2017). Currently, there is a lack of information regarding the lived experience of service provision and care in health-related research (Spence, 2017).

My study provides additional insight regarding the lived experience of counseling with gender minorities by interpreting multiple examples of rich data gained from independently practicing professional counselors with this unique experience. In this chapter, I will provide a detailed explanation of the research design and rationale, as well as explain the role of the researcher, and a detailed account of the methodology I used to analyze the data. I will also discuss issues of trustworthiness including credibility, dependability, and ethical procedures.

Research Design and Rationale

Through the proposed research, I discovered the lived experiences of professional counselors engaging in counseling with gender diverse clients. Chang, Singh, and Rossman (2017) indicated that gender diversity refers to individuals who identify outside of the gender binary system, which “ assumes that all people fall into categories of either male/man/masculine or female/women/feminine” (p. 20). Interpreting these experiences

provided new insights on counseling with the gender diverse population and illuminated the meaning of this experience by answering the question: What are the lived experiences of independently practicing counselors who counsel gender diverse clients? The problem, purpose, and research question fit with phenomenological inquiry due to the goal of understanding and exploring the experiences of the participants (Patton, 2015).

Phenomenological methodology focuses on determining the meaning a group of people ascribe to a phenomenon they experience (Pistrang & Barker, 2012). This process is done either through transcendental phenomenology, which is descriptive, or hermeneutic phenomenology, which is interpretive (Sloan & Bowe, 2014). Regardless of the specific method, phenomenological researchers engage participants in interviews by asking each participant about their experience of a specific phenomenon (Patton, 2015). In phenomenological research, data analysis begins with gathering information then developing clusters of meaning, or codes, from the transcripts of participant experience (Patton, 2015). Clusters of meaning either provide descriptive themes or the researcher interprets the participant experiences to uncover the meaning of experiencing the phenomenon for the group of participants (Patton, 2015).

Current experiential research focusing on gender diverse individuals feature the voice and experience of counseling clients with a nonbinary gender identity. This exploration illuminates the experiences of professional counselors who engage in counseling with gender diverse clients to uncover and understand their views, perspectives, and beliefs about counseling with gender diverse individuals (Hunt, 2014). The research question is open-ended allowing for the experiences of the participants to

become the focus of the research and bring forth themes that will inform the meaning of this experience (van Manen, 2016). I used hermeneutic phenomenology to interview professional counselors to understand their views, perspectives, and beliefs about counseling with gender diverse clients and interpret the meaning of their experiences. After completing data collection, I used coding practices to discover and identify themes, or structures of experience (Sloan & Bowe, 2014).

Next, I transformed the interpretation of these themes into hermeneutic reductions to illuminate the meaning for each participant (Sloan & Bowe, 2014). For example, themes such as lack of preparation to work with gender diverse clients, as well as themes of self-motivation to seek education and training to build competence to serve the gender diverse population emerged. An example of a hermeneutic reduction of these structures of experience is that after beginning counseling with gender diverse individuals, professional counselors lived experiences motivated them to seek additional training due to feelings of inadequacy regarding their preparedness to serve this population.

Role of the Researcher

Qualitative design and methods allow researchers to discover, analyze, and share the meaning of participant experiences (Sloan & Bowe, 2014). First, however, I sought to discover the preunderstanding I possess that would inform my interpretation of each participant's experience (Spence, 2017). For example, I gathered my knowledge of the topic based on my understanding of the literature and personal experiences. Spence (2017) suggested novice hermeneutic researchers engage in self-inquiry to understand their closeness to the topic by asking questions such as, "How did you become interested

in the topic?" (p. 838). Thus, the researcher and participant coconstruct meaning (Sloan & Bowe, 2014). As a researcher, I have knowledge of the literature regarding the life and counseling experiences of gender diverse individuals. As a counselor, I have experience counseling gender diverse clients, as well as engaging in education and training to develop competence with this population. I became interested in this topic because of the multiple incidence of violence among gender diverse individuals in my community, as well as my awareness of transprejudice and lack of knowledge among professionals and service providers in the community. As a hermeneutic researcher, I used my "background, prior knowledge and experience of the research subject to influence the process of data gathering" (Sloan & Bowe, 2014, p. 1298).

After gaining a meaningful understanding of my presuppositions regarding the topic, questions emerged from my *Dasein*, or there-being, understanding and experience of the topic (Miles et al., 2013). I included these questions in a semi-structured interview that provoked participant responses to answer the main research question in the interview protocol (Appendix B). In turn, the participants were responsible for consenting to engage in the study and sharing their experience of the phenomenon to supply the data necessary for interpretation. It is in this way that the participant responses dictated the outcome of the research (Patton, 2015). The strength of qualitative phenomenology lies in the ability of the researcher to become a part of the meaning-making process as the instrument and elicitor of experiential responses, as well as the ability of the participant to provide the content of their lived experience for interpretation (Spence, 2017).

Methodology

Participant Selection

Phenomenological researchers focus on capturing and interpreting the participants lived experiences (Patton, 2015). Purposeful sampling is the process of selecting participants and settings that can inform understanding of the research problem and phenomenon of focus (Robinson, 2014). Thus, the sample for my research included carefully selected professional counselors who engage in counseling with gender diverse clients to understand the experiences of this specific group. The careful selection includes crucial decisions regarding the sample that could alter issues of consent and sample size (Walshe, Ewing, & Griffiths, 2011). Robinson (2014) developed a four-point approach to qualitative sampling that includes decisions for solidifying sample universe, sample size, sample strategy, and sample source.

The purposeful sampling strategy that I used is cell sampling. Cell sampling is a strategy that provides a series of categories that each participant would fall into during sampling (Robinson, 2014). In cell sampling, the categories can overlap, hopefully providing a more diverse, inclusive sample (Robinson, 2014). Experience is an identifying characteristic of competent mental health professionals who work with gender diverse individuals (Dispenza & O'Hara, 2016); thus, a category featured in my cell sample was professional counselors who have 5 or more years of experience post independent licensure and a lived experience of counseling with gender diverse clients. The category for professional counselors included licensed professional counselors with the highest level of licensure indicated by the completion of required education and

training to obtain licensure and their ability to practice independently, or without required supervision. This sampling criteria made it possible to obtain the desired number of participants.

Qualitative inquiry does not require a large sample size because the goal is not to generalize the results of the research to the rest of the population, but to gain valuable information about a population and the phenomenon of focus (Patton, 2015). A goal of qualitative inquiry regarding sample size is to gain the number of participants to ensure enough information is captured to develop an in-depth understanding of the participant's experience (Dworkin, 2012). Thus, saturation is deemed the best indicator for sample size (Dworkin, 2012). Data saturation occurs when the data provides no new insights, actions, behaviors, or practices (Bloomer, Endacott, O'Connor, & Cross, 2013). I obtained a sample of seven participants to ensure intensive analysis and data saturation occurred (Dworkin, 2012; Robinson, 2014).

The data collection process necessitated my engagement in snowball sampling to ensure I obtained the desired number of participants necessary to reach saturation. Snowball sampling is a participant recruitment method based on participant referrals (Robinson, 2014). Using this method, participants recommended colleagues who would meet the criteria and possibly be willing to participate in the study (Robinson, 2014). Snowball sampling proved useful for my study as some of the initial potential participants were hesitant to respond to an email requesting participation in a study (Robinson, 2014).

The participants were made aware of the aim of the study, the duties of participation, and all other information that ensured they participated based on an informed decision (Robinson, 2014). Participants understood that they had the option to opt out of the study at any time (Bloomer et al., 2013). Participants received a letter explaining the study and informed consent via email. The letter featured the informed consent and a request that they respond to the email with the words “I consent” before engaging in the study. If the counselor chose to participate, they responded to the email providing consent and their availability to participate in an interview. In addition, the researcher reviewed the informed consent with the participants before the interview commenced.

Data Collection

Interviewing is a common and useful depiction of the communication between the interviewer and interviewee (Sloan & Bowe, 2014). An interview is a primary method for collecting data and begins with developing open-ended interview questions based on the central focus of the research (Sloan & Bowe, 2014). Developing interview questions that will provoke participant responses to illuminate the meaning of their experience is crucial (Sloan & Bowe, 2014). According to Heidegger, developing and asking the right questions will “reveal the hidden meaning of the experience” (Miles et al., 2013, p. 410). I used semistructured interview questions. Semistructured interviewing allows the researcher to begin the data collection process with a structured set of questions based on the literature (Corbin & Strauss, 2015). Heidegger (2013) believed that inquiry and thought emerges from one’s being-in-the-world. As a Heideggerian hermeneuticist, I

developed semi-structured interview questions based on my assumptions, my experience of the phenomenon, and my knowledge of the literature.

Semistructured interviewing also provides an opportunity for follow-up questions and the option to gain additional information from participants (Corbin & Strauss, 2015). Challenges with this approach are the researcher's ability to remain open to additional information from participants and maintaining awareness that participants may have additional information to add but have not because the research did not provide opportunities for them to do so (Corbin & Strauss, 2015). Openness to the possibility of a change in the understanding of a phenomenon leads the researcher to openness regarding the interpretation of a phenomenon (Spence, 2017). Spence (2017) suggested that developing and maintaining an openness to new interpretation of phenomenon "requires a rigorously, reflexive process of ongoing reading, listening, thinking, questioning, and writing" (p. 839), repetitively. This cyclical hermeneutic journey leads the researcher to form new interpretations of the participants experience and the phenomenon (Spence, 2017).

Research participants indicate that their experience of qualitative interviewing is both challenging and positive and regard the process as an opportunity to tell their stories for the benefit of others (Wolgemuth et al., 2015). Qualitative interviewing occurs in a myriad of ways including telephonic, text-based, and face-to-face. Face-to-face interviews offer the researcher and participant an opportunity to use non-verbal body language to convey feelings or express emotion (Briggie, Hilsenroth, Conway, Muran, & Jackson, 2016). Although researchers benefit from observing the non-verbal

communication of participants, the researcher's nonverbal behaviors also have an impact on participants. Nonverbal responses of the researcher can lead the participant in one direction or another-thus researchers must remain aware of this possible drawback of engaging in face-to-face interviews (Corbin & Strauss, 2015).

Robinson (2014) highlighted the positives of using the Internet to engage participants in virtual interviews to engage with participants at a distance, but without the cost of travel. Challenges of virtual interviewing included missed nonverbal cues and technological issues (Pearce et al., 2014). Regarding this study, the benefits of engaging in virtual face-to-face interviews outweigh the risks. The use of virtual face-to-face interviews reduced travel costs, saved time, and allowed for inquiry with participants living in a wide range of geographical locations. I scheduled virtual face-to-face interviews and worked to mitigate any technological challenges that could arise prior to commencing the interview. To do this, I engaged in an Internet connection test with participants before the scheduled interview to address any technological issues.

For this study, I recruited seven professional counselors with a lived experience of counseling gender diverse clients. During my participation at local and national professional counselor conferences, I acquired the contact information, including email addresses, of counselors interested in the research topic. I contacted each potential participant, whose email addresses I acquired through networking at conferences, by email using a participant recruitment letter (Appendix A) and provided information about the research and purpose of the interview, as well as consent forms (Appendix B) to review and respond with consent before the start of the interview. After receiving

confirmation of consent from the participant, I sent another email featuring a link to a demographic survey, to ensure the potential participant met the criteria for participation, and a scheduling tool with several dates and times to select based on availability to participate in the interview.

Once the interview commenced, I used an interview protocol (Appendix C) to review the research purpose with each participant to ensure understanding of the research purpose, process, and clarify questions before beginning the interview (Laureate Education, Inc., 2010b). Once the interviews were complete, I engaged the participants in a reflexive debriefing process called holistic debriefing to allow participants an opportunity to make sense of their experiences, emotions, frustration, and reactions to situations through engagement in self-reflective questioning and feedback (Moldjord & Hybertsen, 2015).

The holistic debriefing process provides opportunities to glean information and learn from the participants experiences in preparation for future interactions (Moldjord & Hybertsen, 2015). Specifically, I asked participants about their interviews, allowing them an opportunity to give feedback and make sense of the interview experience. The holistic debriefing questions included: (1) How did you experience the interview? (2) What did you learn from the interview? (3) What do you need after completing the interview? I used the information gleaned from the debriefing to meet the expressed needs of the participant, as well as inform subsequent interview experiences with future participants. I completed the interview process by thanking the participants and indicating that I would

contact them to schedule a follow-up interview if further information or clarification of the data is needed.

Data collection will produce large amounts of information that require organization so that the information gained through inquiry is useful (Patton, 2015). Since I captured the experiences of participants through interviews, which are rare instances that cannot be reproduced or duplicated in the same way, it is important to protect the data through electronic backup files, copies, and secured storage (Patton, 2015). After completing the interview, recording, and transcription process, I saved the information electronically and made duplicates of the information for myself and the participants to ensure the process remains ethically sound (Patton, 2015). In addition, the electronic files were data encrypted with passcodes to ensure the safety of the information (Patton, 2015).

Transcribing interviews provides yet another layer of information connecting the exchange between the interviewer and interviewee (Patton, 2015). Transcription moves the researcher from data collection towards data analysis and when done by the researcher provides opportunities for immersion (Patton, 2015). Once the interviews are complete, I transcribed the interviews myself to make connections to the voice and experience of the participants. Transcribing each interview helps the researcher engage in meaning-making that allows the meaning of each participants' experience to emerge (Albright, Duggan, & Epstein, 2008). Specifically, the hermeneutic researcher reflexively engages with each transcript by asking questions of the data and allowing interpretations to emerge (Spence, 2017).

Data Analysis Plan

Goals of the hermeneutic research process are to highlight important aspects of the human experience, interpret the experience based on the interpretation of the personal experience and knowledge of the researcher, and make sense of experiences to promote further thought about the phenomenon (Crowther, Ironside, Spence, & Smythe, 2017). With these goals in mind, the interpretation of phenomena depends on the researcher engaging in a cyclical process that repeatedly blends both preexisting and novel understanding (Smith, Flowers, & Larkin, 2009). This process is the hermeneutic circle. Aspects of interpretive phenomenological analysis (IPA) coincide well with the hermeneutic researcher's iterative cycle of meaning making. For example, the IPA process requires the researcher to follow the movement of the data and emerging meaning, rather than relying on the steps of the process (Smith et al., 2009). Instead, the researcher must allow the data to guide movement towards interpretation (Spence, 2017).

While hermeneutic researchers are guided by the emerging data, those focused on research pertaining to sexual and gender minorities are intentional about the methods employed for data analysis (Chan & Farmer, 2017). Researchers engaging in inquiry that encompasses the unique features, needs, and experiences of sexual and gender diverse individuals and their surrounding communities conflate the rigor and humanity of qualitative research (Chan & Farmer, 2017; dickey, Hendricks, & Bockting, 2016). The IPA process provides opportunities for rigorous data analysis to help the researcher formulate an understanding of the experience of the participants and capture the meaning

that emerges through this process (Chan & Farmer, 2017). I used three major steps of the iterative IPA process: reflexivity, coding, and theme identification.

Reflexivity. Once the interviews were complete, I listened to the recorded interviews to make connections to the voice and experience of the participants. For each piece of data, I began the data analysis process by listening to the interview recording, starting with the most in-depth interview (Smith et al., 2009). While listening, I engaged in free coding, the process of taking notes on my experience as I listen to the recording (Chan & Farmer, 2017). Next, I began transcribing the interview recording.

Transcribing interviews provides yet another layer of information connecting the exchange between the interviewer and interviewee (Patton, 2015). Transcription moves the researcher from data collection towards data analysis and when done by the researcher provides opportunities for immersion (Patton, 2015). After transcribing each interview, I read the transcriptions at least three times. Reading and rereading the interview transcript allows the researcher to actively engage with the data and observe meaning emerge (Chan & Farmer, 2017). While reading each transcript, I continued engaging in free coding. Documenting observations while reading the interview transcript helps to slow down the process of analysis to help the researcher develop a deeper connection to the world of the participant (Smith et al., 2009).

Coding. The reflexive process of reading, rereading, and free coding leads to coding (Smith et al., 2009). While free coding, I engaged in line-by-line analysis, examining the transcripts for concepts of importance to the participants, as well as the meaning participants attributed to these concepts (Chan & Farmer, 2017). This process of

line-by-line coding leads to the generation of interpretations that make meaning of the participant's experience (Chan & Farmer, 2017). This strategy is also a way to derive words of importance to the participant regarding the phenomenon (Chan & Farmer, 2017). I also coded using words that best describe the information based on what I expected to find, as well as themes unique to the research (Smith et al., 2009). Doing this allowed me to identify themes to categorize each of the codes, or meaning units to form an interpretation (Chan & Farmer, 2017).

After completing the manual coding process, I used analysis software, NVivo, as a means of further connecting with the data and continued facilitation of the data storage, comparison, and linking processes (Patton, 2015). Software analysis eases the process of labeling, coding, and comparing data; however, the software does not analyze or interpret the information (Patton, 2015). The researcher is still responsible for naming the codes, deciding which codes fit each category, and how to interpret the findings (Patton, 2015). NVivo offers researchers the ability to store the data, easily manipulate the codes, and develop visual representations of the data that support the themes that emerge, as well as engage in continuous constant comparison as new themes emerge (Leech & Onwuegbuzie, 2011). The researcher's access and connection to the data, their knowledge about the topic, and participant meaning lead to interpretive thoughts and themes (Smith et al., 2009).

Themes. The next step in analysis is to synthesize the emergent themes in search of meaning amid the participant's words (Spence, 2017). Synthesis of emerging themes requires grouping shared meaning derived from each data set (Chan & Farmer, 2017).

This synthesis is the interpretation of the part in relation to the whole and vice versa, representing the hermeneutic circle (Smith et al., 2009). Considering the hermeneutic circle, the themes derived reflect both the participant's experience and words, but also researcher's interpretation (Smith et al., 2009). From this step, all the data is organized so that one can trace alignment from the initial interview, to the development of meaning units, to the finalization of themes (Smith et al., 2009).

Trustworthiness

Quality of the research and the research process is an important aspect of hermeneutic phenomenology (Kafle, 2011). Credibility, transferability, dependability, and conformability are markers of quality qualitative inquiry (Kafle, 2011).

Credibility

Asserting one's research goals, design, and methodology secure the credibility of the data (Williams & Morrow, 2009). A benefit of qualitative research is the ability to provide a thoughtful description of the method to inform the reader of the credibility of the work (O'Connor, 2011). Providing a detailed description allows other researchers to replicate the study with other populations and increase the credibility of the findings (Lee, 2014). Thus, my description of the research process and methodology provide clear examples of the quality of the data collected (Williams & Morrow, 2009). The integrity of the data also enhances with the use of specific participant words to convey their experience to interpret the meaning of their experience (Sloan & Bowe, 2014).

Using credible sources while engaging in research and writing enhances one's credibility as a scholar-practitioner (Beins & Beins, 2012). One way to determine the

credibility of a source or resource is to question the origin of the source (Bush, 2009). Is the source second-hand information that was featured in someone else's work and did the source go through a rigorous editing and approval process (Beins & Beins, 2012)? These questions, and more, help researchers decide the credibility of a source. I sought only peer-reviewed or refereed sources from the research databases I used to gather resources for my literature review, as using these credible sources and resources in my work enhanced my trustworthiness and credibility as a researcher.

Transferability

The concept of transferability in qualitative research is akin to generalizability, or external validity found in quantitative research (Morse, 2015). To achieve transferability, a researcher must acquire thick, rich data (Morse, 2015). Thick, rich data occurs when the themes that emerge are plentiful and overlap, leading to recurring meaning (Morse, 2015). Increasing the sample size and ensuring the participants meet the criteria to provide appropriate data are methods for ensuring transferability (Morse, 2015). To ensure transferability in my study, I acquired the desired number of participants who meet the sample criteria and continued to recruit participants until thick, rich data and meaning emerges.

Dependability

Dependability in qualitative research equates to reliability concepts of quantitative methods (Morse, 2015). Dependability refers to the ability to replicate the study and achieve similar research findings (Morse, 2015). Member checking is a means of securing dependability through reviewing and discussing the interview transcripts with

participants (Morse, 2015). Completing this task ensures that the researcher understands and interpreted the participant's meaning correctly (Morse, 2015). In my study, I transcribed each interview and returned the transcripts to the participants. I provided opportunities to discuss the transcript with each participant for understanding, clarification, and allow for correction to solidify each participant's meaning.

Confirmability

Qualitative researchers acquire confirmability, or objectivity, in research through methods such as triangulation, audit trails, and reflexive journals (Morse, 2015). Reflexive journals provide opportunities to balance the participant's meaning and the researcher's interpretation by providing an outlet for researcher self-inquiry (Spence, 2017). Reflexive journal entries support the hermeneutic circle by reinforcing the researcher's interaction with the literature, data, and the emergence of new knowledge (Spence, 2017). I engaged in reflexive journaling to document the hermeneutic circle and increase confirmability in my research.

Ethical Procedures

Each participant's safety, privacy, and confidentiality will serve as a means of maintaining ethical soundness (Patton, 2015). Providing and reviewing the informed consent, at least once verbally, to ensure the participants understand the purpose of the study, the way the information is protected, and their right to cease participation at any time will secure the safety of each participant (Lewis, 2008; Patton, 2015). Protecting the information gathered from participants is a way to ensure their privacy is secure (Creswell, 2013). Methods for securing and storing data were decided and planned before

engaging in the interviews to assure the participant that the information they provided would remain private (Patton, 2015). Finally, to ensure confidentiality I requested that the participants omit the identities of the individuals featured in their responses, I offered the participants a copy of the transcribed interview, as well as disclosed each of the entities that will be privy to the information (Patton, 2015). Providing all this information to the participants before engaging in the research process afforded them the opportunity to make an informed decision about whether to participate in the study (Patton, 2015).

Summary

In this chapter, I provided rigorous and ethically sound qualitative research design and methodology to explore the lived experiences of professional counselors engaging in counseling with gender diverse clients. My design includes methods for participant recruitment, data collection, data analysis, and data management. I supported each aspect of my methodology with current literature and a firm justification. In the next chapter, I will implement my research design and uncover the meaning of the phenomenon of the experience of counseling gender diverse individuals.

Chapter 4: Results

This hermeneutic phenomenological inquiry illuminated the lived experiences of counselors who engage in counseling with gender diverse clients. Through data collection and analysis, I interpreted the experiences of the participants by engaging in the hermeneutic circle, requiring the conflation of my prior knowledge and experiences with the expressed experiences of the participants. I gained insights regarding the phenomenon of counseling with gender diverse clients, giving voice to the meaning of these experiences for the counselors engaging in counseling with this population.

Understanding the meaning of this experience provided the information necessary to enhance counselor education and training to include the components necessary to foster counselor competence with the gender diverse population. Illuminating, interpreting, and disseminating this information will hopefully ensure changes in counselor preparation to increase the availability of competent, positive, supportive, and affirming counseling experiences for gender diverse individuals. In this chapter, I will discuss the research setting, participant demographics, data collection, data analysis, evidence of trustworthiness, and the results of this inquiry.

Setting

Video-based software allows researchers to engage with participants and conduct qualitative interviews through virtual face-to-face meetings, although each person is in a different location (Seitz, 2016). The benefit of this technology is convenience, comfort, and cost (Seitz, 2016). Challenges to using this method to conduct interviews include technological issues, loss of audio and/or visual connectivity, and the lack of

interpersonal connection common with in-person interviews (Seitz, 2016). In my study, I provided a link for participants to schedule a virtual interview based on their availability. Once scheduled, the participants received a link to access the scheduled interview via the Zoom video conference platform. Zoom offers free, reliable, and easy to use audio and video conferencing options (About, 2018). Participants were encouraged to test the link ahead of time to ensure technological compatibility and contact the researcher for help if necessary.

Comfort and safety are imperative for participants; the use of video conferencing technology provides the opportunity for the researcher and participant to complete the interview in a private, personal space without physically intruding on each other causing discomfort (Seitz, 2016). Using the Zoom video conferencing platform allowed both the interviewer and interviewee the ability to select a safe and secure space to engage in the interview, to ensure comfort for both parties. Rapport building is crucial to obtaining in-depth, quality, and rich responses from participants (Seitz, 2016).

Researchers suggest reassuring the participant that audio, visual, and security parameters were appropriately addressed as a means of building and maintaining rapport (Haddouk, Govindama, & Marty, 2013). At the beginning of the interview, I engaged the participants in a visual and sound check, as verbally assured them I was in a private, secure location to conduct the interview. To maintain rapport with the participants, I maintained eye contact, engaged in active listening, and began with easier questions to allow the participant time to acclimate to the video conference environment. Many

participants mentioned that they were skeptical about the use of technology to conduct the interview, but relaxed after the first few questions.

Demographics

Professional Counselor

Prior to scheduling and engaging in the interview, each participant completed a demographic survey to ensure they met the research criteria. Of the 12 individuals who responded to the invitation email, only seven met the research criteria. The five participants excluded from participation held a licensure other than professional counselor, had not practiced independently for 5 or more years, or eventually declined to participate due to a lack of availability. Seven participants engaged in qualitative interviews via the Zoom video conferencing platform. Each participant met the criteria of professional counselor with independent licensure status for the state where he or she engages in counseling practice. Thus, each participant is no longer required to engage in required supervision with another licensed counselor while engaging in the practice of counseling. Each participant also met the study criteria of counseling experience for five years or more post independent licensure status. Finally, each participant confirmed experience counseling gender diverse individuals.

Geographic Location, Age, and Education

The participants reported a wide range of geographic locations where they are licensed as professional counselors. In addition, while each participant resides in the United States, each participant reported licensure and counseling practice in a different state. Participants reported holding state licensure and practicing in the following regions

of the United States: three in the Northeast region, two in the Southeast region, one in the Midwest region, and one in both the Midwest and Northeast regions. The participants represented licensure in the states of Connecticut, New Jersey, Pennsylvania, Maryland, Florida, Minnesota, and Texas. The participants ranged in age from 35 years old to 50 years old. Four of the participants reported the completion of a master's level degree in a counseling education or related program. These participants were also identified as doctoral candidates, in the process of completing doctoral level education without the conferral of a doctoral degree. Three participants reportedly identified as having a doctorate, completed and obtained a conferred degree in counseling or related program.

Gender Identity and Gender Expression

Regarding gender, two variables were designated, gender identity and gender expression. According to the Human Rights Campaign (2018), one's gender identity is an internal concept of self as male, female, both, or neither, which can either match the gender assigned at birth or not. Gender expression, then, is one's external concept of gender, typically experienced through clothing, behavior, and other observable characteristics based on the individual's subjective perspective of gender (Sexual, 2018). The participants reported the following gender identities: one participant identified as transgender, four participants identified as cisgender, and two participants did not indicate a gender identity. Of the seven participants, four participants identified their gender expression as female, two identified their gender expression as male, and one participant chose not to indicate a gender expression (see Table 1). Each participant's

name was changed to protect their identity and privacy, as well as maintain the confidentiality of the data gathered.

Table 1
Participant Gender Identity and Gender Expression

	Participants						
	Toni	August	Mae	Tanuja	Billie	Nikki	Carter
GI	--	--	Cisgender	Cisgender	Cisgender	Cisgender	Transgender
GE	Female	Male	--	Female	Female	Female	Male

Note. GI = gender identity; GE = gender expression.

Data Collection

After receiving approval from the Institutional Review Board (IRB), I began data collection. To commence data collection, I emailed my participant recruitment letter (Appendix A) to contacts I acquired through my participation at local and national professional counselor conferences. I sent this email to 37 potential participants. This effort produced one participant. This initial phase of participant recruitment necessitated my engagement in snowball sampling due to the limited number of participant responses. The sole participant recruited during the initial phase of sampling provided the contact information for colleagues and resources for potential participant recruitment. In my initial email to potential participants I included the description and purpose of the research (Appendix A), as well as attached the informed consent (Appendix B) to this email for review. Once reviewed, participants had the option to respond to the email indicating consent. Once a participant responded to the initial email stating “I consent,” I

sent a second email with the demographic survey (Appendix D) and the link to schedule a video conference meeting to complete the semi-structured interview.

Seven participants met the research criteria based on their responses to the demographic survey (Appendix D), scheduled a date and time to engage in a semistructured interview, and provided data to support this inquiry. I used a semi-structured interview protocol (Appendix C) to guide my interview with each participant. According to Smith, Flowers, and Larkin (2009), semi-structured, one-on-one interviews optimize the ability to build rapport and engage in in-depth discussion that produces rich, thick data for analysis and interpretation. Each semi-structured interview was scheduled for 90 minutes structured as follows: 15 minutes to verbally review the purpose of the study and the informed consent, 60 minutes to complete the interview, and 15 minutes for questions, to complete the debriefing process, and conclude the interview.

At the time of the scheduled interview, the participant and I accessed the link to the Zoom video conferencing platform. I reminded the participants that I was audio recording the interview for recall and transcription purposes. The use of an interview protocol provides structure and flexibility for the researcher to prepare questions that will draw rich data, while being able to listen intently to the concerns of the participant (Smith et al., 2009). The flexibility of a semi-structured interview allows the researcher to deviate from the protocol as needed to delve into the expressed concerns of the participant (Smith et al., 2009). My interview protocol (Appendix C) included 12 interview questions with prompts to encourage more in-depth responses, if needed. The debriefing process included three additional questions for self-reflection.

Once the interview was complete, I saved the audio recording and secured the file with password protection on a password protected laptop, then copied the file to a password protected universal serial bus (USB) that I stored in a locked file cabinet in my private office. I began the transcription process by uploading each audio file to NVivo, a data analysis software. This software allowed me to organize the data, listen to, and transcribe each interview with ease. Once transcription was complete, I exported each transcript to a password protected Word document and reviewed the document to de-identify any participant information to maintain confidentiality.

Each participant was sent one email with the password protected transcript of the interview. Next, the participant was sent a second email with the password to ensure the exchange remained safe and secure. Participants were given a timeframe to review their transcript for correction and clarification. This process serves as member checking, which increased the dependability of the study. The transcripts were discussed with the participants and none of them desired to clarify their responses as the transcripts correctly captured the experiences the participants meant to convey.

While I did not encounter any unusual circumstances during data collection, there was one variation in my data collection plan. One difference from the proposed data collection plan was the lack of need to engage participants in a follow-up interview. The interview questions I developed allowed the participants to provide rich data to support their experience of the phenomenon. In addition, my use of an interview protocol allowed me to focus on participant responses and concepts important to the participant, prompting to ask follow-up questions during the interview.

Data Analysis

I commenced data analysis by listening to the audio recordings of each interview at least three times. As I listened to each audio recording of the interviews, I engaged in free coding by jotting down ideas and initial codes that came to mind as I listened. Once the audio file was imported to the NVivo data analysis software, I began transcribing each interview. After the transcription process concluded, I exported the transcript to a password protected Word file and printed each transcript. Engagement in the iterative, inductive data analysis process begins with line-by-line analysis of each transcript to draw out initial codes and promote the identification of emerging themes, which leads to the ability to interpret the data (Smith et al., 2009). Working with a hard copy of each transcript, I read and reread each one engaging in free coding by writing initial codes and underlining participant responses that provided information to answer the research question (Appendix E).

Once the process of free coding was complete for each interview, I revisited each transcript searching for patterns that illuminated the commonalities and differences among each participant. Doing so led me to develop manual codes and meaning units for each participant transcript and then for the group of participants. After working with the data manually, I moved back to NVivo to work with the data electronically. In NVivo, I developed nodes, or preliminary meaning units, based on the patterns discovered through manual analysis of the data. I then reviewed each transcript in NVivo and tied participant responses to each node. Using the NVivo data analysis software allowed me to visualize

the data and group each participant's shared meaning of experience into a theme (Appendix E).

Smith et al. (2009) suggested that qualitative researchers can create a single case study report based on the analysis of the first transcript. However, in this study multiple cases are available for consideration, so I engaged in the analysis process with each transcript. Once each transcript was analyzed individually, I searched for themes across cases. NVivo data analysis software made this process easy as the data was accessible and manageable. Using the software, I grouped the data by themes and by interview question. Grouping the data by interview question allowed additional themes to emerge as I could view each participant response to each interview question as a group, then reduce the whole down to its parts and code the responses to a theme. This process also illuminated the most potent themes, as well as led to the reorganizing, relabeling, redefining, and elimination of some themes.

The next step in the data analysis process was to synthesize and finalize the themes to interpret each participant's experience of the phenomenon (Appendix E). Smith et al. (2009) indicated that the iterative and inductive cycle of data analysis moves the researcher from understanding the lived experiences of the participants to interpreting how the participant thinks about and experiences the phenomenon of focus. Manipulating the data through NVivo, 21 nodes emerged and I organized and connected each node to participant responses, which produced 10 themes to support the research question. This process mirrors the hermeneutic circle, moving between parts of the data and the whole then back again (Smith et al., 2009).

Although many of the participants provided in-depth, rich data contributing to the emergence of patterns and themes, some responses were discrepant, but warranted highlighting nonetheless. For example, most participants shared the commonality of being thrust into the experience of counseling gender diverse clients. However, two participants shared that they sought the gender diverse population and desired to work with this group. While five out of seven participants reflected on professional experiences with the gender diverse population, two participants reported that personal experiences, a romantic relationship and identity as a gender diverse individual, began their exploration of the gender diverse population.

The initial thematic analysis of the data yielded ten themes and eleven sub-themes. Emergent themes were classified as recurrent if present in over half, at least four, of all the participant interviews. Smith et al. (2009) indicated that setting a criterion for identifying emergent themes intensifies the validity of the research findings. Based on the criteria for emergent themes, the data analysis process illuminated ten emergent main themes and seven emergent sub-themes to support the research question.

Evidence of Trustworthiness

Smith et al. (2009) identified quality as one of the key components to solidifying the trustworthiness of qualitative research. One way the authors suggested for enhancing the quality of qualitative research is to demonstrate sensitivity to context throughout the data collection and analysis processes (Smith et al., 2009). In this study, I demonstrated sensitivity to context by ensuring the credibility, transferability, dependability, and conformability of the research.

Credibility

To ensure the credibility of my work, I provided a detailed description of the research design and methodology, making the study replicable for other researchers in the future (Lee, 2014; Williams & Morrow, 2009). I also made sure to include specific words and quotes from each participant to maintain sensitivity to context and enhance the credibility of the research. Smith et al. (2009) indicated that high quality qualitative research includes several verbatim data to support the experience of the participants, which increases the integrity of the study. To increase the credibility of the research, I expressed my awareness of the literature by linking the participant experiences to relevant literature. In addition, I enhanced the credibility of the study by achieving data saturation. Data saturation validates the replication of the study findings if the study were conducted by another researcher (Hancock, Amankwaa, Revell, & Muller, 2016). I acknowledged data saturation when participant data was recurrent and a lack of new data emerged, which occurred by my interview with participant five. I completed the interview process with the two remaining participants to ensure and solidify data saturation.

Transferability

To ensure the transferability of the research, one must engage in data collection processes that produce rich data from which overlapping patterns and themes emerge (Morse, 2015). Careful selection of participants, planned data collection strategies, and engagement in in-depth interviews are methods for achieving transferability in qualitative research (Smith et al., 2009). In this study, I set the participant criteria to match the

research question to ensure the participants would provide the most in-depth and quality responses to answer the inquiry. I used a prepared interview protocol to engage in semi-structured interviews with the desired number of participants, from which data that was plentiful with reoccurring, meaningful themes emerged.

Dependability

Another method for ensuring the quality of qualitative research is to show a high level of attentiveness to the participants during data collection (Smith et al., 2009). The authors suggested that qualitative researchers can achieve this goal by listening and attending closely to what each participant is saying and zoning in on concepts that are important to the participant (Smith et al., 2009). To measure my level of attentiveness and attention to each participant during data collection, I engaged in member checking. Member checking is a method used to secure the dependability of the research by providing and reviewing each transcript with each participant to ensure the responses were understood correctly (Morse, 2015). After reviewing each transcript, none of the participants clarified their words and only a minimal few indicated corrections to grammatical errors in the transcript. The lack of correction and clarification from the participants indicates that I was attentive to their concerns and the data provided will lead to the correct interpretation of the meaning of their experience.

Confirmability

Strengthening confirmability of a quality qualitative study lies in the researcher's ability to engage in an activity that promotes objectivity (Morse, 2015). Throughout the research process, I engaged in reflexive journaling to balance my continuous

consideration of the participant experience and my interpretation of the phenomenon.

Reflexive journaling reinforces the researcher's stance and engagement in the hermeneutic circle, making meaning of each participants' experience (Smith et al., 2009; Spence, 2017). Reflexive journaling allowed me to document my experience of the hermeneutic circle as new knowledge emerged through my engagement with data collection, participant experiences, and the literature, increasing confirmability.

Results

Interpreting the lived experience of counselors who engage in counseling with gender diverse clients was possible because of the rich, thick data I collected from seven criterion-based participants. The process of hermeneutic phenomenological inquiry supported my efforts, as well as the integration of portions of the interpretive phenomenological analysis offered by Smith et al. (2009). The combination of these approaches to research provided a foundation for me to acquire information, understand the meaning, and interpret the lived experiences of this phenomenon. Through semi-structured interviewing, participants told their lived experiences of counseling with gender diverse clients, how these experiences began, what they did in these experiences, how they prepared for these experiences, and their perception of the future regarding these experiences.

The research question for this study was: What are the lived experiences of professional counselors engaging in counseling with gender diverse clients? Ten major themes and seven subthemes emerged from the data. The final themes that emerged from the data to illuminate and interpret the experiences of professional counselors engaging in

counseling with gender diverse clients were: (1) self-sought education and training; (2) lack of formal gender education: (a) limited awareness and (b) application of gender counseling competencies; (3) understanding gender diversity issues; (4) future orientation; (5) cautious communication; (6) holistic gender discussions; (7) affirming perspective: (a) clinical stance, (b) client experiences, (c) professional identity; (8) gender binarianism; (9) intentional bias examination: (a) self-awareness and (b) introspection; and (10) professional experience. I will present the results of my study using verbatim participant responses to support each theme and answer the research question by interpreting the meaning of counselor experiences of counseling with gender diverse clients.

Emergent Main Theme One: Self-Sought Education and Training

This theme refers to participants experience of seeking education and training to enhance gender diverse counseling competence. This theme emerged as participants discussed their response to the commencement, maintaining, and continuing clinical work with gender diverse clients. Carter shared, “I stay educated with the most recent research. I don’t feel like just because I’m trans I know it all.” Billie discussed the experience this way:

I tried to go to different trainings and things like that. It was relatively easy to find trainings on like the LGBT community as a whole, but I really wasn’t able to find anything specifically with transgender clients or gender non-conformity or anything like that. And so most of my experience has been from coming back into my doc program just making that effort to read studies, read literature, find books

on personal experience and finally engaging in actually doing counseling with individuals. So, most of it has been me seeking that out on my own. I don't think any of the core courses in our Master's program, I mean they address it, but it's so limited still. I think most people really need to find out on their own and do their own work.

Mae and Nikki expressed ownership and responsibility for seeking education and training to enhance their work with gender diverse clients. Mae asserted, "I feel like that's on me and that's where I reach out and go to sessions and conferences so that I am well versed on the topic. I mean it's not their role to educate me on that it's my, that's my responsibility to learn that." Campbell and Arkles (2017) concluded that counselor professional development is a counselor responsibility that serves as a means for enhancing one's competence to serve diverse populations. Nikki shared:

Just being willing to learn, but at the same time not making the client feel that it's their job to educate me. A lot of my clients feel like previous therapists and even some school personnel interrogate them and ask them a lot of questions. Almost making them feel like they have to walk around the school with a banner saying, 'I'm trans, ask me questions' or 'It's not my job to educate you. Could you go to a workshop?' So, walking that line between help me understand what you're saying so I can focus more on what we're doing in here, but not trying to make them feel like, "Okay, its tutoring time for my therapist." So, I really watch that.

Mizock and Lundquist (2016) highlighted seeking education about the population from gender diverse clients as a misstep in the counseling process. The experiences of the

participants illuminate practical processes for distinguishing client educating the therapist about the gender diverse community and the counselor seeking understanding of the client's unique perspective and experience of life. Regarding self-sought education and training, the participants engage in educative activities to increase their understanding and awareness of gender diversity, which provides a deeper level of competence with this group. By engaging in these activities, the participants avoid client harm by refraining from gaining this knowledge from the client. Rather, the participants expressed their ability to exert competence by obtaining knowledge and understanding of the gender diverse population through reading research, training participation, and learning from other professional experts.

Emergent Main Theme Two: Lack of Formal Gender Education

Although self-sought education and training is a positive attribute of the counselor experience as it enhances competence, challenges exist with this acquisition of knowledge. Campbell and Arkles (2017) indicated that difficulties arise when counselors attempt to acquire knowledge while simultaneously providing services. When providers who will serve gender diverse populations are sparse, counselors act. August explained, "I knew that this population had a lot of unmet needs. So, I felt as though while I was continuing to get the training that I could at least create a positive trusting environment that would allow the client to just open up and talk."

Every participant reported receiving little to no education or training on gender diversity, gender issues, or practice with gender diverse clients during their engagement in Master's level counseling program. The lack of formal education and training to

address the needs of the gender diverse population compelled the counselors to act and seek education and training to build competence. When asked about their experience of education and training that prepared them to engage in counseling with gender diverse clients, the participants provided the following responses:

- August: I really genuinely don't believe we received any training at all or had any conversations at all in grad school about gender minorities.
- Billie: I graduated from my Master's program in 2006 so there was really no formal education that helped me because it just really wasn't discussed. I don't think like any of the core courses in our Master's program...I mean they address it, but it's so limited still.
- Carter: No. Not until I got in my doc program where I got a specialization in relational cultural theory, where it had advanced courses in diversity. So, yeah Master's there was not a class.
- Mae: We talked about one week, maybe we talked about gender minorities one week in that class. And then, we didn't. I don't think we talked about it in any other class I had in my Master's program, which was unfortunate because then I felt that void.
- Nikki: Most of it came post degree.
- Tanuja: Not a lot. Not in counseling anyway.
- Toni: There hasn't been a lot of formal training. There wasn't any formal training really in my Master's program. I think, yeah even in the

multicultural counseling class, there wasn't a lot on um gender identity. I think it mostly focused on racial identity as you know um where there is a need for multicultural competence.

Participant engagement in a Master's level counseling preparation program ranged from eight to twenty years ago. Regardless of the time frame, each participant indicated that they did not learn about counseling with gender diverse clients during engagement in formal education. However, this lack of formal education did not stop these counselors from engaging in services with their gender diverse clients, either before or during the acquisition of self-sought education and training to increase competence.

Subtheme: Limited awareness.

Most the participants conveyed a lack of awareness and application of counselor standards and competencies for treatment with gender diverse clients. Nuefeld (2014) observed that counselors do not engage in competency building regarding gender diverse clientele because the acquisition and implementation of competence with this group is merely a suggestion, not a requirement. When asked about his experience with the counselor competencies for counseling with gender diverse clients, August admitted, "I don't know them to be honest." Many of the participants were either unable to articulate an understanding of the standards and competencies.

Other participants expressed their understanding of counselor competencies through the employment of another set of standards deemed more applicable to their work with gender diverse clients. For example, Nikki revealed, "I haven't really found a set of

standards that I felt completely address the needs.” Tanuja expressed her experience of the counselor competencies:

I ended up being more attracted to the guidelines that came out of the WPATH because that tended to address the needs that the clients brought, which at that time very much was to get affirmation validation and unfortunately permission. So, those were more clinically relevant.

The thing about the guidelines out of counseling is that they tend to be more less clinical and more activist. And while social justice is, is something I believe in on a personal level, I want to meet my clients where they are. And some of them, you know, I’ve had clients who are really conservative. They don’t want social justice! They want to do what they want to do.

Subtheme: Application of gender counseling competencies.

Besides a lack of formal gender education and training to inform practice with this population, the participants also expressed issues impacting the ability to apply counselor standards and competencies for treatment with gender diverse clients.

Participants indicated that one limitations of the gender diverse counselor competencies is that the standards do not meet the needs of the client. Carter and Tanuja expressed a deeper understanding of the counselor competencies and the awareness that the competencies exist but do not meet the needs of their clients, nor are they practical for application in treatment. Both participants, along with some others, preferred to adhere to and apply competencies from other professional organizations because these standards are viewed as “clinically relevant” while the counseling competencies are perceived as

irrelevant to their work with the gender diverse population. Carter explained the challenge regarding the lack of counselor competency awareness and use as the lack of integration into state laws and competencies that guide clinical practice. He stated:

I think ACA has done a really good job, especially ALGBTIC to create competencies. However, I don't feel like the states have really adopted them.

They are out there but our ethics specifically don't go over that. And so, I feel like competencies are not there or not expected to be in place right now. I mean we have that overall, you can't discriminate against clients and you have to see all clients and you can't say you really don't see clients because they're gay or trans.

But I haven't heard of any major case where a counselor loss their license because of that. But I do know counselors who are horrible counselors and shouldn't be seeing any LGBT clients because they do more harm than they do good. So, I don't think our competencies in states match ACA by a long shot.

State and local entities fail to adopt and incorporate competencies, standards, and guidelines regarding clinical care and treatment of gender diverse clients (Salisbury & Dentato, 2016). In addition, counselors must base their clinical skills used in counseling with gender diverse clients on competencies and standards that ensure competent practice (Bidell & Stepleman, 2017; Singh & Burnes, 201b). The lived experience of the counselors in this study indicate the existence of a disconnect between the competencies and needs of the clients. Which begs the question, "Do the counselor competencies for counseling with gender diverse individuals competently include the needs of the gender diverse community?" If not, should counselors utilize these competencies in practice? In

the meantime, counselors serving this population continue to seek supervision, consultation, and continuing education to develop the competence necessary to address the needs of the gender diverse population (Campbell & Arkles, 2017).

Emergent Main Theme Three: Understanding Gender Diversity Issues

Based on their experiences with the gender diverse population, the participants could identify and articulate the challenges experienced by these clients. One challenge identified for gender diverse individuals was the inability to find open and accepting counselors. Carter shared, “I was the only counselor seeing gender variant and trans clients.” He also mentioned he serves clients in large metropolitan area with a large population. August asserted, “I find that not all counselors are that open and accepting of working with gender non-conforming clients.” Another challenge indicated by the participants was the inability for some counselors to focus only on gender. Mizock and Lundquist (2016) asserted that some mental health providers focus on gender identity issues although it was not identified as the primary area of focus by the client. August shared:

I do need to be aware of it and only if the client addresses that their gender minority status is an issue, I need to be able to recognize what the issues are and their experience in that role, what that’s really like for them. Really being mindful that just because somebody comes in as a gender minority that that might not be their underlying issue. Their underlying issue might be totally different.

At times, however, focusing on gender does benefit the client when the focus is purposeful. Toni explained her experience this way:

With understanding what their needs are and how that aligns with where they are with their gender identity. Meaning how far along in the transitioning process, how out they are to friends and family, to the public, with their identity. Their needs are all different.

August reported, “I was working with them at different stages in their life, right. So, I worked with them differently because they were at different stages in their life and experiencing different problems.” Sangganjanavich and Headley (2013) discussed the variation of challenges that compel gender diverse individuals to seek counseling, as well as the challenges embedded in the gender transition process. In this study, participants highlighted the purposefulness of focusing on gender to determine the client’s ‘trans-age,’ or their stage of transitional gender development. Researchers asserted the value of mental health professionals’ ability to identify and address the unique needs of the client (Budge et al., 2017; Moe et al., 2015; Skerven & Aubin, 2015). Avera et al. (2015) also asserted that affirming practitioners “conceptualize transgender individuals’ development across their life span and understand the intersection of internal and external factors that affect transgender individuals’ identity development” (p. 277). The ability to identify, validate, address, and affirm the unique needs of the gender diverse population lie in the counselor’s ability to focus on gender for the purposes of determining the client’s trans-age, thus determining specific challenges that might exist around the client’s stage of transitional gender development.

Emergent Main Theme Four: Future Orientation

All the participants shared a view of self as a competent practitioner serving the gender diverse population in the future. Future areas of counseling competence included professional development of other counselors, engaging in additional training, advocacy work in gender diversity, and service to the profession regarding the enhancement of professional standards and competencies. Researchers called counselors to action regarding their ability to serve as advocates, allies, and often the voices for the gender diverse population (Case & Meier, 2014; Nuefeld, 2014). Nikki responded saying, “I feel like I’m being pushed less and less to just counseling and more and more to advocacy.”

Mae assured:

I definitely will continue to counsel them in the future. I will continue to engage in as much education as I can to make sure that I’m on top of understanding what’s going on with transgender clients and continue to advocate for them.

The ACA (2014) highlighted advocacy as a key component to promote change and remove barriers. According to O’Hara et al. (2013), competence and advocacy are the bedrock of affirming practice with the gender diverse population. Nuefeld (2014) provided examples of advocacy in affirming gender diverse counseling including teaching the client self-advocacy skills and communication with other providers on behalf of the client.

Mae summarized the experience of advocacy:

I advocate for the person that is not being treated fairly all the time and I think that was innate from the time I was a child until now, but I feel like its directed

now because I am a counselor and because I'm in a role to advocate and make a difference.

Emergent Main Theme Five: Cautious Communication

Cautious communication is the mindful use of language, both verbal and non-verbal, used to communicate with and about gender diverse clients. Participants expressed engaging in cautious communication as the need to engage in mindful behavior regarding their communication when writing letters, sending emails, talking to other providers, and especially when speaking to gender diverse clients. Each participant expressed the need to "be careful" not to use the wrong pronouns or misgender the client. For example, Tanuja shared, "I'm much more careful in gender language." August indicated, "...really being more mindful about pronouns that I use, which I still struggle when clients are requesting that they identify as both genders."

Avera et al. (2015) indicated the importance of counselors increasing their understanding of gender diverse terminology by adopting and applying affirming language. August provided an example of the application of cautious communication:

I've also even changed how I write letters or an email. So, if a client emails me and asks a question, I will only refer to them by their first name, because I don't want to get into the prefix of like Mr., Ms., because I never know what their gender minority is ahead of time, so I just stick with first names and the name that they email as, trying to keep that more universal. I'm more careful because, if you think about it we use a universal precaution; so, I don't know why we're just not universally mindful of the words we use with all of our clients regardless of

gender or sexual identity. They are still a human being, they are still a person. We should treat everybody with the same level of respect regardless.

Regarding cautious communication, Billie shared, “Kind of navigating those conversations and these little details that seem small but could really have an impact on someone’s experience in counseling.” These are instances where advocacy and self-advocacy play a role in the development of the counselor-client relationship. Toni and August reported reinforcing the use of affirming language with colleagues and other clients as a sign of advocacy. Toni explained:

Having to do a lot of reinforcement of our group rules, our agency rules. Emphasizing that inappropriate language or discriminatory language cannot be used. Doing some discussions with the clients about tolerance and things like that is, you know kind of some of the things that we decided would be appropriate. And then I was a supervisor at that time, so we also had to do a lot of work with the staff for changing which pronouns they use and how to interact with the client. Even just, you know, in the halls, or things like that.

August asserted that exhibiting this form of advocacy with the client present also expanded the ability to teach self-advocacy. Neufeld (2014) valued the experience of teaching and assisting clients during transphobic situations. According to August, the client experiences an in-person lesson on how to advocate for self in the moment and teach others how you desire to be treated. August explained:

And I think a lot of the work I did with some of the adolescents was teaching them assertiveness skills and how to really stand up for and really feel

comfortable telling other people, ‘No, don’t just call me Mark because that’s the name that I was born with. I want to be called Cindy’ for instance. And doing so in a respectful assertive manner. I think that was a lot of the work that I was doing with adolescents.

The experiences of the participants regarding careful communication provide specific examples of language, techniques, and interventions counselors can use to affirm gender diverse clients. These examples are a missing component of utilizing affirming communication, a key competency for counselors working with the gender diverse population (Taskforce et al., 2013).

Emergent Main Theme Six: Holistic Gender Discussions

Discussing gender as a foundational therapeutic practice with all clients is a theme that was common across all participants. When discussing her experience of counseling with gender diverse clients, Toni indicated, “It also helped me with my conceptualization of other clients that don’t necessarily identify as a gender minority. That I’m able to have conversations about identity, about culture in a much broader way than I did before.” Tanuja shared, “I am much more sensitized with all of my clients for gender and how gender shapes their lives.”

Carter reported:

I think that makes me more sensitive even with cisgender individuals that do not say anything about gender. Even with my female clients, ‘How is it to be female in your family or society?’ I want to know those things too. I know that women are still discriminated at work and in public. And then I even ask my white male

clients, ‘How is it to be male? What pressures do you have because you’re a male in your family? In your work place?’ Yeah so, I do address gender in other places. The view of counseling as a genderphobic environment causes gender diverse individuals to avoid the therapeutic process (Salisbury & Dentato, 2016). Generalizing gender discussions across clients and populations creates a neutral space for discussing gender and reduces challenges regarding bias and discrimination. For example, identifying clients whose gender assigned at birth coincides with their current gender identity as cisgender and engaging in discourse about this identity equalizes discussions about gender within the therapeutic setting.

Emergent Main Theme Seven: Affirming Perspective

The theme *affirming perspective* regards the counselor’s ability to view self, others, and experiences affirmatively. Neufeld (2014) highlighted that ambiguous counselor responses to gender diversity perpetuate discomfort, discrimination, and prejudice towards these clients. The affirming perspective theme includes the sub categories of affirmative client experiences, affirmative clinical stance, and affirmative professional identity.

Subtheme: Clinical stance. This theme includes the positive and supportive services, behavior, and attitudes towards gender diverse clients. Participants reported providing safe spaces, being open and honest, unconditionally supportive, admitting and communicating mistakes, staying educated and up-to-date regarding the gender diverse community, and engaging in advocacy. Participants shared how they maintain an affirmative clinical stance:

- Billie: I think one of the most salient things recently is just the fact that there is so much going on day to day, just trying to keep on top of what laws are there nationally and locally, what supports are out there, because there really is a lack of support, like networks and community support and stuff like that. Really trying to dig deep and find those community connections.
- Mae: I think the biggest thing with counseling transgender [clients] is that you have to have an unconditional positive regard for everyone as a human and meet them where they are and they are not different than counseling any other person. If you can have that unconditional positive regard and help them to build on their strengths and assert themselves and just be who they are.
- Nikki: And identifying those things that come up that are keeping people from moving forward. So, I hope, I would like to say I'm a holistic practitioner because I look at those things. And that's usually where I start. It's not as simple as what brings you here today, it's what almost kept you from coming?
- Tanuja: And I think this is really important, I pay attention to news because I know that there are times that clients are impacted by stuff that they don't know that they can talk about in therapy. For instance, just recently another trans woman of color was murdered and so often I'll bring that up and say, 'Anything came up for you?' And

sometimes they'll say, 'Oh you know it's just the news.' And sometimes they'll say, 'I cried.' And I want to invite them to be able to bring that in.

During training, counselors are timid about identifying and implementing affirming practices with gender diverse clients (Moe et al., 2015). The experiences of these counselors solidify the ability of counselors to transcend the discomfort of recognizing and implementing an affirming clinical stance the longer they engage in counseling with this population. Many of the counselors expressed challenges maintaining this stance when they began engaging in these experiences. Thus, overtime a counselor's affirmative stance evolves as experience with gender diverse clients increases. Engagement in education, training, and experience promotes the evolution of affirmative counselors and their ability to meet the counselor competencies for treatment with gender diverse clientele (Campbell & Arkles, 2017).

Subtheme: Client experiences. Participants shared positive client experiences because of interactions in counseling. Affirmative client experiences were described as feeling validated, relaxed, trusting, appreciative, unconditional acceptance, and comfortable. When asked, 'How do you believe your gender diverse clients experience you as a counselor?', the participants provided the following responses:

August: I think they experience me very positively because of my openness.

Mae: I think they view me as, they know I unconditionally accept them for who they are, but they also know that I will challenge them to

be the best person they can be and will not hesitate to do that. I think they just view me as a strong assertive counselor who accepts them for who they are will focus on their strengths and will get them to bring the best in them out.

Nikki: I hope, if you asked any of my clients they would say that I was trustworthy, that I was competent and caring.

Tanuja: I'll challenge them They find me challenging. I believe my clients trust me. They trust me to not abandon them that they can get mad at me and they can be sometimes who they fear they are with me and I won't reject them.

Toni: The feedback that I've gotten just through my work with them, you know, they suggest that it was helpful information and helpful work that we did together.

In response to how he believes his gender diverse clientele view him, Carter spoke highly of his ability to easily build rapport. He shared:

I think walking through the door, they automatically know I'm one of them. So, I think it's easier for that rapport to be built up first. I'm not saying anyone who's not can't build rapport with these clients. I just think it's faster because all of a sudden it's like, " Ah, you're one of me!" Like off the bat. I don't have to explain terminology, there's a lot of things I don't have to go through. So, I think they experience the things that I said, I just think that rapport building happens a little quicker than with someone who identifies as binary.

Researchers asserted that validation is a strengthening aspect of the therapeutic process that affirms the experiences of gender diverse individuals (Heck et al., 2013; Skerven & Aubin, 2015). Tanuja explained:

The counseling needs I think are to be validated and normalized for feeling marginal. To think about ways in which they can see themselves putting their gender minority identity with all of their other goals. To have a space to grieve the life they're not going to have. And I think that that's a big part because you know without meaning that they're not clear. Or that, either somehow, that regret means you're not actually trans or you're not actually gender fluid. No, it just means that the stuff you grew up with which looked like ways in which community and family celebrate may not be how you will end up celebrating. And that mourning I think, making a space where it's safe to mourn.

Subtheme: Professional identity. The participants collectively shared a view of self as an affirming practitioner. August shared, "I am a very affirming counselor, and I think having that openness and having that acceptance really supported the clients." He went on to describe himself as an "innately open accepting person." Billie viewed the ability to collaborate and partner with clients in the therapeutic process as affirmative characteristic of her professional identity. McCullough et al. (2017) exposed the value of the counselor identity in ensuring affirmative counseling experiences for gender diverse clients. Based on the experiences of the participants, an addition to these identities is the perception of self as an affirmative counselor. Carter expressed his self-perceived affirmative counselor identity:

I would say that I'm a very passionate counselor. A very empathetic counselor, almost sometime too much, which is why I don't have a full caseload because I sometimes don't know how to close my heart off to my clients because I take them home with me unfortunately, in my thoughts. And I really do strive to know my clients and I really work on this authentic relationship between me and my clients so that there is trust when we do work and work hard in session. And my goal is for them to feel better, whatever better is for them. And try to help them reach their goals. If I can help them with that all the better.

Emergent Main Theme Eight: Gender Binarianism

The theme gender binarianism is the distinctive practice of placing gender into a state of being that is either male or female, based on one's subjective view and experience of gender. Moe et al. (2015) reported that the biases held by counselors are typically cisgender-based biases. Tanuja remarked, "...some of my lens around how men are and how women are, was in that binary frame." Billie shared the following regarding gender binarianism:

I personally tend to be on the relatively feminine side of being female. And you know, sometimes I wonder if that ends up being my bias. You know, if an individual is presenting more feminine then do I make the assumption that they have like a female gender identity. Or, if they identify as a trans female, do I assume that they want to wear like high heels and their hair long. And so, sometimes I kind of take a step back and think about what is this client actually saying to me versus what am I seeing and then making interpretations based on.

Toni asserted:

I'm just more acutely aware of how my identity as a cisgender female might color or informs how I'm conceptualizing either what my client is trying to, wants to live as. And I just have to catch myself there with trying to become, because it's not about becoming something. It's about actualizing how they actually feel. So, those are the kinds of things that I have to be really aware of and conscientious of even when I'm talking to them. You know that I'm not unintentionally communicating something that I'm still working on. Like I don't have a whole bunch of lived experienced not feeling comfortable in my body or not identifying with what my body looks like or how I feel as a person. So, um, so it just makes me more aware and more conscientious about how I'm communicating and how I'm perceiving things.

Carter explained:

I think when I first started I was more gender variant and so I didn't really understand the process of transition. I hadn't fully understood it. Like I had cut my hair and was wearing male clothing at the time, but starting in my Master's program, like in the past year I've started testosterone and realizing the impatience of wanting things to happen faster than they do. And so, really having more empathy with the transitional process now that I've actually, with hormones anyways, gone through it. It's just this waiting game and I don't think counselors really appreciate or understand just the nervousness and the anxiety and the anticipation of starting this process. And just because you take one shot or one

pill, like it doesn't fix it right away. Like there's still more transition to do and I don't think I really appreciated, just that time and how to help clients through being impatient and wanting things to happen now. Like, I'm more about let's make you comfortable in your body today. Like, we know what we want for our end goal and that's cool and we're going to work towards that goal, but we have to be happy with self today. So how do we appreciate where we are in the process of transition now. And before hand, I don't think I really did some of that.

It is these rigidly held beliefs that manifest, either consciously or subconsciously, in the therapeutic relationship and cause harm (dickey & Lowey, 2010). Thus, counselors must remain aware of and actively address personal bias regarding gender diverse clientele (Ratts, 2017).

Emergent Main Theme Nine: Intentional Bias Examination

Participants indicated purposefully exploring internal biases that could contaminate the therapeutic relationship. Most of the participant reported bracketing their experience of gender to avoid interference with the therapeutic process. Toni asserted, "Just to ensure that um I'm not committing any micro aggressions because, really because I identify so strongly as a female. You know a cisgender female, I want to make sure I'm not making assumptions about what that means for the clients that I work with." Moe et al. (2015) concluded that the covert and overt expressions of bias and discrimination could lead to unintended microaggression. Examining one's biases includes self-awareness and introspection.

Subtheme: Self-awareness. Tanuja responded, “Well, you know when you do multicultural work you have to look at your own crap.” The theme self-awareness is the experience of reflecting on one’s experiences counseling gender diverse clients. August reflected on self-awareness saying:

We talk about that all the time, but counselors, once they get in the field, they might not take some time to reflect on their own values and their own biases. And I think supervision is such a great way to do that. So, I continue to seek supervision and I think specifically if I screw up one time and I might use a different pronoun than I should be, I will immediately call my supervisor and kind of process that like, ‘Why, like where did that come from? Was it just an accidental slip? Was it me not being mindful? Was it me being stigmatizing?’ Maybe it is, I don’t know. So, I think supervision is also so important.

Subtheme: Introspection. Examination or observation of one’s mental and/or emotional processes defines the theme of introspection. Bias examination is an ongoing self-reflective process that competent counselors must engage in for the duration of their career to ensure the continuation of competency (Ratts et al., 2016). Billie shared, “I feel an overwhelming sense of gratitude with most clients who kind of connect with me and share their world with me.” Toni indicated, “...intentionally having discussions and grappling with those concepts, those ideas, has helped me identify and understand what my biases are.”

Nikki admitted:

So just as a person, I tend to be pretty protective of my clients anyway. And when they are young people, vibrant, intelligent, filled with so much potential I tend to get a little angry. So, I would find myself having to check my own self before I engaged in trying to do any kind of advocacy for them. Yeah, it made me angry. It really made me angry.

Tanuja indicated:

... to some extent my own identities as being ways in which I've transgressed across culture allowed me to empathize with how there must be some places of pain there. And then making the space for clients to tell me.

Carter asserted:

I have to be honest I do have biases and I think if we as counselors go, 'Oh, I'm multicultural, I have no biases' then we're wrong. We have to be willing to recognize those things in ourselves and I think that comes with great self-awareness. And for me, I'm constantly in therapy and I do really want to become self-aware and I want to understand where my biases come from and how did these develop and how can I change these. And I think, once I know I have a bias then I do start educating myself about what I'm biased about.

Emergent Main Theme Ten: Professional Experience

The theme *professional experience* emerged from the data based on each participant sharing their experiences with the gender diverse population. These experiences emerged as professional encounters with gender diverse individuals. Participants discussed their experiences through the lens of clinical needs of the client

and how they addressed these needs. Typical responses regarding how participants began counseling with gender diverse clients included the following:

Carter: “ I was the only counselor who was a part of the LGBT population.”

Nikki: “ I kind of just got thrown into it.”

August: “ They found me.”

Toni: “ There was nothing intentional that I did to seek out that population...”

Participants described their experiences in counseling with gender diverse clients as challenging, difficult, enjoyable, curiosity provoking, and interesting. Many expressed feeling nervous when they began counseling this population, ill-equipped, insecure, protective, and angry. For example, one participant, Mae, described the experience this way: “When I first started engaging with them I was nervous. I was inhibited like am I going to screw this up? Am I going to say the wrong thing? What am I going to do wrong?” Researchers indicated that counselors are responsible for engaging in professional development activities that promote ethical growth and increase competence to serve the gender diverse population (Campbell & Arkles, 2017).

Summary

In this chapter, I provided a detailed explanation of the data collection and analysis process I employed to explore the lived experiences of counselors who engage in counseling with gender diverse clients. I also interpreted the data and expressed the data

in the form of themes that illuminate the response to the research question: What are the lived experiences of counselors who counsel gender diverse clients?

The data analysis and results section of this chapter are expressed through my application of aspects of the interpretive phenomenological analysis process, which compliments and enhances the hermeneutic cycle. I engaged seven independently licensed counselors in semi-structured interviews to capture their experiences counseling gender diverse clients. The interviews produced rich data to support my ability to interpret the experiences of the participants and illuminate the meaning of counseling with gender diverse clients.

Data collection led to data analysis, from which themes emerged. The emergent themes I derived from the data shed light on the experience of counseling with gender diverse clients as a process that requires counselors to engage in self-sought education and training to enhance their competence to serve this population. These counselors must engage in self-sought educative activities due to the lack of formal education and awareness, use, and application of counselor competencies regarding counseling with gender diverse individuals.

Counseling with gender diverse clients encourages counselors to acquire additional education and training, which also increases their knowledge of the needs of this population. The participants articulated a future orientation for working with gender diverse clients that includes additional education, training, and advocacy. Another tenant of counseling with gender diverse clients that was revealed was the need to engage in cautious communication with the client, other clients, colleagues, and other providers as a

means of exposing the client to advocacy efforts. These conversations about affirmative communication led counselors to explore gender holistically with all clients as a foundation for practice and to eradicate transphobic counseling environments. Counselors shared their experience of an affirming perspective, which includes an affirmative clinical stance, affirmative client experiences, and an affirmative professional identity. This shared experience embraces the gender diverse experience, creating opportunities for the affirmation of self and others.

Gender binarianism emerged from the data to give meaning to the counselors' experience of placing gender into a state of being that is either male or female based on one's subjective perspective of gender. The counselors acknowledged this experience as unintentional and viewed it as an opportunity for self-examination and growth, both personally and professionally. Intentional bias examination illuminates the counselors' experience of increased self-awareness and introspection regarding their interactions with gender diverse clients. Each of these themes embodies the experience of counseling with gender diverse individuals and elucidates the meaning of this phenomenon based on the lived experience of these counselors. The next chapter will include an in-depth interpretation of the findings, highlight the limitations of the study, offer recommendations for further research based on the results, illuminate implications of the study, and conclude the research.

Chapter 5: Discussion, Conclusions, and Recommendations

My purpose in this hermeneutic phenomenological inquiry was to explore the lived experiences of counselors with experience counseling gender diverse clients to illuminate and interpret the meaning of this phenomenon. Understanding these experiences will lead to increased awareness and insight regarding counseling with gender diverse clientele from the counselor's perspective. The data revealed multiple themes related to the counselor experience of counseling with gender diverse clients. These themes include self-sought education, lack of formal gender education, understanding the needs of the population, future orientation, cautious communication, holistic gender discussions, affirming perspective, gender binarianism, internal bias examination, and experience. In this chapter, I will discuss the research findings, the limitations of the study, as well as the recommendations and implications of the study.

Interpretation of the Findings

Hermeneutic phenomenological research requires the researcher to interpret the findings based on the researcher's understanding of the phenomenon, the participant's experience of the phenomenon, and the merger of these bodies of knowledge from which the meaning of this phenomenon emerges. This process is described as the hermeneutic circle based on the conceptual framework developed by Heidegger (2013). I will use my knowledge and experience of the phenomenon to understand the experiences of the counselors participating in the study, interpret the meaning of counseling gender minorities, and support this interpretation with evidence-based literature and the voices of the participants.

Historically, the experience of counseling with gender diverse individuals exposed the negative experiences of this population (Avera et al., 2015; dickey & Loewy, 2010; Heck et al., 2013; Moe et al., 2015). Nonaffirming counseling experiences included invalidating communication, hyper focusing on gender, shaming, blaming, and attempts to reform gender identity or expression (dickey & Loewy, 2010; Mizock & Lundquist, 2016; Poteat et al., 2013). In response to these damaging client experiences, professional organizations, including counseling, published standards and competencies for practice with gender diverse individuals (ACA, 2014; Taskforce et al., 2013; WPATH, 2012). Knowledge of these negative experiences and an understanding of the needs of the gender diverse population encouraged the participants to engage in affirming practice with their gender diverse clients.

Self-Sought Education and Training

To ensure their engagement in affirmative counseling, the participants sought education and training to gain an understanding of gender diversity and the needs of this client population. Ratts (2017) revealed that counselors seeking to provide competent counseling with gender diverse clientele must engage in education and training to be effective. The participants found that educative experiences enhanced their ability to provide competent counseling by giving them a foundational understanding of the needs of the population and how to effectively respond. In addition, the participants iterated a sense of ownership and responsibility regarding the need to educate themselves on gender diversity, releasing that responsibility from the client. Instead of asking the client to educate the counselor, the participants unanimously expressed the need to allow the client

to share their unique experiences by providing an “open and affirming space.” The findings of the study confirm the lack of knowledge of knowledge counseling students and novice counselors are exposed to during engagement in formal counselor education programs.

Lack of Formal Gender Education

The participants collectively expressed experiencing a lack of education and training experiences to prepare them for counseling with gender diverse clientele. Counselor competencies regarding practice with gender diverse individuals encourages counselors to use language, techniques, and strategies that ensure and enforce affirmation and acceptance (ACA, 2014; Taskforce et al., 2013). After completing a master’s level counseling program, each participant shared the experience of feeling “ill-equipped” to work with gender diverse clients due to the lack of focus, knowledge, or experience offered during their experience of formal education. In addition, some participants shared that the counselor competencies do not accurately reflect the needs of their gender diverse clients, therefore they do not actively implement the counselor competencies. The participants did, however, agree that the competencies from other professional organizations such as WPATH compliment their ability to effectively address the needs of gender diverse clients.

Understanding Gender Diversity Issues

Gender diverse individuals experience discrimination, bias, and prejudice by actively engaging in society, leading to debilitating mental health challenges (Budge et al., 2017; Greene & Britton, 2014; Heck et al., 2013). The participants articulated an

understanding of the needs of this population to include access to an increasing number of affirming counselors and focusing on gender as deemed necessary by the client or for the purposes of determining the client's trans-age. Researchers solidified the need for counselors to address the unique needs of gender diverse individuals based on the gender identity developmental stage of the client (Avera et al., 2015). According to the participants, understanding the gender identity developmental stage of the client also illuminates the unique needs of the client. For example, adolescents that have not begun the process of transition would benefit from learning assertiveness skills, older adults might need grief counseling to address the loss of loved one as they engage in the transition process, and all developmental stages could benefit from exposure to advocacy.

Future Orientation

Advocacy was revealed as a role participants envisioned regarding their future work with gender diverse clients. Many of the participants viewed themselves as future advocates for this population and serving in leadership roles in organizations to support legislation to positively affect the gender diverse community. Participants reinforced the importance of serving as a "voice for the community" and enhancing the lives of marginalized groups. This theme coincides with the need to adopt standards and competencies at the state and local level to ensure that the availability of competent counselors matches the growth of the gender diverse population (Ratts et al., 2016). Some participants expressed the desire to develop training programs to increase the number of competent counselors trained to address the needs of gender diverse clients. While others plan to develop additional therapeutic services for this community.

Cautious Communication

Salisbury and Dentato (2016) indicated that blatant disregard of the needs of gender diverse individuals perpetuates prejudice and discrimination. The collective experience of the participants highlights the intentionality of therapeutic interactions with gender diverse clients. For instance, counselors reported efforts to engage in cautious communication with and regarding their gender diverse clients. Carefully communicating with gender diverse clients requires the counselor think about their use of words, prepare to communicate with their clients, and teaching others, even the client, about affirming communication. This heightened awareness of both the affirming and damaging qualities of communication with and about gender diverse clients allows the counselor to display and act on attentiveness to the client's needs. Cautious communication includes verbally identifying the client's correct gender and using proper pronouns in both verbal and written communication.

Holistic Gender Discussions

To decrease genderphobia in therapeutic settings, the participants engage in gender-based discussions with most of their clients. Awareness of a client's worldview and cultural perspective enhance the counseling relationship, allowing the counselor to interact with the client based on the understanding of how he or she experiences the world (Collins et al., 2015; Ratts et al., 2016). Discussing gender with gender diverse clients has "sensitized" the participants to the act of discussing gender as a foundational practice for understanding how the construct impacts all clients. Doing so enhances the

therapeutic process by addressing an aspect of human experience that is often overlooked for those who fall into a binary category of gender identity.

Participants admitted that they explore gender with cisgender clients to ensure they are engaging in a holistic therapeutic exchange. Authors Mizock and Lundquist (2016) highlighted gender avoidance, or “lacking focus on issues of gender in psychotherapy with transgender clients” as a misstep in the therapeutic process (p. 151). Although their research focused on transgender clients, the authors also discussed the avoidance of gender discussions in counseling as a marker of limited awareness of the impact of gender on mental health (Mizock & Lundquist, 2016). Thus, equalizing the discussion of gender across clients could be an indicator of a counselor’s heightened awareness of the impact of gender on the client’s life and their ability to address these challenges.

Affirming Perspective

The affirming perspective theme includes three sub themes, affirmative clinical stance, affirmative client experiences, and affirmative professional identity. Participants who expressed an affirming perspective shared the experience of an innate openness and acceptance for others, as well as the impassioned desire to engage in social justice on behalf of their clients. Heck et al. (2013) asserted that a critical act of engaging in competent practice with gender diverse clients is the ability to affirm and validate their experiences. Skervern and Aubin (2015) elaborated on this assertion indicating that counselor’s provision of affirmation and validation must be intentional and deliberate.

The participants collectively indicated taking an intentional and deliberate affirmative clinical stance regarding counseling with gender diverse clients. Specifically, the participants expressed the importance of providing unconditional positive regard, genuineness, compassion, and support during therapeutic interactions with gender diverse clients. In addition, each participant identified affirmative client experiences, either observed or through verbal feedback, regarding engagement in the counseling process. Participants articulated client experiences as comfortable, trusting, validating, and supportive. Both affirming clinical stance and client experiences led to the development of an affirmative professional identity.

Counselors entering the field who begin working with gender diverse clients view themselves as ill-equipped, lacking confidence, and under-developed regarding their ability to serve this population (Fredriksen-Doldsen et al., 2014); based on the inability to recognize and implement affirmative practices (Moe et al., 2015). After acquiring self-sought education and training, over five years of clinical experience, and engaging in counseling with gender diverse clients, the participants viewed themselves as confident and competent counselors who serve the gender diverse population. The ability to identify and articulate specific affirmative counselor characteristic and values emerged as a crucial aspect of affirming counseling provision.

Gender Binarianism

A major tenant of affirming counseling is maintaining an awareness and addressing subjective views about gender. Moe et al. (2015) concluded that counselor's working with gender diverse clients engage in counseling based on cultural, historical,

and personal perspectives of gender. Participants explained how subjective thoughts about and experience of gender throughout their lives has shaped their responses to gender diverse clients. Participants mentioned experiencing antagonistic thoughts about their clients' expressions of gender based on their personal perspective of gender binaries. Researchers Dickey and Loewy (2010) expressed the detrimental impact of mental health professionals' rigidity regarding gender binaries, including the inability to remain open, accepting, affirming, and supportive. The participants indicated the need to challenge themselves to determine the source of their binary views and address their experience of gender binarianism to avoid engaging in biased non-affirming practice.

Intentional Bias Examination

The act of intentionally examining bias was a theme that emerged from each participant experience. Because gender biases manifest unintentionally at times, counselors must actively work to identify and address these biases (Moe et al., 2015). Counselor competence with gender diverse clients hinges on the ability of the counselor to engage in self-examination to determine and address values, beliefs, and biases (Ratts et al., 2016). The participants identified various methods they employ to engage in intentional bias examination including self-awareness and introspection, two subthemes that emerged from this emergent main theme.

Self-awareness and introspection are subthemes that evolved out of the participants' experience of identifying and attending to their experiences of gender, as well as understanding the emotional and mental processes they experience from engaging in counseling with gender diverse clients. Although identifying gender biases was a

collective experience of the participants, each participant shared a different method for addressing gender bias. These strategies included engaging in clinical supervision voluntarily, engaging in peer supervision with trusted colleagues, attending diversity seminars to discuss biases, and attending personal therapy to explore themes of bias that arise from their work with gender diverse individuals. Regardless of the strategy implemented, each participant experience illuminated the value of bias identification and addressing bias to protect the client from harm, maintaining the professional relationship.

Professional Experience

The participants each shared the experience and feelings related to professional engagement with gender diverse clients. Overall, the participants shared that they did not intentionally seek the gender diverse community, but their innate human characteristics and affirming counseling skills allowed them to acquire gender diverse clients. For example, many participants shared that gender diverse clients were assigned to them by a clinical supervisor because they were known as open and accepting counselors. Many explained the experience of working with their first gender diverse client as anxiety-producing due to the lack of knowledge about the population. In addition, the resounding sentiment about the experience was the challenge of engaging with the client and the difficulty of initial encounters with the clients. However, each participant expressed a willingness and desire to educate themselves, self-examine and address biases, and activate affirming perspectives to ameliorate their competence with the gender diverse population.

Limitations of the Study

A limitation of this study I anticipated was the lack of numerical data to support the findings. Quantitative researchers can conclude research findings with the certainty of numbers to express the significance of the outcomes (Husserl, 2013). Specifically, regarding the sample size, my sample of seven participants was not large enough to assert quantitative significance and generalize the findings to the large population of counselors serving gender diverse clients. In addition, engaging in hermeneutic phenomenology inherently requires the researcher to include his or her presuppositions regarding the phenomenon in question (Spence, 2017). In a hermeneutic study, the researcher's role is co-creator of meaning through the collaboration with the participants and their experiences (Sloan & Bowe, 2014). Both the lack of numerical data to support the findings and the inclusion of the collaborative role of the researcher in the study impede the trustworthiness of the study.

Trustworthiness in qualitative research is signified by the aspects of the study that increase the quality of the research (Kafle, 2011). To enhance the transferability of the study, I ensured that the participants selected met the study criteria to acquire rich data. Doing so provides opportunities to gather data with several meaningful emergent themes (Morse, 2015). The credibility of the study was solidified with the inclusion of verbatim accounts of participant experiences. I also connected the experiences of the participants to credible literary resources to increase the credibility of the research. The use of participant words and credible sources enhances the credibility and thus the trustworthiness of the research (Beins & Beins, 2012; Sloan & Bowe, 2014).

Recommendations

This study provides an interpretive meaning of the experience of counseling gender diverse clients from the counselor's perspective. The study findings add to the dearth of research regarding counseling experiences of the gender diverse population. Specific limitations in research on gender diverse populations include effective therapeutic interventions, counselor characteristics, and methods for ameliorating the therapeutic process with gender diverse clients (Budge et al., 2017). The current study attends to these tasks by elucidating the experiences of counselors engaging in counseling with gender diverse clients to illuminate the meaning of this phenomenon. Based on the findings of the current study, a follow-up study to learn if the experiences of these participants changed over time will provide insight regarding the maintenance of counselor competence. This additional understanding would increase the meaning of long-term counseling with gender diverse clientele, including methods counselors implement to maintain competence with this population.

Another recommendation for future research is a study to understand the impact of applying the emergent themes from the current study with counselors lacking experience with gender diverse clients. Salisbury and Dentato (2016) revealed deficits in counselor competence with gender diverse clients due to the lack of education, training, and understanding the needs of the population. In addition, Ratts (2017) indicated that counselors must engage in education and training activities to ensure counselor competencies for working with gender diverse clients are implemented with efficacy. Understanding the impact of education and training that incorporates the emergent

themes from the current study will provide quantifiable outcomes regarding the effectiveness of the study findings with other counselors. Learning the effectiveness of the application of the emergent themes increases knowledge of effective strategies for improving the counseling process for gender diverse clients.

The exploration of counselor bias emerged as a key component of the experience of counselors working with gender diverse clients. Bidell and Stepleman (2017) asserted that while the counseling profession is shifting towards an affirming perspective, mental health providers continue to struggle with rigid biases, prejudices, and attitudes that are detrimental to safe and supportive counseling for gender diverse clients. A recommendation for future research is a study to understand the effectiveness of the varying methods participants of the current study used to address bias. Measuring gender-related biases of participants, implementing the methods employed to identify and address bias, then engaging in a post-assessment of gender-related bias will provide outcomes regarding the effectiveness of various methods for mitigating the deleterious effects of bias on the counseling process with gender diverse clients.

Implications

The results of the current study provide insight regarding the potential contribution to positive social change. The current research serves as the foundation for social change in the counseling field regarding alterations to counselor competencies, counselor education programs, and training activities. In addition, inexperienced counselors and could benefit from understanding the meaning of counseling with gender diverse clients based on the findings of the current research. This study provides valuable

insight regarding the experience of gender diverse counseling from the counselor's perspective, leading to enhancements for the profession and client wellness overall.

Originally, counselors approached counseling with gender diverse individuals from a deficit-based model that focused on negative perspectives and understanding of gender identities existing outside of the male female binary (Avera et al., 2015; Singh & Burnes, 2010a). Today, wellness-models of care that openly explore and affirm gender diversity from a strengths-based perspective offer counselors the ability to eliminate harmful pathologies used to denote diverse gender identities (Avera et al., 2015). The implications of this study are twofold regarding the positive impact of social change at the individual level. First, increasing the competence and availability of educated and trained counselors to serve the gender diverse population could enhance the quality and perception of counseling services. Secondly, the wellbeing of gender diverse individuals could increase due to the increase in access to competent counselors.

Implementing the Heidegger's philosophy of hermeneutic phenomenology made it possible to "understand the meaning of experience by searching for themes, engaging with the data interpretively" (Sloan & Bowe, 2014, p. 1297). Adhering to the tenets of hermeneutic phenomenological inquiry allowed me to incorporate my prior knowledge of the phenomenon as a means of engage in a collaborative research process with the participants to interpret the meaning of their experiences. Thus, the study results credibly add to the body of existing research related to counseling with gender diverse individuals, providing an in-depth understanding of the phenomenon from the counselors lived experiences. This study highlights the value of employing a hermeneutic framework to

deepen one's understanding of phenomena and enhance the trustworthiness of qualitative research.

Regarding clinical practice, the study findings imply the need to reform the counselor standards and competencies for counseling practice with gender diverse clients. Based on the findings of this study, the counselor competencies developed to guide the therapeutic process with gender diverse clientele are limitedly implemented due to the perception that these competencies do not meet the counseling needs of gender diverse clients. A deficiency of the current counseling competencies for counseling with gender diverse individuals is the lack of specific language, techniques, and strategies to apply practical and effective counseling practices with this population (Moe et al., 2015). The research findings illuminate the meaning of affirming counseling with the gender diverse population, including implications for the counseling process, the counselor, and the client.

Conclusion

Gender diversity is an ever-changing aspect of American culture (Ratts et al., 2016). Formal counselor education and training programs must include an academic focus on the unique needs of the gender diverse population and effective counseling responses to these needs (Campbell & Arkles, 2017). Counseling with gender diverse clients presents a daunting, anxiety provoking task that most counselors are ill-equipped to handle. Applying the meaning of gender diverse counseling, derived from the counselor's perspective, in counselor education and clinical settings serves as the catalyst for positive social change that will eradicate transprejudice, transphobia, and other forms

of bias-based discrimination previously experienced by gender diverse individuals in counseling.

References

- Albright, K. J., Duggan, C. H., & Epstein, M. J. (2008). Analyzing trauma narratives: Introducing the narrative form index and matrix. *Rehabilitation Psychology, 53*(3), 400-411. doi:10.1037/a0013040
- American Counseling Association Competencies for Counseling with Transgender Clients. (2010). *Journal of LGBT Issues in Counseling, 4*(3/4), 135-159. <https://doi.org/10.1080/15538605.2010.524839>
- American Counseling Association. (2014). *ACA Code of Ethics*. Alexandria, VA: Author.
- Avera, J., Zholu, Y., Speedlin, S., Ingram, M., & Prado, A. (2015). Transitioning into wellness: Conceptualizing the experiences of transgender individuals using a wellness model. *Journal of LGBT Issues in Counseling, 9*(4), 273-287. <https://doi.org/10.1080/15538605.2015.1103677>
- Bauerband, L. A., & Galupo, M. P. (2014). The gender identity reflection and rumination scale: development and psychometric evaluation. *Journal of Counseling and Development, 2*(2), 219. <https://doi.org/10.1002/j.1556-6676.2014.00151.x>
- Beins, B. C., & Beins, A. M. (2012). *Effective writing in psychology: Papers, posters and presentations*. (2nd ed.). Malden, MA: Blackwell Printing.
- Bidell, M. P. (2013). Addressing disparities: The impact of a lesbian, gay, bisexual, and transgender counselling course. *Counselling & Psychotherapy Research, 13*(4), 300-307. doi:10.1080/14733145.2012.741139
- Bidell, M. P., & Stepleman, L. M. (2017). An interdisciplinary approach to lesbian, gay, bisexual, and transgender clinical competence, professional training, and ethical care:

Introduction to the special issue. *Journal of Homosexuality*, 64(10), 1305-1329.

<https://doi.org/10.1080/00918369.2017.1321360>

Bloomer, M. J., Endacott, R., O'Connor, M., & Cross, W. (2013). The 'dis-ease' of dying: Challenges in nursing care of the dying in the acute hospital setting. A qualitative observational study. *Palliative Medicine*, 27(8), 757-764.

doi:10.1177/0269216313477176

Briggie, A. M., Hilsenroth, M. J., Conway, F., Muran, J. C., & Jackson, J. M. (2016).

Patient comfort with audio or video recording of their psychotherapy sessions: Relation to symptomatology, treatment refusal, duration, and outcome. *Professional Psychology: Research and Practice*, 47(1), 66-76. doi:10.1037/a0040063

Brown, L. S. (2011). Client diversity in psychotherapy. In J. C. Norcross, G. R. VandenBos, D. K. Freedheim, J. C. Norcross, G. R. VandenBos, & D. K. Freedheim (Eds.), *History of psychotherapy: Continuity and change*. (pp. 475-483). Washington, DC, US: American Psychological Association. <https://doi.org/10.1037/12353-028>

Buck, D. M. (2016). Defining transgender: What do lay definitions say about prejudice?

Psychology of Sexual Orientation and Gender Diversity, 3(4), 465-472.

<https://doi.org/10.1037/sgd0000191>

Budge, S. L., Israel, T., & Merrill, C. R. S. (2017). Improving the lives of sexual and gender minorities: The promise of psychotherapy research. *Journal of Counseling Psychology*, 64(4), 376-384. <https://doi.org/10.1037/cou0000215>

Bush, G. (2009). Thinking around the corner: The power of information literacy. *Phi Delta Kappan*, 90(6), 446-447.

Cammell, P. (2015). Relationality and existence: Hermeneutic and deconstructive approaches emerging from Heidegger's philosophy. *The Humanistic Psychologist*, 43(3), 235-249.

doi:10.1080/08873267.2014.996808

Campbell, L. F., & Arkles, G. (2017). Ethical and legal concerns for mental health professionals. In A. Singh, & lore m. dickey (Eds.), *Affirmative counseling and psychological practice with transgender and gender nonconforming clients*. (pp. 95-118). Washington, DC, US: American Psychological Association.

<https://doi.org/10.1037/14957-005>

Case, K. A., & Meier, S. C. (2014). Developing allies to transgender and gender-nonconforming youth: Training for counselors and educators. *Journal of LGBT Youth*, 11(1), 62-82. doi:10.1080/19361653.2014.840764

Chan, C. D., & Farmer, L. B. (2017). Making the case for interpretative phenomenological analysis with LGBTGEQ+ persons and communities. *Journal of LGBT Issues in Counseling*, 11(4), 285-300. <https://doi.org/10.1080/15538605.2017.1380558>

Chang, S. C., & Singh, A. A. (2016). Affirming psychological practice with transgender and gender nonconforming people of color. *Psychology of Sexual Orientation and Gender Diversity*, 3(2), 140-147. doi:10.1037/sgd0000153

Chang, S. C., Singh, A. A., & Rossman, K. (2017). Gender and sexual orientation diversity within the TGNC community. In A. Singh & lore m. dickey (Eds.), *Affirmative counseling and psychological practice with transgender and gender nonconforming clients*. (pp. 19-40). Washington: American Psychological Association.

<https://doi.org/10.1037/14957-002>

- Clark, K. A., White Hughto, J. M., & Pachankis, J. E. (2017). "What's the right thing to do?" Correctional healthcare providers' knowledge, attitudes and experiences caring for transgender inmates. *Social Science & Medicine*, 193(Supplement C), 80-89.
<https://doi.org/10.1016/j.socscimed.2017.09.052>
- Collins, S., Arthur, N., Brown, C., & Kennedy, B. (2015). Student perspectives: Graduate education facilitation of multicultural counseling and social justice competency. *Training and Education in Professional Psychology*, 9(2), 153-160.
<https://doi.org/10.1037/tep0000070>
- Corbin, J., & Strauss, A. (2015). *Basics of qualitative research: Techniques and procedures for developing grounded theory* (4th ed.). Thousand Oaks, CA: Sage.
- Counseling research: Databases: Articles and more. (n.d.). Retrieved September 21, 2016, from Walden University website:
<http://academicguides.waldenu.edu/counselingresearch#s-lg-box-1524364>
- Creswell, J. W. (2013). *Qualitative inquiry and research design: Choosing among five approaches* (3rd ed.). Thousand Oaks, CA: Sage Publications, Inc.
- Creswell, J. W. (2014). *Research design: Qualitative, quantitative, and mixed methods approaches* (Laureate Education, Inc., custom ed.). Thousand Oaks, CA: Sage Publications, Inc.
- Crowther, S., Ironside, P., Spence, D., & Smythe, L. (2017). Crafting stories in hermeneutic phenomenology research: A methodological device. *Qualitative Health Research*, 27(6), 826-835. <https://doi.org/10.1177/1049732316656161>

- dickey, lore m., Hendricks, M. L., & Bockting, W. O. (2016). Innovations in research with transgender and gender nonconforming people and their communities. *Psychology of Sexual Orientation and Gender Diversity, 3*(2), 187-194.
<https://doi.org/10.1037/sgd0000158>
- dickey, lore m., & Loewy, M. I. (2010). Group work with transgender clients. *Journal for Specialists in Group Work, 35*(3), 236-245.
<https://doi.org/10.1080/01933922.2010.492904>
- Dispenza, F., & O'Hara, C. (2016). Correlates of transgender and gender nonconforming counseling competencies among psychologists and mental health practitioners. *Psychology of Sexual Orientation and Gender Diversity, 3*(2), 156-164.
[doi:10.1037/sgd0000151](https://doi.org/10.1037/sgd0000151)
- Donatone, B., & Rachlin, K. (2013). An intake template for transgender, transsexual, genderqueer, gender nonconforming, and gender variant college students seeking mental health services. *Journal of College Student Psychotherapy, 27*(3), 200-211.
<https://doi.org/10.1080/87568225.2013.798221>
- Dworkin, S. L. (2012). Sample size policy for qualitative studies using in-depth interviews. *Archives of Sexual Behavior, 41*(6), 1319-1320. [doi:10.1007/s10508-012-0016-6](https://doi.org/10.1007/s10508-012-0016-6)
- Fredriksen-Goldsen, K. I., Hoy-Ellis, C. P., Goldsen, J., Emler, C. A., & Hooyman, N. R. (2014). Creating a vision for the future: Key competencies and strategies for culturally competent practice with lesbian, gay, bisexual, and transgender (LGBT) older adults in the health and human services. *Journal of Gerontological Social Work, 57*(2-4), 80-107.
<https://doi.org/10.1080/01634372.2014.890690>

- Gadamer, H.-G. (2013). *Truth and method* (J. Weinsheimer & D. G. Marshall, Trans.). New York, NY: Bloomsbury Academic. (Original work published 1975)
- Grant, J. M., Mottet, L. A., Tanis, J., Harrison, J., Herman, J. L., and Keisling, M. (2011). *Injustice at every turn: A report of the national transgender discrimination survey*. Washington: National Center for Transgender Equality and National Gay and Lesbian Task Force.
- Greene, D. C., & Britton, P. J. (2014). Self-regulation mediates LGBTQQ oppressive situations and psychological distress: Implications for psychotherapy. *Journal of Gay & Lesbian Mental Health, 18*(2), 121-141. <https://doi.org/10.1080/19359705.2013.831385>
- Haddouk, L., Govindama, Y., & Marty, P. F. (2013). A video interview experience. *Cyberpsychology, Behavior, and Social Networking, 16*(5), 402-405. <https://doi.org/10.1089/cyber.2013.1509> (Original work published)
- Hancock, M. E., Amankwaa, L., Revell, M. A., & Mueller, D. (2016). Focus group data saturation: A new approach to data analysis. *The Qualitative Report, 21*, 2124-2130. Retrieved from <http://nsuworks.nova.edu/tqr/vol21/iss11/13>
- Heck, N. C., Flentje, A., & Cochran, B. N. (2013). Intake interviewing with lesbian, gay, bisexual, and transgender clients: Starting from a place of affirmation. *Journal of Contemporary Psychotherapy; New York, 43*(1), 23-32. <http://dx.doi.org.ezp.waldenulibrary.org/10.1007/s10879-012-9220-x>
- Heidegger, M. (2013). *Being and time* [Kindle Edition]. (Original work published 1926)

- Ho, K. M., Chiang, V. L., & Leung, D. (2017). Hermeneutic phenomenological analysis: The 'possibility' beyond 'actuality' in thematic analysis. *Journal of Advanced Nursing*, 73(7), 1757-1766. doi:10.1111/jan.13255
- Hunt, J. (2014). An initial study of transgender people's experiences of seeking and receiving counselling or psychotherapy in the UK. *Counselling & Psychotherapy Research*, 14(4), 288-296. doi:10.1080/14733145.2013.838597
- Husserl, E. (2013). *Ideas: General introduction to pure phenomenology*. New York, NY: Routledge. (Original work published 1931)
- Kafle, N. P. (2011). Hermeneutic phenomenological research method simplified. *Bodhi: An Interdisciplinary Journal*, 5, 181-200.
- Kanamori, Y., & Cornelius-White, J. D. (2017). Counselors' and counseling students' attitudes toward transgender persons. *Journal of LGBT Issues in Counseling*, 11(1), 36-51. doi:10.1080/15538605.2017.1273163
- Laureate Education, Inc. (Executive Producer). (2010a). *Counselor as scholar practitioner: A professional counselor as consumer of information*. Baltimore: Author.
- Laureate Education, Inc. (Executive Producer). (2010b). *Doctoral research: Why critique research?* Baltimore, MD: Author.
- Laureate Education, Inc. (Executive Producer). (2010c). *Writing a quality prospectus: The literature review I*. Baltimore, MD: Author.
- Lee, Y. (2014). Insight for writing a qualitative research paper. *Family and Consumer Sciences Research Journal*, 43(1), 94-97. doi:10.1111/fcsr.12084

- Leech, N. L., & Onwuegbuzie, A. J. (2011). Beyond constant comparison qualitative data analysis: Using NVivo. *School Psychology Quarterly*, 26(1), 70-84.
doi:10.1037/a0022711
- Lewis, I. (2008). With feeling: Writing emotion into counselling and psychotherapy research. *Counselling & Psychotherapy Research*, 8(1), 63-70. doi:10.1080/14733140801918953
- McCullough, R., Dispenza, F., Parker, L. K., Viehl, C. J., Chang, C. Y., & Murphy, T. M. (2017). The counseling experiences of transgender and gender nonconforming clients. *Journal of Counseling & Development*, 95(4), 423-434.
<https://doi.org/10.1002/jcad.12157>
- Miles, M., Francis, K., Chapman, Y., & Taylor, B. (2013). Hermeneutic phenomenology: A methodology of choice for midwives. *International Journal of Nursing Practice*, 19(4), 409-414. <https://doi.org/10.1111/ijn.12082>
- Mizock, L., & Lundquist, C. (2016). Missteps in psychotherapy with transgender clients: Promoting gender sensitivity in counseling and psychological practice. *Psychology of Sexual Orientation and Gender Diversity*, 3(2), 148-155. doi:10.1037/sgd0000177
- Moe, J. L., Finnerty, P., Sparkman, N., & Yates, C. (2015). Initial assessment and screening with LGBTQ clients: A critical perspective. *Journal of LGBT Issues in Counseling*, 9(1), 36-56. <https://doi.org/10.1080/15538605.2014.997332>
- Moldjord, C., & Hybertsen, I. D. (2015). Training reflective processes in military aircrews through holistic debriefing: The importance of facilitator skills and development of trust. *International Journal of Training and Development*, 19(4), 287-300.
<https://doi.org/10.1111/ijtd.12063>

- Morse, J. M. (2015). Critical analysis of strategies for determining rigor in qualitative inquiry. *Qualitative Health Research, 25*(9), 1212-1222.
<https://doi.org/10.1177/1049732315588501>
- Neufeld, A. C. (2014). Transgender therapy, social justice, and the northern context: Challenges and opportunities. *Canadian Journal of Counselling and Psychotherapy, 48*(3), 218-230.
- O'Connor, S. J. (2011). Context is everything: The role of auto-ethnography, reflexivity and self-critique in establishing the credibility of qualitative research findings. *European Journal of Cancer Care, 20*(4), 421-423. doi:10.1111/j.1365-2354.2011.01261.x
- O'Hara, C., Dispenza, F., Brack, G., & Blood, R. C. (2013). The preparedness of counselors in training to work with transgender clients: A mixed methods investigation. *Journal of LGBT Issues in Counseling, 7*(3), 236-256.
- Onwuegbuzie, A. J., & Frels, R. K. (2014). A framework for using discourse analysis for the review of the literature in counseling research. *Counseling Outcome Research and Evaluation, 5*(1), 52-63. doi:10.1177/2150137813515905
- Patton, J., & Reicherzer, S. (2010). Inviting 'Kate's' authenticity: Relational cultural theory applied in work with a transsexual sex worker of color using the competencies for counseling with transgender clients. *Journal of LGBT Issues in Counseling, 4*(3-4), 214-227. doi:10.1080/15538605.2010.524846
- Patton, M. Q. (2015). *Qualitative research & evaluation methods* (4th ed.). Thousand Oaks, CA: Sage Publications.

- Pearce, G., Thøgersen-Ntoumani, C., & Duda, J. L. (2014). The development of synchronous text-based instant messaging as an online interviewing tool. *International Journal of Social Research Methodology: Theory & Practice*, 17(6), 677-692.
doi:10.1080/13645579.2013.827819
- Pistrang, N., & Barker, C. (2012). Varieties of qualitative research: A pragmatic approach to selecting methods. In H. Cooper, P. M. Camic, D. L. Long, A. T. Panter, D. Rindskopf, K. J. Sher, ... K. J. Sher (Eds.), *APA handbook of research methods in psychology, Vol 2: Research designs: Quantitative, qualitative, neuropsychological, and biological* (pp. 5-18). Washington, DC, US: American Psychological Association. doi:10.1037/13620-001
- Poteat, T., German, D., & Kerrigan, D. (2013). Managing uncertainty: A grounded theory of stigma in transgender health care encounters. *Social Science & Medicine*, 84, 22-29.
doi:10.1016/j.socscimed.2013.02.019
- Ratts, M. J. (2017). Charting the center and the margins: Addressing identity, marginalization, and privilege in counseling. *Journal of Mental Health Counseling*, 39(2), 87-103.
<https://doi.org/10.17744/mehc.39.2.01>
- Ratts, M. J., Singh, A. A., Nassar-McMillan, S., Butler, S. K., & McCullough, J. R. (2016). Multicultural and social justice counseling competencies: Guidelines for the counseling profession. *Journal of Multicultural Counseling & Development*, 44(1), 28-48.
<https://doi.org/10.1002/jmcd.12035>
- Reicherzer, S. (2008). Evolving Language and Understanding in the Historical Development of the Gender Identity Disorder Diagnosis. *Journal of LGBT Issues in Counseling*, 2(4), 326-347. <https://doi.org/10.1080/15538600802502035>

- Robinson, O. C. (2014). Sampling in interview-based qualitative research: A theoretical and practical guide. *Qualitative Research in Psychology, 11*(1), 25-41.
- Rocco, T. S. (2003). Shaping the future: Writing up the method on qualitative studies. *Human Resource Development Quarterly, 14*(3), 343-349. doi:10.1002/hrdq.1070
- Rosenberger, J. (2015). Enactment and dissociation: A retrospective journey applying relational theory. *Smith College Studies in Social Work, 85*(4), 453-467.
doi:10.1080/00377317.2015.1092826
- Salisbury, M. E., & Dentato, M. P. (2016). An exploratory study examining needs, access, and competent social services for the transgender community in Phoenix, Arizona. *Journal of Human Behavior in the Social Environment, 26*(2), 119-136.
<https://doi.org/10.1080/10911359.2015.1052911>
- Sangganjanavanich, V. F., & Headley, J. A. (2013). Facilitating career development concerns of gender transitioning individuals: Professional standards and competencies. *The Career Development Quarterly, 61*(4), 354-366. <https://doi.org/10.1002/j.2161-0045.2013.00061.x>
- Seitz, S. (2016). Pixilated partnerships, overcoming obstacles in qualitative interviews via Skype: a research note. *Qualitative Research, 16*(2), 229-235.
<https://doi.org/10.1177/1468794115577011> (Original work published)
- Sexual orientation and gender identity definitions. (2018). Retrieved from
https://www.hrc.org/resources/sexual-orientation-and-gender-identity-terminology-and-definitions?utm_source=GS&utm_medium=AD&utm_campaign=BPI-HRC-Grant&utm_content=276004593780&utm_term=gender%20identities&gclid=Cj0KCQjw

yYHaBRDvARIsAHkAXcuT7yxWwsrUJSxYu36Oct9ZhAgnugl77Xf_LpDShZA4gyQ_
_Q88p_waAqSGEALw_wcB

Shi, Q., & Doud, S. (2017). An examination of school counselors' competency working with lesbian, gay and bisexual and transgender (LGBT) students. *Journal of LGBT Issues in Counseling, 11*(1), 2-17. doi:10.1080/15538605.2017.1273165

Singh, A. A., & Burnes, T. R. (2010a). Introduction to the special issue: Translating the competencies for counseling with transgender clients into counseling practice, research, and advocacy. *Journal of LGBT Issues in Counseling, 4*(3/4), 126-134.

<https://doi.org/10.1080/15538605.2010.524837>

Singh, A. A., & Burnes, T. R. (2010b). Shifting the counselor role from gatekeeping to advocacy: Ten strategies for using the competencies for counseling with transgender clients for individual and social change. *Journal of LGBT Issues in Counseling, 4*(3/4), 241-255. <https://doi.org/10.1080/15538605.2010.525455>

Singh, A., & dickey, l. m. (2017). Introduction. In A. Singh, l. m. dickey (Eds.), *Affirmative counseling and psychological practice with transgender and gender nonconforming clients* (pp. 3-18). Washington, DC, US: American Psychological Association.

doi:10.1037/14957-001

Skerven, K., & Aubin, E. de S. (2015). Internalized homonegativity and the double bind for lesbians: Those with higher need perceive more barriers to mental health treatment.

Journal of LGBT Issues in Counseling, 9(1), 17-35.

<https://doi.org/10.1080/15538605.2014.997331>

- Sloan, A., & Bowe, B. (2014). Phenomenology and hermeneutic phenomenology: The philosophy, the methodologies, and using hermeneutic phenomenology to investigate lecturers' experiences of curriculum design. *Quality and Quantity*, 48(3), 1291-1303. <https://dx.doi.org/10.1007/s11135-013-9835-3>
- Smith, J. A., Flowers, P., & Larkin, M. (2009). *Interpretative phenomenological analysis: theory, method and research*. Los Angeles: SAGE.
- Spence, D. G. (2017). Supervising for robust hermeneutic phenomenology: Reflexive engagement within horizons of understanding. *Qualitative Health Research*, 27(6), 836-842. <https://doi.org/10.1177/1049732316637824>
- Sue, D. W., Arredondo, P., & McDavis, R. J. (1992). Multicultural counseling competencies and standards: A call to the profession. *Journal of Multicultural Counseling and Development*, 20, 64-88. doi:10.1002/j.2161-1912.1992.tb00563.x
- Taskforce, A. L. C., Harper, A., Finnerty, P., Martinez, M., Brace, A., Crethar, H. C., ... Hammer, T. R. (2013). Association for lesbian, gay, bisexual, and transgender issues in counseling competencies for counseling with lesbian, gay, bisexual, queer, questioning, intersex, and ally individuals. *Journal of LGBT Issues in Counseling*, 7(1), 2-43. <https://doi.org/10.1080/15538605.2013.755444>
- Trier-Bieniek, A. (2012). Framing the telephone interview as a participant-centered tool for qualitative research: A methodological discussion. *Qualitative Research*, 12(6), 630-644. doi:10.1177/1468794112439005

- Troutman, O., & Packer-Williams, C. (2014). Moving beyond CACREP standards: Training counselors to work competently with LGBT clients. *Journal of Counselor Preparation & Supervision, 6*(1), 1-19. <https://doi.org/10.7729/51.1088>
- van Manen, M. (2016). *Phenomenology of practice: Meaning-giving methods in phenomenological research and writing*. New York, NY: Routledge. (Original work published 2014)
- Walden University. (2014). *Searching and finding information in the library databases: Overview*. Retrieved from <http://academicguides.waldenu.edu/searchingfinding>
- Walsh, I., Holton, J. A., Bailyn, L., Fernandez, W., Levina, N., & Glaser, B. (2015). What grounded theory is...a critically reflective conversation among scholars. *Organizational Research Methods, 18*(4), 581-599. doi:10.1177/1094428114565028
- Watts, M. (2014). *Heidegger: An essential guide for complete beginners* [Kindle Mac version]. (Original work published 2001)
- Williams, E. N., & Morrow, S. L. (2009). Achieving trustworthiness in qualitative research: A pan-paradigmatic perspective. *Psychotherapy Research, 19*(4-5), 576-582. doi:10.1080/10503300802702113
- Wolgemuth, J. R., Erdil-Moody, Z., Opsal, T., Cross, J. E., Kaanta, T., Dickmann, E. M., & Colomer, S. (2015). Participants' experiences of the qualitative interview: Considering the importance of research paradigms. *Qualitative Research, 15*(3), 351-372. doi:10.1177/1468794114524222
- World Professional Association for Transgender Health. (2012). *Standards of care for the health of transsexual, transgender, and gender nonconforming people –Version 7*.

Wrathall, M. (2014). *How to read Heidegger* [Kindle Mac version]. (Original work published 2005)

Wronka, J. (2008). *Human rights and social justice: Social action and service for the helping and health professions*. Thousand Oaks, CA: Sage Publications.

Zoom. (2018). About Zoom. Retrieved from <https://zoom.us/about>

Appendix A: Data Collection Email

Dear **(Insert Name)**,

I hope this email finds you well. I am currently a PhD student in the Counselor Education and Supervision program at Walden University. Presently, I am completing my dissertation research by conducting a study about the experiences of counselors who engage in counseling with gender minorities. The title of the study is: “ Professional Counselors’ Lived Experiences of Counseling Gender Diverse Clients” (IRB Approval # 05-23-18-0316122). As part of my research study, I am looking for professional counselors who have at least five years post independent licensure and are either currently working with or who have worked with gender minorities in counseling.

For this study, you will be asked to participate in a brief demographic survey to ensure you meet the criteria for the study. If you meet the criteria, you will be invited to engage in a 90-minute meeting (15-minute introduction to clarify any questions, 60-minute semi-structured interview that will be recorded, and 15-minutes to complete a short debrief and conclude the interview). If you agree, I will provide you with a more detailed informed consent document. I will ask you review and email back the informed consent with the phrase “ I consent” in the email to signify your voluntary participation in the research study. Finally, I will schedule a date and time that we can meet via video conference for the interview.

Please let me know if you would like to participate or if you know any other counselors that fit the criteria and may be interested in participating. You can contact me by phone 240-427-5547 or email veronica.kirkland@waldenu.edu if you have any additional questions. Thank you very much and I look forward to your response.

Best wishes,

Veronica M. Kirkland

Appendix B: Informed Consent

CONSENT FORM

You are invited to take part in a research study about the experiences of professional counselors who engage in counseling with gender minorities. This research will extend the work of researchers before me by illuminating the phenomenon of counseling with gender minorities to discover the meaning of this experience for professional counselors, adding significant information to the field that will hopefully help elevate the competence of counselors and the counseling experience for gender minorities. The researcher is inviting at least six professional counselors with a lived experience of counseling gender minorities and five years of post-supervision counseling experience to be in the study. This form is part of a process called “informed consent” to allow you to understand this study before deciding whether to take part.

This study is being conducted by a researcher named Veronica M. Kirkland who is a doctoral student at Walden University. You might already know the researcher as a professional counselor, but this study is separate from that role.

Procedures:

If you agree to be in this study, you will be asked to:

- Engage in a semi-structured interview with the researcher via a secure Online video conference platform and respond to questions about your counseling interactions with gender minorities. You may be asked to engage in a follow-up interview to clarify responses, confirm responses, or respond to additional questions to gain further information. The interviews will be audio recorded.
- The initial interview will take a minimum of 60 minutes, but no longer than 90 minutes. This process will include a brief debriefing that will include three questions to process your experience of the interview.
- If necessary, a follow-up interview will be completed within two weeks after the initial interview and may last up to 30 minutes.
- Please note, you are under no obligation to engage in this study, complete the interview after it has begun, or engage in the follow-up interview process. You are invited to participate in the study/interview and you can terminate the interview at any time.

Here are some sample questions:

- Please share your experience counseling gender minorities.
- Please share your experience of the mental health needs of gender minorities.
- What is your experience of education and training that prepared you to counsel gender minorities?

Voluntary Nature of the Study:

This study is voluntary. You are free to accept or turn down the invitation. No one will treat you differently if you decide not to be in the study. If you decide to be in the study now, you can still change your mind later. You may stop at any time. Please note that not all volunteers will be contacted to take part in the study.

Risks and Benefits of Being in the Study:

Being in this type of study involves some risk of the minor discomforts that can be encountered in daily life, such as fatigue, stress or becoming upset. Being in this study would not pose risk to your safety or wellbeing.

With this research, I will attempt to affect social change by providing additional understanding regarding the phenomenon of counseling with gender minorities. I hope that these changes will positively enhance the therapeutic relationships between counselors and gender minority clients to foster growth and change that will reduce the impact of the life challenges gender minorities experience.

Payment:

Participants in the study will not receive any payment, gifts, or reimbursements.

Privacy:

Reports coming out of this study will not share the identities of individual participants. Details that might identify participants, such as the location of the study, also will not be shared. The researcher will not use your personal information for any purpose outside of this research project. Data will be kept secure through electronic backup files, copies, and secured storage. After completing the interview, recording, and transcription process, I will save the information electronically and make duplicates of the information for myself and the participants to ensure the process remains ethically sound. In addition, the electronic files will be data encrypted with passcodes to ensure the safety of the information. Data will be kept for a period of at least 5 years, as required by the university.

Contacts and Questions:

You may ask any questions you have now. Or if you have questions later, you may contact the researcher via veronica.kirkland@waldenu.edu. If you want to talk privately about your rights as a participant, you can call the Research Participant Advocate at my university at 612-312-1210. Walden University's approval number for this study is 05-23-18-0316122 and it expires on May 22, 2019. Please print or save this consent form for your records.

Obtaining Your Consent

If you feel you understand the study well enough to make a decision about it, please indicate your consent by replying to this email with the words, " I consent."

Appendix C: Interview Protocol

Interview Protocol

Professional Counselors' Lived Experiences of Counseling Gender Diverse Clients**Time of Interview:****Date:****Place:****Interviewer:****Interviewee:****Introduction and Brief Description of the Research:**

Thank you for agreeing to voluntarily participate in my study. I will briefly review the informed consent that you received and then we will begin the interview. Do you have any questions before we begin? (Review the informed consent.)

Through the proposed research, I will discover the lived experiences of professional counselors engaging in counseling with gender minorities. For the purposes of this study, the term gender minority includes individuals identifying outside of the rigid gender binaries of male and female (Moe et al., 2015). These identities include transgender, gender non-conforming, genderqueer, gender-fluid and many other self-identifying terms created by members of this community (ACA, 2010). Interpreting these experiences will provide new insights on counseling with the gender minority population and illuminate the meaning of this experience by answering the research question:

What are the lived experiences of professional counselors who counsel gender minorities?

Questions:

1. Please tell me about your experience counseling gender minorities.

Prompts: What happened? How did you feel? What did you do?

2. Can you tell me how you began counseling gender minorities?

Prompts: How long ago? What do you think brought this about? Can you describe how you felt about counseling gender minorities at the time?

3. Can you tell me about the most recent time when you counseled a gender minority client?

Prompts: What happened? How did you feel? What did you do?

4. How have you changed the way you engage in counseling with gender minority clients over time?

Prompts: In what ways? Does anything make it better? Does anything make it worse? How do you feel about these changes?

5. How does your experience of counseling with gender minority clients differ from your experience counseling other clients?

Prompts: What are the positives? What are the challenges?

6. Please share your experience and understanding of the counseling needs of the gender minority population.

Prompts: How did you identify these needs? How did you come to understand these needs? How did you address these needs?

7. Can you tell me about your experience of education and training that prepared you to counsel gender minorities?

Prompts: What did you learn? What was it like? How did it help?

8. What is your experience with the counselor competencies developed for counseling gender minority clients?

9. What is your experience with understanding your bias and values, both personally and professionally?

10. How would you describe yourself as a professional counselor?

11. How do you think your gender minority clients experience you as a counselor?
12. As a professional counselor, how do you see yourself in the future engaging in counseling with gender minority clients?

Concluding Debrief and Closing Statement:

Thank you for your participation in the interview. I would like to ask a few additional questions to debrief since the interview is complete. Debriefing is a process that allows individuals to make sense of their experiences, emotions, frustration, and reactions to situations through engagement in self-reflective questioning and feedback.

The debriefing process provides opportunities to glean information and learn from the participants experiences in preparation for future interactions.

Debriefing Questions

- (1) How did you experience the interview?
- (2) What did you learn from the interview?
- 3) What do you need after completing the interview?

The responses provided for both the interview and debriefing will remain confidential. If you have further questions please feel free to contact me. I will review the interview recording, transcribe, and analyze the data over the next two weeks. After completing this process, I will send you a copy of the transcript for you to review and provide clarification and/or correction. In addition, I may contact you for a follow-up interview to clarify your responses, confirm your responses, and/or ask additional questions to gain more information. Thank you for your participation!

Appendix D: Demographic Survey

Counselor Experiences with Gender Diverse Clients
Demographic Survey

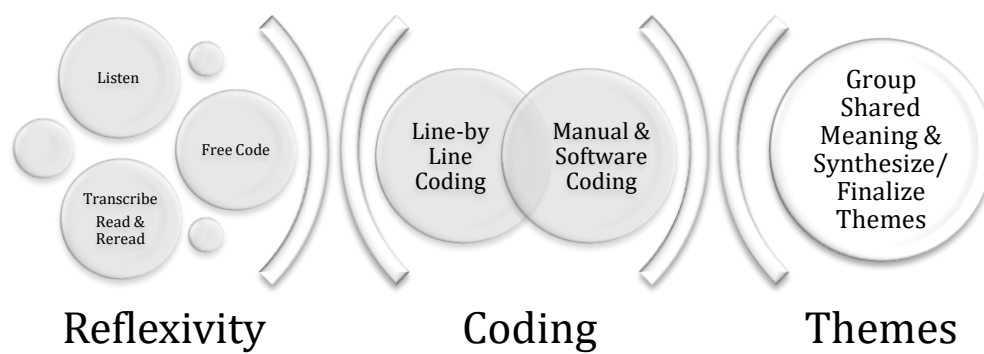
1. What is your gender?
2. What is your age?
3. What is your highest level of completed education?
4. Are you independently licensed as a counselor? For example, an LPC, LCPC, etc.

Yes ___
No ___
5. If so, in what state are you licensed to practice independently and what are your credentials?
State:

Credential:
6. How many years post licensure have you practiced independently, without the need for required supervision?
1 - 2 years ___
3 - 4 years ___
5 or more years ___
None ___
7. As an independently licensed counselor, do you have experience counseling gender minority or gender diverse clients (including but not limited to transgender individuals, gender non-conforming individuals, or another non-cisgender identifying individual)?

Yes ___
No ___

Appendix E: Data Analysis Process



Appendix F: Emergent Themes

Emergent Main Themes										
	Self-Sought Education and Training	Lack of Formal Gender Education	Understanding Gender Diversity Issues	Future Orientation	Cautious Communication	Holistic Gender Discussions	Affirming Perspective	Gender Binarianism	Intentional Bias Examination	Professional Experience
Emergent Subthemes		Limited awareness					Clinical stance			
		Application of gender counseling competencies					Client experiences			Professional identity