EXPERIENCE OF COUNSELLORS WORKING WITH LESBIAN, GAY, BISEXUAL AND TRANSGENDER CLIENTS IN THAILAND:
A GROUNDED THEORY METHOD

เป็นไพล เทวินทร์1*, อมราพร สุรการ ฐานศุกร์ จันประเสริญ1 และนฤมล พระใหญ่2
Penthai Thewin1*, Ammaraporn Surakarn1, Thasuk Janprasert1, and Narumol Prayai2

1Behavior Science Research Institute, Srinakharinwirot University
2Faculty of Education, Srinakharinwirot University
*corresponding email e-mail: pthewin@gmail.com

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บทคัดย่อ

จิตวิทยาเพื่อบุคคลที่มีความหลากหลายทางเพศได้รับการศึกษาและพัฒนาขึ้นอย่างต่อเนื่องตั้งแต่ปี พ.ศ. 2530 ในขณะที่สมรรถนะการให้คำปรึกษาสำหรับผู้รับบริการที่มีความหลากหลายทางเพศยังคงเป็นหัวข้อที่ได้รับการอภิปรายและแสดงความคิดเห็นในเรื่องความแตกต่างของวิธีการหรือแนวทางการให้คำปรึกษาที่เหมาะสมที่สุดเพื่อสนับสนุนบุคคลในกลุ่มนี้จุดประสงค์ของการศึกษาครั้งนี้เพื่อสำรวจสมรรถนะการให้คำปรึกษาซึ่งผู้ให้คำปรึกษาในประเทศไทยเชื่อว่ามีประโยชน์และมีประสิทธิผลสำหรับการให้บริการต่อบุคคลที่มีความหลากหลายทางเพศวิธีการวิจัยเชิงคุณภาพตามแบบวิธีการวิจัยทฤษฎีฐานรากถูกนำมาใช้ในการศึกษาในครั้งนี้ เพื่อกับรวบรวมข้อมูลในช่วงระยะเวลา 10 เดือน โดยการสัมภาษณ์แบบเขียนข้อเข้าร่วมวิจัยจำนวน 12 คนซึ่งได้รับการคัดเลือกอย่างเจาะจงเพื่อให้การวิจัยในบางกลุ่ม โดยเป็นผู้ให้คำปรึกษาที่ทำงานในองค์กรที่มีประสบการณ์ทางหลากหลายทางเพศในพัทยา เชียงใหม่ และ กรุงเทพมหานครผลการวิเคราะห์ข้อมูลจากผู้เข้าร่วมวิจัยพบว่า สมรรถนะการให้คำปรึกษาเพื่อการให้คำปรึกษาสี่การให้คำปรึกษา ได้แก่ ความสามารถ การกระทำ การรับรู้การให้คำปรึกษา

คำสำคัญ: บุคคลที่มีความหลากหลายทางเพศ การให้คำปรึกษา ทฤษฎีฐานราก
Abstract

Lesbian, gay, bisexual, and transgender (LGBT) psychology has been studied and has evolved significantly since 1980. However, counselling competencies for LGBT individuals are still very much in discussion as to the different methods optimal to support LGBT individuals. The purpose of this study was to explore counselling competencies perceived to be supportive and effective for LGBT clients by interviewing counselling professionals in Thailand who are actively involved with LGBT clients. Qualitative research was done using a Grounded Theory method as the technique to collect rich data over a ten-month period by intensive interviews. Using purposive and snowballing techniques, twelve participants who work as professional counsellors with LGBT organizations in Pattaya, Chiangmai and Bangkok, were selected. The results analyzed from participants’ experiences show that ability, awareness, advocacy and self-development are four main categories of competency utilized for effective counselling in Thailand.

Keywords: LGBT, counselling, Grounded Theory

Introduction

Lesbian, gay, bisexual and transgender (LGBT) individuals are people who recognize themselves as non-heterosexual or don’t conform to their sexual organs. They experience same-gender attraction and/or have sexual interactions with persons of the same-gender or multiple genders (Charles, 2013; Miller, 2014). Researchers now recognize that LGBT individuals encounter psychological issues because frequently they have experienced being abused, neglected, ignored, or bullied within community or society, through heterosexism, religion, governmental regulations, a lack of social and family support, or anti-gay harassment. The experience of discrimination that LGBT individuals face can prompt some challenging life circumstances which may lead to self-doubt, self-hatred, depression, self-harm, suicide, drug and alcohol abuse, and other adverse consequences on their well-being (Yardley, 2010; Charles, 2013; Shilo et al, 2015; Gibbs & Goldbach, 2015; Puckett & Levitt, 2015).
Thailand has a reputation to be a tolerant society in terms of personal behaviour including homosexuality as long as one does not pretentiously display the behavior. One of the most prevalent societal and cultural issues that LGBT individual in Thailand encounter is rejection from family. For Thais, Honoring parents, following and living under parental expectations, and preserving the family reputation are important social norms. However, these norms often go against or cause the suppression of sexual expression as they attempt to live according to these norms and to avoid discrimination or confrontation. LGBT in Thailand are also suppressed by their religious faith. In Buddhism, ‘Kateoy’ or a man who has romantic sex with another man ‘as a woman does,’ cannot ordain to be a monk. Some believe that LGBT individuals have bad karma because of sins from their previous lives, while others believe that they lack the capacity to control their desires or have no dharma in their lives (Kanoksilpdham, 2013; UNDP and USAID, 2014). In much of Thailand, LGBT individuals will be accepted as long as they conform to general social norms, culture, and family traditions. However, acting out their sexual expression may cause them to be targeted verbally or through rejection, abandonment, isolation or even physical assault and violence (Ieamkong, 2010; Ocha, 2013; Mahidol University et al, 2014, Jarernpanit et al, 2019). Theses LGBT individuals may seek support through therapeutic sessions with counsellors who not only have the professional skills, but also understand and have empathy for LGBT issues and their struggle to find their identity (ALGBTIC, 2010; Filmore, 2014).

Many studies related to counselling competencies have focused only in the individualism of a western societal context and did not included and reflected on collectivism-valued, homogeneity and Buddhism cultures such as in Thailand. Recent research revealed that 50% of LGBT individuals have been dissatisfied and displeased with the counselling they have received, not only because of the counsellors’ lack of understanding of LGBT concerns, but also because of the negative and heterosexist attitudes held by the counsellors (Logan and Barret, 2005; Clarke et al, 2010). Therefore, they terminated the counselling after just one
session. The purpose of this study was to explore counselling competencies perceived to be supportive and effective for LGBT clients by interviewing active counselling professionals in Thailand with the initial research question, “What experience creates a competent counsellor for LGBT clients?”

Method

A qualitative research: Constructivist Grounded Theory method was selected for this research because of its ability to collect rich data from research participants including values, beliefs, perspectives, ideas and background attitudes which influence their life, experiences and their interaction with clients (Charmaz, 2012; Charmaz, 2014).

Participants

In this research, participants were chosen by purposive selection within the research criteria then snowball sampling was used to find more participants to bring into the research (Minnix, 2015; Dudovskiy, 2016). The researcher continued to select additional participants until no new information emerged or the data reach the theoretical saturation (Creswell, 2007; Minnix, 2015). The selection started with two participants who work with an LGBT organization, then he/she referred the next participants to the research. Creswell (2007) advised that the number of participants for grounded theory can be as low as 6 or higher than 30 depend on the data saturation (Senese, 2012; Charoenpornwattana, 2015).

Participants in this research are a variety of self-defined genders: man, woman, transgendered, and gay, with a variety of working experience and all are of Thai nationality as shown on Table 1.

Data collection instruments

The researcher created initial intensive interview questions such as: “Describe the event that led up to the point that you became interested in counselling LGBT clients?” “How did you learn to handle the complexity of LGBT individuals’ struggles?” and “How has your experience before counselling LGBT clients affected how you handled their issues right now?” The researcher used a
digital voice recorder to record the interviews as well as taking notes documenting particular words, phrases, and researcher’s reflections. After each interview, the audio file was uploaded to a private computer and manually transcribed, word-for-word, to generate the transcript of the interview (Charmaz, 2014; Minnix, 2015).

Table 1  Demographic of the participants

<table>
<thead>
<tr>
<th>Participant</th>
<th>Biological Sex</th>
<th>Self-defined gender</th>
<th>Experience (Yrs)</th>
</tr>
</thead>
<tbody>
<tr>
<td>A01-Sisters, Pattaya</td>
<td>Male</td>
<td>Male</td>
<td>2</td>
</tr>
<tr>
<td>A02-Sisters, Pattaya</td>
<td>Male</td>
<td>Transgender</td>
<td>4</td>
</tr>
<tr>
<td>A03- Sisters, Pattaya</td>
<td>Male</td>
<td>Gay Male</td>
<td>2</td>
</tr>
<tr>
<td>A04- Sisters, Pattaya</td>
<td>Male</td>
<td>Transgender</td>
<td>1.6</td>
</tr>
<tr>
<td>B01- M Plus, Chiang Mai</td>
<td>Female</td>
<td>Female</td>
<td>8</td>
</tr>
<tr>
<td>B02- M Plus., Chiang Mai</td>
<td>Male</td>
<td>Male</td>
<td>1.2</td>
</tr>
<tr>
<td>B03- M Plus, Chiang Mai</td>
<td>Male</td>
<td>Transgender</td>
<td>4</td>
</tr>
<tr>
<td>B04- M Plus, Chiang Mai</td>
<td>Male</td>
<td>Transgenders</td>
<td>8</td>
</tr>
<tr>
<td>C01- SWING, Pattaya</td>
<td>Male</td>
<td>Gay Male</td>
<td>3</td>
</tr>
<tr>
<td>D01- Tangerine Clinic, Bangkok</td>
<td>Male</td>
<td>Transgender</td>
<td>5</td>
</tr>
<tr>
<td>D02- Tangerine Clinic, Bangkok</td>
<td>Female</td>
<td>Female</td>
<td>2</td>
</tr>
<tr>
<td>E01-LGBT educator &amp; activist</td>
<td>Male</td>
<td>Transgender</td>
<td>8</td>
</tr>
</tbody>
</table>

Role of the Researcher

The researcher is a human instrument for the research; therefore, his perspective, experiences and knowledge mediate between participants and the research data (Kinsey, 2015; Minnix, 2015). In the case of this study, He is Thai, middle class, and self-identifies as a gay male. He was raised in a small rural family in northern Thailand. Growing up he had internalized shame about and around his own sexuality and struggled with the many challenges faced by LGBT individuals in this culture. His background and perspectives may influence the interpretation of the data; however, the researcher also uses his own experiences to connect to participants’ stories, which enriches the analysis.
Data analysis procedure

In this research, the analysis procedure follows recommendations from Charmaz (2014). Throughout the phases of coding and analysis the researcher returned to the initial coding to compare the gathered data and then continually refine the definition. Memo writing also took place throughout the data analysis process to serve as another agent in data collection and data analysis (Raines, 2015).

An additional phase of this research is theoretical sampling. The researcher discovered research categories, analyzed them and sent them through a peer review process as well as consulting with research advisors. Some research categories needed more data so the researcher went back to gather additional data from previous or new participants both to test research categories and to look for data saturation. The researcher conducted further interviews with participants who could complete the gap in the data. When the researcher found no new data emerging, called theoretical saturation, the process of collecting new data was stopped. The researcher then sent the refined categories back to peer review and research advisors.

Ethical considerations and confidentiality

After the proposal was approved, the researcher applied for ethical approval from the Research Ethics Committee at Srinakarinwirot University’s before the data collection started. In an effort to assure participants retain anonymity, confidentiality and privacy, the researcher provided each participant with an identifying code to be used throughout the research process and specifically when transcribing and writing memos (Raines, 2015). Participants were clearly informed they have a right to withdraw from the research project at any time without giving a reason.

Research results

The results of this research represent the experiences of twelve participants. While a majority of participants were involved with LGBT advocacy, all
participants described the importance of support without stigmatizing, acceptance without prejudice and the need for awareness of specific LGBT challenges and issues. The proposed counselling competencies for LGBT clients are composed of 4 categories which appear to play an important role in the competency of LGBT counsellors: (1) Ability to work with LGBT individuals, (2) Awareness of LGBT issues and challenges, (3) Advocacy for LGBT rights, and (4) Ongoing self-development. These competencies are not achieved sequentially or linearly. Counsellors don’t seem to develop these in any specific order, but rather build on all of them as the opportunity presents itself. They may come from Awareness of LGBT issues then move into gaining ability then advocacy, or in any other order. The results indicate that these competencies are of similar weight and importance overall. Yet, different counsellors rely on a different mix of these competencies to be effective in their personal style with clients.

![Counselling competencies for LGBT clients](image)

**Figure 1** Counselling competencies for LGBT clients.

1. **Ability to work with LGBT individuals**

   The result from participant responses shows two important themes: (1) build a relationship, and (2) acceptance without prejudice/judgment when working with LGBT individuals.
1.1 Build a relationship

The counsellor is willing to create a sincere and friendly atmosphere towards LGBT individuals using both nonverbal languages (i.e. body posture, facial expression, tone of voice) and encouraging verbal language. These actions allow the client to relax and build a strong and trusting connection at the beginning of the counselling session. A warm personality plus a willingness to help with a sincere heart are main factors in the counsellor’s effectiveness when meeting with clients, as described by one of our participants:

“Our personality is the first thing and important because LGBT individuals don’t like a person with grumpy face and stern short speak. If we are friendly with them, they will give their friendship to us quickly.” (A02)

It is also important for a counsellor to “walk a mile in their client’s shoes,” which means trying to consider or understand their thoughts, feelings and experiences rather than judging them.

1.2 Acceptance without prejudice/judgment

Unconditional acceptation is one of the important roles of a counsellor, especially when working with LGBT individuals. Listening without prejudice or condemnation will support the client to open their hearts and express their story during the session. “we treat people who come here as members of our family, and close friends. What we don’t like or want to happen in our lives, such as being judged, judging or, being verbal bullied, we won’t do to our clients.” (B01)

2. Awareness of LGBT issues and challenges

The results indicated that there are 5 sub-categories found under the significantly awareness; (2.1) awareness of the specific counselling needs of each LGBT client, (2.2) awareness of the diversity within the LGBT community, (2.3) awareness of common LGBT issues, (2.4) awareness of the difference of sexual orientation between clients and counsellor, and finally, (2.5) awareness that the client’s challenges may affect the counsellor.
2.1 Awareness of the specific counselling needs of each LGBT client

Our participants are aware their goal is seeking to understand their client’s issues, and discover why they are coming to see them. The client’s childhood, background and family issues need to be explored using a person-centered approach. Counsellors build a trusting atmosphere to lead their clients to open up and tell detailed stories that reveal their core issues. It’s important for the counsellor to identify what are the main negative influences from the client’s past, such as family rejection, physical or verbal bullying and social rejection. Together they then come up with a solution focusing toward empowerment, self-compassion, and self-acceptance.

“First of all, we need to help them to know their own issues. I mean the real issues from them. As I mentioned, most of the time they won’t tell us directly what problems they have but they will tell us their stories. So, we need to listen and catch the main points to know what are the real issues for our clients. Then we and our clients list the problems, then prioritize them. Which ones can be solved and which cannot. Then the client and I will plan together step by step. Most of our clients usually don’t see their issues clearly.” (B01)

The counsellor often also needs to educate their clients regarding how to live a healthy life as well as give them information about medicine, prevention of sexual diseases and general tips for well-being.

2.2 Awareness of the diversity within the LGBT community

The Counsellor recognizes that sexual diversity doesn’t fit in the standard definitions held by heterosexual paradigm. Rather it means that each person is able to accept themselves as they are, be confident with who they are, and honour their feelings. Sexual diversity, sexual fluidity, and diversity of sexual orientation are the main points that a competent counsellor is always aware of.

“Honestly, our perspective should be wide open. If we still have the old thought that this gender needs to be with that gender only, we are building a sexual box and supporting the prejudice. For example, when we have the sexual box and our client is gay, we will think that he should date or hang out...
with only gay. However, he may not want to date gay but other genders. If we still hold this kind of prejudice, we will judge and believe something is wrong with this person and the bias will continue and increase in our mind and thoughts.” (B01)

2.3 Awareness of common LGBT issues

The counsellor has awareness of the potential issues a client may be struggling with in their lives. LGBT individuals are often rejected by their families, or bullied by people in their community or society, which creates a negative mental state, leading to feeling a sense of shame and not being able to confidently express their needs. The Counsellor looks for these issues by talking with their clients and listen to their stories.

“Most of the mental issues are from rejection in the family. When they were young, during childhood, they got seriously bullied and continually shamed for who they are. Some LGBT individuals were convinced they were abnormal or sick which led to more bullying and maltreat.” (A03)

There are conflicts, divisions, and stereotypes that occur even within the LGBT community. As an example, the idea that Male to Female transgenders can only work in bars and in dancing shows for a living. Despite their abilities, LGBT individuals still can be discriminated and treated unequally when it comes to employment and opportunities in promotion because of their sexual orientation. Some organizations discriminate against LGBT individuals simply by ignoring them.

2.4 Awareness of the difference of sexual orientation between clients and counsellor

Clients tend to be more open to counsellors who identify as LGBT individuals than heterosexual counsellors. Some clients feel an invisible bond or connection between them and an LGBT counsellor that allows them to feel more confident about sharing experiences, life stories, and attitudes.

“For transgender clients, it appears that I understand them because I am the same as they are. The straight counsellors could not touch the deeper levels of client’s emotions because they never faced or had the same
experiences as me who is transgender. They may understand but not as deep as I do. (A03)

2.5 Awareness that the client’s challenges may affect the counsellor

During the counselling session, the counsellor will encounter clients who express their trauma and serious issues, such as AIDS infection, suicidal risk or depression. So, the counsellor needs to be aware of transference or secondary depression that may affect his/her own emotions, feelings and mental states. Counsellor’s need to have the skills to detect and let go of their clients’ issues and energies that they may have picked up during the session. Not developing these skills can lead to counsellor burnout and added emotional challenges that were never theirs to begin with.

3. Advocacy for LGBT rights

In all the organizations, the counsellors have a willingness and ability to support, advocate and represent LGBT individual’s rights in order to push forward equality in their local community. The counsellor is willing to bring positive and non-prejudice attitudes as well as acceptance toward LGBT individuals:

“I would like our society to be more understanding regarding LGBT individuals. There are many countries now where LGBT individuals can have legal marriage as same-sex couples. Nowadays, the world is all connected, our society needs to be more open. No one needs to be in the closet, hide or be someone whom they don’t want to be. I would like, in Thailand, that we have an area, maybe a district or province that promotes understanding and a positive attitude about LGBT.” (B02)

Counsellors, regardless of their sexual orientations or genders, often take part in campaigns which educate the public and the LGBT community to help bring change and harmony to the larger community.

4. Ongoing self-development

Self-development for counsellors is necessary in order to have the skills and information needed to support LGBT individuals. The counsellor needs to advance themselves with up-to-date and appropriate information regarding health
care, rights, and counselling methodology. These developments are often gained by attending LGBT support workshops and discussing experiences and knowledge with other counsellors or activists from both their own and other organizations. Counsellors usually attend workshops or seminars regularly to improve their understanding and skills as well as to network with others who work in a similar field.

**Discussion and Conclusion**

The research findings indicate that these competencies are of similar weight and importance. One is not more significant than the other. Different counsellors rely on a different mixed of competencies to be effective with clients. Consistent with this research, Sperry (2010) suggested that clients would feel accepted, supported and valued when the counsellor holds and display empathy, respect, and acceptance as well as demonstrates active listening and responding, it facilitates the development of an effective alliance. When client feels that their counsellor cares about them, they will be more hopeful and confident regarding the success of the counselling sessions.

The counselling competencies that emerged from this research will lead to constructing recommendations and guidelines for counsellors in Thailand that can be used to encourage counsellors to be more successful, confident, aware and effective when working with LGBT clients.

As LGBT counsellors primarily work in health and HIV prevention organizations, the leading issues, which bring the clients to their offices, are generally not focused on social or emotional issues. To better support LGBT clients, the counsellors are encouraged to utilize an intersectionality approach to engage a more holistic focus on the client’s life including family, relationships, career, local culture, social policy as well as issues of discrimination (Clarke et al, 2010; Adames et al, 2018, Jarernpanit et al, 2019). By expanding their focus and awareness, counsellors will be able to both be more effective with LGBT clients while also developing themselves personally and professionally.
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