Indicators of LGB Affirmative Training: A Study of Family Therapy Faculty

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Study Rationale

• Growing awareness in the field regarding the importance of providing students with LGB affirmative training (Carlson et al., 2013; Godfrey et al., 2006; Long & Serovich, 2003; Rock et al., 2010).

• Scholars have identified several key components of LGB affirmative training:
  — Specific course content on LGB topics
  — Experiences working with the LGB community
  — Self-of-the-therapist work
  — Overall training program environment

• Recent studies suggest that CFT faculty are providing LGB affirmative training to their students at increasing rates (Edwards et al., 2014; McGeorge & Carlson, 2016).

• Little is known about the indicators that faculty members are using to determine whether or not their training is indeed LGB affirmative.
Research Questions

• Research questions for this study were:
  – To what extent do family therapy faculty members believe their program is LGB affirmative?
  – What are the specific indicators that family therapy faculty members use to determine if their program is LGB affirmative?
Participants

• 71 CFT faculty members from accredited programs
  – Majority were women (73.1%), White (77.6%), and heterosexual (77.5%).
  – Average of 11.13 years (SD = 9.57) as faculty members.
  – 52.1% in a Master’s program, 14.1% in a Doctoral program, and 28.2% in a dual Master’s & Doctoral program.
Measures

• A 6 point Likert-item:
  − My family therapy program takes an affirmative (i.e., a positive view of LGB identity and relationship) stance toward LGB individuals and relationships.

• An open-ended question:
  − What factors or indicators are you using to determine the extent to which your program is taking an affirmative stance?
Data Analysis

• Thematic analysis is a method that allows researchers to analyze qualitative data by identifying themes and patterns within the data (Braun & Clarke, 2006).
  – Read the data several times.
  – Searched for meaningful patterns in participants’ language in order to create codes.
  – Identified potential categories within the data.
  – Looked for any themes and possible subthemes within each category.

• Throughout the process we used peer debriefings to add more credibility to the coding process (Guba & Lincoln, 1989).
## Results: Likert Scale Item

<table>
<thead>
<tr>
<th>Items</th>
<th>Strongly Agree (n = 36)</th>
<th>Agree (n = 19)</th>
<th>Somewhat Agree (n = 12)</th>
<th>Somewhat Disagree (n = 1)</th>
<th>Disagree (n = 1)</th>
<th>Strongly Disagree (n = 1)</th>
</tr>
</thead>
<tbody>
<tr>
<td>My family therapy program takes an affirmative stance toward LGB individuals and relationships.</td>
<td>50.7%</td>
<td>26.8%</td>
<td>16.9%</td>
<td>1.4%</td>
<td>1.4%</td>
<td>1.4%</td>
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</tbody>
</table>
## Results: Open Ended Item

<table>
<thead>
<tr>
<th>Category</th>
<th>Teaching, Supervision, and Research</th>
<th>Presence of LGB Faculty, Students, and Clients</th>
<th>Values and Beliefs of Faculty and Students</th>
<th>Overall Program Environment</th>
<th>Not LGB Affirming</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Themes</strong></td>
<td>1. Coursework</td>
<td>1. Presence of LGB Faculty</td>
<td>1. Faculty Members’ Values and Beliefs</td>
<td>1. Program Identity</td>
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<tr>
<td></td>
<td>2. LGB Affirmative Supervision</td>
<td>2. Presence of LGB Students</td>
<td>2. Students’ Openness to LGB Topics and People</td>
<td>2. Program Statements</td>
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<td>4. Clinical Environment</td>
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<td>5. Community Training and Involvement</td>
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<td>6. Presence of Affirmative Faculty</td>
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</tbody>
</table>
Results: Teaching, Supervision, & Research

• Coursework
  — Additive versus Integrative Approaches
    • “Inclusion of [LGB] affirmative information included in some of the courses.”
    • “The incorporation of LGBT concerns and social justice issues into the program in general and all of the courses.”
  — Self-of-the-Therapist Work
    • “Opportunities for self-reflection and reflective assignments that explore potential barriers in therapy with others similar to and different from oneself.”
Results: Teaching, Supervision, & Research

• Coursework
  — *Classroom climate*
    • “I also think that the climate in the classroom demonstrates that the culture is or at least is expected to be, affirming to be LGB people.”

• LGB Affirmative Supervision
  — “Degree to which heterosexism is dealt with in supervision.”

• Research on LGB Topics
  — “Conducting research on same-sex couples and using it to inform practice of all couple therapy.”
Results: Presence of LGB Faculty, Students, & Clients

• Presence of LGB Faculty
  — “We have a dean who is gay and several faculty members who are openly gay.”

• Presence of LGB Students
  — “We have many LGB students within our student population; they are welcomed and valued.”

• Presence of LGB Clients
  — “LGBT client participation in clinical services.”
Results: Values and Beliefs of Faculty and Students

• Faculties Values and Beliefs
  —“I am also fortunate to be surrounded by colleagues who hold such an affirmative stance as a core value.”

• Students’ Openness to LGB Topics and People
  —“The openness of my interns to me (I’m a Lesbian) and to their working with LGB clients.”
Results: Overall Program Environment

• Program Identity
  — “We are a postmodern, non-pathologizing, inclusive community.”

• Program Statements
  — “Our overt value statements in the program that are included on our website, syllabi, etc.”

• Interviewing and Admissions Practices
  — “Our admissions interview process includes screening for heterosexist and homophobic biases in applicants.”
Results: Overall Program Environment

• Clinical Environment
  — “We do not allow students to reject clients based on sexual orientation.”

• Community Training and Involvement
  — “Support efforts on campus and in the community that are affirming of LGB activity and encourage students to do the same.”

• Presence of Affirmative Faculty
  — “Personal support of students during the coming out process.”
Results: Not LGB Affirming

“We affirm the individual but cannot in good conscience affirm something that is potentially harmful to them such as homosexuality. Homosexuality is not an identity but rather an experience and collection of many factors. So, if someone comes to us wanting their condition affirmed, it would be unfair to them for us to try and do something. Rather, it’s more helpful to them if we try and find a better fit for them and do so in a caring way.”
Discussion

• LGB affirmative course content - additive or integrative
  — Integrate LGB content into every course and throughout the clinical training program

• Self-of-the-therapist work to address heteronormative assumptions
  — Engage students in an exploration of the influence of heterosexist biases and heteronormative assumptions
Discussion

• LGB community involvement
  — Engage in LGB affirmative training within the local community and participating in LGB community events
• Inclusion of LGB faculty, students, and clients
• No indicators or anti-LGB stance
  — Appear to be failing to meet the current COAMFTE accreditation standards
Implications for Clinical Training

• LGB Affirmative Program Assessment:
  – Systematic assessment of training utilizing existing LGB affirmative assessment tools:
    • Assessment questions from Long and Serovich (2003)
    • Affirmative Training Inventory (Carlson et al., 2013)
    • Affirmative Training Inventory-Faculty Version (McGeorge et al., 2015)
Implications for Clinical Training

- LGB Affirmative Clinical Practice and Training Guidelines:
  - AAMFT to adopt official clinical guidelines for the ethical and competent treatment of LGB individuals and relationships.
  - COAMFTE create assessment tools, based on the proposed LGB affirmative practice guidelines, which site visitors could use when evaluating CFT programs.