Supervision Experiences of Lesbian, Gay, and Bisexual Psychologists-in-Training: A Qualitative Study

Cheryl L. Stolz

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SUPERVISION EXPERIENCES OF LESBIAN, GAY, AND BISEXUAL PSYCHOLOGISTS-IN-TRAINING: A QUALITATIVE STUDY

by

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Bachelor of Arts, University of North Dakota, 2003
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A Dissertation
Submitted to the Graduate Faculty
of the
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Doctor of Philosophy

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August
2009
This dissertation, submitted by Cheryl L. Stolz in partial fulfillment of the requirements for the Degree of Doctor of Philosophy from the University of North Dakota, has been read by the Faculty Advisory Committee under whom the work has been done and is hereby approved.

This dissertation meets the standards for appearance, conforms to the style and format requirements of the Graduate School of the University of North Dakota, and is hereby approved.

Dean of the Graduate School

Date
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Department Counseling Psychology

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ABSTRACT

With little research on how LGB psychologists-in-training experience supervision and how supervision affects their development as professionals and as LGB individuals, this qualitative study investigated the experiences of lesbian, gay, and bisexual (LGB) psychologists-in-training within the supervisory dyad. Included in the analysis were the developmental processes, both as LGB and as professionals, affected by the supervision relationship. Fourteen LGB participants were interviewed via telephone. Interview questions focused on where the individual was in terms of being “out,” what their overall experiences have been in supervision, and the impact of these supervisory relationships on their identity as LGB and as professionals. Participants were also asked select questions derived from the Sell Assessment of Sexual Orientation (SASO) to more intricately define their sexual orientation identity. Data analysis of the interviews followed a grounded theory methodology.

Four categories, Identity, Supervisory Relationships, Climate, and Impact, emerged from the data. Under each category relevant themes emerged: (a) three for Identity, (b) four for Supervisory Relationships, (c) three for Climate, and (d) four for Impact. The core category that emerged was the category Climate; from this an axial paradigm and theoretical propositions evolved. The main findings of this study are that (a) LGB psychologists-in-training develop in a healthy way
when they are able to integrate both their sexual orientation identity and their professional identity within the training environment and are hindered in their development when there are barriers to this integration; (b) although “good” and “bad” supervision are construed similarly by supervisees in general, the one difference with regard to LGB supervisees is the added component that in “good” supervision, the supervisor defines “diversity” broadly and in “bad” supervision, the supervisor is less aware of LGB issues as part of diversity; (c) education of LGB issues in all psychology training environments is needed to reduce homonegativity, and heterosexism; and, (d) the impact on LGB psychologists-in-training of homonegative/heterosexist environments and relationships is that trainees not only lose learning opportunities, but also must compensate for this loss on their own. Implications for supervisors, faculty, and future research are discussed.
CHAPTER I
INTRODUCTION

In 1973 psychologists converged on the Vail Conference to discuss cultural diversity in the profession of psychology (Korman, 1974). Some 20 years later Sue, Arredondo, and McDavis (1992) put forth an article requesting the profession of psychology put into practice multicultural counseling competencies and counseling standards. Their article provided a foundation for such an implementation in all areas of psychology, including counseling, assessment, research, and training (Sue, Arredondo, & Davis, 1992). One of the most renowned books on multicultural competency in the field of counseling and psychology, *Handbook of Multicultural Competencies in Counseling and Psychology*, states that Multicultural Counseling Competency (MCC), "...is a critical component of counseling training, supervision, and practice..." and provides much basis in the literature of this claim (Pope-Davis, Coleman, Liu, & Toporek, 2003).

Within training and supervision, the issue of MCC has typically been broadly defined and is most often exclusively, either explicitly or implicitly, considered to be competency in working with racial and ethnic minorities (Holcomb-McCoy & Myers, 1999), although some articles suggest that training
focus on "cultural groups" in general (McRae & Johnson, 1991). Researchers of cross-cultural supervision have taken into account some of the multi-faceted issues that supervisors encounter when working with ethnic and racial minorities, as well as in working with women (Cook, 1994; Granello, Beamish, & Davis, 1997; Nelson, 1997), but little to no literature, until more recently, has focused on lesbian, gay, and bisexual issues in training and supervision.

Multicultural Counseling Competency in Education and Training

The Council for Accreditation of Counseling and Related Educational Programs (CACREP) is considered the foremost governing body of counseling training and accreditation. CACREP (2009) has established that, in order to become an accredited training program, cultural and social diversity issues must be addressed in the training of counselors (Bidell, 2005). Not only must counselors working with clients be multiculturally competent, multicultural competency must also be addressed in training of supervisors (CACREP, 2009). According to CACREP (2009) standards for education and training of counselors/clinicians, multicultural counseling competencies must include preparation in terms of:

The role of racial, ethnic, and cultural heritage, nationality, socioeconomic status, family structure, age, gender, sexual orientation, religious and spiritual beliefs, occupation, physical, and mental status, local, regional, national, international perspective, and equity issues in counselor education programs (p. 36).
The American Psychological Association (APA) is the leading professional organization monitoring and providing resources to psychologists in the United States. In 2002 the APA published an extensive policy, Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change for Psychologists (2002). Within this tome the APA defines “multicultural...narrowly, to refer to interactions between individuals from minority ethnic and racial groups in the United States and the dominant European-American culture” (2002, p. 2), as well as international students and temporary workers within the United States. Within these guidelines, six specific competency areas are set out: (1) Psychologists are encouraged to recognize that, as cultural beings, they may hold attitudes and beliefs that can detrimentally influence their perceptions of and interactions with individuals who are ethnically and racially different from themselves; (2) Psychologists are encouraged to recognize the importance of multicultural sensitivity/responsiveness, knowledge, and understanding about ethnically and racially different individuals; (3) As educators, psychologists are encouraged to employ the constructs of multiculturalism and diversity in psychological education; (4) Culturally sensitive psychological researchers are encouraged to recognize the importance of conducting culture-centered and ethical psychological research among persons from ethnic, linguistic, and racial minority backgrounds; (5) Psychologists strive to apply culturally-appropriate skills in clinical and other applied psychological practices; and, (6) Psychologists are encouraged to use organizational change...
processes to support culturally informed organizational (policy) development and practices.

Psychologists are also expected to consider that individuals belong to and associate with many identities and some of those identities interrelate with each other. Interrelations can include all cultural identities and dimensions, including sexual orientation. According to Messinger and Topal (1997), LGB issues are to be considered in the multicultural genre. In order to effectively help clients and train students, psychologists are encouraged to be familiar with issues of these multiple identities within and between all individuals.

Multicultural Counseling Competency and Lesbian, Gay, and Bisexual Clients

Despite APA adopting a resolution to have “homosexuality” removed from the Diagnostic and Statistical Manual (DSM) in 1975, it took a number of years after this for psychology to truly begin looking at lesbian, gay, and bisexual issues within the profession. In 2000, APA published a separate document, Guidelines for Psychotherapy with Lesbian, Gay, and Bisexual Clients (APA, 2000). These Guidelines are presented in four sections: (1) attitudes toward homosexuality and bisexuality, whereby the psychologist is encouraged to understand her or his biases and attitudes toward homosexuality and bisexuality and how these might impact work with a homosexual or bisexual client; (2) relationships and families, which asks the psychologist to acknowledge and respect same-sex relationships and families; (3) issues of diversity, whereby the psychologist is encouraged to take into consideration multiple diversity identities, specific struggles of bisexual individuals, issues for homosexual youth and aging,
and issues for homosexual persons’ with disabilities face; and, (4) education, indicating the psychologist’s responsibility to educate himself or herself and others on LGB issues.

Throughout APA’s (2000) guidelines for working with lesbian, gay, and bisexual (LGB) individuals, APA “encourages” psychologists to “strive for” lesbian, gay, and bisexual (LGB) understanding; APA does not include LGB issues as a firm mandate of training competencies as much as it does with regard to racial/ethnic multicultural issues. Although these guidelines proclaim the importance of self-awareness as clinicians around issues of sexual orientation and prescribes suggestions on working with LGB clients, there is no mandated policy in this regard. As well, these guidelines are almost ten years old and are currently being revisited and updated.

Despite these guidelines for both training and clinical work, many students graduating from counseling and clinical psychology programs do not feel prepared to work with LGB clients. In a study done by Murphy, Rawlings, and Howe (2002), only approximately 10 percent of psychologists could report having had a class specifically designed around LGB topics in their training programs, and of the 10 percent, only approximately half stated they had taken the class. Even without specific classes, few psychologists reported that LGB issues were even incorporated into other courses, with less than one-quarter of courses having any LGB issues presented (Murphy et al., 2002)
The Importance of Addressing LGB Issues in Training

It is very likely that psychologists will work with LGB individuals at some time in their careers, as LGB individuals do utilize psychotherapy at a high rate (Liddle, 1997). In a survey of 2,544 APA-member psychologists (Garnets, Hancock, Cochran, Goodchilds, & Peplau, 1991), 99% of practitioners reported having had at least one gay or lesbian individual as a client in their careers. These same professionals reported that their current client load consisted of approx. 6-7% gay men or lesbians. It is therefore very likely that current psychologists-in-training will also be working with LGB clients; it is imperative they are doing so in a competent manner.

LGB individuals are considered a minority group consisting of unique cultural aspects, and therefore, will likely have unique concerns within therapy (Burkard, Knox, Hess, & Schultz, 2009; Murphy et al., 2002; Pachankis & Goldfried, 2004; Pilkington & Cantor, 1996). As well, LGB individuals continue to suffer discrimination and prejudice within society and will seek therapy to discuss their own victimization (Herek, Gillis, Cogan, & Glunt, 1997). Some other specific and typical concerns include negotiating coming out to friends and family (Murphy et al., 2002), and LGB couples and families negotiating their relationships in an oppressive society (Fassinger & Arseneau, 2007). Therefore, if a professional training environment were to exclude LGB issues from their training competencies, this would be flawed and detrimental to the well-being of LGB individuals (Sue & Sue, 2008), including LGB supervisees (Burkard et al., 2009; Pope, 1995). However, because LGB individuals are often an invisible
cultural group, more so than race/ethnicity and sex, LGB issues are often forgotten from a cultural diversity perspective.

*LGB Psychologists-in-Training*

LGB individuals also enter the profession of psychology. LGB issues as they apply to LGB psychologists-in-training in their work with supervisors, heterosexual or otherwise, should be considered as part of the multicultural competencies as set out by APA, and should be considered as relevant and important in supervision research (Halpert & Pfaller, 2001; Messinger & Topal, 1997).

Despite criteria, competencies, and guidelines, LGB psychologists-in-training continue to experience LGB-negative or heterosexist training environments. In a study by Pilkington and Cantor (1996), LGB psychologists-in-training experienced the occurrence of both discrimination and bias within a number of training areas, such as within course materials and textbooks, within research work, within teaching assistantships, via comments by instructors, and within contact with faculty and administrators. In categorizing the responses by participants of their study, Pilkington and Cantor (1996) derived five key areas within text and course material where LGB psychologists-in-training perceived anti-LGB or heterosexist bias: (1) pathologizing gays, lesbians, or bisexuals; (2) curing homosexuality; (3) diagnosing homosexuality; (4) stereotyping; and, (5) minimizing or failing to address nonheterosexual experiences; all despite the removal of homosexuality from the DSM some 20 years prior.
Statements from instructors that were perceived to be anti-LGB or heterosexist by LGB participants included, pathologizing lesbians, gays, or homosexuality, stereotyping, and, curing homosexuality. In addition, instructors were also perceived as ridiculing homosexuality or LGB individuals or simply not addressing blatant LGB bias or comments within the classroom setting. Faculty, administrators, and other teaching assistants have also been perceived as anti-LGB or heterosexist based on comments. For example, “One practicum interview included a humiliating grilling on my relationship – its duration and stability… and a question about whether I was ‘one of those who had to tell clients my sexuality.’ I turned down the offer of that site” (Pilkington & Cantor, 1996, p. 608). Since the publication of this ground-breaking work, no updates have been made with regard to this study.

Although a number of papers have been written with regard to supervision and LGB individuals in training, much of this research has been conceptual in nature (e.g., Buhrke, 1989b; Buhrke & Douce, 1991; Halpert & Pfaller, 2001) with little empirical research looking at the trainees’ experiences in supervision. Some recent qualitative research focusing on LGB-identified psychologists-in-training describes both LGB affirming and non-affirming interactions with their supervisors (Burkard et al. 2009). Although this study reported that affirming interactions exist between the LGB supervisee and his or her supervisor, some supervisors were perceived to be biased against LGB individuals, and were often described as pathologizing LGB individuals and/or making oppressive statements regarding LGB individuals. Elements of heterosexism were also evident in these
interactions, in that some supervisors seemed to ignore the issue of sexual orientation altogether, both in their work with supervisees and in discussing sexual orientation of clients. Supervisees who participated in this study reported that such non-affirming experiences negatively affected not only their supervisory relationship, but also their work as psychologists-in-training, particularly as client issues around sexual orientation arose.

*Development of the LGB Psychologist-in-Training*

If we are to put ultimate importance on the development of healthy professionals in the field of psychology in order to provide ethical services to clients (American Psychological Association, 2002; Barnett, Johnston, & Hillard, 2006; Carroll, Gilroy, & Murra, 1999), it is imperative we assist the psychologist-in-training in such development in a holistic way. The LGB psychologist-in-training is not only developing as a psychologist, but also as a person identifying as lesbian, gay, or bisexual.

There are a number of models of sexual orientation development; two of the most influential have been Cass (1979) and D’Augelli (1994). Cass (1979) posited that the individual moves through six stages of sexual orientation identity development, from confusion to comparison, tolerance, acceptance, pride, and ultimately, synthesis. D’Augelli (1994) proposed that the LGB individual moves from exiting her or his heterosexual identity, developing a *personal* LGB identity and then a *public* LGB identity, “coming out” to others, developing an LGB intimate relationship with another, and ultimately the LGB individual will make a community for herself or himself. These models are not necessarily linear in
nature, and it should be noted that most individuals who are developing their LGB identity are doing so at a later point in life than most heterosexual individuals are developing their sexual orientation identity.

Models of Supervision and the LGB Psychologist-in-Training

Certain research and models of supervision take into account some of the issues the LGB individual must face, not only in society, but also in the microcosm of the supervisory relationship. A model of supervision, Buhrke’s Conflictual Situation model (1989a), describes two situations where conflict would arise between supervisor and supervisee as a result of homophobia. A second model used in LGB supervision is Holloway’s (1995) Supervisee Empowerment model, where emphasis is on the empowerment of the supervisee to bring up and discuss issues of sexual orientation and/or sexual attraction, not only with regard to clients, but also in relation to the supervisory dyad. Russell and Greenhouse’s (1997) Homonegativity model of supervision speaks to collaboration within the supervisory relationship and how homonegativity as well as more personal issues, such as the supervisee’s and the supervisor’s stage of sexual orientation identity development, are a focus within the relationship. Although not a model of supervision with LGB supervisees, Burkard et al. (2009) published a recent study that utilized qualitative methodology to determine what LGB-affirmative and non-affirmative supervision might look like. These models and studies are primarily presented as theory and do not necessarily have corroborating support for any particular model of supervision. Although some models of psychologist-in-training development in supervision appear to parallel,
to some extent, LGB identity development, no specific research exists that looks at how LGB individuals develop as psychologists in light of their own sexual identity development.

Just as it is important to consider and adapt competencies in working with racial and ethnic identity issues in our profession, it is important to specifically incorporate competencies in working with LGB individuals, including LGB psychologists-in-training. Based on psychology’s call for proficiency in working with cultural diversity and taking into account the culture of the LGB individual and the development of the LGB individual, it is important to study and better understand how we train professionals to work with LGB issues. It is also imperative that professors and supervisors be able to effectively address LGB client issues and LGB trainee issues.

It is the intent of this study to qualitatively examine the experiences of LGB psychologists-in-training in their supervisory relationships, regardless of the supervisor’s sexual orientation/identity within the supervisory dyad. In exploring the experiences of the LGB psychologist-in-training in supervision, this study will examine both the LGB trainee’s own place within his/her LGB identity development and the effect of supervision on the LGB trainee.

Throughout this paper the terms psychologist-in-training, supervisee, and trainee will be used interchangeably.

Statement of the Problem

Within the supervisory dyad between supervisor and LGB supervisee, the concern is that by not attending to LGB issues, certain negative consequences
may result. For example, the LGB supervisee may experience internalized homophobia as a result of a supervisor dismissing, thus in effect, devaluing, the subject of sexual orientation, which could ultimately lead to ineffective or even detrimental work with clients. With very little research on how the LGB psychologists-in-training experience supervision and how supervision affects both their development as a professional and development as an LGB individual, it is the intent of this study to investigate and uncover both development processes within this specific supervisory dyad.
CHAPTER II
LITERATURE REVIEW

In order to discern the important LGB issues within the supervisory dyad, a number of areas and factors must be addressed. We must begin by understanding the LGB individual. It is prudent to review how society affects LGB individuals as they discover who they are, how they perceive their world, and how the world perceives them. From that, we must come to understand how LGB individuals progress through their own development, both sexually and with regard to their identity as LGB. Separate from sexual orientation identity is the LGB psychologist-in-training’s development as a therapist. Each therapist, including the LGB individual, brings to her or his work a unique background and life experience. Finally, the amalgamation of LGB issues within the training environment, specifically within the supervisory dyad, must be discussed in order to comprehend how this microcosmic interaction affects the LGB psychologist-in-training’s work with clients.

Terminology

Before beginning discussion of the issues, it is essential to understanding the LGB individual to know the terminology used to describe different sexual orientations within Western society. According to Bieschke, Perez, and DeBord,
(2007), “L” or “lesbian” refers to a woman who self-acknowledges same-sex emotional, physical/erotic, and relational attractions. Similarly, “G” or “gay” refers to a man who self-acknowledges same-sex emotional, physical/erotic, and relational attractions. The term “bisexual,” or “B,” refers to an individual, either man or woman, who has both same-sex and opposite-sex emotional, physical/erotic, and relational attractions. Although not included as participants in this study, the term “transgender,” or “T,” refers to individuals who identify and, much or all of the time, express their gender in a way that is traditionally considered to be the opposite of their perceived biological sex. The reason for not including “T” individuals in this study was to keep the focus on sexual orientation and not confound those experiences with those related to gender identity. Finally, more recently some LGBT individuals prefer to be referred to as “queer” and can be chosen as a term-of-reference by any individual regardless of sexual orientation or gender expression. In essence, the current use of the term “queer” is the LGBT community reclaiming a word that has been used in a derogatory fashion within society.

LGB Issues in Psychology and in Society

Despite reports indicating attitudes toward lesbian, gay, and bisexual (LGB) individuals within the United States have become progressively more positive over the past several decades (The Harris Poll, 2006), there remain many issues perpetuated within society for the LGB individual. Reports indicate that same-sex marriage, specifically, was recently opposed by approximately 60 percent of respondents (The Harris Poll, 2004). As well, homophobia,
heterosexism, discrimination, and prejudice against LGB individuals remain problems within our society and have been present within the psychological profession of psychology. The American Psychological Association’s (APA’s) guidelines for psychologists working with LGB individuals call for the acknowledgment, respect, and support of the relationships and families of LGB individuals (APA, 2000); in 2004, APA announced its support for the legalization of gay marriage (APA, 2004). However, this acceptance is not necessarily the norm in society or even in psychology. Even if we were able to say that most psychologists are in favor of equal rights for LGB individuals, this is certainly not the case for the general public. Therefore, there is still a considerable amount of discrimination and bias based on sexual orientation in our society.

**History of LGB Issues in Psychology**

Historically the two APA organizations, the American Psychological Association and the American Psychiatric Association, have varied in their support with regard to LGB issues (Garnets et al. 1991). In fact, it was only a generation ago in 1973 that the American Psychiatric Association removed homosexuality from the list of mental disorders and began to promote supportive mental health care for LGB individuals (Garnets et al., 1991). In 1975, the American Psychological Association began advocating more openly for LGB issues.

**History of LGB Issues in Society**

Within American society as a whole the variability of support for LGB individuals is even more accentuated and apparent. Hate crimes against gay men
and lesbians have been occurring for centuries (e.g., Herek, 1994, 2009; Herek et al., 2009; Parrott & Peterson, 2008) and hate crimes and antigay aggression continue to be experienced in significant ways among gay men, lesbian, and bisexual individuals (Herek, 2009; Parrott & Peterson, 2007; Rostosky, Riggle, Horne, & Miller, 2009). Such crimes clearly continue to this day as evidenced, for example, in the beating death of Matthew Shepard in Laramie, Wyoming in 1998 (Matthew Shepard, http://www.matthewshepard.org), an incident in 2005 in Santa Fe, New Mexico where a 21-year-old man was savagely beaten by three men (Santa Fe “gay bashing,” http://www.kunm.org), and the killing of Lawrence King, a 15-year-old murdered in 2008 by a fellow classmate for his sexual orientation and gender expression (Gay Lesbian Straight Education Network, GLSEN, http://www.rememberinglawrence.org/). LGB individuals continue to face many negative experiences within their world, and at one point every LGB individual has most likely experienced homophobic or homonegative attitudes and discrimination because of his or her sexual orientation in a heterosexist society.

Homophobia

Initially named by Weinberg (1972), the term homophobia refers to fear of being in close proximity to LGB individuals. However, more recently, Herek (2000) suggested that such definitions are misleading, implicitly assuming that antigay positions emerge out of fear of such individuals and are therefore suggestive of a form of illness on the part of the homophobic individual (e.g., Herek, 2000). Herek (2000) suggested that rather than “homophobia,” the term
"sexual prejudice" be used, defined as "negative attitudes toward an individual because of her or his sexual orientation" (p. 252). Biphobia, or a fear or dislike of individuals who do identify as bisexual (Hutchins & Kaahumanu, 1991; Ochs & Rowley, 2005), is a derivation of homophobia, and can be just as detrimental to the bisexual individual as homophobia is to the gay or lesbian individual. This form of phobia is more likely to be experienced from both "worlds:" the heterosexual world and from within the gay and lesbian community, as bisexuals are often perceived as "riding the fence" in terms of sexual orientation.

Homophobia can be viewed on a continuum of attitudes, as demonstrated by the scale developed by Riddle (1985). On the homophobic end of the continuum, and in a gradual progression toward more positive attitudes, are: repulsion (LGB people are strange, sick, crazy, and aversive); pity (LGB people are somehow born that way and it is pitiful); tolerance (life for LGB people is hard; anti-gay attitudes just make things worse); and acceptance (homosexuality is a fact of life that should neither be punished nor celebrated). The positive attitude side of the continuum consists of: support (the rights of LGB people should be protected and safeguarded); admiration (being LGB in our society takes strength); appreciation (there is value in diversity; homophobic attitudes should be confronted); and nurturance (LGB people are an indispensable part of society). Individuals can move among these attitude levels and may experience a number of these levels within a lifetime. Conversely, some individuals may remain at one attitude level; this is most likely the case for those who are on the more homophobic end of the continuum.
Homonegativity

Another derivation of homophobia is homonegativity. Russell and Greenhouse (1997) define homonegativity as, "any cognitive, affective, or social form of homophobia and heterosexism" (p. 27). Similar to Herek (2000), Morrison and Morrison (2002) suggest the use of the term homonegativity to signify negative attitudes toward gays and lesbians, rather than homophobia, which indicates a fear response toward LGB individuals. Gender differences are apparent with regard to homophobic and homonegative attitudes. Heterosexual men hold significantly higher homophobic attitudes toward gay men than do heterosexual women (see Herek & Capitanio, 1999a, 1999b). Herek (2000) found that, overall, heterosexual men were much less comfortable around gay men than were heterosexual women, with only 25 percent of male participants feeling "very comfortable," compared to 46 percent of female participants. The only similarity between genders appears to be the relative level of comfort around LGB individuals when they are of the same sex as the participant. Although women were more comfortable with gay men and lesbians as a whole, men were most uncomfortable with gay men and women were most uncomfortable around lesbians.

Pervasiveness of Homonegativity

Since the 1980s it would appear that homonegative attitudes have diminished to a greater or lesser degree in North America, particularly in young adults (The Harris Poll, 2004). Studies examining the pervasiveness of homophobia found that two commonly utilized measures (the Attitudes Toward
Lesbians scale, or ATL, and the Attitudes Toward Gay Men scale, or ATG; Herek, 1988) resulted in scores that were below the scales’ mid-points (Balanko, 1998; Schellenberg, Hirt, & Sears, 1999; Simon, 1995; Simoni, 1996; Waldo & Kemp, 1997). This would indicate that individuals’ perceptions toward homosexuals were positive or at the very least, neutral. Although a more favorable perception of gay men and lesbian women appears to be prevalent among university-aged individuals, it would seem as though homophobia and homonegativity may instead have become more covert (Morrison & Morrison, 2002).

In their work to develop an instrument to measure the more covert nature of homonegativity, Morrison and Morrison (2002) found that homophobia, or homonegativity, has not diminished. This homonegativity seems to have been transformed from a more traditional, biblical, and moral objection (e.g., gay men are immoral) to a more modern version of homonegativity (e.g., gay men should stop complaining about the way they are treated in society, and simply get on with their lives). Although these forms of attitude toward LGB individuals appear, on the surface, as more benign and less threatening in nature, it is often more difficult for the LGB individual to determine any threat and react appropriately when such a “threat” is presented in a more clandestine way. If we were to postulate that homophobic and/or biphobic and homonegative attitudes exist on a continuum (Morrow, 2000), ranging from negative attitudes to neutral attitudes, the effects on LGB individuals would remain harmful. Similarly, although attitudes in support of gays and lesbians appear to be more widespread on university
campuses than in society in general, Norris (1992) reported that homonegative graffiti in washrooms on campus remains prevalent. Norris (1992) also found that 68 percent of white homosexuals and bisexuals felt it essential to hide their sexuality, and that many were subject to verbal harassment because of their perceived sexual orientation.

_Heterosexism_

Heterosexism is the unspoken belief that all that is heterosexual is “normal” and superior. Herek (1995) defined heterosexism as, “the ideological system that denies, denigrates, and stigmatizes any nonheterosexual form of behavior, identity, relationship, or community” (p. 321). Chemin and Johnson (2002) defined heterosexism as oppression of LGBT or queer individuals marked by behaviors that both discriminate and create prejudice toward the LGBT or queer individual. This form of discrimination is the most prominent in society, as society itself covertly and overtly supports and professes the heterosexual norm through media, advertising, marriage and other civil rights. This is the one “ism” that the LGB individual lives in constantly in all settings, including universities, graduate programs, and training settings. Pharr (1997) wrote that heterosexism devalues any identity that is not heterosexual, thus maintaining the power and privilege that all heterosexual individuals have.

Despite studies in which results indicate that individuals have become more surreptitious in their homonegativity, possibly due to it being less politically correct in our day and age to admit to homonegative attitudes (Morrison & Morrison, 2002), heterosexist, homophobic, and biphobic attitudes remain an
issue in our society (e.g., Morrow, 2000). These negative and sometimes hateful attitudes toward LGB individuals can impede the positive development of the LGB individual (Buhrke & Douce, 1991; McHenry & Johnson, 1993). Not only can experiencing negative attitudes and behaviors toward oneself as an LGB individual create questions about one's identity as gay, lesbian, or bisexual, but these negative attitudes can be internalized and experienced as self-hatred (Perez, DeBord, & Bieschke, 2000). As one might imagine, the formation of one's identity as a whole person, including one's sexual orientation, is crucial to healthy functioning within society. As an element of the society within which the psychologist-in-training lives, and as the supervision dyad can be viewed as a microcosm of the larger society, it would seem logical that homonegativity and heterosexism can and will arise in the supervisory relationship (e.g., Buhrke & Douce, 1991; Long 1996), and thus, potentially affect not only the LGB psychologist-in-training's development as a therapist, but also his or her very identity development as an LGB individual.

LGB Identity Development

According to the theory of social constructionism, how we assign meaning to personal identity or identities, and how people choose among different identities, is determined by choices available within a specific sociocultural context (Perez et al., 2000). The predominant contemporary view of gay male and lesbian identity development has been compared to that of racial and ethnic identity development, in that it is emergent across the lifespan (D’Augelli, 1994; Garnets & Kimmel, 1993). Identity development as LGB is challenging, as it
constitutes accepting oneself in a nontraditional role and requires the reforming of
many of one’s relationships, including the one with oneself (de Monteflores &
Schultz, 1978). This “coming out,” as it is often referred to, can happen very
quickly or progressively over time, and is seen as a lifelong course of
development (D’Augelli, 1994; Garnets & Kimmel, 1993). Some individuals
may believe they have to choose a single identity from a number of identities
available to them. Some individuals will identify more with a particular ethnicity
or race, others more with sexual orientation, and still others find ways by which to
integrate the two. Different people experience and react to such pressures to
choose an identity in different ways (Chang Hall, 1993; Constantine & Sue,
2006).

Models of LGB Identity Development

As a result of homophobic and heterosexist attitudes prevalent in our
society, a great deal of effort is required on the part of the LGB individual in
order to formulate a healthy and positive identity (Gonsiorek & Rudolph, 1991).
Several models of LGB identity development have been proposed (e.g., Cass,
1979; D’Augelli, 1994; Fassinger & Miller, 1996; McCarn & Fassinger, 1996).

Cass (1979)

One of the most widely-referenced models is Cass’ (1979) Homosexual
Identity Formation Stages of Identity Development. The stages of this model are:
Stage 1, Identity Confusion (“Who am I?” Experiences of confusion and turmoil
as they begin to realize their thoughts, feelings, and/or behaviors can be defined
as homosexual); Stage 2, Identity Comparison (“I’m different;” start to compare
their own self-perceptions to other’s perceptions of their behaviors and self-image; feelings of alienation from society at large based on feelings of being different); Stage 3, Identity Tolerance ("I’m probably gay/lesbian;" seek out other gay and lesbian individuals to counter feelings of isolation and alienation; begin to tolerate, but not yet accept, their gay/lesbian identity); Stage 4, Identity Acceptance ("I am gay/lesbian;" increased contact with other gay and lesbian individuals, which validates and "normalizes" their gay/lesbian identity as a way of life; can now accept more so than tolerate their gay/lesbian self-image); Stage 5, Identity Pride ("I’m gay/lesbian and proud of it;" devalue heterosexual "others" and value positively LGB individuals to the point of developing a "them vs. us" attitude; they are proud to be gay/lesbian and no longer conceal their sexual orientation identity); and, Stage 6, Identity Synthesis ("I’m more than gay/lesbian: I’m a complex person;" abandon the "them vs. us" mentality; supportive heterosexuals are valued while unsupportive ones are further devalued; personal and public sexual identity become synthesized into one identity and they are able to integrate gay/lesbian identity with all other aspects of the self). Cass’ (1979) model represents a progression through stages; however, an individual may return to a lower stage at any time, depending on what is happening in her or his life.

D’Augelli (1994)

A more contemporary view of sexual identity development has been postulated by D’Augelli (1994). D’Augelli developed a model of lesbian, gay, and bisexual development that views these identities as being molded by environmental/social interactions. He also presents this model as a life-long
process. The key word here for D'Augelli is that it is a process and not a stage model of development; all LGB individuals will develop and process their multiple identities uniquely and at different times. The first process in D'Augelli’s (1994) model is exiting heterosexual identity. The individual going through this process is just recognizing physical and emotional attraction to same-sex individuals, and that these feelings differ from what is accepted in the dominant culture. Next, the individual develops a personal LGB identity status, whereby she or he starts finding some stability in one’s sexual orientation identity and challenging any internalized thoughts and feelings about what it means to be LGB. Third is the development of an LGB social identity, creating a social system of people who know and accept the LGB identity. The fourth process is becoming an LGB offspring. This involves disclosing one’s identity as LGB to parents and/or other family members and hopefully gaining support in this identity. Fifth is developing an LGB intimacy status, in which the LGB individual begins an intimate relationship with another individual. D’Augelli (1994) stated that this process is perhaps the most challenging because of a lack of role models and cultural scripts for such relationships. Lastly the LGB individual enters a community. The individual in this process is making social and political stands with regard to LGB issues. Some LGB individuals may never engage in this process due to real and/or perceived risk of danger and discrimination.

Lesbian Identity Development Models

A number of identity development models also exist that are specific to lesbians. Some of these models focus more on the social constructionist
formation of a lesbian identity (e.g., Ponse, 1978), while others such as Moses (1978) impress more the maintenance or management of one’s lesbian identity. Sophie’s (1985/1986) model was one of the first developmental identity models for lesbians. This model proposes four stages: awareness, testing and exploration, acceptance of identity, and integration of identity. Sophie herself found both confirming and contradictory evidence for her model, and hypothesized that any variability in lesbian development is dependent upon temporal and contextual variations, particularly in the later stages of acceptance and integration. This variability would indicate that sexual orientation development is not a linear process, similar to what was stated earlier in this discussion.

Another model of identity development specifically for lesbian identity formation comes from Chapman and Brannock (1987). This model postulates five stages: same-sex orientation, incongruence, self-questioning/exploration, identification, and choice of lifestyle. From their data, they found that some discord or dissonance, particularly from within the predominantly heterosexual society, is necessary in order to accept one’s own lesbian identity. Rust (1992) also views identity development of lesbian and bisexual women as socially constructed, but rather than propose a linear developmental model of lesbian identity, her research supports a more malleable form of identity formation.

Also in response to the perceived inadequacies of more linear lesbian identity models, McCarn and Fassinger (1996) proposed a model that integrates gender identity and racial/ethnic identity. Here, a dual identity process includes the integration of both personal identity and reference group orientation, as LGB
and as a person of color. Their dual process model allows for the integration of all important aspects of a woman’s life, including work environment, race and ethnicity, and even geographic location. This complex model of identity proposes that although integration occurs, sexual identity and group membership identity occur separately within four phases: awareness, exploration, deepening/commitment, and internalization/synthesis. Because of McCarn and Fassinger’s theory being inclusive of multiple realities among the diverse lesbian population, it is viewed as one of the premier lesbian and bisexual woman identity models.

**Gay Male Identity Development Models**

Similar to lesbian identity models, there are many identity development models that have been applied to gay men and models applicable to bisexual individuals. Gay male developmental models are wide-arching and most models that have been developed have been validated simultaneously with application to gay men. A number of studies examining gay male identity development have found support for both linear and nonlinear perspectives. For example, McDonald (1982) did a retrospective study on the coming out experiences of gay men, and discovered that this process was sequential in nature. Both Troiden (1989) and Finnegan and McNally (1987) disagree with the stage model concept, stating that gay male identity development happens more in a repetitive spiral pattern and/or a back and forth between stages.

A newer model of gay male identity development has been put forth by Fassinger and Miller (1996). This model places the identity development process
into two parallel, mutually catalytic branches of development: (a) an internal individual sexual identity development process and (b) a contextual group-membership identity development process. This model not only takes into account the diversity and individual differences among gay men, but also how society's homophobic and heterosexist views affect and influence such development.

Another element of healthy gay identity development for men is the degree to which the gay male identifies with the gay community. The more one identifies with the gay community, the more the gay male is able to understand himself, cope with issues, and have an overall acceptance of oneself as a gay male (Martin, 1993). Conversely, a disconnection with the gay community at large may hinder that individual's support network as a whole, and can contribute to increased risky behaviors (e.g., unsafe sex).

Bisexual Identity Development Models

Although a large proportion of women and men have reported engaging in some kind of same-sex sexual activity within their lifetime, only a small portion self-identify as bisexual (Klein, 1993). Same-sex sexual behavior does not necessarily lead to one identifying as gay, lesbian, or bisexual. Although some work has been done with regard to bisexual identity development, this area of research is far less studied than lesbian and gay male identity development (Zinik, 1985).

One of the most famous studies related to bisexual identity development is that of Kinsey, Wardell, Martin, and Gebhard (1948), wherein it is suggested that
bisexuality is more prevalent than homosexuality. Subsequent research also postulates sexual orientation on a continuum (Klein, Sepekoff, & Wolf, 1985), and sexual identity has been hypothesized as changing a number of times over one’s life (Blumstein & Schwartz, 1993). Klein et al. (1985) have also investigated the complexity of bisexuality as having multiple variables such as attraction, fantasy, and behaviors (the sexual self) as well as emotional preference, social preference, and heterosexual or gay lifestyle (sexual orientation), as well as self-identification. Overall, however, bisexuality is often viewed as a behavior that does not necessarily have an identity to corroborate that behavior (du Plessis, 1996). Hansen and Evans (1985) have put forth three explanations for the lack of a defined sexual orientation: (a) the belief that bisexuals are promiscuous and nonmonogamous, (b) the idea that individuals cannot be attracted to men and women simultaneously, and (c) the fact that LGB definitions are often based on the heterosexual norm.

**Criticisms of LGB Identity Development Models**

There have been many criticisms of the gay, lesbian, and bisexual models of identity development (Perez et al., 2000). The main criticisms have been that these models are too simplistic and reductionistic, and rely too heavily on viewing the identity formation process as linear.

**Sell Assessment of Sexual Orientation**

A system of measuring LGB identity development was developed by Gonsiorek, Sell, and Weinrich (1995) to assess the frequency and strength of sexual interests, the frequency of sexual contacts, and how the individual self-
identifies by degrees of heterosexuality, homosexuality, and bisexuality. Sell (1996) went on to further develop this scale, which he deemed as more appropriate in determining one’s identity than theoretical models. This scale takes into account variations in one’s sexual interests and sexual contacts on a continuum from same-sex to opposite-sex, while simultaneously looking at variations of sexual orientation, from homosexual to heterosexual.

_Identity and Other Identity Integration_

Many gay, lesbian, and bisexual identity models have postulated the integration of sexual orientation identity with other parts of an individual’s identity (e.g., Cass, 1979; Fassinger & Miller, 1996; McCarn & Fassinger, 1996). It would seem to follow, then, that identity integration is part of the development of the gay, lesbian, and bisexual psychologist as well, whereby his or her sexual orientation must somehow become integrated with his or her identity as a professional therapist. Fassinger and Miller (1996) and McCarn and Fassinger (1996) state that an individual cannot have a fully integrated identity as LGB until he or she is completely open about his or her sexual orientation and same-sex relationships. Some LGB individuals may have achieved a high level of sexual orientation identity development but still not be able to come out at work or to family due to cultural factors or potential discrimination. For example, a lesbian-of-color might have to consider other cultural facets, such as racial/ethnic minority issues, around coming out to family and friends. Based on these models of identity development, it would seem warranted to explore how LGB individuals develop in their identity as psychologists in light of their sexual
orientation identity development. As the recent literature on LGB supervision is sparse, explicating the experiences of LGB supervisees (e.g., psychologists-in-training) would be an important contribution to the research.

**Supervision and Therapist Development**

Overall, supervision is a crucial part of the clinical training experience for psychologists. One definition of supervision, as provided by Bernard and Goodyear (2004) is:

Supervision is an intervention provided by a more senior member of a profession to a more junior member or members of that same profession. This relationship is evaluative, extends over time, and has the simultaneous purposes of enhancing the professional functioning of the more junior person(s), monitoring the quality of professional services offered to the clients that she, he, or they see, and serving as a gatekeeper for those who are to enter the particular profession. (p. 8).

Homestead Schools (2003) provides another definition of supervision:

A term used to describe a formal process of professional support and learning which enables individual practitioners to develop knowledge and competence, assume responsibility for their own practice and enhance consumer protection and safety of care in complex clinical situations. It is central to the process of learning and to the expansion of the scope of practice and should be seen as
a means of encouraging self assessment and analytical and
reflective skills.

Effective clinical supervision is when the, “...practitioners feel supported, valued
and able to continue their work” (Webb, 1997, p. 34). The question becomes: are
LGB psychologists-in-training receiving “effective” supervision if they are not
feeling supported, valued, and are unable to continue their work?

Models of Supervision

There are a number of models of supervision, some of which are
grounded in psychotherapeutic theory, some of which are more
developmental in nature, and some models based on social roles (Bernard
& Goodyear, 2004). The primary focus of each model is to theorize how
therapists-in-training develop via the supervision process.

In this study the focus will primarily be on the work of Stoltenberg (1981)
with regard to the Integrated Development Model of supervision. This model
takes into account not only the trainee’s skill acquisition, but also her or his
varying needs, motivations, and any possible resistances as she or he progresses
through different levels of trainee development. Another important model for the
purposes of this study was created by Ronnestad and Skovholt (1991, 1993,
2003). This particular model is also based on supervisee development, but takes
into account the individual’s development as a psychologist over the lifespan.
Both models are summarized in Table 1.
Table 1. Comparison of Two Developmental Models of Supervision.

<table>
<thead>
<tr>
<th>Model</th>
<th>Authors</th>
<th>Sample on which Model was Based</th>
<th>General Characteristics of Model</th>
<th>Strengths of Model</th>
<th>Criticisms of Model</th>
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</thead>
<tbody>
<tr>
<td>Lifespan Model</td>
<td>Ronnestad and Skovholt (1991, 1993, 2003)</td>
<td>General trainees from 1st year of graduate training to practitioners with 25 years experience.</td>
<td>- Therapist development over the professional lifespan.</td>
<td>- Takes into account that growth does not stop at graduation.</td>
<td>- Limited in terms of diversity. - Career development model rather than a supervision model.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>- Development as a clinician rather than development as a person in training.</td>
<td>- 4 levels.</td>
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</table>
Ronnestad and Skovholt (1991) Lifespan Model

Ronnestad and Skovholt’s work on therapist development began over 15 years ago, with the question: do therapists actually develop with more experience? (Ronnestad & Skovholt, 1991). In answering this question, these researchers found little empirical support for a linear developmental model; other researchers had not found robust significant results to state that, in fact, the more experienced a therapist, the better the client results.

Ronnestad and Skovholt (1991) believed that past research on development of an effective therapist did not necessarily demonstrate development of the therapist, but rather the consequences of such development. Ronnestad and Skovholt’s work is based on their belief that counselors and therapists do not necessarily complete their development at graduation, but rather continue to grow and develop throughout their careers. Therefore, their subsequent work was based on how therapists experience themselves over time on numerous aspects related to their work (Ronnestad & Skovholt, 1993, 2003; Skovholt & Ronnestad, 1992a, 1992b, 2003a, 2003b). Their work in the area of therapist development is unique in that they used qualitative research to develop their model.

Phases. Ronnestad and Skovholt, individually and together, have investigated professional development of the therapist and postulated the following eight-stage model (Skovholt & Ronnestad, 1992b) (a) Conventional stage (the untrained individual); (b) transition to professional training (first year of graduate school); (c) imitation of experts (middle years of graduate school); (d)
conditional autonomy (internship, six months to two years); (e) exploration (new graduate, two to five years); (f) integration (two to five years); (g) individuation (ten to thirty years); and, (h) integrity (preparing for retirement). Later in their work, this stage model was reformulated and renamed as a phase model, and was modified to incorporate five rather than eight phases of development. These phases are: (a) the lay helper phase (similar to their previous conventional stage); (b) the beginning student phase; (c) the advanced student phase; (d) the novice professional phase; and, (e) the experienced professional phase (Ronnestad & Skovholt, 2003).

**Themes.** It was after their initial work on stages of development that they did their qualitative study, which resulted in a model of themes related to psychologist development. This cross-sectional study sampled 100 counselors and therapists ranging in experience from first-year graduate students to doctoral practitioners with 25 years of experience (Skovholt & Ronnestad, 1992a). Skovholt and Ronnestad developed these themes in the hopes that the themes themselves might become hypotheses, rather than a fact, for future research on therapist development.

In their later work Ronnestad and Skovholt (2003) revisited and reformulated their theme formulations in much the same way as they revised their proposed phases of development. This was done by consensus method, whereby they reread their original qualitative results and revised themes where appropriate. At this time, rather than having 20 themes broken down into 4 categories, their final consensus resulted in 14 themes: 1) Professional development involves an
increasing higher-order integration of the professional self and the personal self;
2) The focus of functioning shifts dramatically over time, from internal to external to internal; 3) Continuous reflection is a prerequisite for optimal learning and professional development at all levels of experience; 4) An intense commitment to learn propels the developmental process; 5) The cognitive map changes: Beginning practitioners rely on external expertise, seasoned practitioners rely on internal expertise; 6) Professional development is a long, slow, continuous process that can also be erratic; 7) Professional development is a lifelong process; 8) Many beginning practitioners experience much anxiety in their professional work. Over time, anxiety is mastered by most; 9) Clients serve as a major source of influence and serve as primary teachers; 10) Personal life influences professional functioning and development throughout the professional life span; 11) Interpersonal sources of influence propel professional development more than "impersonal" sources of influence; 12) New members of the field view professional elders and graduate training with strong affective reactions; 13) Extensive experience with suffering contributes to heightened recognition, acceptance, and appreciation of human variability; 14) For the practitioner there is realignment from Self as hero to Client as hero.

Trainee Anxiety. Trainee anxiety plays a large role in the Ronnestad and Skovholt (2003) model of development. Ronnestad and Skovholt (1992a, 1993, 2003) found that graduate student anxiety was intense throughout training, particularly in the beginning student phase. However, Goodyear et al. (2003) point out that other researchers have found this to not necessarily be true. For
example, Chapin and Ellis (2002) stated that in their research they did not find this level of anxiety among graduate student trainees. It should be pointed out that in Ronnestad and Skovholt (1993), reporting of high anxiety at the graduate student level was retrospective in nature, from professionals who had been working in the field for 20 to 40 years. Ronnestad and Skovholt (1993) point out that current graduate trainees are less likely to admit anxiety. Although Chapin and Ellis (2002) found similar results with regard to current students, they suggest that this may be due to current students' unwillingness to disclose anxiety. Therefore, I believe that Ronnestad and Skovholt's model warrants a reminder to supervisors to keep in mind that even though a supervisee may not outwardly admit anxiety, the majority of professionals reported having experienced anxiety in their training. It should be noted that it is not only anxiety-provoking for the new graduate trainee within the training environment, but an additional source of anxiety exists as an LGB individual within the training environment (e.g., Rosario, Schrimshaw, Hunter, & Braun, 2006)

*Contributions.* Ronnestad and Skovholt take into consideration development of therapists across the life span, rather than just limiting development until graduation and immediate post-doctoral training. They take into account the integration of the personal and professional self in therapist development. While this model does not specifically account for LGB issues within the supervisory relationship, it is one of the fundamental supervision models that appears to parallel LGB identity development, in that it is fluid and lifelong.
Limitations. Skovholt and Ronnestad (1992a) themselves list limitations to their initial qualitative study in which the stages and themes of their model were derived. They point out that their work was cross-sectional in nature, leaving room for cohort effects, and state that a longitudinal study, perhaps over 30 years, may result in more conclusive data. They also point out that the sample used in their study was limited in terms of diversity, as most of the graduate students interviewed were from the University of Minnesota, therefore incorporating a potential training bias into their work. They also acknowledge that although the qualitative nature of this study provides rich information regarding therapist development, it also limits the ability to look at causal factors in therapist development.

Evaluation of the Model. The Ronnestad and Skovholt model (1992a, 2003) is limited in terms of empirical support; however, their work has helped generate hypotheses for other researchers. Heidel (1998), in a quantitative study of 79 interns at university counseling centers, developed questionnaires based on a number of the most prevalent developmental models, including Ronnestad and Skovholt’s model. Heidel (1998) noted that most models of trainee development were supported, with interns reaching the final stages of the models in their final year; however, it is pointed out that only the Skovholt and Ronnestad (1992a) model allowed for further growth as therapists beyond internship. Heidel (1998) recommended that the Ronnestad and Skovholt model be used specifically to generate quantitative surveys in future research.
Only one article specifically reviewed, but did not necessarily test, the Ronnestad and Skovholt model of therapist development (Goodyear, Wertheimer, Cypers, & Rosemond, 2003). Although Goodyear et al. (2003) point out that the work of Ronnestad and Skovholt is important to our field, as issues of professional development affect all therapists, they cite potential pitfalls in Ronnestad and Skovholt's work. Specifically, Goodyear et al. (2003) discuss how the 14 themes could be made even more parsimonious, as many of the themes appeared to be similar in nature. Goodyear et al. (2003) had seven individuals group the current themes, which resulted in 6 meaningful clusters (Themes 4, 6, 7; Themes 1 and 3; Themes 2 and 5; Themes 8 and 12; Themes 9, 10, and 11; and Themes 13 and 14). It should be noted that a limitation to this review would be that only seven professionals participated in this mini-study, and although they are experts within the field, this may limit the validity of their clusters. Goodyear et al. (2003) also point out that the revised model of Ronnestad and Skovholt (2003) is really a career development model as opposed to a model of supervision, as this model has similarities to Super's (1953) model of career development, mainly because of the integration of the personal and professional self into the model.

Identity Development Model (IDM)

Stoltenberg's (1981) Counselor Complexity Model, later known as Integrated Development Model (IDM) of supervision (Stoltenberg, 1987, 1998), posits four levels of development. Throughout additions and revisions, this model of supervision has become one of the most utilized developmental models of supervision in the counseling field (Bernard & Goodyear, 2004). The IDM levels
are rooted more in the individual's development as a clinician and less with regard to his or her development as a person in training. Each of the four levels contains information on three overriding structures or markers of growth: self-other awareness, motivation, and autonomy. Autonomy is simply to what degree the supervisee can or will be independent of his or her supervisor with regard to clinical decision making. Motivation indicates the supervisee's interest and effort put forth in his or her training and growth as a therapist. Lastly, and perhaps most personal to the individual, is self-other awareness, a structure that denotes where the supervisee is in terms of his or her own self-preoccupation as well as self-awareness. According to Stoltenberg (1998), "The cognitive component [of this structure] describes the content of the thought processes characteristic across levels, and the affective component accounts for changes in emotions such as anxiety" (p. 16).

Three Levels of Development. Stoltenberg (1987, 1998) discusses the three levels of development within IDM. In Level 1 the supervisees are new within their training in psychotherapy. These supervisees are often focused on learning specific simple techniques, understanding basic theories, and a primary worry may be around feelings of competency around building rapport with clients. At this level the supervisee's awareness of oneself and others is primarily focused on himself or herself, limiting the supervisee's ability to process the client's perspective or even her or his own feelings and thoughts toward the client. This level is marked with supervisee anxiety and negative, critical self-focus (Stoltenberg, McNeill, & Delworth, 1998).
Resolution of Levels. Stoltenberg et al. (1998) write about resolution of levels in the supervisee’s progression through this model. Resolving Level 1 involves the supervisee switching his or her focus on self to focus on the client. The supervisee in Level 2 can cognitively and affectively understand and connect with the client’s world view. This ability to shift his or her focus from self to others is primarily due to a lessening of anxiety in the supervisee.

At Level 3 increased autonomy and stability are prominent. Although focus once again returns to the self, as it did in Level 1, the quality of this self-focus is completely different. The supervisee begins accepting himself or herself more, both strengths and weaknesses. Simultaneously, the supervisee at this level is also able to attend to the client, both cognitively and affectively, with some ease and grace. Stoltenberg et al. (1998) state: “This therapist, through the self-knowledge that has developed, is better able to use herself or himself (personal characteristics, genuine responses) in session” (p. 25). From this point the supervisee will begin to reach Level 3i (Integrated) where the therapeutic and personal processes learned and developed in Level 3 become more smoothly transitioned between. This level is also typified by the supervisee understanding and being aware of “how his or her personal characteristics affect various clinical roles, as well as an integration and consistency of identity across these roles” (Stoltenberg et al., 1998, p. 26).

The Supervisory Relationship

The question that might be asked is what facilitates the supervisee’s/psychologist-in-training’s LGB identity integration with her or his professional
identity? Stoltenberg et al. (1998) write about the supervisory relationship and its importance for the supervisee's growth. According to these authors, the interpersonal relationship between supervisor and supervisee serves as a factor for the supervisee's self-awareness, which in turn promotes even further learning by the supervisee. Loganbill, Hardy, and Delworth (1982) state that the supervisory relationship is crucial in the same way the relationship between therapist and client is crucial.

*Satisfactory Supervision*

Stoltenberg et al. (1998) cite research as to what the supervisee deems as "satisfactory supervision." Beginning supervisees are more likely to want a combination of didactic (Worthington & Roehlke, 1979) and self-awareness exploration (Nelson, 1978). More intermediate supervisees hope to receive attention along with development of client conceptualization skills (Mueller & Kell, 1972). Advanced supervisees want to work on more advanced therapeutic skills and issues, including more complex personal development issues (McNeill & Worthen, 1989). However, there are simpler aspects that allow for the supervision experience to be deemed a "good supervisory relationship": acceptance, respect, warmth, understanding, and trust (Hutt, Scott, & King, 1983; Martin, Goodyear, & Newton, 1987). Also, good supervisors self-disclose and are supportive of mistakes in an environment conducive to safe experimentation (Black, 1988). According to Bordin (1983) building a strong working alliance, via "bonding," can greatly reduce anxiety that exists and persists with regard to the power differential between supervisor and supervisee. Another study by
Allan, Szollos, and Williams (1986) indicates that clear and open communication and respect far outweigh the didactic and structural mechanisms of supervision. What all of these studies indicate is that varying degrees of anxiety will exist in the supervisory relationship, and it is important, if not crucial, to establish trust, respect and acceptance within the relationship to allow the supervisee to progress to his or her fullest.

Yet, even with the research affirming the absolute importance of the supervisory relationship, most of the research in this area was done in the early 1980s; Stoltenberg et al. (1998) note how little research has been done in the area of the supervisory relationship since that time. A more recent qualitative study by Worthen and McNeill (1996) asked the question of what constitutes “good psychotherapy supervision.” For participants in this study the most fundamental aspect of good supervision was the quality of the supervisory relationship, which included supervisor empathy, validation and affirmation, and being nonjudgmental. The consequence of not developing a “good supervisory relationship” may well be that the supervisee becomes delayed in learning and developing psychotherapy skills, and that her or his very professional identity development may be hindered and delayed (Stoltenberg et al., 1998).

Difference between Effective and Ineffective Supervision

Stoltenberg et al. (1998) state that the important difference between effective and ineffective supervision might well be support and responsiveness versus judgment and insensitivity. They stress that demonstrating acceptance, warmth, respect, understanding, empathy and support is vital across all of the
IDM levels of development. Therefore, these can be considered the core of supervision. Without this basis to work from, it would be tantamount to not providing our clients with these interpersonal characteristics as they strive for their own growth (Stoltenberg et al., 1998) In other words, it would stagnate the therapeutic process.

*Diversity in the Supervisory Relationship*

Stoltenberg et al. (1998) discuss the supervisory relationship in terms of supervisee diversity, including race, ethnicity, culture, gender, and sexual orientation. Supervisees from racial and ethnic minorities may be struggling with their own cultural identity development, let alone with their professional identity development (Vasquez & McKinley, 1982). Stoltenberg et al. point out the difficulty for the trainee in cross-cultural supervision to assert himself or herself within the supervisory relationship as a result of the power dynamic within this relationship. This is perhaps most evident when the supervisor, already in a place of power, is perceived to be from the dominant culture. In addition, these supervisees have likely experienced some form of discrimination and isolation in their lives, and as a result, felt anger, confusion, and discouragement. Perhaps in order to reduce these incidents from reoccurring in their professional environment, these supervisees may choose to not disclose or discuss with the supervisor their thoughts and/or feelings around these issues and experiences (Stoltenberg et al. 1998). As a result, the supervisory relationship may become or be perceived to become unsupportive.
In order to allow for the most potent and growth-oriented supervision experience, it is recommended that the issues faced by racial and ethnically-diverse supervisees be addressed in supervision (McNeill, Hom, & Perez, 1995). The very frustrations and feelings of confusion this supervisee might experience in life may well be replayed within the supervisory relationship, making it pertinent for exploration. If a supervisor ignores ethnic and racial issues within the supervisory relationship, he or she may be perceived as an inadequate supervisor (Cook & Helms, 1998).

**Absence of Diversity Issues in the Supervisory Relationship.** One important element about the supervisory relationship that might prevent supervisees from discussing diversity issues and their feelings in this regard is the power differential between supervisor and supervisee (Stoltenberg et al., 1998). Some supervisors may be uncomfortable discussing these issues, and may also believe they are too personal in nature to be pertinent in supervision. However, Stoltenberg et al. urge the supervisor, the person in power in the supervisory relationship, to bring up issues of diversity within the relationship, as diversity is pertinent to the supervisee's growth and development as an integrated therapist.

**Sexual Orientation in the Supervisory Relationship.** Stoltenberg et al. (1998) are perhaps one of the first sets of clinicians to acknowledge the increasing issues of diversity with regard to supervisees, particularly in relation to supervisee sexual orientation. One diversity issue these authors acknowledge is the paucity of research on gay and lesbian issues in supervision. Even today, a decade after their research, the supervision literature does little to address specific issues with

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regard to the LGB supervisee, with the exception of a few recent studies (e.g., Burkard et al. 2009). Therefore, the supervisor who might want to be more open to discussing such issues with a supervisee may not feel she or he has a point of reference in the literature from which to base such discussions. Just as in the 1970s and 1980s it became important to study supervisees' experiences and needs in supervision in general, today it is imperative to continue to understand supervisees' experiences and needs in relation to who they are as diverse individuals.

**LGB Issues in Supervision**

The fundamental and complex issue of sexual orientation will and does arise in supervision with LGB psychologists-in-training, and often the key components are heterosexism and homophobia (Long, 1996). In considering the number of permutations that could exist among client-supervisee-supervisor, we can better understand the different dynamics that might occur (see Table 2).

<table>
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<tr>
<th>Role</th>
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<th>6</th>
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<tr>
<td>Client</td>
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</tr>
<tr>
<td>Supervisee</td>
<td>LGB</td>
<td>LGB</td>
<td>Hetero</td>
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<tr>
<td>Supervisor</td>
<td>LGB</td>
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If one were to pick up the most recent textbooks on clinical supervision within psychology, one would note that the literature with regard to these triads primarily focuses on the sixth scenario, wherein it is assumed that all three
members of the triad are heterosexual. Perhaps the next most discussed is the fifth scenario, whereby the client identifies as LGB, with both the trainee and the supervisor being heterosexual. This literature generally disregards the fact that supervisees as well as supervisors can identify as LGB.

**Buhrke's Conflictual Situation Model**

There have been a number of supervision models applied to gay and lesbian supervision issues. One model is Buhrke's Conflictual Situation model (1989a). In this model Buhrke describes two situations where conflict would arise between supervisor and supervisee as a result of homophobia: 1) supervisor is not homophobic and the supervisee is; 2) the supervisor is homophobic and the supervisee is not. Buhrke goes on to discuss the two nonconflictual situations in supervision, that being where neither supervisor nor supervisee is homophobic, and where both supervisor and supervisee are homophobic. Buhrke and Douce (1991) discuss transference and countertransference issues that arise in the LGB supervisory relationship. Issues of attraction for a supervisor or supervisee are difficult in and of themselves, and when paired with any homophobic or homonegative attitudes, recognizing and working through same-sex attractions can be difficult for both the LGB individual and the heterosexual individual. As in the client-psychologist therapeutic relationship, non-communicated issues of this type can result in negative outcomes for the supervisee or the supervisor or both.

Within the *therapeutic* relationship, it is most often the psychologist that would bring up the issue of attraction to the client in an effort to work through this
sensitive issue. If this same philosophy were to follow to the supervisory relationship, it would be at the discretion of the supervisor to bring up the issue of attraction within the supervisory relationship (Buhrke & Douce, 1991). The other issue that arises in regard to the supervisory dyad is that the purpose of supervision may be perceived by the supervisor as a place only for discussion of client issues and not issues between supervisor and supervisee. However, if the LGB supervisee is hesitant to discuss her or his own sexuality and attractions within the supervisory relationship, this may also prevent her or him from talking about similar attraction issues pertaining to clients. If the LGB supervisee is unable to present any and all attraction issues to the supervisor, it may impede the psychologist-in-training from working through any transference and countertransference issues that exist in the client-counselor dyads (Yarris & Allgeier, 1988).

Holloway’s Supervisee Empowerment Model

A second model used in LGB supervision is Holloway’s (1995) Supervisee Empowerment model. This model places an emphasis on the empowerment of the supervisee by means of: (a) the supervisee developing skills and knowledge as it pertains to counseling; and, (b) self-efficacy being achieved in both the supervisory relationships and therapeutic relationships. This model would allow for the supervisee to have the power to bring up and discuss issues of sexual orientation and/or sexual attraction, not only with regard to clients, but also in relation to the supervisory dyad. Although this model addresses power differentials within the supervisory relationship, and empowerment is a key issue
for marginalized individuals, Holloway does not specifically refer to LGB trainees; therefore, issues unique to LGB supervisees are lacking in this model.

*Homonegativity Model*

Russell and Greenhouse's (1997) Homonegativity model of supervision speaks to collaboration within the supervisory relationship. The authors suggest that homophobic or homonegative attitudes in supervision and the supervisory relationship symbolize the amalgamation of political issues (feelings of power/lack of power, being out/not being out) and personal issues (internalized homophobia, stage of sexual orientation identity development) which, in turn, affect the supervisory relationship.

Although homonegative attitudes can exist regardless of the supervisor's or supervisee's sexual orientation, Russell and Greenhouse (1997) stated that the most detrimental scenario may be when the supervisor identifies as heterosexual and the supervisee as LGB, as the power bias is the most evident in this relationship. In relation to power differential, within the LGB community, individuals who have come out generally are more comfortable with themselves and ultimately have more power in their lives than those individuals who have not come out. Therefore, there would be an evident difference between a supervisor who identifies as LGB and is "out" and a supervisee who identifies as LGB who may not be "out." This may compound the supervisee's reluctance to bring up sexual orientation issues and/or sexual attraction issues. Conversely, the LGB supervisee who is "out" would potentially have more power within the supervisory relationship than the LGB supervisor who is not "out." This could
result in the supervisor feeling discomfort when issues of client sexual orientation, therapist-client same-sex attraction, and/or supervisee-supervisor attraction arise in supervision. Such discomfort would likely lead to the supervisor again dismissing and avoiding the issue altogether. Again, this avoidance could be at the ultimate detriment to clients.

Limitations of these Models

The above-cited models take into account some of the issues the LGB individual must face, not only in society, but also in the microcosm of the supervisory relationship. However, these models are primarily presented as theory and are not necessarily supported by corroborating evidence. As well, these models are becoming dated, with the most recent still being over 12 years old. Buhrke’s Conflictual model (1989a) refers to “homophobia,” a dated term with an outdated definition. Buhrke and Douce’s (1991) model focuses specifically on transference and countertransference issues that the supervisee might face with regard to clients, and does not take into account other LGB issues that might arise within the supervisory relationship. Holloway’s (1995) Supervisee Empowerment model, although applied to supervision of LGB supervisees, does not address specific LGB issues. Russell and Greenhouse (1997), while being the most recent model applied to the supervision of LGB trainees, would benefit from data to support and/or refute their claims. As well, although there are models of psychologist-in-training development within the supervisory context that appear to parallel, to some extent, LGB identity development, (e.g., Ronnestad and Skovholt), no specific research exists that
looks at how LGB individuals develop as psychologists in light of their own sexual identity development.

LGB Affirmative versus LGB Non-Affirmative Supervision

A recent qualitative study by Burkard et al. (2009) looked at the perceptions of LGB supervisees in terms of how affirming or non-affirming the supervisors were perceived by the supervisee. Using Consensual Qualitative Research (CQR) methodology, Burkard et al. asked LGB participants questions with regard to LGB affirmative or non-affirmative supervisors, based on comments made by supervisors in the context of the supervisory relationship.

The findings of Burkard et al. (2009) are based on 17 doctoral student participants, all of whom identified as lesbian, gay, or bisexual, and were from clinical psychology, counselor education, and counseling psychology programs. In relation to LGB affirming events in supervision, supervisees generally experienced supervisors as supporting LGB-affirmative work with clients and this support positively affected the supervisee, the supervisory relationship, and the supervisee's work with clients. The LGB-affirming event typically (more than half the time) occurred in relation to the supervisee presenting a clinical case in supervision. After presenting this case, the supervisee felt validated and respected by the supervisor, which, in turn, strengthened the supervisory relationship. Prior to the LGB-affirming event, supervisees already had a strong relationship with their supervisor, a relationship described as supportive, trustworthy, and open. More than half the supervisees reported having grown in their clinical skills as well as their own supervision skills. Perhaps of greatest importance in this regard
is that more than half of the participants felt not only more confident in their work with LGB clients as a result of this LGB-affirming supervision event, but also grew in their understanding of important clinical issues in general.

*LGB Affirmative Supervision*

LGB-affirmative supervisors did not generalize or pathologize LGB issues and individuals (Burkard et al., 2009). Taken one step further, not only did these LGB affirming supervisors support supervisees’ clients who identified as LGB, but these supervisors were also affirmative of the supervisee’s LGB identity. Supervisees reported a sense of empowerment and confidence in their work overall, while also internalizing these supervisors’ positive style of supervision as their own. For these supervisees, feeling as though they could approach the LGB-affirming supervisor again and again in consultation and being able to feel comfortable and open in their self-disclosure within supervision were highly important.

*LGB Non-Affirmative Supervision*

In the LGB non-affirmative event status, supervisees generally (all or all but one) reported that these non-affirming events evoked negative emotions such as fear, anger, and distress, and that such LGB non-affirming events had a negative impact on the supervisory relationship, creating an unsafe environment (Burkard et al., 2009). Based on the Integrated Development Model (Stoltenberg et al., 1998) of supervision discussed earlier, the supervisory relationship is crucial and at the very core of supervisee’s growth and development into competent and confident therapists. As with the LGB-affirming supervision
event, the non-affirming event typically began as the supervisee sought help with a clinical case, to which LGB non-affirmative supervisors were perceived as prejudiced toward the supervisee and/or the supervisee’s LGB client. As a result, supervisees withdrew in supervision and were less trusting of the supervisor, including the supervisor’s competency overall.

After the occurrence of the LGB non-affirming event, supervisees were afraid to talk to their supervisors about the issue for fear of being negatively evaluated. In this LGB non-affirming situation, supervisees reported that they would have preferred to use supervision to, at least, explore this issue with the supervisor, and, at most, that the supervisor would acknowledge his or her error and insensitivity, and then focus back on how the supervisee might be feeling. Supervisees hoped that these supervisors would acknowledge the tension in the relationship after the event and show care about how the supervisee was doing.

In some of the cases the supervisee perceived having a good relationship with the supervisor prior to the LGB non-affirming event; therefore, non-affirming behaviors can occur regardless of the relationship. Some of the supervisors referred to by participants were unresponsive to LGB issues in general and lacked knowledge about working with LGB individuals. Supervisees then believed that any LGB issue brought up in supervision would be dismissed. Some supervisees began to even question their choice to be in the field of psychology, as they believed they would be more supported as LGB individuals than they were. With regard to the effect on the all-important clinical work, supervisees who experienced LGB non-affirming supervision varied on how they...
perceived this effect. Most stated that they believed their clinical work was compromised; some stated that these non-affirming events had little effect on their clinical work. Some supervisees reported a positive outcome to the non-affirming event, as they learned how not to be in their work with clients, in terms of addressing hard issues and being supportive to the client.

Overall, supervisors supported LGB-affirmative work with clients, and many were open to discussion of LGB issues within supervision. In turn, the supervisees reported that not only did they feel more confident in their clinical work and saw improvement in that work, they also stated that the relationship with their supervisors improved as well.

A number of supervisors were perceived to hold biases against LGB individuals, as well as making pathologizing and oppressive statements regarding LGB individuals. Some supervisors ignored the issues of sexual orientation altogether, which would appear to be a form of either discomfort with the subject or perhaps is indicative of heterosexism, and not seeing the importance of discussion of sexual orientation within the supervisory relationship. These non-affirming experiences had the opposite effect of the affirming experiences, in that they negatively impacted the supervisory relationship, and supervisees perceived their supervisors as incompetent as a result of these non-affirming events.

Burkard et al. (2009) determined that, with regard to LGB-affirming supervision events versus LGB non-affirming supervision events, 2 out of 17 (12%) participants had never experienced LGB-affirming supervision and 12 out of 17 (70%) participants reported having at least one LGB non-affirming event.
during their training. Burkard et al. point out the percentage of LGB non-affirming events have potentially increased in the past 13 years since the Pilkington and Cantor (1996) study, which found evidence that 50% of participants reported LGB-biased supervision.

**What the Burkard et al. Study did not Address**

The findings of Burkard et al. (2009) are indicative of the fact that, despite diversity issues being at the forefront within the field of psychology, supervisors continue to use non-affirmative, derogatory, and stereotypical language when discussing LGB issues and individuals. This study highlighted how LGB-affirmative supervision positively impacted the supervisory relationship, and ultimately, client outcomes; LGB non-affirmative supervision also affected the supervisory relationship and client outcomes, but in a negative way. An issue the above study did not take into account is how the supervisee's own sexual orientation identity development interacted with and was affected by affirmative/non-affirmative statements by supervisors; in fact, Burkard et al. list this as a limitation to their study. As well, they did not address how the supervisory relationship was affected by discussion of the supervisee's own LGB sexual orientation in general, focusing on LGB issues as they apply to the therapist-client relationship. Although the client is the reason for supervision and, therefore, of primary importance, if the supervisory relationship is negatively impacted, it will ultimately have an effect on the therapeutic relationship and the client.
Gap in the Supervision Literature

There is a gap in the supervision literature with regard to supervising LGB trainees as a whole. More specifically, much of the research cited herein has not focused on the LGB supervisee in his or her experience not only in training and supervision, but also in general, in relation to his or her identity development. If we consider a developmental model of the psychologist-in-training juxtaposed onto a developmental model of sexual orientation identity, the data acquired would add more depth and breadth to the literature.

Purpose of the Current Study

The purpose of the current qualitative study was to examine the experiences of the LGB psychologist-in-training in her or his supervisory relationships. The study sought information primarily on how LGB issues are or are not being addressed in the supervisory relationship. The primary goal was to determine how these issues have impacted the LGB psychologist-in-training's perception of how the supervisory relationship has changed as a result of the following issues: (a) coming out or not coming out to the supervisor; (b) perception of supervisors' comfort with talking about LGB issues, be they client issues or supervisee issues; and (c) how this perceived comfort, or lack thereof, influences the LGB psychologist-in-training's work with clients, particularly LGB clients. Also of importance was to determine where the participant is in terms of his or her own sexual identity development, and how the supervisory relationship may or may not have played a part in, not only his or her development as an LGB individual, but also as a psychologist. In addition, this study asked the LGB
psychologist-in-training what he/she would hope for in the supervisory dyad in terms of support from the supervisor.

By utilizing a Grounded Theory approach to studying LGB psychologist-in-training issues in supervision in relation to her or his sexual identity, this study attempts to build a conceptual model that examines how the LGB psychologist-in-training’s professional development within the supervisory relationship interacts with her or his sexual orientation and sexual identity development. By developing a conceptual model in this area it is hoped that supervisors within counseling and clinical psychology programs will be more aware of not only experiences of their LGB supervisees, but also aware of the consequences of sexual orientation issues on the LGB supervisee’s own sexual identity development. As a result of this study it is hoped that supervision for LGB psychologists-in-training will improve through greater awareness of LGB issues, and subsequently, that harm to both LGB supervisees and their clients will be eliminated.
CHAPTER III

METHODS

Rationale and Overview of Grounded Theory Qualitative Research

Research involving LGB psychologists-in-training in supervision is a relatively new pursuit and no quantitative measures exist at present to assess the experiences of either LGB supervisor or supervisee. In fact, Burkard et al. (2009) utilized the consensual qualitative research (CQR) approach in order to determine themes in LGB affirmative and LGB non-affirmative supervision experiences. Their study asked questions specific to determining affirmative and non-affirmative supervision, but did not necessarily look at the LGB psychologist-in-training’s entire experience. Therefore, it was the intent of this study to examine the overall experiences of the LGB psychologists-in-training in their supervisory relationships. Simultaneously, this study examined both the LGB trainee’s own place within his/her LGB identity development and the effect of supervision on the LGB psychologist-in-training.

Because there is so little theoretical foundation for the development of the LGB psychologist-in-training within a supervisory relationship, a grounded theory approach was warranted as the methodology to analyze the data. Originally developed by Glaser and Strauss (1967), the grounded theory methodology allows
for the emergence of a theory via a sequence of steps, proceeding from data collection to data coding; to placing the coded data into increasingly inclusive and comprehensive categories; to describing the subsequent categories or constructs based on their properties, leading finally to an articulate theory based on the emergent constructs and any interrelations between constructs. Later, Strauss and Glaser fell into disagreement about the fundamental concepts of the grounded theory approach, with Glaser utilizing a large bank of codes, from which the theory emerges, and Strauss focusing more on the explanatory power of the coding paradigm, including causal conditions, action strategies, intervening conditions, phenomena, and consequences (Walker & Myrick, 2006). For the purpose of this study the Straussian method was utilized.

Participants

Fourteen participants who identify as lesbian, gay, or bisexual and were enrolled as graduate students in either a counseling psychology or clinical psychology program were recruited via email (Appendix A) from two professional psychology listservs: those of the Association of Counseling Center Training Agencies (ACCTA) and the American Psychological Association, Division 44, Society for the Psychological Study of Lesbian, Gay, and Bisexual Issues.

As part of the participant inclusion criteria, each of these doctoral-level students of individual supervision. There was a relative balance of sexual orientation across participants (6 who identified as lesbian, 4 who identified as gay/queer, and 4 who identified as bisexual/queer). Participant gender consisted

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of 9 women (6 lesbian, 3 bisexual/queer) and 5 men (4 gay/queer, 1 bisexual). Participants ranged in age from 26 to 46 and all identified as Caucasian. Most participants identified as being in clinical psychology Psy.D. programs, with 3 participants being in counseling psychology Ph.D. programs. Participants were in programs from around the United States, including the East Coast, West Coast, South, Southwest, and Northwest. See Appendix B and Appendix C for participant data.

Instruments

*Interview*

Grounded theory methodology relies primarily on interviews for the gathering of data. Interviews allow the participant to answer the research questions in their own words, thus allowing them freedom of expression (Creswell, 1994; Fassinger, 2005). The primary instrument was an in-depth, semistructured interview developed by the principal researcher in consultation with her dissertation committee. The interview consisted of five primary questions specific to sexual orientation and supervision experiences (Appendix D). All questions were first tested with two pilot interview participants: one gay man and one lesbian woman. Revisions were made to the questions at that time, based on feedback from the pilot participants. Specifically, the pilot participants gave feedback that having to think of only one supervisor was difficult and restrictive, as they had had numerous supervisors that they felt warranted talking about. Follow-up questions were modified as a result of input from the pilot participants (e.g., Appendix E); as well, other follow-up questions were

59
incorporated during each interview as deemed necessary for appropriate clarification by the participant. The questionnaire consisted of primarily open-ended questions to allow participants the most freedom of response. Interviews ranged from 35 minutes to 50 minutes in duration, with the average interview taking approximately 45 minutes.

The Sell Assessment of Sexual Orientation (SASO)

In the original construction of the SASO, Sell (1996) used the Kinsey Scale of Sexual Orientation (Kinsey et al. 1948) to assess for convergent validity of the SASO. The results indicated that a significant correlation ($r=0.85$) existed between the SASO and the Kinsey Scale of Sexual Orientation (Sell, 1996). The SASO is comprised of 17 items across four categories: (1) biological sex, (2) sexual interests, (3) sexual contact, and (4) sexual orientation identity. The category of sexual interests consists of seven questions designed to assess the intensity and frequency of sexual interest in men and women. Participants are asked to consider times they were: (1) sexually attracted to a man or a woman; (2) had sex fantasies, daydreams or dreams about a man or woman; or (3) were sexually aroused by a man or woman. The sexual contact category is comprised of five questions designed to assess the frequency of sexual contacts. Participants are asked to consider times they had contact between their body and another man or woman's body for the purpose of sexual arousal or gratification. Lastly, sexual orientation identity consists of four questions assessing the participant's own sexual orientation identity. The SASO has six questions that look at
homosexuality. Three of these questions assess homosexual attractions, two assess homosexual contacts, and one assesses homosexual identity.

The first step in creating the “homosexual summary” is to allocate standardized responses to each of the six questions. These standardized responses are “not at all homosexual,” “slightly homosexual,” “moderately homosexual,” and “very homosexual.” For example, a woman reporting she is “not at all sexually attracted” to women is labeled “not at all homosexual,” a woman reporting she is “slightly sexually attracted” or “mildly sexually attracted” to women is labeled “slightly homosexual,” a woman reporting she is “moderately sexually attracted” or “significantly sexually attracted” to women is labeled “moderately homosexual,” and a woman reporting she is “very sexually attracted” or “extremely sexually attracted” to women is labeled “very homosexual.” This procedure is repeated for each of the remaining five questions.

In the original study by Sell (1996), only data from men were analyzed, as only 21 of the 198 participants were women. The median age of the 177 men was between 30 and 34 years. Participants were predominantly White and highly educated (over half completed at least four years of college/university). The participants were citizens of the United States (77%), Canada (10.2%), the United Kingdom (5.6%), and other countries (7.2%). This sample produced a very high test-retest reliability (0.93) (Sell, 1996).

For the purpose of this study only portions of the SASO were utilized (Appendix F), including the question asking biological sex, one of seven questions asking about sexual interest, and all four questions asking about sexual
orientation identity; no questions with regard to actual sexual contact were utilized. These specific questions were selected not to quantify the participants' sexual orientation identity, but to enhance and allow for increased specificity in relation to the self-definition of sexual orientation identity as reported by participants. The results from this measure will be reported in Chapter 4 and integrated into the discussion of identity in Chapter 5.

**Demographics Form**

A Participant Questionnaire (Appendix G) was administered to determine each participant's age, gender, race/ethnicity, sexual orientation, program of study (counseling psychology or clinical psychology), degrees conferred, number of semesters of clinical supervision, and the number of supervisors he/she has had. This form was emailed to each participant prior to the interview date and answers were given verbally at the end of each interview.

**Procedure**

**Instrument Development**

The original five interview questions (Appendix D) were compiled by the principal researcher in consultation with her dissertation committee in order to answer three main research questions: (a) What has been the process of coming out or not coming out to supervisors? (b) What has been the overall experience in supervision with regard to talking about LGB issues? and, (c) How has the supervisory relationship, in light of LGB issues, affected the LGB psychologist-in-training's clinical work and LGB identity development? These questions were primarily derived from the principal investigator's curiosity regarding general
experiences of LGB psychologists-in-training in supervision. At that time some potential follow-up questions were also developed and were later modified as per pilot participant responses and feedback (Appendix E). As well, additional follow-up questions were incorporated during each interview as deemed necessary for appropriate clarification by the participant.

**Interviews**

Interested individuals were asked to contact the principal researcher directly via email to set up a time for a telephone interview. Through email correspondence a date, time, and preferred telephone number were confirmed; as well, the five primary questions or “Topics of Interview” (Appendix D), the demographic form or “Participant Questionnaire” (Appendix G), and the informed consent form (Appendix H) were emailed to the participant for review.

The day of the interview, the primary researcher called the participant at the designated time. Participants were only required to give verbal consent to participation at that time, as per Institutional Review Board (IRB) approval.

Kvale (2003) described the research interview as a specific interpersonal exchange between individuals, an interaction that results in knowledge. In order to create a more open dialogue and interpersonal feeling of safety, I began each interview with some casual conversation with the participant. I also chose at the beginning of the interview to disclose my own sexual orientation, lesbian, to each participant in order to create a greater sense of safety. In addition, when opening a new question, the researcher would refer to each participant by the sexual orientation identity term with which she or he identifies (e.g., “As a - lesbian, gay
man, bisexual woman or bisexual man, queer man or queer woman – what have your overall experiences with supervisors been like?").

Participants were allowed to articulate their experiences in their own words, consistent with the objective of qualitative research (Creswell, 1994; Fassinger, 2005; Morrow & Smith, 2000). The order of questions varied from the original questionnaire structure and from participant to participant, as issues were often brought up spontaneously by participants throughout the interview.

According to Rubin and Rubin (1995), it is imperative to have flexibility within the interview “because you have to work out questions to examine new ideas and themes that emerge during the interviews” (p. 45).

At the end of each interview, I stopped the tape recorder and spent a few minutes with the participant discussing the interview. As these participants had likely not been given such a forum to articulate their experiences as LGB supervisees, it was important to give them an opportunity to reiterate certain points and to add any thoughts or feelings. Both during the interview itself and post-interview, I made notes about themes I was observing as arising from the data and impressions of the interview. The notes were used to build on the follow-up questions and in the construction of the grounded theory conceptual model. All interviews were transcribed by the principal researcher.

Awareness of Bias

In order to identify any researcher bias, an issue most prevalent in qualitative research methods (Morrow & Smith, 2000), expectations and biases of the principal investigator were discussed at length with the faculty advisor from
the conceptualization of this project and continued throughout the course of data analysis. The principal investigator identifies as lesbian, while the faculty advisor/dissertation chair identifies as a gay man. The principal researcher and the dissertation chair discussed any biases held in the area of sexual orientation in general, as well as biases specific to LGB psychologists-in-training, supervision, and supervision of LGB psychologists-in-training. The principal investigator’s biases consist of the following: (a) the principal investigator is a lesbian and, therefore, part of the participant group; (b) the principal investigator is also a psychologist-in-training, and part of the demographic population; (c) supervisors, regardless of their own sexual orientation, must be open to discussing LGB issues in supervision; (d) all supervisors should provide LGB-affirmative support to LGB supervisees; (e) supervision must integrate supervisee/supervisor personal characteristics as they apply to clinical work; (f) the principal investigator is passionate about supervision and LGB issues; and (g) throughout analysis of data and writing of this dissertation, the principal investigator was on pre-doctoral internship at a site where trainee ignorance of LGB issues was, if not accepted, at least tolerated. The perceived biases of the advisor/dissertation chair were: (a) he is a gay man and part of the demographic population; and (b) he is a primary supervisor and a professor, and both of these professions are discussed by the participants in both affirming and derogatory ways.

Data Analysis

Data analysis was conducted by the principal investigator under the guidance of a counseling psychology professor/advisor. At the end of each
interview, the principal investigator completed field notes indicating the location of the interview, the length of the interview, perceptions of rapport, and other interview features and distinctions (e.g., interruptions). Field notes were utilized to interpret the transcripts during data analysis in order that authenticity and trustworthiness were maximized with regard to the narrative data (Lincoln & Guba, 1985).

According to grounded theory as set out by Strauss and Corbin (1990, 1998), the first phase of data analysis involves open coding, whereby each transcript is broken down into concepts or small, discrete parts (e.g., a word, or a sentence, etc.). The next phase of coding involves creating categories, which are higher order descriptions or labels that are inclusive of several concepts. Next is axial coding, which is the process of linking codes (both categories and properties) to each other, through both inductive and deductive thinking. This is done by identifying any causal relationships that may exist between categories and properties. When subsequent interview coding within a particular category ceases to add to the properties of that category, coding was concluded. This saturation level is set to guarantee as much as possible that the categories are as reflective as possible of the participants’ responses, while maintaining the uniqueness of experiences that are less shared. Finally, the emergent theory will be formulated in the selective coding phase of data analysis. From all the categories previously generated, one core category will be determined by the principal investigator, and agreed upon by the dissertation chair/faculty advisor. The basic theory that is derived from this process serves as a conceptual model for
the process being studied (Creswell, 1994), and interrelations between categories and themes are determined.

All data were analyzed using the computer program Atlas-ti 5.0, 2nd Edition. Atlas-ti 5.0 is a program first designed in 1996; at that time, Anselm Strauss contributed a foreword to the manual. Since then, many revisions have been incorporated (Scientific Software Development, June 2004). Atlas-ti is used in many professions (e.g., psychology, literature, medicine, engineering, law, history, etc.) to analyze large bodies of text via complex and systematic qualitative data analysis. The four Principles of Atlas-ti are Visualization (assists in visualizing complex properties and relations between data); Integration (assists in integrating data); Serendipity (assists in finding properties and relations without specifically searching for them); and, Exploration (reiterates above three principles of systematic discovery of the data). Atlas-ti also allows for an audit trail of the research process to be maintained in terms of development of codes and categories (“networks”). As well, the principal investigator maintained written documentation of the process, by making notes on the thought processes involved in the development of codes, categories, and any changes made to this analysis. For example, both in Atlas-ti and on paper, the principal researcher made note of themes that arose in the data. Figure 1 depicts the Atlas-ti workflow (Atlas-ti, 2004, p. 28).
Figure 1. Atlas-ti (2004) Analytical Workflow
All transcripts (Primary Documents or PDs) were uploaded into an Atlas-ti Hermeneutic Unit (HU), the document which houses all transcripts and subsequent data. Each transcript was coded in Atlas-ti in the order interviews were completed. Each interview was systematically coded, line by line, using an open coding format. As coding of each interview was completed, the list of open codes grew and codes were modified as themes emerged. Simultaneously, memos were incorporated into relevant places within each interview. These memos denoted themes, exceptions, thoughts, and ideas of the principal researcher/coder with regard to the data.

After initial coding of the PDs was complete, multiple re-reading of the PDs and constant comparison of the data ensued (Corbin & Strauss, 1990; Strauss & Corbin, 1998). Using the Atlas-ti program, codes and concepts that related to each other within the data were grouped together to form categories. Within each category, and utilizing memos and field notes, recurrent themes emerged.

Employing inductive and deductive reasoning, the codes and categories were reassembled in a new and different way via the axial coding process (Strauss & Corbin, 1990, 1998). Axial coding is a way by which the data can be presented using a logic diagram depicting the coding paradigm, whereby a core category, causal conditions, action strategies, context, intervening conditions, and resultant consequences are acknowledged (Creswell, 1998; Fassinger, 2005). Lastly, selective coding was done in order to construct an abstract explanation of the entire process (Creswell, 1998).
Verification of Findings

There are many ways to verify the credibility and accuracy of qualitative findings (Lincoln & Guba, 1985). As the other component of the supervisory dyad (the supervisor) was not interviewed in this study, and no other documentation of the supervisory interactions exist, verification was accomplished simply by checking with the participants during the interview process. This was done by asking follow-up clarifying questions and expansion of data (Strauss & Corbin, 1998).
CHAPTER IV

RESULTS

The purpose of this qualitative study was to explore the experiences of LGB psychologists-in-training in their supervisory relationships. Both the LGB trainee’s sexual orientation identity development and the effects of supervision on the LGB trainee were the main focus in the exploration. Utilizing a grounded theory approach, categories, themes, and propositions emerged.

Utilizing the qualitative software program, Atlas-ti, through the open coding process, four categories emerged from the data. The emergence of the four categories was as a result of constant comparison of codes between transcripts and included researcher’s memos denoting themes. Atlas-ti kept track of the degree of “groundedness” each code had: the greater the occurrence of the code, the more grounded. After repeated examination of the transcripts by the researcher, which included modifying of some codes, the final list of codes was established. It was from this final list that the researcher grouped the codes into meaningful categories, based on the perceived relatedness of the codes to one another. What resulted was the emergence of four categories, which were named by the researcher.
Sell Assessment of Sexual Orientation (SASO)

There was a relative balance of sexual orientation across participants: 6 women who identified as lesbian, 4 men who identified as gay/queer, and 3 women and 1 man who identified as bisexual/queer. According to each participant’s Sell Assessment of Sexual Orientation (SASO), all participants who identified as either lesbian or gay reported having an identity that was “exclusively homosexual” or “predominantly homosexual, and only incidentally heterosexual.” Three of the 4 participants who identified as bisexual reported being “equally homosexual and heterosexual,” with one female bisexual participant stating that she identifies as “predominantly homosexual, but more than incidentally heterosexual.”

Categories, Themes, and Theoretical Propositions

The four categories that emerged from the data are (a) Identity, (b) Relationships, (c) Climate, and (d) Impact. Following is a discussion of each category and subsequent themes that developed within the categories (see Table 3). Despite an inter-relatedness between some of the categories and themes, I will present them as separate entities. Immediately following will be a presentation of the axial coding paradigm, whereby the data were reconfigured into a model consisting of a central phenomenon, causal conditions, action strategies, context, intervening conditions, and consequences. At the end of Chapter 4 and in Chapter 5, I will further discuss how these categories and themes are interwoven.
## Table 3. Categories and Themes as a Result of Open Coding Process

<table>
<thead>
<tr>
<th>Categories</th>
<th>Themes</th>
</tr>
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<tbody>
<tr>
<td><strong>Identity</strong></td>
<td>1. LGB psychologists-in-training are vigilant about whom to come out to at their training sites.</td>
</tr>
<tr>
<td></td>
<td>2. It is important for LGB psychologists-in-training to integrate their experiences as LGB individuals into their professional life.</td>
</tr>
<tr>
<td></td>
<td>3. Openness and honesty around identity as LGB allows for self-respect.</td>
</tr>
<tr>
<td><strong>Supervisory Relationships</strong></td>
<td>1. If LGB supervisees do not feel supported by their supervisor, they consult with other professionals by whom they feel supported.</td>
</tr>
<tr>
<td></td>
<td>2. In “good” supervision, the supervisor is not necessarily gay or gay-affirmative, but believes in the integration of the whole person in the work and defines diversity broadly.</td>
</tr>
<tr>
<td></td>
<td>3. In “bad” supervision, the supervisor is perceived as rigid, judgmental, defensive, and has less awareness of sexual orientation as a diversity issue.</td>
</tr>
<tr>
<td><strong>Climate</strong></td>
<td>1. Experiences of homophobia, heterosexism, and general ignorance around LGB individuals and issues are still salient.</td>
</tr>
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<td></td>
<td>2. Certain training environments, training genres, and geographic locations greatly influence LGB climate.</td>
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<tr>
<td></td>
<td>3. The lack of education on LGBTQ issues in training environments puts the onus of educating on the trainee.</td>
</tr>
<tr>
<td><strong>Impact</strong></td>
<td>1. Supervisees often experience anxiety, shame, and guilt, around bringing up LGB issues in supervision and/or training situations.</td>
</tr>
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<td></td>
<td>2. LGB psychologists-in-training often feel “dismissed” when bringing up LGB issues.</td>
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<tr>
<td></td>
<td>3. Although LGB psychologists-in-training want to turn to supervisors for their learning, they feel stuck doing the training and teaching.</td>
</tr>
<tr>
<td></td>
<td>4. Judgment and ignorance of LGB issues can hinder or impede the LGB individual’s identity development.</td>
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</tbody>
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Quotes that are presented herein have been edited only to remove speech disfluencies to allow for ease of reading and to remove identifying information, such as participant’s exact age. Any disfluencies that remain were deemed important for the tone and emphasis of the participant. As well, specific participant quotes are identified using first the letter “P” for “Participant” and a corresponding number.

Category 1: Identity

The first category, “identity,” refers not only to how participants identified their sexual orientation, but also what that identity means to them and how they manage their identity. Three themes developed from the “identity” category:

1. LGB psychologists-in-training are vigilant about whom to come out to at their training sites.
2. It is important for LGB psychologists-in-training to integrate their experiences as LGB individuals into their professional life.
3. Openness and honesty around identity as LGB allows for self-respect.

*Theme One: LGB Psychologists-in-Training are Vigilant in their Environment about who to come out to*

Nine of the 14 participants were out to almost everyone in their lives, such as family, friends, coworkers/colleagues, and 5 were not out to some important people in their lives. Most of the individuals who were fully out as LGB had been in the process of coming out for over 10 years (range of 11 to 31 years). The 6
individuals who were not out to everyone in their lives had been out for less than 10 years (range 4 to 8 years).

LGB sexual orientation identity and coming out was described by these participants as a process. One gay male participant stated, “I was 18... I realized I was different. To my family [I have been out] since I was 24. To work and um... and other social sectors since 28.” (P14). Another gay male participant reported, “I’m [middle age] years old and I have been out since I was 15. But in various stages. I was not out to my family until... I came out at age 28.” (P11) One lesbian participant required more explanation of her coming out process. She stated,

I’ve been with my partner for 12 years. I’ve been as out as I am now, for that long at least. Um... before that... it was sort of... I guess it was sort of a process before that. Um, let’s see... well I met her at a job where I was not out. I was living in [the South] at the time. Um... I actually grew up in [the South]. So... I would say, that would be 12 years... I would say out, fully out, and then... I would say a few years before that there was sort of a window of... semi-out, and then, um... maybe a window... like 5 years or so of out to people who... who I knew were gay or I knew were more okay with it, but sort of not out to other people. Not out at work.

(P6)

A gay male participant reported that he is currently in an earlier process of coming out, “Well, I’m out to myself; I’m out to my friends, but I’m not out to
family yet. Um, it's been a process... um... oh, and I'm out professionally.”

(P12)

Despite the exception noted from this last participant, for many individuals the last place they come out is in their professional environment as psychologists-in-training. One lesbian participant reported,

Since September or August is the first time that I have been out at work, which I consider sort of, for me, has been kind of the last step in, um, in coming out, as far as different groups of people to be out with. (P9)

Another lesbian participant also reported how her current LGB identity development prevented her from coming out professionally,

It wasn't a conscious choice, it wasn't like a, “oh this has no bearing on my supervision.” I was still at a point where I wasn't really sure what was going on... or... was really still struggling with how exactly I identified and what was going on for me, so it was something that I was really only talking about with my closest friends and in my therapy. (P4)

Most participants reported that they did not come out to therapy clients unless there was therapeutic value in doing so. Specifically, the participants reported coming out if it became relevant to the client’s presenting issues or if the client asked. Although not asked directly in the interview, participants did not report coming out to self-identified heterosexual clients. A gay male participant reported,

[With clients] that's more of a... a case by case basis and I don't really put anything up in my office that would... I mean, I've got LGBT therapy

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books in there, but, um, only a couple of clients, I think, has it been relevant enough in our discussions to actually say it to them. (P5)

Another gay male participant reported coming out to a client, and described how he navigated this with his supervisor,

So I have a client right now that after years of addiction is finally breaking in to what it is for him to be a gay man. It’s clinically… I feel, and my supervisor supports it… it’s clinically important for me to be there with him and let him know that I can strongly understand many of his experiences and what he’s struggling with, and so having a very honest relationship with these supervisors and the value they put on being in the room as you are, I believe has allowed me to do very good work with clients. (P2)

A bisexual female participant also stated she would only disclose her sexual orientation identity to her client and her supervisor if her self-disclosure could help with the client’s issues, “I would bring it up if it came up with… a way of working with the client that I could help them in that way.” (P10). Two gay male participants and one lesbian participant also felt it was therapeutically relevant to be out to clients. One gay male participant stated,

It was an LGBT agency. I kind of maybe fell into this area, assuming that the client would assume that I was bi or gay, but the client didn’t! I mean, he identified as gay himself so he ended up asking me about my orientation, and I came out to him and… I guess it actually did… ya, it did help our work. I did feel… it’s interesting, ‘cause I felt like he knew
already (laughs), but from his perspective he really didn’t know, um, and he had questions... so then, like, it felt like, he did, you know, feel more connected to me, so that was... that was definitely a good impact. (P12)

Another gay male participant who had been out for many years, but struggled somewhat with being out in his particular training environment reported,

But I had a client who actually preferred to have therapy from me so I received a special permission to provide therapy for... for this client because he didn’t want to talk to anyone else, and in that instance, it... it was important to disclose some of my personal um... how I identify myself. (P14)

A lesbian participant stated,

I mean, I guess... I think that’s part of the identity process of realizing just as you may talk about what role gender is impacting on the relationship or race or other... it was only within the past year that I realized, “Wow, this could strengthen rapport with some of my GLBT clients.” To this day I’ve never come out to a heterosexual client, which, um... I don’t know, again, it’s kind of a lack of advisement one way or the other. (P3)

She went on to report that advisement of whether one should or should not come out to clients, regardless of client sexual orientation identity, is lacking in training environments and in supervision.

Part of the rationale for asserting that coming out is a process is that feeling safe or unsafe in an environment often takes time to determine. Many participants reported being vigilant and aware of environments in which they
perceive it unsafe to come out. A gay male participant reported, "I think there’s always an initial hesitation of, ‘Oh, how are they going to react.’ " (P5). A lesbian participant stated,

It definitely didn’t feel like a safe and affirming environment.

Interestingly, that’s… I think the only supervisor who I have not come out to. So I… in some aspects, being a lesbian in that environment seemed to play a role. I mean, there were certain comments that were made that suggested to me that it wasn’t an affirming environment. That was sort of the general tone. (P3)

This participant’s reaction is typical for other participants as well. Another lesbian participant reported how a “tolerant” supervisor advised her to not disclose her sexual orientation,

My supervisor last year, he’s… he… he… he was… he tolerates things… um, he would make sort of under-the-table remarks about different ethnicities and races, he’s… he’s Caucasian, I’m Caucasian, and um… he… I was out to him, but he advised me not to be out at my practicum site because he didn’t think it would be tolerated. Um… and that… I’m not used to that. (P7)

As we can see from this example, even though this participant had been out for 15 years, she was being asked to not be where she is at in her lesbian identity development. Usually, the longer the participant had been “out,” the easier it was to come out at his or her training site. A lesbian participant and a gay male participant, respectively, reported,
I try to do it as soon as possible, um, I... like even in the interview, I do it in the interview if I can, um... um... I try to make it as natural as possible. Um... it’s... it... I mean, it’s a fact, it’s not anything that I’d want to change or hide, so um... and it’s something that they’re going to find out eventually anyway. (P7)

I felt more comfortable with myself, you know, having been out for more years, so that definitely influenced it [feeling secure about coming out]. (P12)

However, for a few, role models and feelings of support enhanced their coming out process and helped integrate their self-identity as a whole. One lesbian participant stated the following in relation to her supervisor who happened to also identify as lesbian,

She has been a great model for me and my lesbian identity... and kind of working on incorporating it into my therapist identity. My psychologist identity has been... was a big part of the work that we did together, um... kind of in conjunction with the individual supervision. (P4)

Another lesbian participant spoke of a supervisor whom she perceived to be heterosexual, but who was important in her development as a psychologist-in-training,

I have a tendency to want to compliment people and to get their approval and... and... he let me know that I didn’t need to do that to get his approval. And... but then let me also know that there’s space for me to grow too. He helped me see the confidence that I already had and build on
that. I think we had a lot of mutual respect. But he’s a very kind person
and I want to be a kind person, so I see... you know, I try to model myself
after him. (P7)

Interestingly, this particular statement did not include LGB issues, but the respect
that he exhibited toward her whole identity, including her lesbian identity,
resulted in her trusting him and subsequently growing and development as a
therapist. One gay man had positive role models growing up, which influenced
him in terms of his gay identity development. He stated, “I had a really positive
experience growing up, um, and so I had a lot of wonderful role models and
supporters in my life that... so it really became an integrated identity, um, so I’m
pretty fully out.” (P2).

Theme Two: It is Important for LGB Psychologists-in-Training to Integrate their Experiences as LGB Individuals into their Professional Life

In order to integrate the genuine personal self into a genuine professional
self, it is important for the LBG psychologist-in-training to be able to incorporate
all aspects of self (personal and otherwise) into the work. Just as the heterosexual
psychologist might bring an opposite-sex partner/spouse to a function and talk
about partner/spouse in casual conversation, perhaps as a way to connect with
colleagues, so too is this important for the LGB psychologist. One lesbian
participant stated,

I know personally and professionally that it’s an important part of our
identities and that it... it... you know, is one aspect of who we are and
often a really important aspect of who we are for some folks. (P13)
Sexual orientation is a diversity issue that must be included in training in order for the LGB psychologist-in-training to integrate herself or himself in the profession. One lesbian participant stated,

I feel much more integrated as a person, because it’s not… I don’t know, not sort of the burden of having to conceal an aspect of myself, but could actually go on and be helpful, whether it’s therapeutically or, you know, in other aspects. (P3)

A gay male participant spoke about the confusion that can arise from feeling he may not be able to incorporate his sexual orientation into his professional development, or uncertainty if such integration is warranted,

I’m not sure yet that… as a professional person, my sexuality… how much is it… is it there, how much is a part of it… my professional persona or, you know, person. Is it… is it… what’s the percentage there or how important is it or, I don’t know… I can tell you as an individual, but I… I don’t know it as a professional. (P14)

Being able to include their own diverse identities, such as sexual orientation, into their journey as a psychologist-in-training has a positive impact. One lesbian participant spoke of how her training experiences and the people she encountered there helped her,

We learn more about ourselves and through our coursework and seeing people kind of come to a greater strength in their identities and where they were was just kind of affirming, knowing that other people were sort of figuring out their own process, figuring out, you know, “Where’s my life
going next?” and “Who am I becoming as a person?” Just allowed us to have a lot of dialogue about that, and I think that sort of lent that support, the idea that I wasn’t alone or isolated or crazy in some way. (P3)

One gay male participant spoke of how integrating himself in his work can be helpful to clients. Here, the participant spoke of how when consulting about a gay client, specifically, he could do so more easily because he felt integrated in his own identity,

I... it’s sort of, in one sense so integrated that I’ll just, not even intentionally use words that would indicate that. So, I might say “a boyfriend” or I might say, um... you know, about a client, you know, “as a member of that same community, I can identify with what he’s struggling with” or something like that. (P2)

Another lesbian participant stated,

It’s [integrating identities] also helped me negotiate, um... how... how out I want to be... or at least think about how out I want to be with my clients and how out I want to be in my own professional life. (P4)

Theme Three: Openness and Honesty around LGB Identity allows for Self-Respect

Supervisors and professors who allow opportunity and space for the LGB psychologist-in-training to talk about his or her LGB identity in an open and honest way promote increased self-esteem and subsequent self-respect in that individual. One lesbian participant stated,
So my current supervisor is a gay man and you know he runs a gay program, and he is... he's pretty much a feminist. He's always trying to bring more women into the program, he always wants to have a female clinician on-site. He's just... I feel like he has helped me grow in my own self-esteem, much less in my clinical skills. (P7)

This same lesbian participant spoke of an instance whereby she was less certain and comfortable about how her needs for openness and honesty around her sexual orientation would be met and that she was very uncomfortable with herself,

It’s something [her sexual orientation] that they’re going to find out eventually anyway, and the only time when I’m uncomfortable... when they assume that... ‘cause I wear a ring, you know, on the wedding finger... is when they assume I have a husband, and so when I have to correct them, that’s when I feel uncomfortable. (P7)

This incident placed the participant in a typical dilemma faced by many LGB individuals: feeling pressure to either allow such heterosexist language to not go uncorrected, or to let it pass and perhaps feel reduced self-integrity as a result. A gay male participant speaks of how in his program and overall experience in graduate school, he has come to believe in himself in a much more confident and respectful way. He attributes this outcome to being allowed to be open and honest about all of who he is, including his sexual orientation,

I don’t know if there’s a direct relationship, but I... I have the experience since coming to graduate school of even further solidifying of being capable and successful and thriving in school, and then hopefully in my
profession. It’s gone from “in spite being a gay man” and moved more towards “because of who I am,” “because I’m a gay man, I bring all of this to the table, and I can be successful and I can be a very competent psychologist.” (P2)

This same gay male participant, who could be perceived as quite self-integrated in his sexual orientation identity, as he has been out for 15 years, feels for the individual in training who perhaps is newly coming out and may not feel empowered to be open and honest about his or her LGB identity,

I think my nature is to be rather outspoken and to... to be rather adamant about speaking up, so I think there is a barrier for anyone whose not of that nature, who is a sexual minority to be able to have a voice and be able to speak up for what is needed in terms of support. (P2)

Category 2: Supervisory Relationships

This category discusses specifically the important relationships that impact the psychologist-in-training. Although the questions presented to the participants asked generally about any and all relationships, including peers, the supervisory relationship was at the forefront for most participants.

In the course of data analysis, three themes emerged in regard to relationships:

1. If LGB supervisees do not feel supported by their supervisor, they consult with other professionals by whom they feel supported.
2. In “good” supervision, the supervisor is not necessarily gay or gay-affirmative, but believes in the integration of the whole person in the work and defines diversity broadly.

3. In “bad” supervision, the supervisor is perceived as rigid, judgmental, defensive, and has less awareness of sexual orientation as a diversity issue.

Theme One: If LGB Supervisees do not feel Supported by their Supervisor, they Consult with other Professionals by whom they feel Supported

It is expected that psychologists-in-training will have many supervisors; it is also expected that they will consult with other professionals as the need arises. However, there is a difference between choosing to consult based on specialization versus over-stepping one’s primary supervisor to consult with another professional because of not feeling supported by one’s primary supervisor. The participants in this study discuss how they have been placed in just these situations. One bisexual female participant who felt dismissed by her primary supervisor with regard to her bringing up an issue around a client and sexual orientation, went to another psychologist, “I’d go and talk with someone else who would, like say, ‘Hell, no! That’s totally valid and important and can potentially change how you conceptualize the whole case or of yourself.’ ” (P1). Another lesbian participant described her doubt of her primary supervisor in assisting her with LGB client issues and how she consulted with another individual,
I just felt like how could she... how could this woman help me become a clinician if she... you know, one, is so completely unknowledgeable about diversity of the lesbian experience, and second, you know, saying offensive things (laughs). You know, how... how am I going to use whatever advice she was going to give me? How am I possibly going to be able to filter it through something, you know, through myself and her views as well? It just sort of discounted everything she said after that. My group supervisor at the time was a lesbian, and she was incredible. So, I went right to her, and I ended up totally consulting with her about that case. (P6)

In this example, the alternate supervisor consulted happened to identify as lesbian, but that does not necessarily have to be the case. In the situation for one bisexual female participant, she approached a perceived heterosexual supervisor for support after the primary supervisor avoided discussion of LGB issues in supervision. The primary supervisor wanted to focus on techniques; this participant believed that by not addressing LGB issues when warranted, she would be doing a disservice to her LGB clients. She stated, “Then, um, I kind of do it on my own and go to a different, like my group supervisor, someone else for support and that, or I just don’t talk about it, with my supervisor.” (P1). Here we should note the importance of the LGB psychologist-in-training, in effect, withdrawing from her primary supervisor. This theme occurs throughout the interviews. It is important for the primary supervisor to be informed of his or her supervisee’s clinical issues. Also of importance is how the supervisory
relationship is impacted, an extremely important part in creating a good working alliance. A lesbian participant spoke of a negative supervisory relationship in which she did not feel supported,

With the supervisor that I had last year... he was never out-and-out rude, or... um... you know, out-and-out homophobic, so, it was just I never really got what I needed from him, I never really got supervision from him. And he... accepted me, sort of, but he didn’t support me, so um... so it was just... it was just not a good fit. And it felt very stilted... I feel like... like I was doing the supervision. (P7)

This particular participant sought out guidance and support elsewhere in her various training environments,

I felt like I had to go outside of the supervisory relationship to get what I needed, so I went to school to... to professors at school to get what I needed and... um, occasionally went to other students to get what I needed, to get support. (P7)

Theme Two: In “Good” Supervision, the Supervisor is not Necessarily Gay or Gay-Affirmative, but believes in the Integration of the Whole Person in the Work and Defines Diversity Broadly

It was clear throughout the interviews that the supervisors who were most memorable, and perceived as most effective worked in harmony with the supervisee. These supervisors were not necessarily LGB-identified and may not have even specifically stated they were gay-affirmative, but as a whole were inclusive of the LGB psychologist-in-training’s whole person in the work. One bisexual female participant spoke of her supervisor, not specifically bringing
sexual orientation into supervision discussions, but just allowing her whole person
to be a part of supervision,

He’s just... he’s so mellow and so soft. I feel totally comfortable with just
correcting him in the moment or bringing something else up, or... or
whatnot... I don’t know that it was specifically him knowing my sexual
orientation, rather just knowing me in general. (P1)

Other participants spoke of how their most memorable and helpful
supervisors, that is, those providing “good” supervision, did acknowledge and
accept their sexual orientation and assisted them in integrating identity as a whole,
identity as LGB, and identity as professionals, into the supervisory relationship.
One lesbian participant stated,

In general, it seems like my supervisors across different settings have...
um... been pretty comfortable and open and supportive and giving me
really constructive feedback, and kind of promoted my awareness. I think
it’s helped to shape who I’ve become professionally, ethically, and... I
don’t know, it’s... it’s been a neat process to get different perspectives and
to help to shape my theoretical orientation and my direction with clients.
(P3)
This same participant went on to speak more specifically about when she came
out to one supervisor and this supervisor’s subsequent positive support,

I think when I came out to the supervisor, who I didn’t know at the time
was bisexual, and I realized... I think she was the first person who gave
me sort of a clear answer, “Yes, you can be openly gay in this profession,
and here's some examples of people who've done it.” Even though she herself wasn’t in that place of her development, she was able to give me potential resources, she was able to kind of open up that door and get me involved professionally in line with where my interests were personally. I don’t know, it just was very affirming to me, and it was, like, “This really makes sense. I don’t have to be two different people.” (P3)

This experience is particularly interesting because the participant stated that she does not perceive her supervisor to be in as advanced a stage of LGB identity development as she was, as the supervisor never did clearly come out to the supervisee. Regardless, this lesbian psychologist-in-training still perceived gaining an integrated perspective on herself within her profession.

Another lesbian participant also spoke of how important a supervisory relationship was in terms of being assisted with integrating her whole person, “Working on incorporating it [her sexual orientation identity] into my therapist identity and my psychologist identity was a big part of the work that we did together.” (P4). She went on to state,

I can really attribute the fact that my two identities are no longer completely separate through the work that we did together. It wasn’t a conscious decision on my part before to have them be separate; I think that… it kinda had to come in time. (P4)

Even though this lesbian psychologist-in-training was not aware of her identities not being integrated, through her work with this particular supervisor, she came to this awareness. This supervisor was able to effectively help the LGB
psychologist-in-training to become conscious of this amalgamation of identities. In terms of integration, a bisexual male participant stated, “It was great. You know, he [supervisor]... he normalized it for me, you know, he put it in perspective of, you know, so let’s talk about your client’s pain, let’s talk about your pain, the pain.” (P11). Here, the supervisor does not distinguish between the gay client and the gay clinician in terms of the pain experienced as a result of prejudice and discrimination. The supervisor provided a forum for the gay psychologist-in-training to look at countertransference issues, as well as talking about LGB issues in general.

Some participants who have worked with “out” supervisors also speak of how their “good” supervision and assistance with integration of the whole individual helped them. One lesbian stated that this role modeling has been another wonderful learning experience, “I think she’s been a great model, not only of how to really... have... I mean to identify as lesbian... a lesbian therapist... that is her identity. So, she helped me integrate those different pieces of me.” (P4).

Another bisexual female participant spoke both about how great it was that her site assisted with her supervisory relationships, “My supervision there regarding gay and lesbian issues was fantastic, I mean, it was just... there was training regarding it, it was all... sexuality was always very comfortably integrated into the supervision discussion regarding transference and countertransference.” (P10). This participant went on to state that this rewarding supervision experience came from a heterosexual supervisor, “My first practicum
there was also with a wonderful supervisor, a heterosexual woman, who, you know, really made an effort to integrate all this into the supervision.” (P10).

In this next example provided by a gay male participant, note that he felt comfortable in the supervisory relationship, which allowed him to challenge his supervisor, and his supervisor remained open to the discussion,

My first year supervisor… I don’t remember a moment of actually coming out to him, but I don’t think I end up… I don’t think I hid anything, and he identifies as a straight man himself, but is a champion of many diverse issues on campus. There were times where he would either make assumptions about someone’s sexual orientation… and he would welcome and be totally open to me saying, “You’re making an assumption about his sexual orientation or her sexual orientation,” and then we’d have a conversation about that. “How was that for you to… for you to speak up?” or “to… hear your sexual orientation in general be more, you know, ‘dismissed’,” or whatever the case may be in that scenario. He was very open, and both of us learned from it, and really set a wonderful example. (P2)

This is a quintessential illustration of a supervisor who is supportive of discussing sexual orientation, who is not afraid to make mistakes around talking about sexual orientation, and subsequently, who keeps the dialogue and learning open for both himself and for the supervisee. A bisexual female participant spoke of her relationship with a heterosexual supervisor who brought sexual orientation into the supervisory session, “I’ve been lucky the past couple years, even my straight
supervisor will kind of... will go there, you know, he always wants to know the client’s sexual orientation when I first meet them. He definitely goes there.” (P1).

This in particular speaks to the supervisor who thinks broadly about diversity issues (e.g., inclusive of sexual orientation), not limiting it to race/ethnicity, for example.

**Theme Three: In “Bad” Supervision, the Supervisor is Perceived as “Rigid,” Judgmental, Defensive, and has less Awareness of Sexual Orientation as a Diversity Issue**

Converse to “good” supervision, “bad” supervision is much less open in general and operates from a narrow view of diversity. Time after time participants described how some supervisors perpetuate stereotypes without consideration of the LGB individual, and rather than having the wherewithal to ask the supervisee, the supervisor speaks from a heterosexist framework and puts forth comments, as in the example from one lesbian participant,

The one [supervisor] that I had the bad experience with, my gay guy friend who was also working under this particular supervisor was openly gay there, and she [supervisor] would start to make comments about maybe him dressing too flamboyantly and... you know, and just some other off-handed comments that didn’t lend itself to me putting any sort of vulnerability out there and that... that was kind of what dissuaded me in that environment. (P3)

Although to some it might appear as though the following scenario, as reported by a gay male participant, is affirming of gay issues, this is not necessarily the case. In this scenario there appears to be no consideration by the
supervisor of the gay supervisee’s own identity development, both professionally and with regard to sexual orientation. This supervisor also appears to be using rigidity and power in his interaction with the supervisee, “That supervisor would also tend to push me to come out to all of my gay clients, and I didn’t always feel like that was necessarily something that needed to happen for them.” (P5).

Most participants spoke of certain supervisors’ lack of knowledge around LGB diversity. This quote by a lesbian participant (used also in Category 1) reveals the participant’s uncertainty about her supervisor’s lack of knowledge and downright use of “offensive” language toward LGB issues. She asks the questions, “How am I going to use whatever advice she was going to give me? How am I possibly going to be able to filter it through something, you know, through myself and her views as well?” (P6). In this particular instance the supervisor was perceived as defensive by the supervisee when the supervisee attempted to challenge an LGB issue.

Category 3: Climate

Climate, in this framework, refers to not just environments and geography, but also what prejudices/barriers and supports the LGB psychologist-in-training might experience in the environment. The participants also provide some recommendations as to how to create a better climate for the LGB psychologist-in-training.

Under the Climate category, three themes developed:

1. Experiences of homophobia, heterosexism, and general ignorance around LGB individuals and issues are still salient.
2. Certain training environments, training genres, and geographic locations greatly influence LGB climate.

3. The lack of education on LGBTQ issues in training environments puts the onus of educating on the trainee.

Theme One: Experiences of Homophobia, Heterosexism, and General Ignorance around LGB Individuals and Issues are still Salient

Most of the participants within this study reported experiences of direct homophobia, heterosexism, and ignorance within their professional lives as psychologists-in-training. One gay male participant spoke of his training environment and fellow students within his program,

   Well, here’s the thing, I expected more... (pause)... I thought that my sexual orientation would be more accepted in graduate school, especially in my field. Unfortunately, last summer two of my classmates told me that I’m going to end up in hell because of my sexual orientation. (P14)

One lesbian participant described an incident where a supervisor made inappropriate jokes,

   He made one comment where I was talking about a female client being very into Superman. She wore Superman t-shirts, Superman ring, and everything and he... and he made a comment about, “Well, at least she’s not into Wonder Woman, ha ha ha ha ha” You know, and not realizing that that’s a homophobic comment and we were in a staff meeting... um... and not realizing that he was offending me. (P7)
What complicated this incident was that this particular supervisor was well respected in the center and the supervisee felt she could not turn to anyone for support. What frequently happens in these instances is that the LGB individual is told that she or he is over-reacting. A gay male participant had an occurrence with a supervisor whereby he perceived the supervisor to be discriminatory toward LGB individuals. It is interesting to note in this statement that he questioned his own judgment in this regard,

I had two supervisors at the site, and the primary supervisor that I had, I often felt like he was, um... discriminative against gay people, because he was not aware of my sexual orientation, or I, um... at least that’s how I perceived it. The way he addressed gay patients at the site was quite negative, and although I felt like this is just my perception, I checked it with other classmates and they, uh, had the same opinion. (P14)

Similarly, a lesbian participant was training in an environment and with a supervisor that was not just non-affirming, but homophobic,

It definitely didn’t feel like a safe and affirming environment.

Interestingly, that’s, I think, the only supervisor who I have not come out to. So, in some aspects, being a lesbian in that environment seemed to play a role. I mean, there were certain comments that were made that suggested to me that it wasn’t an affirming environment. That was sort of the general tone. It wasn’t... I didn’t get the impression from this particular person that maybe it was just the lack of experience or awareness. (P3)
While a portion of this particular quote was presented earlier to support Category 1, Identity, Theme 1 with regard to vigilance of coming out in certain environments, the last sentence of this quote has the participant alluding to homophobia on the part of the supervisor.

One participant, a bisexual man, perceived that he was being unfairly judged by his supervisor. The participant questioned the root of this judgment and evaluation,

It was very hard to parse out after that initial incident with that supervisor of where I was going wrong, you know, I felt like, “Am I going wrong because she sees me as a... a less-than clinician? Or she sees me as a less-than person? Or sees me as too emotional?” I have good communication skills, I have good writing skills, but when I got my final evaluation from this supervisor... it... it felt like the most mediocre... and there was one line in her evaluation: “Well, [P11]’s real talent lies in his heart.” (chuckles) And I was like, “Great, well, that’s going to look really good on a doctoral application to... you know, an APA or an APPIC application”.

(P11)

Here the participant attempted to understand whether his work was a problem, or if he himself was a “less-than person,” and that some part of himself or his identity were ultimately the problem. He may have been picking up on subtle hints of homonegativity. A lesbian participant received advice from a supervisor about being out. Although this quote was referred to in Category 1, Theme 1 in terms of vigilance in coming out, it is relevant in relation to the Category of

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Climate in terms of not only heterosexism within this environment, but racism as well,

My supervisor last year, um... he's... he... he... he was... he tolerates things. He would make sort of under-the-table remarks about different ethnicities and races. He's... he's Caucasian, I'm Caucasian, and um... he... I was out to him, but he advised me not to be out at my practicum site because he didn't think it would be tolerated. And that... I'm not used to that. (P7)

Although this might be perceived by some as caring advice, it perpetuates the belief that LGB sexual orientation is something to be ashamed of and not talked about. As well, this particular participant described her supervisor as tolerant as opposed to affirmative, indicative of a more homonegative attitude than an LGB-affirming attitude (Cass, 1979).

Another gay male participant spoke very matter-of-factly about his experience of homophobia and heterosexism in one training environment,

Not being out and experiencing some of the homophobia, or maybe homophobia, or heterosexism at least, in some of those environments, you know, it made me angry at times, but that anger sometimes became fueled into pride, and I'm wanting, in a way, to get back to the community, or at least, you know, work with LGBT people. (P12)

For some, such as this participant, homophobia and heterosexism can motivate the individual toward action.
In the next example, this gay male participant addressed the argument often made by heterosexist individuals: that gay people should not flaunt their sexual orientation,

I’ve read or heard about a lot of straight people saying that they never make sort of an issue of their sexuality, and I suppose, of course not in the same way, but people do all the time when they’re talking about partners or marriage or, you know, so... it’s... it’s always there in a sense. (P12)

The participants reported experiencing heterosexism constantly in their world, and for some, blatant homophobia and bigotry.

Theme Two: Certain Training Environments, Training Genres and Geographic Locations Greatly Influence LGB Climate

In this study, “training environments” means where the training took place, for example, a counseling center, a testing center, a community agency, etc. As for “training genres,” this refers to clinical psychology and counseling psychology, Ph.D. or Psy.D. programs. “Geographic location” indicates where in the country the individual received training.

This lesbian participant had the following experience while doing her first practicum at a community agency in a large Midwestern city, and is in response to the principal investigator’s question, “How have supervisory relationships impacted you as a lesbian?,”

I would say that… (pause)... Um, I think I was just treading water with the first one [training environment]. That I just sorta held my breath when
I went there and just get the job done. I put in the minimum amount of hours, the minimum amount of reports required by my program. (P7)

In this particular environment, the participant had fellow student colleagues who did not know what any of the letters of “LGBTQI” meant; simultaneously, one of the primary supervisors tended to “pathologize” LGBT. Therefore, this participant felt like simply holding her breath and biding her time until she was done in this particular training environment.

The following bisexual female participant described her feelings around climate amongst peers and educators at her Midwestern clinical Psy.D. program,

Not to say that LGBT issues should take... should be the forefront of... of why they’re in the program or... or why they came into this field; however, you know, it’s... it’s mental health and... I was really... I found it an obstacle to see how many of my classmates just... were not... particularly interested and... oh God, how can I say this... not that they weren’t interested, there was just no exposure at all. No exposure AT ALL! (P10)

LGB-negative environments exist not only in the Midwest, but also in coastal areas. One gay man described his West Coast university,

They [his university] had this Unity week there for all different types of diversity, sexuality and gender included, and I ended up being a part of it and I showed a documentary about trans people. It was nice to be part of that, and I did up some outreach materials for the outreach table for Pride
week at the college itself. And it was really interesting, 'cause it was another sort of homophobic/heterosexist college environment. (P12)

It is interesting to note that this participant persevered and did outreach and education despite his perception of the environment as “homophobic/heterosexist.”

Some individuals have had positive experiences in certain environments. One bisexual woman reported that working at a gay and lesbian center on the West Coast has been a positive environment for her to work and train, “I know that I can just speak about it [sexual orientation] openly without worrying about anybody judging me.” (P8). A gay man reported another positive environment, also an LGBT center, where he had training,

I never worked in a professional environment, like psychology-wise, where most of the staff was gay, so that was really helpful, and that helped me feel more comfortable coming out, like I wouldn’t be the only one, I wouldn’t be alone and, um, or the only male, so that was... that was really good. And then because of that, I think it helped me feel comfortable in general coming out professionally. (P12)

Based on the experiences of these participants, it appears that LGB climate varies across professional settings. It also seems that LGB non-affirming training settings are not limited to specific geographic regions; some participants reported being surprised at moving from one area of the country perceived as more LGB non-affirming to an area believed to be more LGB affirming, but not necessarily
experiencing tremendous difference in terms of affirmation and acceptance as an LGB individual.

*Theme Three: The Lack of Education on LGBTQ Issues in Training Environments puts the Onus of Educating on the Trainee*

Perhaps one of the most predominant themes in this study is that supervisors, professors, and administrators of psychology training sites and programs need to become more aware of LGBTQ issues in order to foster more inclusive and supportive environments. In effect, LGB psychologists-in-training need the leaders within their training to begin making a concerted effort to incorporate LGB issues into training and contribute to a systematic decrease in ignorance of LGB issues. One bisexual female participant perhaps speaks for all participants of this study,

I think the biggest thing is for them to educate themselves, because I don’t... it’s not my job to, you know, fill in any... I don’t know, fill in any blanks in their awareness of issues, or, you know what I mean, like, it’s really, really nice... I don’t care the sexual orientation of the supervisor, to come in... or the faculty or whoever, to come in and have them already have good knowledge of an area, and how to supervise *me* and how to work with *me personally* or be sensitive to me and also be sensitive to the sexual orientation issues that my clients might be going through. (P1)

Another lesbian participant expressed how broad her expectations were of supervisors in terms of the depth of knowledge she would hope for them to have,
Even the things you think wouldn’t be integrated like Christianity and LGBT, you know, they are! I worked at a substance abuse treatment center, and, you know, for sure, lots of peoples’ higher powers are God, so um… just having people become more familiar and comfortable um… and modeling that to students. I think that’s so important because what supervisors are doing are showing students how to be psychologists. (P7)

Some participants have sought out support from others, but expressed a wish for sexual orientation to become part of the training program. One gay man reported about an LGBT student organization,

We have a student organization that’s called [deleted for confidentiality]. We spend part of our meetings focusing on needs of the members, at least of that committee… of dealing with diverse clients, or our own personal interactions within the program related to our own diversity. We often come to feeling that we wish that this kind of support was integrated within the program and not something that was student motivated and student facilitated, and if I were to ask for support it would be more room for our students to be able to either get supervision or get consultation or just general human-to-human support for addressing, you know, issues that are related to sexual orientation or any other diversity arena. (P2)

A lesbian participant gave specific ideas about what supervisors and professors could do,

When someone does come out to them [supervisors and/or professors], to be able to offer resources of any kind I think would be really positive,
and... maybe having the training, or have been to at least some workshops or done some readings to... to educate themselves, you know... What options are out there and... and the idea that... someone doesn’t have to remain closeted and... and be in this profession, and I think some people just, you know, don’t know how to advise people on that... But, ya, so just some education on how to navigate some of these as a future professional, and maybe some point people to go to, even if someone is an expert in the area, “Well, here’s the colleague I know who would be a great person for you to talk to.” (P3)

This particular participant spoke of the fact that she is now supervising up-and-coming psychologists, and because she was never advised about coming out or not coming out in her supervision, she feels at a loss to advise other students, and to even talk about herself as a lesbian supervisor.

Category 4: Impact

Participants have been impacted throughout their experiences as psychologists-in-training, and particularly in relation to them being LGB. Under this category, four themes arose:

1. Supervisees often experience anxiety, shame, and guilt around bringing up LGB issues in supervision and/or training situations.

2. LGB psychologists-in-training often feel “dismissed” or “discounted” when bringing up LGB issues.

3. Although LGB psychologists-in-training want to turn to supervisors for their learning, they feel stuck providing the teaching and training.
4. Judgment and ignorance of LGB issues can hinder or impede LGB individual’s identity development.

**Theme One: Supervisees often Experience Anxiety, Shame, and Guilt around bringing up LGB Issues in Supervision and/or Training Situations**

Anxiety was the most salient emotion in terms of coming out to supervisors or others in their lives. This anxiety often arises when the LGB psychologist-in-training either does not feel safe, and/or it is early in her or his own sexual orientation identity development. One lesbian participant stated, “Coming out was anxiety provoking because I was still developing in my lesbian identity.” (P13). Others reported feeling the impact of homonegative individuals and situations, but feeling powerless to do anything about it. One lesbian participant spoke of needing a professional environment, such as a supervision session, to discuss the impact on her of a homophobic world, specifically, to be able to discuss the anxiety and shame she felt in her non-professional world and how this impacted her professional world. She described a session with a parent of a child client of hers, and how this parent stated derogatory things about LGB individuals,

I don’t remember who it was… some family member, you know, had just come out as lesbian and how horrible and… and um… sinful that is and, “blah blah blah...” you know, and it (chuckles)... So those would have been times when it would have been nice to feel like I could have conversations with my supervisors about how that impacted me, and… and didn’t feel I was able to do that. (P9)

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This participant went on to state that she felt some anxiety in the moment with the parent, and the anxiety escalated post-session when thinking about possibly discussing this with her supervisor. One bisexual male participant reported the shame he felt with regard to discussing with his supervisor an intake with a client who was applying for public assistance,

I had a young man come in... I remember one thing sticking out to me was that he said that he would go into fugue states, or, my word “fugue states,” he would blackout for days, even sometimes weeks at a time and then come to with large amounts of cash... Um... and my supervisor, you know, didn’t seem to think anything of this, and I said, “Well, look you know this is [a metropolitan area]. This is a very good looking young man. I’m [older]; however, I remember what it was like to be... a 20-something in this environment, you know, if you’re good looking, you know, if you can attract attention, you know, there are opportunities... if you choose to take them.” And I said, “You know, I’m wondering if part of... you know, I’m wondering if he has participated in sex work and not been aware of it, or he’s dissociating from the sex work,” and, on one hand, my supervisor, said, “You know that’s a really great observation, but you know, I don’t really need to know that information about you. You’re personalizing it. That’s just something that can really make you look unprofessional.” I was so... like my... my... my mouth fell open and I felt so completely ashamed. (P11)
This particular participant was aghast at this incident, as the supervisory relationship to that point had been “fantastic.” The participant went on to discuss how it took him six months to approach this supervisor about how he had felt ashamed. Here, the participant was attempting to be professional in presenting his insights and hypothesis with regard to his client; however, the supervisor was unable to completely honor this insight because he seemed to be distracted by his own discomfort regarding what such an insight might mean – perhaps the supervisee knows from experience about such sex work.

_Theme Two: LGB Psychologists-in-Training often feel “Dismissed” when bringing up LGB Issues_

While training programs do pay attention to race/ethnicity as diversity, LGB as a diversity issue is often dismissed. One gay male participant described how individuals in his training program have dismissed his gay identity, “They’ve really been dismissive of my... of my identity. Because they look at me they see a White man and they don’t see a White gay man.” (P5). Take the example given previously, in which the bisexual male participant discussed his client who went into “fugue states” and may have done sex work. That particular interaction was dismissive, not necessarily of the psychologist-in-training’s professional savvy (“you know, that’s a really great observation”), but of his gay identity and how he might know about such things. That supervisor stated, “But you know, I don’t really need to know that information about you... you’re personalizing it, you know, that’s just something that can really make you look unprofessional.” (P11).
A gay male participant reported an incident with a supervisor in which he felt dismissed and was not getting what he needed in supervision.

I do recall a couple times at the beginning trying to raise, you know, “I really think that my struggle right now in dealing with this client is that... they’ve hit too close to home in terms of their orientation or in terms of this specific experience about being gay.” My experience of that in supervision was often missed and the focus went back to the client, and I’m all for the focus being on the client, don’t get me wrong, but there are times when it’s... the most important thing is to check in about my own experience, and that got missed. (P2)

In this particular case the participant stated that LGB issues seemed to be the one thing this supervisor did not want to process. A major training barrier in this is that it is often difficult, with the power differential, to challenge the supervisor. The developmental level of the supervisee’s sexual orientation identity will also influence if he or she will confront the supervisor.

Theme Three: Although LGB Psychologists-in-Training want to Turn to Supervisors for their Learning, they Feel Stuck Providing the Teaching and Training

As depicted in Category 3, Climate, Theme 3, participants overwhelmingly spoke of not being able to count on learning from supervisors, particularly when a supervisor exhibits such clear ignorance or lack of understanding with regard to certain diversity issues, such as LGB issues. Under the current category, Impact, the lack of education provided by supervisors results in consequences which affect the supervisee. One bisexual female participant
stated how she wanted to turn to her supervisor for learning, but did not feel satisfied in the experience,

I mean, a supervisor is kind of like the model, right? We’re following in a sense, so she’s, I think not modeling very... um... very... thorough, nor necessarily competent, way of being with someone, especially if sexual orientation or sexual identity issues are up for the client. If that is something that really would be useful to be the focus of therapy, then she’s completely missing it, and she’s, you know, modeling for me, “it’s okay to miss it” or “it’s not important” or something. (P1)

One lesbian participant spoke of her annoyance at having to work with two supervisors who were not knowledgeable on LGBTQ issues,

Of the two [supervisors] who were straight, I just have felt... I felt like they weren’t very knowledgeable, and it was more, like... an educational thing, which can solidify your identity to some extent, but it’s more just sort of annoying. (P6)

She went on to relay a particular supervision experience that resulted in her having to choose whether to challenge and educate the supervisor, or perhaps defend a particular LGBT client,

If [supervision] wasn’t being sidetracked by the shaving, I mean, if she [supervisor] would have just said something like, “Oh wow, I’ve never had a client who shaves her face every morning,” that would have been different, but it was something... it was something... it was something else. I wish I could remember what it was, but... I remember at the time
saying something like, "You know, I take offence to that" and... and sort of explaining why. (P6)

A gay male participant stated, "It makes me feel like I know more than them, and that's not a good feeling because I... I would like to see them as someone who has a much greater knowledge and experience." (P14).

_Theme Four: Judgment and Ignorance of LGB Issues can Hinder or Impede LGB Individual's Identity Development_

Although participants do not report necessarily _regressing_ in their identity development, they do report feeling hindered or impeded in their sexual identity, as well as their professional development when they feel judged or if the individual in power is ignorant of LGB issues. One bisexual female participant stated,

I think with my straight male supervisor, there have been times where I think he... he’ll, uh... it’s... it’s easier to categorize me as lesbian for him. It’s easier to kind of push me to a different extreme, and I think sometimes in that, something is lost, you know, his knowledge of who I am, and of my history, and my perspective is lost. (P1)

The experience for this supervisee of a supervisor not trying to understand what it means for her to be a bisexual woman takes away her unique voice and perspective. This woman has been out for eleven years as "queer/bisexual," and her SASO results (see Appendix C) indicate a bisexual woman who will have a unique perspective from a woman who identifies as a lesbian. Many participants spoke of feeling small when supervisors do not seek more knowledge and
understanding of their LGB supervisees’ experiences. This same bisexual woman stated,

The feeling in that would be kind of like a turning in maybe a little, like a questioning myself... turning in, almost like a shrinking. I tend to be very, well, extroverted, but also out-reaching, so there’s definitely pulling in kind of introspection around that, questioning, self-questioning. (P1)

One gay male participant spoke of feeling hindered in society as a whole,

A lot of [LGB] people have to repress that side of themselves, um, just don’t have that... sort of, that experience with being social and being connected with other people in particular that way. (P5)

This particular gay man was also the participant who, as reported earlier in this chapter, did not feel fully acknowledged within his training program,

I was trying to use my sexuality to understand ethnicity and a lot of people sort of jumped on that and said, “Oh you can’t do that; it’s not the same thing” And it was a big sort of tension between um... now, is that really dismissive of my... of my identity. Because they look at me they see a White man and they don’t see a White gay man, um, and sort of things around that.

A lesbian participant spoke of having an experience with a supervisor that resulted in her re-visiting “old stuff,” negative things that she believed she had surpassed, “A couple of times it brought up all the stuff I had dealt with when I was realizing that I was gay, which was a really difficult process for me, given where I had grown up.” (P6). She went on to state how she feels comfortable in
In reality I don’t really have anything that can shake me, knowing that I’m a lesbian (chuckles), and I live in a very liberal town, and I go to a liberal school, and I’ve been with my partner for a long time, and we have kids and, you know, they have friends, and all these people know, and I’m supported in all these places, um... so... it’s not like I could really be rocked except for when something hits me in a place that feels very old, um... and that happened a couple of times, definitely, in supervision. (P6)

Later, she stated,

I think, you know, the more... the more time goes on it takes... it takes more to actually get to that button, but occasionally, given if I’m in a vulnerable situation like being in a brand new trainee setting with a supervisor for a first time, I mean, it might make it more easy to hit that spot like that. (P6)

Again, even though an LGB identity might be very integrated into one’s persona, one ignorant or mis-informed comment, joke, or stereotype, can propel that professional into a vulnerable and shaky state.

Core Category/Central Phenomenon

According to Strauss and Corbin (1998) creating an axial coding paradigm allows the researcher to think about the data in a more complex and systematic way and allows the potential for discerning cause and effect. The researcher in essence dismantles the structure of the somewhat isolated categories and themes...
of the open coding process and reconfigures the data into a more systemic “story” of the data. This could be likened to having a set of building blocks - creating one structure, dismantling that structure and using the same blocks to construct a new structure.

Although considered a separate phase of data analysis, through researcher memos and inductive thinking about the data, the axial coding paradigm was being established as early as the first read-through of all transcripts. Through the constant comparison method, a rough axial coding paradigm was being continuously constructed throughout the data analysis, and the paradigm evolved throughout the process. It should be noted that Atlas-ti was not utilized in this process.

In order to begin constructing a visual paradigm, a core category, or central phenomenon, must be discerned as emerging from the data. This core category will be one that was heavily saturated and will be the basis for the emergent theory/conceptual model (Creswell, 1994). The core category was the category that permeated every phase of the participants’ supervision experiences and is the category into which all, or nearly all, codes and categories flow.

Throughout the analysis process, and particularly after the determination of the four categories, “Climate” emerged as the core category and central phenomenon. “Climate” can be defined as the environment, situation, and/or relationship in which all LGB psychologists-in-training function and experience their personal and professional lives. Climate and Supervisory Relationship were at odds with one another for the title of core category, and the researcher

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determined that Climate represented more closely the macrocosm in which the microcosm of the Supervisory Relationship occurred, thus Climate emerged as the core category.

Once the core category was determined, the other three categories and themes were considered in relation to Climate. Strauss and Corbin (1998) determine this as an advanced phase within the axial coding process and must specifically include conditions, context, intervening conditions, actions/interactions, and consequences. By reviewing each basic component of the categories and related codes, the researcher utilized inductive reasoning to discern how each of the three categories related to Climate. From this process a conceptual framework of how the participants’ supervision and training world is experienced by them was created. This framework is similar to a story of the data. The conceptual framework emerged and evolved as the researcher continually referred back to the data and inductively and then deductively made sense of the data in the story.

Throughout the LGB psychologist-in-training’s professional journey, the climate of the institution, the graduate school department, the training program, and subsequent clinical training environments and relationships impact his or her identity as an individual and as a professional. Within these elements of the overall climate exist both positive and negative experiences, qualitatively positive and negative interactions, all of which contribute to the growth and/or hindrance of growth for the LGB individual. LGB psychologists-in-training must discern whether the climate they are currently working or interacting in is safe for their
own exploration of their sexual orientation identity. Any given individual, whether training director, supervisor, administrator, or fellow psychologist-in-training working within the environment can create a safer climate for LGB individuals.

*Causal Conditions*

Causal conditions are variables or events that direct the development or occurrence of the central phenomenon (Strauss & Corbin, 1998). From the current data, two causal conditions arose. First, there must be an interaction between the psychologist-in-training and one or more individuals within a training or educational environment who are perceived as having power (e.g., supervisors, faculty, administrators). The second causal condition is that within the interaction, LGBTQ issues are either directly or indirectly of central importance or consideration.

As psychologists-in-training in general, standing up to or challenging supervisors and faculty can be daunting, due to the perceived and actual power differential. For LGB psychologists-in-training, feeling powerless is rooted not only in their identity as student/supervisee, but also in feeling diminished as members of an oppressed minority group within the overall culture. One lesbian participant described just such a condition in the case where the male supervisor joked about how the participant’s client had an interest in Superman and not Wonder Woman,
Consequences
- Increased vigilance in all training settings.
- Limited selection of LGB affirming training sites.
- Less effective supervision with perceived non-affirming supervisors.

Context
- Training Setting
- Clinical Setting
- Supervisory Relationship

Core Category/ Central Phenomenon
"Climate"
The environment, situation, and/or relationship in which all LGB psychologists-in-training function and experience their personal and professional lives.
The climate of the geographic region, the institution, the graduate school department, the training program, and subsequent clinical training environments and relationships impact his or her identity as an individual and as a professional psychologist.

Action Strategies
- Reaching out to "queer" friends.
- Consulting LGB or LGB-affirmative supervisors or faculty.
- Choosing if and when to educate re LGB issues.
- Seek out externships and internships that are either LGB centers or are clearly LGB affirmative.

Intervening Conditions
- Knowledge/Lack of knowledge of diversity on the part of faculty and supervisors.

Figure 2. Axial Coding Paradigm.
Not realizing that that’s a homophobic comment and we were in a staff meeting... um... and not realizing that he was offending me, you know... he’s adored, you know. (P7)

In this incident the person in power made a joke that offended the lesbian trainee, but this trainee perceived the person in power to be so loved and respected within the agency that she feels even more powerless to say anything.

A bisexual male participant provided another example of the causal conditions of interacting with a person of power around LGBTQ issues. This particular psychologist-in-training finally worked up the courage to confront a supervisor about a comment made about personalizing a client issue, specifically how a dissociative client who may have engaged in sex work,

It wasn’t until... especially because everything up until that point had been so fantastic in supervision, it had been so fantastic that I was like, I... I... I sat on it... I sat on it for like six months until finally I screwed up the courage to say, “I’ve been sitting on this for six months and, I felt really ashamed when you came back at me with that statement.” (P11)

Within this interaction, the supervisor is, of course, the person in power within this environment and relationship. The psychologist-in-training has had a “fantastic” experience with the supervisor until LGBT issues arose in their interactions and discussions. At that point, the climate within the relationship changed for the psychologist-in-training and the power differential became more apparent. This participant goes on to describe his consultation with another professional in power about the above incident,
I had gone to my group supervisor who was a really a lovely woman, um, wonderful psychologist who kept saying “You know, this is part of supervision. You have to... it’s your responsibility...” She said, “I can pull hierarchy on this person, but real growth comes from the trainee and the supervisor hashing this out.” But I was really scared to do it for... for... for weeks, months at a time, and finally when I came back, the response I got from that supervisor was, “I’m very clear about this. I’m very, very clear that is not an issue for me and I’m very clear on that”... and then ended discussion. (pause) And... I... you know, I... once again I just felt completely shut down and, um... and dismissed.

In this case even the “safe” supervisor the trainee interacted with and approached for help contributed to the “unsafe” climate by not assisting or advocating for the LGB trainee. When this participant approached the primary supervisor and then felt dismissed by him, again the climate became one that lacked safety for the LGB psychologist-in-training, and now had been generalized to the entire agency.

*Action Strategies*

In axial coding, action strategies are specific procedures that transpire as a result of the core category/central phenomenon (Creswell, 1994). The action strategies that evolved from the core category, Climate, were: (a) reaching out to queer friends; (b) consulting with LGB or known LGB-affirmative faculty and supervisors; (c) selecting if and when to confront and educate others, and; (d) seeking out externships/internships that are either in LGB centers or are known
LGB-affirmative settings. Both the context and the intervening conditions directly influence these action strategies.

**Context**

Context is defined as specific qualitative or quantitative factors that affect the action strategies (Creswell, 1994). The three contextual conditions in the data of the current study by which the action strategies unfold are the training setting, the clinical setting, and the supervisory relationship. Training settings refer to clinical psychology or counseling psychology programs that the participants received their training. Clinical settings are settings where the participants completed externships/internships providing clinical services. Lastly, the supervisory relationship is typically the dyadic relationship between the supervisor and the supervisee (participant).

Initially psychologists-in-training are educated via a clinical psychology or counseling psychology program, focusing on didactic and experiential clinical training. Most participants spoke of having a combination of “awesome” and “challenging” experiences in the training programs, often with the challenging experiences involving LGB issues. Although some participants spoke of feeling relatively affirmed overall within a program setting, most went on to add that, upon looking more closely, many programs are more non-affirmative or dismissive toward LGB individuals than they are affirmative. One bisexual male participant stated he felt that overall the graduate program was supportive of him as a queer man, then added, “It’s been a little, um... there’s... there’s a little bit of the “We’re all one” kind of naïveté or whatever, that... that I find... that I have...
found frustrating.” (P1). Another gay male participant talked about feeling supported overall, but went on to state how he felt he had to “push” his program to be more inclusive around diversity issues, and his feeling the “push back,”

As a GLB, first, I generally felt quite supported by my faculty, administration, peers, and a lot of my work is focused on diversity in general across the board, and I’ve pushed rather hard on my program to... to do a better job at addressing, um, issues of diversity both within our program and in clinical practice, and I think systemically and organizationally I’ve had a lot of push back. I don’t know that that’s necessarily specific to my identity as a gay man, but I know my program is... is, um, doing its best, but struggling a lot to address general diversity issues across the board. (P2)

This participant went on to state how “distressed” he felt in a class where the professor did not include same-sex examples in regard couples therapy training.

It is important to note here that in this participant’s training program, he did feel some support as a gay man by faculty, administration, and peers, and, as stated earlier, the support from any of these individuals can help to create a safer climate for the LGB trainee; however, this support does not necessarily eliminate or counter-balance the harm done at other levels of training. One lesbian participant stated,

You know, when you’re in such a high stress environment as graduate school and you’re navigating multiple classes, seeing clients, doing
research, you know, having something like that [LGB issue in training program] weighing on you it just does not fit well in the equation. (P3)

Other participants spoke of the overall lack of LGB training or discussion within programs. Two gay male participants shared,

I just took a multicultural counseling course this semester and it was predominantly all done on racism and it was very, um... um... we had a section where... I was trying to use my sexuality to understand ethnicity, and a lot of people sort of jumped on that and said, “Oh, you can’t do that; it’s not the same thing,” um, and it was a big sort of tension. (P5)

I was out... to friends and professors and classmates, but nobody ever made, for better or worse, like, nobody really ever made an issue of it, in... in a sense, um, so, no one really ever asked me what it was like. (P12)

In the former scenario you will note how LGB issues are not considered on the same level as racial/ethnic issues; this was reiterated by most participants in the study. In this last scenario, the participant hoped people in his training program would make an issue of sexual orientation so that he could talk about his experiences as a gay man.

Clinical settings also provide a context that affects the LGB psychologist-in-training’s action strategies. These strategies help the individual to seek affirmation of the LGB-self as a trainee. Some of the most positive clinical training settings were either in LGB Centers or were otherwise LGB-affirmative, as described by one lesbian participant,
My most recent externship, in the setting that I’ll be working on internship, which is a counseling center setting, I... I don’t mind sharing that has been really positive. I had the opportunity to co-facilitate a GLBT support process group and was able to sort of dialogue about what my experience was professionally and how that might have an impact on client care, so it was kind of neat to be able to... kind of integrate both of those areas. (P3)

Another lesbian participant also described positive feelings when she discovered that she would have an LGB supervisor in an LGB setting, “There was definitely something in me that relaxed when I knew I was going to have lesbian supervisors at a queer counseling center.” (P6).

The supervisory relationship within the clinical settings is another contextual variable contributing to the LGB psychologist-in-training’s action strategies. Some participants spoke of having to seek affirmation outside of the supervisory relationship, which was perceived as non-affirming. One bisexual female participant stated, “Then, um, I kind of do it on my own and go to a different, like my group supervisor, someone else for support and that, or I just don’t talk about it with my supervisor.” (P1).

*Intervening Conditions*

Intervening conditions indirectly affect the action strategies of the individual — the how and why of the action strategies (Creswell, 1994). One evident intervening condition in this study is an individual faculty’s or supervisor’s perceived knowledge or lack of knowledge of diversity issues as a
whole. Participants commented on how supervisors need to become more aware of all aspects of diversity. One bisexual female participant’s statement reiterated the thoughts and feelings of most participants,

I think the biggest thing is for them [supervisors] to educate themselves, because I don’t, like,… it’s not my job to, you know, fill in any… I don’t know, fill in any blanks in their awareness of issues. I don’t care the sexual orientation of the supervisor or the faculty or whoever, to come in and have them already have good knowledge of an area, and how to supervise me and how to work with me personally or be sensitive to me and also be sensitive to the, you know, sexual orientation issues that my clients might be going through. I don’t… I don’t want to be the one bringing them articles. (P1)

Knowledge of diversity is not simply an understanding of didactic and external issues, but also knowledge of oneself as a diverse individual. One gay male participant stated, “Some of the things I’d be concerned about I think are, I don’t know, almost um… those supervisors assuming a better integration or a better understanding of who they are than they might have yet.” (P2). As psychologists, it is imperative that we understand ourselves and our place in the world, including our privilege as supervisors. The absence of this knowledge and understanding can have dire consequences for our supervisees and clients.

Consequences

Based on the individual’s action strategies, certain consequences arise. The first consequence is LGB supervisees having to be vigilant in their training
with regard to their own feelings of safety and feeling affirmed. Such vigilance is likely present in the LGB individual's life already, as society as a whole continues to support a heterosexist environment; however, as these individuals prepare to become professionals within the field of psychology, such vigilance will have an effect on their ability to effectively integrate their identities as an LGB individual and professional. Vigilance also exacerbates anxiety and wears on the already strained resources of the typical graduate student.

The second consequence is simply that LGB psychologists-in-training will be more limited than their heterosexual counterparts in finding affirming training programs and clinical settings in which to train. In an already competitive field, particularly in terms of clinical sites, the LGB psychologist-in-training will be more aware of clinical training sites that may not be LGB-affirmative and therefore, become undesirable as clinical training environments.

A third consequence is less effective or even "bad" supervision with supervisors who are perceived to be LGB non-affirmative. In terms of defining "effective" and "bad" in this instance, two issues arise: (a) the all-important supervisory relationship is weakened or distrusted by the supervisee; and, (b) as a result, all clients will be impacted by this ineffective or bad supervisory relationship, and in particular, LGB clients.
Propositions

From the data analyses, four propositions are presented:

1. It is imperative that LGB psychologists-in-training be able to integrate both their sexual orientation identity and their professional identity in order to develop in a holistically healthy way.

2. Although “good” and “bad” supervision are construed similarly by supervisees in general (e.g., feeling respected and cared for versus feeling judged and disrespected), the one difference with regard to LGB supervisees is the added component that in “good” supervision, the supervisor defines “diversity” broadly, whereas in “bad” supervision the supervisor is less aware of LGB issues as part of diversity.

3. Education on LGB issues in all psychology training environments will contribute to the reduction of homophobia, homonegativity, and heterosexism.

4. The negative impact on LGB psychologists-in-training of homonegative/heterosexist environments and relationships is that trainees not only lose learning opportunities, but also have to compensate for this on their own.

These four propositions are key components to building a conceptual framework of the supervisory relationship for LGB psychologists-in-training.
Summary

Within Chapter 4, four categories emerged from the data. Each of the four categories supported subsequent themes, which, in turn, led to overall propositions. The first category, Identity, referred to not only how participants identified their sexual orientation, but also what that identity meant to them. As well, this category reflected how they manage their identity, in terms of if, when, and to whom to “come out” to, as well as the importance to their own self-respect and enhancement of their professional self to do so.

The second category that emerged, Supervisory Relationships, referred to relationships and their effect on the training experience of the LGB psychologist-in-training. Participants in this study contributed to the development of a definition for both “good” and “bad” supervision. Without the support they need, the LGB psychologists-in-training take it upon themselves to seek out and consult with people in their environment they do feel supported by.

In Category 3, Climate, which emerged as the Core Category, not only were the various training genres contributing factors to the overall experience of the LGB psychologist-in-training, but even within our profession, ignorance, heterosexism, homonegativity, and even homophobia remain for the LGB individual to navigate and cope with. The lack of knowledge, and perhaps even the lack of interest or acknowledgement of sexual orientation as a diversity issue, contributes to the climate. It is important to note that positive climates, climates that support and affirm LGB trainees, although valuable, do not necessarily
negate the impact of negative climates; the effect of the positive climate does, however, serve as an oasis for the LGB psychologist-in-training.

Lastly, Category 4, Impact, highlights how vigilance around Identity, Supervisory Relationships, and Climate affects the LGB psychologist-in-training. A sense of disillusionment exists on the part of the LGB trainee in relation to the profession as a whole, as a direct result of training environments and individuals within that environment, specifically faculty and supervisors. This disillusionment is a direct result of the LGB trainee feeling negated and “small” within the training environment, as a result of supervisors who are ignorant of LGB issues within therapy and supervision or who perhaps do not believe these issues to be pertinent. From this experience, the LGB trainee loses some or all respect for the supervisor, and subsequently, loses a valuable learning opportunity. The direct impact is reduced growth and professional development of the trainee and, consequently, reduced quality of services to that trainee’s clients.
CHAPTER V
SUMMARY AND DISCUSSION OF FINDINGS, CONCLUSIONS, AND RECOMMENDATIONS

Discussion

The primary purpose of this study was to gain a better understanding of the experiences LGB psychologists-in-training have in supervision. As well, this study explored issues around these experiences and how they impact the LGB psychologist-in-training’s identity development, both as an LGB individual and as a professional. Three primary research questions guided the discovery in the investigation:

1. How does the participant identify (L, G, or B), what has the process been in his or her coming out, and if and when did he or she come out to the clinical supervisor?

2. What has the overall experience been in supervision with regard to talking about LGB issues?

3. How has the supervisory relationship in light of LGB issues impacted not only the LGB psychologist-in-training’s clinical work, but also his or her identity development in general?

Overall, a greater understanding of the issues was gained through discussion with the 14 participants. Participants for this study self-selected via
the APA Division 44 (Society for the Study of Lesbian, Gay, and Bisexual Issues) listserv as well as a recruitment email via the Association of Counseling Center and Training Agencies (ACCTA). Four of the participants identified as bisexual/queer, 4 as gay/queer, and 6 as lesbian. All but 3 of the 14 participants were receiving their doctorate from a clinical Psy.D. program; the 3 other participants were enrolled in a counseling psychology Ph.D. program. The focus of the interviews was on where the participants were in terms of being out as LGB, experiences of being out within their training programs and various training settings, the relationships with supervisors in particular, and the impact that being out and the supervisory relationships have had on their development not only as LGB individuals but, specifically, as LGB psychologists.

Chapter 4 outlined the experiences of the participants. The data were examined and analyzed for commonalities, which resulted in the emergence of four categories: (1) Identity; (2) Supervisory Relationships; (3) Climate; and, (4) Impact. Within these categories, 13 themes also emerged. Data were reconfigured into an axial coding paradigm highlighting the interrelationship of the data in terms of causal conditions, a central phenomenon, action strategies, context, intervening conditions, and consequences (Figure 2). In Chapter 5, I will begin with a discussion of the four categories that emerged from the data and then summarize how categories and themes are interrelated into a conceptual framework.
Discussion of Category 1: Identity

The data in this study support the importance of the process of LGB identity development. All models of LGB identity development include stages, phases, or processes that each LGB individual goes through (e.g., Cass, 1979; D’Augelli, 1994; Fassinger & Miller, 1996; McCarn & Fassinger, 1996). In particular, D’Augelli’s (1994) model indicates a process that all LGB individuals go through in their identity development. His model theorizes that the LGB individual’s process contains a number of elements: (a) the LGB individual exits her or his heterosexual identity; (b) the LGB individual finds some stability in his or her LGB identity through challenging internalized thoughts and feelings about what it means to be LGB; (c) the LGB individual develops an LGB social identity by including others who know and accept her or his LGB identity; (d) the LGB individual discloses his or her LGB identity to parents and/or other family members and, it is hoped, gains support in this identity; (e) an LGB intimacy status is formed with another individual; and (f) the LGB individual enters the community making social and political stands with regard to LGB issues, but only if the particular environment is perceived as safe. All LGB individuals grow up in a heterosexual world and have the challenge of having to integrate their nontraditional LGB identity into a traditional mold (D’Augelli, 1994; de Monteflores & Schultz, 1978).

As indicated in Chapter 4, there was a relative balance of sexual orientation across participants. All participants who identified as either lesbian or gay reported having an identity that was “exclusively homosexual” or
"predominantly homosexual, and only incidentally heterosexual." Three of the four participants who identified as bisexual reported being "equally homosexual and heterosexual," with one female bisexual participant stating that she identifies as "predominantly homosexual, but more than incidentally heterosexual." Based on the participants’ responses on the SASO in relation to both interest and behavior, it would appear that all participants were quite consistent across dimensions of LGB identity. Also, no participants identified as more heterosexual than homosexual, indicating that only part of the bisexual spectrum was represented in the sample. One thing the SASO, as it was utilized in this study, could not discern was where each participant was in terms of formation of their LGB identity. In comparing SASO ratings with the qualitative data, however, it would appear that how long each participant has been "out" does not necessarily affect how they perceive themselves as LGB.

The first theme in the category of Identity speaks to the challenge and struggle for the LGB individual to move from the heterosexual world into her or his LGB identity. Because of the nonconformity of being LGB, and due to persecution, discrimination, and prejudice (Herek, 1995, 2000, 2009), the LGB individual must be vigilant in her or his environment, including the professional work environment, about if, when, where, and to whom she or he comes out. This journey is never-ending for the LGB individual; even if the individual is in a committed relationship and/or has been out to oneself for some time, the process of coming out in each new environment, to each new person one meets, is lifelong (e.g., D’Augelli, 1994).
The data in this study support, in almost every instance, that LGB individuals come out in their professional environment later than to friends and family. Part of this pattern can be attributed to where individuals are in their coming out process. According to models of LGB identity development, it is likely that these participants are at varying places in the way they perceive themselves as LGB. If we look at D’Augelli’s (1994) LGB identity process model, we can more clearly see that each participant is working on different processes; none are at the end of their journey in terms of identity. What stands out most is that although the participants in this study may have gone through many, if not all, of the processes of D’Augelli’s model in their private lives, they are likely having to work through some of the processes again as professionals. For example, all participants in their personal lives have exited heterosexual identity; developed a personal LGB identity status, whereby they have reached some personal stability with regard to their identity; developed an LGB social identity complete with friends and organizations; and, developed an LGB intimacy status, as all indicated having been in intimate relationships. Professionally, however, it is likely that many of the participants will find themselves having to re-navigate through some of these processes again: What does it mean to have a personal LGB identity, social identity, and intimacy identity as a psychologist-in-training?

Most of these participants have not been out as LGB to all supervisors in their training, even though they have been out to primarily all friends and family in their lives. This hesitation to be out to some supervisors does not seem to be
related at all to how the participant identified or to how long she or he has been out. Some participants identified that they needed to have the support and care from family and friends prior to coming out to others. Some participants indicated that new and novel environments, such as a training environment, created an old and familiar feeling of caution for the LGB trainee. Coming out in the professional training environment requires the LGB individual to discern if the environment is safe and who in that environment will be safe (Whitcomb, Wettersten, & Stolz, 2006). Although it is a risk to come out to anyone in one’s life for fear of being abandoned by that person, the risk of losing one’s job, source of income, and place one spends most of his or her time, can be particularly distressing. Considering each of these individuals is investing considerable effort into becoming a professional psychologist, it would be difficult to risk potential discrimination from people in power who decide whether he or she will continue on in the field.

Theme Two indicates how the participants in the current study believe in the importance of not separating or disregarding one identity for another (e.g., disregarding LGB identity for a psychologist-in-training identity, or vice versa). This integration can be particularly difficult if we consider Theme One and the LGB individual’s need to be vigilant about coming out. Being able to integrate the whole person into the professional role is imperative for optimal growth, not only as a person, but as a psychologist.

Ronnestad and Skovholt (2003) stated that developing as a professional involves an always-increasing integration of personal and professional self. This
supports the LGB individual’s constant need to integrate his or her values and personal experiences into the professional self. Level 3, the final level of development according to Stoltenberg et al.’s (1998) IDM model, states the trainee becomes more accepting of oneself, which would include sexual orientation identity. Stoltenberg and colleagues go on to state that, “This therapist, through the self-knowledge that has developed, is better able to use himself or herself (personal characteristics, genuine responses) in session” (Stoltenberg et al., 1998, p. 25). As well, understanding “how his or her personal characteristics affect various clinical roles, as well as an integration and consistency of identity across these roles” (Stoltenberg et al., 1998, p. 26), is imperative for the mastery of the profession by these trainees. If supervisors are not supportive of the supervisee’s self-reflection and acceptance of herself or himself as a whole, the LGB trainee’s growth as a professional may be stunted. The result: at minimum, diminished effectiveness as a therapist, at most, harm to clients. Let us reflect on one bisexual male participant’s positive experience of integration within the supervisory relationship, “[My supervisor] normalized it for me. He put it in perspective of, ‘So, let’s talk about your client’s pain, let’s talk about your pain, the pain.’ ” (P11). Not only does this interaction incorporate client issues, but the supervisor is able to help the supervisee integrate what “the pain” means for him as well.

In the helping professions, psychology and social work for example, it is crucial that the professional individual know and understand herself or himself in order to provide more effective services to the client. If the training environment
discourages or does not support the LGB individual sharing her or his personal life (e.g., talking about one’s partner and/or children), the LGB psychologist-in-training will feel denigrated and less-than.

Following from Theme Two is Theme Three, which indicates that in order to have optimal self-respect as an LGB psychologist-in-training, one must be allowed and encouraged to be open and honest with one’s whole identity. Most of the participants spoke of the importance of classmates and colleagues being either supportive or not supportive, but far and away the most profound influence came from people in power within training settings. These people in power can contribute to the supervisee’s ultimate success or failure in the profession. Supervisors in particular have considerable power in the life of the supervisee (Bernard & Goodyear, 2004), as the supervisor is the one who will write letters of reference for the supervisee’s future clinical training applications. Therefore, it is up to the supervisors, as well as training directors and professors, to make a safe space for these individuals to share so that they may feel self-respect and flourish in the profession.

*Discussion of Category 2: Supervisory Relationships*

Crucial to the psychologist’s growth is the relationship with one’s supervisor (Loganbill et al. 1982; Stoltenberg et al., 1998). Supervisors act as teacher, consultant, and, at times, clinician (Bernard & Goodyear, 2004). This relationship is so important to the therapist’s growth that entire courses are often required in graduate school in order to become an effective supervisor. It should be noted that supervision courses are more typical in counseling psychology.
programs than in clinical psychology programs (Romans, Boswell, Carlozzi, & Ferguson, 1995).

The most recent published qualitative study that explored LGB-affirmative and LGB non-affirmative supervision was by Burkard et al. (2009). In interviews with 17 LGB doctoral students from both clinical and counseling psychology programs, their findings substantiate previous research on supervisory relationships in general. LGB supervisees identified affirming supervision as a relationship that they could turn to over and over for consultation, feeling safe, comfortable, and being able to self-disclose within the parameters of the relationship. LGB non-affirming supervision evoked negative emotions such as fear, anger, and distress, all as a result of an unsafe environment. Typically the non-affirming event with the supervisor began when the LGB supervisee sought help with regard to a specific client, and the supervisor was perceived to either be prejudiced toward the supervisee and/or the supervisee’s client.

The current study allowed for participants to articulate more generally about supervision experiences than in Burkard et al.’s (2009) study. The participants in the current study spoke of some supervisors being unresponsive to LGB issues in general and as having a lack of knowledge working with LGB clients. Having these non-affirming supervisory relationships had some participants questioning their choice of career as a psychologist. Most stated that their clinical work was compromised; a few stated that their clinical work was not affected by this non-affirming supervision.
It is expected that the psychologist-in-training confide in and consult with her or his primary supervisor first, using other individuals for special consultations, such as working with a specific type of client (Bernard & Goodyear, 2004). Theme One of Category 2 indicates that if the LGB supervisee does not feel supported as an LGB individual in supervision, he or she will seek out LGB-affirmative psychologists to consult with. This leaves the supervisee entering the supervision session each week with the fore-knowledge that he or she must withhold certain things within supervision, or risk feeling dismissed and small. At the same time, the supervisee’s withholding client issues and information in relation to LGB issues place all at risk. For example, if the supervisee senses that a client is becoming attracted to him or her, not discussing this in supervision can result in negative consequences; the supervisee may feel more vulnerable when the client is the same sex as him or her. The supervisee may respond to the client’s attraction by alienating the client or by reciprocating the client’s feelings of attraction. Either of these responses would likely be harmful to the client, and in relation to the latter scenario, could jeopardize the supervisee’s career and perhaps even the license of the supervisor.

The data in this study that support Theme Two also support the literature. In “good” supervision, supervisors are supportive of the development and integration of the whole being, not just a “clinical self.” “Good” supervision also entails self-disclosure on the part of the supervisor, as well as the creation of a supportive environment conducive to safe experimentation (Black, 1988). The supportive supervisor is not afraid to make mistakes when discussing sexual
orientation, and keeps dialogue open in this regard. Even though this may feel like “educating the supervisor,” an open, honest, and genuine exchange of information and understanding is very different from having to explain and defend every aspect of one’s sexual orientation. The latter type of educating is one-sided and does not have the supervisor taking risks and being vulnerable in the discussion.

The supervisor who incorporates sexual orientation identity into discussion of clients is considered, as reported by the participants in this study, to be more open and educated about all types of diversity. This will bode well for all of this supervisor’s supervisees, as she or he is likely to include all aspects of the clients’ identity and the supervisees’ identity, taking the whole person into consideration.

In the current study, “good” supervision took place regardless of the supervisor’s sexual orientation. Supervisors who do identify as LGB functioned as a role model to their supervisees. The supervisory relationship, according to Ronnestad and Skovholt’s (2003) themes, is an interpersonal interaction that is extremely influential for the growth of the psychologist-in-training, second only to the impact of interpersonal interactions with clients. Therefore, positive and affirming interactions with a supervisor greatly affect the development and growth of the supervisee. Stoltenberg et al. (1998) in their Integrated Development Model (IDM) of supervision reported that demonstrating acceptance, warmth, respect, understanding, empathy, and support is vital for supervisee development. This might very well be the core of “good” supervision.
They go on to state that without this basis it is tantamount to not providing our clients with these interpersonal interactions (Stoltenberg et al., 1998). In the case of LGB supervisees, these ways-of-being are imperative in order to not hinder or impede their development overall.

Stoltenberg and colleagues (1998) go on to discuss the plight of supervisees from marginalized groups. Because LGB supervisees have likely experienced some form of prejudice and discrimination because of their sexual orientation, and they have likely experienced this from the hands of the dominant culture (i.e., heterosexuals), if the supervisor is perceived to be from this dominant culture and sexual orientation is not addressed by this person in power, supervisees may be unwilling to disclose thoughts and feelings around LGB issues in supervision. As a result, the entire supervisory relationship may be perceived as non-supportive (Cook & Helms, 1998; Stoltenberg et al. 1998).

Conversely, in “bad” supervision, according to the findings in the current study, supervisors were perceived as rigid, judgmental and defensive in general, and were less aware of sexual orientation as a diversity issue. Participants in this study reported that “bad” supervision negatively affected the relationship with their supervisor.

Participants in this study reported that supervisors who have a narrower definition of diversity and interact in a much less open way negatively affected the supervisory relationship. By such supervisors not stopping to consult and ask the supervisee about her or his experience in supervision and in life in general, the supervisor is likely operating from heterosexual beliefs and ways of interacting
with LGB trainees. This affects the identity of the LGB trainee, the relationship between the trainee and supervisor, and ultimately the trainee’s clients.

A few participants described having a good relationship with their supervisor. For some, the supervisory relationship started out good, until one event in which the participant brought up an LGB issue, which created strain and changed the relationship thereafter. Burkard et al. (2009) also reported that despite some participants’ having a previously “good” supervisory relationship, LGB non-affirming events negatively affected the relationship and the LGB supervisees believed they could not bring up LGB issues again. As well, most participants in the current study stated that a supervisor’s judgment and heterosexism in supervision led the participant to question the supervisor’s overall competence in the field. Similarly, Burkard et al. (2009) found that after an LGB non-affirmative event between a participant and his or her supervisor, the supervisee perceived the supervisor as incompetent. Just as we know not to dismiss or demean a client in relation to his or her sexual orientation (Loganbill et al. 1982), it follows that it is imperative that supervisors within the supervisory relationship not demean the supervisee for his or her sexual orientation.

Another issue that arose from the data is that even when a supervisor is aware of the supervisee’s LGB identity, in “bad” supervision she or he may still make heterosexist and stereotypical comments about LGB individuals in general, rather than asking the LGB supervisee for clarification. As well, some of these supervisors insist on the supervisee coming out to all LGB clients. Although this might first appear as affirming the LGB identity, these sorts of demands do not
take into account the LGB supervisee’s own identity development and subsequent comfort level with coming out. Many of these supervisors, when the LGB supervisee felt courageous enough to challenge them, became defensive with the supervisee, which ultimately will impair the relationship and potentially lower the evaluation of the supervisee by the supervisor.

Discussion of Category 3: Climate

Climate, as it relates to the data in this study, refers to not only geography or training settings, but also prejudices and barriers, as well as support, that the LGB psychologist-in-training might experience.

Some individuals would likely state that homophobia is a thing of the past. However, based on many studies, we know that homophobia, heterosexism, negative attitudes, and ignorance toward LGB individuals remain prevalent (e.g., Herek, 1994, 2000). In terms of experiences of homophobia and heterosexism in the general population, this prevalence is not necessarily unexpected. Perhaps we would think that in the profession of psychology, where APA has made distinct statements about LGB as a diversity issue, heterosexism would be, if not decreasing, at least discussed and a part of the awareness of an agency. This is not necessarily the case. In fact, Burkard et al. (2009) reported that within psychology supervision, heterosexism has actually increased since the groundbreaking study by Pilkington and Cantor in 1996. Discrimination and prejudice, considerable homophobia, homonegativity, and heterosexism still exist in higher education, and of particular interest to this study, in psychology training programs and internship settings.
Also under the Climate category is the theme that identifies specific training environments, training genres, and geographic locations that influence LGB climate. It appears that, overall, the one training environment that is completely supportive and creates a positive climate for LGB psychologists-in-training is mental health centers that cater specifically to LGB clients.

One of the most predominant themes from the data is LGB psychologists-in-training asking for training programs, regardless of genre and geographic location, to educate themselves on LGB issues in order to create a more affirming climate. LGB psychologists-in-training want and need the ignorance to decrease and for the leaders within the field of psychology to truly make an effort to incorporate LGB issues. Lack of extensive or even sufficient training on LGB issues in many psychology departments creates a climate of ignorance; therefore, it becomes imperative for the LGB psychologist-in-training to navigate somewhat blindly through such environments. It is not enough to simply lump all cultures together within the definition of “diversity training,” as this “color blind,” “we are all the same” mindset is outdated and incorrect (Sue & Sue, 2008). There are unique issues that the LGB individual must endure. To educate themselves with regard to these unique issues, professors, supervisors, and training directors must really listen to the LGB individuals, and ask and respond to trainees’ experiences rather than responding in a heterosexist way, telling the LGB psychologist-in-training how it is. Another way to better understand LGB issues is for professors, supervisors, and training directors to immerse themselves into the culturally diverse LGB settings.
Discussion of Category 4: Impact

How all these events impact the LGB psychologist-in-training is a category which holds all the outcomes of their experiences. From the data in this study, four themes arose in relation to impact. First, LGB psychologists-in-training become disillusioned with not only their supervisors, but also with the profession of psychology. This is as a result of a multi-stage process that starts with the supervisee turning to the supervisor as an expert, someone to help her or him grow. As soon as the supervisee perceives the supervisor as ignorant around LGB issues, the supervisee generalizes that the supervisor’s knowledge is lacking as a whole (Burkard et al., 2009). Therefore, in the supervisory relationship, the supervisee becomes disheartened and/or is left feeling stuck providing teaching and training. Overwhelmingly, the participants of this study spoke of not being able to count on primary supervisors for their learning as a result of the supervisor’s ignorance and heterosexism.

When a supervisor was perceived to be ignorant of LGB issues in general or if the supervisor was overtly or covertly heterosexist in the supervisory relationship, the response by all participants in this study was to withdraw from the primary supervisor, if not completely, at least partially. Stoltenberg et al. (1998) discuss how the supervisee from a marginalized group chooses to discuss issues of diversity in supervision. If the supervisor is perceived to be from the dominant and privileged culture, the supervisee, in order to reduce familiar experiences of judgment, discrimination, and isolation, chooses not to disclose certain elements of oneself, and perhaps even clients, with the supervisor and
withdraws from the relationship to some level. As a result, the supervisory relationship may be perceived by the supervisee as non-supportive. Burkard et al. (2009) also found that when the supervisory relationship was perceived as LGB non-affirming, the supervisee withdrew and became less trusting of the supervisor and questioned the supervisor’s competency as a whole.

What price is paid when the supervisee withdraws from the supervisory relationship because of perceived heterosexism and ignorance? The ultimate price is likely paid by the clients the supervisee works with, particularly LGB clients, as the supervisors’ ignorance of LGB issues was most blatant when supervisees were discussing LGB clients or issues that implied same-sex relations (e.g., the hypothesized sex work of the male client). With this less-than-effective supervision, the LGB supervisee develops more slowly, is more anxious, and less confident, which will, ultimately, go into the therapy room. Some participants in this study did not report significant impact to client work; perhaps as reported by Burkard et al. (2009), the supervisee turns these negative interactions into positive outcomes, discerning how not to be in their work with LGB clients. Many participants in this study stated that, particularly with LGB clients in a primarily heterosexual training environment, the heterosexist environment likely impacted the effectiveness and experience of therapy for the client; heterosexism, discrimination, and ignorance are perpetuated for the client.

And how can the supervisor minimize the likelihood of such negative events happening? Simply, by confronting LGB issues of diversity within supervision, just as they would racial and ethnic diversity (McNeill et al., 1995).
As reported by some of the participants in this study, some supervisors outwardly stated that LGB issues were too personal for supervision, and specifically asked the supervisee to *not* discuss his or her own personal LGB identity or share information in this regard. Stoltenberg et al. (1998) urge the supervisor, the person in power within the supervisory relationship, to bring up issues of diversity; this should include LGB issues.

An interesting theme as postulated by Ronnestad and Skovholt (2003) is that any suffering experienced by the psychologist-in-training will contribute to her or his keen recognition, acceptance, and appreciation of human variability. From this process the therapist develops integrity and wisdom. We might extrapolate that the heterosexual individual, or for the purposes of this study, the heterosexual supervisor, who has not necessarily had plights such as those experienced by the LGB individual, may not have the same recognition, acceptance, and appreciation of diversity. Individuals such as those who are heterosexual, White, or of high socioeconomic status, although not immune to trauma and suffering, have overall privilege in society. With regard to the participants in this study, although they have faced many situations whereby heterosexism and/or homophobia affected their personal or professional life, these individuals have been resilient and exhibited courage in continuing to pursue their profession.

A second theme within Category 4 is feelings of anxiety, shame, and guilt around bringing up LGB issues in supervision or other training environments. Anxiety is a common developmental theme for most supervisees (Ronnestad &
Skovholt, 1992a, 1993, 2003; Rosario et al., 2006; Stoltenberg et al., 1998), and there can be much anxiety around the issue of deciding to “out” oneself in supervision. Stoltenberg et al. spoke of the Level 1, or beginning, therapist, and that this level is primarily marked with supervisee anxiety and negative, critical self-focus. What complicates this for the LGB psychologist-in-training is although anxiety as a professional might decrease, the participants in this study indicate that being an LGB trainee and supervisee replenishes anxiety at varying times in training, such as when the LGB trainee comes out to a supervisor (Rosario et al., 2006). Already self-critical, according to Level 1 of IDM supervisee development (Stoltenberg et al., 1998), the LGB psychologist-in-training does not need further criticism, such as supervisors “criticizing” an LGB sexual orientation.

Interestingly, Ronnestad and Skovholt (2003) also reported as a theme in the development of the professional psychologist, that new trainees will likely view seasoned psychologists and supervisors in a very affective way, ranging from strong idealization to strong devaluing of the supervisor. They added that any power differentials between the psychologist-in-training and the supervisor, inherent in the relationship, will accentuate these affective responses. In the current study, almost all participants were in their final internship setting; their responses reflected a wide range of affect, from a combination of anxiety, sadness, and frustration, particularly when discussing challenging supervision events, to being enthusiastic when describing more positive events.
In terms of shame, depending where the LGB individual is in his or her identity development, shame can become more or less of an issue (Dafnos, 2007; Warner, Hornsey, & Jetten, 2007). Society has already placed a measure of shame on LGB individuals (Downs, 2006), often long before coming to graduate school; feeling shamed in the professional realm adds another dimension and impact. Feelings of guilt also arise when the supervisor or training director blames the LGB psychologist-in-training for making waves in the training environment. The shamed and guilted individual is less likely to feel confident in the training setting, and as a result, will potentially feel less confident as a clinician as a whole. Loganbill et al. (1982) discuss how the supervisory relationship is crucial in the same way the relationship between therapist and client is crucial; we as clinicians know that we should never demean a client, and similarly, it is imperative that supervisors not, intentionally or unintentionally, demean a supervisee.

One way to reduce the anxiety experienced by the supervisee, as suggested by Bordin (1983), is to build a strong working alliance and bond between supervisor and supervisee. This bonding would require a more intimate focus rather than simply sticking to client issues. Studies on trainee anxiety indicate that anxiety will be present, to varying degrees, within the supervisory relationship, and it is crucial that an environment of trust, respect, and acceptance be developed to allow the supervisee to grow.

Perhaps the most predominant impact on LGB psychologists-in-training is feeling dismissed when bringing up LGB issues in supervision and training.
Although perhaps not as long-lasting or pernicious as some of the other impacts, this dismissal also contributes to feelings of shame and anxiety and can result in harm to both the supervisee and her or his clients. One way the LGB psychologist-in-training feels dismissed is by training programs paying considerable attention to race/ethnicity diversity issues, for example, but teaching or discussing little in relation to LGB diversity issues. As well, even if LGB psychologists-in-training bring up LGB issues in relation to clinical work, supervisors and training personnel often dismiss this input. Methods of dismissing the supervisee range from asking the supervisee to not get so personal to the supervisor not addressing the LGB issues being raised, as if it never happened. Burkard et al. (2009) reported that some supervisors are unresponsive to LGB issues in supervision in general and lacked knowledge with regard to working with LGB clients. Therefore, many supervisees believed that any LGB issue brought up in supervision would be dismissed.

The fourth theme under this category is the culmination of judgment and ignorance on the part of supervisors and training directors with regard to LGB issues. This judgment and ignorance hinders and impedes the LGB individual’s identity development, both as an LGB-identified person and as an LGB psychologist. Stoltenberg et al. (1998) state that an important difference between effective and ineffective supervision is support and responsiveness versus judgment and insensitivity. The data in this study reiterate the findings of Stoltenberg and colleagues with regard to effective and ineffective supervision, and in terms of the LGB supervisee, the participants in this study reflect on how
the lack of effective supervision can impede their overall identity, particularly when the supervision is truly “bad.”

Supervisors may inadvertently taking liberties in terms of how an LGB supervisee identifies (e.g., even though one participant identified as a bisexual woman, the supervisor just referred to her as a lesbian because, as the supervisor understood it, he needed a less ambiguous category to put her in). This lack of knowledge of LGB identity creates an element of vulnerability for LGB individuals, not that they would somehow change their mind about their sexual orientation identity, but it can complicate the already complicated identity development process. In addition, the LGB individual is also trying to integrate oneself into an LGB professional identity; such ignorant comments contribute to impeding this development as well. Overall, heterosexist attitudes and comments impact the LGB individual regardless of how long she or he has been out. As one lesbian participant stated,

I think the more time goes on it takes more to actually get to that button [of vulnerability], but occasionally, given if I’m in a vulnerable situation like being a in brand new trainee setting with a supervisor for a first time, it might make it more easy to hit that spot like that. (P6)

Notably, similar to the findings by Burkard et al. (2009), participants did not report an overall detriment to their work with clients as a result of “bad,” (e.g., inadequate, judgmental, heterosexist) supervision; supervisees in the current study sought out others to help with therapeutic issues dismissed or inadequately addressed in such supervision. Regardless, these negative supervisory
experiences are impacting the LGB psychologist-in-training in a negative way. Despite APA guidelines with regard to diversity, LGB non-affirming supervision has increased since the ground-breaking Pilkington and Cantor (1996) study (Burkard et al., 2009). Therefore, it is imperative that the voices of the participants of this study, as well as the voices of all LGB supervisees, be heard in order to turn professional supervision into a positive and affirming experience for all trainees.

Summary

The purpose of this study was to examine the experiences of LGB psychologists-in-training in their supervisory relationships. The study sought information on how LGB issues are or are not being addressed in the supervisory relationship. The primary goal was to determine how these supervisory experiences have impacted the LGB psychologist-in-training and how the supervisory relationship may have changed as a result of the following issues: (a) coming out or not coming out to the supervisor; (b) perception of supervisors’ comfort with talking about LGB issues, be they client issues or supervisee issues; and (c) how this perceived comfort, or lack thereof, impacted the LGB psychologist-in-training’s work with clients, particularly LGB clients. Also of importance was determining where the participant is in terms of her or his own sexual identity development, and how the supervisory relationship may or may not have affected not only her or his development as an LGB individual, but also development as a psychologist. In addition, this study sought what the LGB
psychologist-in-training would hope for in the supervisory dyad in terms of support from the supervisor.

Based on the data derived in this study, four broad conclusions can be drawn. First, it is imperative that LGB psychologists-in-training be able to integrate both their sexual orientation identity and their professional identity in order to develop in a holistically healthy way. This conclusion is based on participants identifying the importance of their identity as a whole and the perception that without this integration, they will be lacking in their growth as therapists and psychologists.

Second, although “good” and “bad” supervision are conceptualized similarly by psychologists-in-training in general (e.g., “good” meaning feeling respected and cared for; “bad” meaning a lack of respect, and being riddled with judgment), the one difference with regard to LGB supervisees is the added component that “good” supervision allows for “diversity” to be defined broadly and “bad” supervision entails the supervisor being less aware of LGB issues as part of diversity.

Third, despite guidelines put forth by governing bodies such as APA, training programs and clinical settings are not necessarily consistently implementing LGB issues in diversity training or in discussion of diverse clients. Participants in this study were disheartened and aggravated by the lack of education and consideration of LGB issues within training programs and clinical training sites. Such omissions in training can perpetuate homophobia,
homonegativity, and heterosexism not only within the training program, but
societally as well.

Lastly, the negative impact on LGB psychologists-in-training of
homophobic/ homonegative environments and supervisory relationships is that
they not only suffer a loss in their learning experience, but also have to
compensate for this on their own. In a place where the trainee wants to glean
information and wisdom from supervisors, it is disillusioning to perceive one’s
supervisor as “incompetent” or at the very least, less knowledgeable in general, as
a result of their being less knowledgeable and even ignorant about LGB issues.
As a result, these psychologists-in-training are left to “fend for themselves” in
terms of learning and reaching out to training professionals who are LGB
knowledgeable and affirmative. If one were to think of the consequences to
clients, this is not only unacceptable but unethical.

*Conceptual Framework*

The conceptual framework that starts to emerge from the data in this study
in relation to supervision experiences of LGB psychologists-in-training posit that
the Core Category is Climate. This refers to the environment, situation, and/or
relationship in which the LGB supervisees function and experience their personal
and professional lives. Causal Conditions that contribute to the Climate for LGB
supervisees are their interaction with someone of power within the environment,
typically a supervisor, and the interaction includes either direct or indirect
reference or discussion of LGBTQ issues. The LGB supervisees employ Action
Strategies to deal with the Climate. An Intervening Condition in terms of the
Action Strategies is whether or not the supervisor or person in power is knowledgeable on issues of diversity in general, and LGB issues specifically. Action Strategies for negative interactions within the Climate are consulting with LGB or LGB-affirmative supervisors, seeking out internship sites that are clearly LGB affirmative, and, to some extent, reaching out to queer friends. Regardless of whether the Climate is perceived as positive or negative, the LGB supervisee might choose as an Action Strategy to educate those within the environment on LGB issues; however, this education is most likely to occur in a relatively safe environment. The Context in which the Action Strategies occur range across Training Setting (program), Clinical Setting (e.g., internship), and/or Supervisory Relationship. The Consequences of the Climate and Action Strategies employed by the LGB supervisee, particularly when the Climate is perceived as negative in any way, is increased vigilance in all training settings (generalized) and the supervision and training within the current Climate being less effective. Because of the increased vigilance, the supervisee will search for LGB-affirmative sites for their next training environment, which limits the sites available and thus the chance of securing a site.

The conceptual framework can be demonstrated via an example. An LGB psychologist-in-training enters a training environment and into a supervisory relationship with another who is in a place of power. At some point in supervision, LGB issues will either directly be addressed within the relationship or the supervisor will have indirectly commented on LGB issues within the training environment. If the supervisor is perceived by the LGB supervisee as
being homonegative, heterosexist, and lacking knowledge about issues of diversity, the supervisee will do two things: (a) she or he will withdraw from the primary supervisor and instead will consult with another individual within the environment who is perceived by the supervisee as LGB-affirmative, and (b) the supervisee will censor all disclosures within the primary supervisory relationship. After the negative interaction with the primary supervisor, the LGB supervisee becomes more vigilant in the training environment. Supervisee growth is stagnated. He or she will also likely research future possible internship sites to determine those that are LGB-affirmative, effectively reducing the number of sites she or he will feel comfortable applying to.

If we were to apply the conceptual framework to a more positive supervision experience, the LGB psychologist-in-training enters a training environment and into a supervisory relationship with another in a place of power. At some point in supervision, LGB issues will either directly be addressed within the relationship or the supervisor will have indirectly commented on LGB issues within the training environment. If the supervisor is perceived as being LGB-affirmative and as conceptualizing diversity broadly, the supervisee will be more open and relaxed within supervision, leaving room for the supervisee to grow and develop, and integrate the personal and professional self.

Although it is clear which of the above two examples would be most helpful to the LGB psychologist-in-training, evidence in the literature, including the data from this study, indicate that many supervisors do not provide positive experiences for the LGB trainee. Later in this chapter recommendations are recommended with permission of the copyright owner. Further reproduction prohibited without permission.
specified for supervisors, as well as for faculty, researchers, and students, on how to create the best climate possible for the LGB psychologist-in-training.

Limitations

A number of limitations exist with regard to this study. First, being a qualitative study with only 14 participants, the findings cannot be expected to fully represent the expanse of experiences of other LGB psychologists-in-training. Second, participants who responded to the listserv request may have had more negative supervision experiences and wanted to be part of a forum that would allow them to discuss these negative experiences, while LGB supervisees who have had more positive experiences may not have felt compelled to share. Third, supervisors were not included as participants; therefore, their perceptions of supervisory interactions with LGB supervisees cannot be understood. Fourth, although there are benefits to having a homogeneous sample in a qualitative study, the fact that all participants identified as White suggests that the conceptual framework may not fully apply to LGB trainees of color. Fifth, although the principal investigator defined her biases at the outset of this investigation, it is likely bias has entered the exploration of the data. As the principal investigator and her advisor both identify as LGB and both advocate for positive and affirming supervision experiences for all, bias is likely in this dissertation. If both the principal investigator and faculty advisor were heterosexual, the results of this study may be interpreted differently. For example, the LGB supervisee may be perceived as overly sensitive (Sue & Sue, 2008), and/or that she or he should not focus on issues of a personal nature within supervision.
Perhaps the most profound limitation comes from the fact that it is likely the participants had never before been able to discuss their supervisory experiences and to express their thoughts and emotions around these issues, as they were not getting sufficient opportunity at their training sites. Despite having an outline of the topics to be discussed, the participants often seemed lost for words, as evidenced by extended, but thoughtful, pauses, and excessive stammering at times when describing emotional or negative experiences. Although the participants were made aware at the start of the interview of the principal investigator's identity as lesbian, the fact that they were asked to describe difficult and emotional situations would require a level of trust by anyone, let alone an LGB individual who has experienced discrimination and prejudice. Although this rawness is listed as a limitation, it may well have provided to the richness and depth of their responses, perhaps more so than if they would have had additional time and opportunity to process all that has occurred in their supervisory relationships.

Recommendations

Recommendations for Supervisors

Some of the following recommendations are derived from the data presented in this study, as well as from Whitcomb et al. (2006):

1. Be aware of your own stereotypes and prejudices toward LGB individuals (Whitcomb et al., 2006).

2. Learn how these stereotypes, prejudices, and discrimination impact LGB individuals.
3. Take educating yourself on LGB issues into your own hands. Seek out resources, including any LGB organizations in your area. Also, educate yourself in terms of what affirmative and non-affirmative supervision might look like. Understand some of the different sexual orientation identity development models so that you can integrate and take into consideration not only the supervisee’s development as a psychologist, but also as an LGB individual.

4. Adhere to the Ethical Codes of the American Psychological Association (APA), as well as the guidelines as set out by Division 44 of APA (APA, 2000) (Whitcomb et al., 2006).

5. Reach out to LGB individuals in your community. Ask the questions, “How can I be a better support to you? What have your therapy experiences been like in the past? What would you have me know as a therapist?” Answer these questions and ask these of your LGB supervisees as well.

6. Be the one to bring up diversity within supervision and include LGB as a diversity issue. One way to do this is by describing yourself in terms of multiple aspects of diversity. For example, “I am a White, heterosexual, Catholic man.” This lets the supervisee know that sexual orientation is on the radar. As well, it will be important to let your supervisee know your definition of diversity and all that is included in that for you.
7. Use nonheterosexist language not only in supervision, but throughout your life. LGB supervisees are vigilant of how you perceive LGB issues not just in the supervision session, but throughout their interactions with you. Examples of nonheterosexist language are using “partner” instead of “spouse” or “husband” or “wife.” Do not make assumptions about your supervisee’s sexual orientation.

8. When supervisees come out to you, let them label their own sexual orientation and experience. For example, if a female supervisee states that she is bisexual, do not try to pigeon-hole her into the category of “lesbian” for your own comfort and understanding.

9. Welcome LGB supervisees to talk about their experiences as LGB, not only in their clinical work, but also how they have been impacted personally.

10. Understand and respect the LGB supervisee’s developmental process and choice as to whether or when to come out to clients. Supervisees will likely need and want supervision with regard to this issue, but it is not advisable to give the supervisee a blanket mandate, such as “always” come out or “never” come out to clients.

11. Become an advocate and ally for your LGB supervisees and all LGB individuals by challenging co-workers and fellow supervisors in their stereotyping of LGB and use of heterosexist language (Whitcomb et al., 2006).
Recommendations for Faculty

Although this is a dissertation specifically on supervision, it is important for faculty, particularly those who teach supervision and multicultural classes, to address LGB issues in the classroom. Educating future supervisors about LGB issues within supervision will hopefully negate many of the “bad” supervision experiences explored in this study. Again, the following recommendations are derived from the data of the current study as well as from Whitcomb et al. (2006). Many of the same recommendations offered for supervisors can be applied to faculty, with some modifications and additions:

1. Be aware of your own stereotypes and prejudices toward LGB individuals (Whitcomb et al., 2006).

2. Learn how these stereotypes, prejudices, and discrimination impact LGB individuals.

3. Take educating yourself on LGB issues into your own hands. Seek out resources, including any LGB organizations in your area. Also, educate yourself in terms of what affirmative and non-affirmative education might look like. Understand some of the different sexual orientation identity development models so that you can integrate and take into consideration not only the development as a psychologist-in-training, but also as an LGB individual.

4. Adhere to the Ethical Codes of the American Psychological Association (APA), as well as the guidelines as set out by Division 44 of APA (APA, 2000; Whitcomb et al., 2006).
5. Reach out to LGB individuals in your community. Ask the questions, "How can I be a better support to you? What have your experiences been like in a heterosexual world? What would you have me know as a psychologist who trains other psychologists? Answer these questions and ask these of your LGB students as well.

6. Be the one to bring up LGB issues as part of the discussion of diversity within the classroom.

7. Use nonheterosexist language not only in teaching, but throughout your life. LGB individuals are vigilant of how you perceive LGB issues not just in the classroom setting, but throughout their interactions with you. Examples of nonheterosexist language are using "partner" instead of "spouse" or "husband" or "wife." Do not make assumptions about your students' sexual orientation.

8. When students comes out to you, let them label their own sexual orientation and experience. For example, if a female student states that she is bisexual, do not try to pigeon-hole her into the category of "lesbian" for your own comfort and understanding.

9. Welcome LGB students to talk about their experiences as LGB, not only in their clinical work, but also how they have been impacted personally.

10. Integrate LGB into all classes as part of the consideration of diversity issues.
11. Design specific seminars and classes and recommend that all students attend.

12. Become an advocate for your LGB students and LGB individuals as a whole by challenging fellow faculty when they use stereotypes and heterosexist language (Whitcomb et al., 2006).

**Recommendations for Researchers**

This study has contributed to the validation of existing data and models regarding supervision of the LGB supervisee. First, this study supported much of what Burkard et al. (2009) found with regard to LGB-affirmative and LGB non-affirmative supervision. As well, the data in this study add to what has already been described in some models of supervision specifically designed for the LGB trainee. For instance, Buhrke's Conflictual Situation model (1989a) described how conflict, such as homophobia, can arise in the relationship between an LGB supervisee and her or his heterosexual supervisor. As with the participants in this study, the supervisee withdraws from the relationship, struggles with discussing LGB issues in general with this supervisor, and as a result negative outcomes can occur, such as same-sex attractions not being discussed in supervision.

A second model that the conclusions from this study have contributed to is Holloway's (1995) Supervisee Empowerment model. This model states that the supervisee, as a result of positive self-efficacy in a supportive supervisory relationship, feels empowered to be the one to bring up LGB issues in supervision, rather than being guided by the supervisor. A number of participants in this study felt empowered to bring up LGB issues in positive supervisory...
relationships, while other participants did not feel empowered to do so, as they perceived the supervisor to be the one in power overall in the relationship.

Despite adding pertinent and important information to the sparse research on supervision of LGB psychologists-in-training, much is left to do. Some areas that require further investigation are as follows.

1. More specific investigation with regard to how supervision experiences affect the development of LGB trainees in comparison to heterosexual trainees.

2. Investigating the supervisory dyads by collecting data from supervisors rather than only the supervisee. This would add another dimension of understanding how supervisors interact with supervisees and how supervisees perceive these interactions.

3. Interview supervisors who identify as LGB and gaining their perspective on their supervisory model and style could be beneficial to non-LGB supervisors.

4. Explore how multiple identities (e.g., race/ethnicity and sexual orientation) interact in the supervisory dyad would extend knowledge and help build the conceptual framework derived from the current all-White sample.

5. Extend this study to include bisexual trainees more fully, particularly those who identify as bisexual and tend to identify more toward the heterosexual end of the sexual orientation spectrum.
6. Determine if receiving “good” and effective training in the field of psychology facilitates LGB identity development forward in a healthy way.

Recommendations for Trainees

In order to gain a sense of empowerment within the training environment, there are a number of recommendations that can be made to both LGB and heterosexual trainees.

Recommendations for Heterosexual Trainees

1. Request that your program and training sites provide some education on LGB issues.
2. Ask your fellow LGB classmates and colleagues how you can best support them in the professional environment.
3. Take some time to immerse yourself in LGB culture by attending LGB-specific events. This will allow you to gain a better understanding and perspective of LGB individuals in general.

Recommendations for LGB Trainees

1. Consult with “safe” professors, classmates, and colleagues about the perceived safety of certain training environments.
2. Offer to provide education components or seminars on LGB issues.
3. Join LGB-affirmative groups in order to maintain perspective of your identity.
Reflections

As a lesbian psychologist-in-training, I have experienced much of what the participants within this study reported, sometimes all too often. From feeling like “lesbian” was a taboo topic to bring up in supervision and the shame and anxiety any perceived dismissal of this topic provoked, to feeling small because of the condoning of heterosexism within a training setting -- all of this impacted my development as a psychologist. As I transcribed the interviews there were a number of times that I felt so very connected to the participants and validated; other times I wept because it is disheartening to hear how, no matter where we grew up or live or train, LGB stereotypes, prejudice, heterosexism, and in some cases, outright homophobia, still exist. In order to regain my composure, I referred back to the questions at hand, rather than joining the participant in their pain.

I, like the participants in this study, have had to persevere and work hard at keeping my self-esteem intact despite these experiences. Like some of these participants, I have also had positive experiences as an LGB supervisee. One in particular that I reflect on often is explaining to one particular supervisor how I came out to a questioning client, utilizing a make-shift continuum drawn roughly on a piece of paper, and then placing myself on the continuum along with my own label for myself: “lesbian.” My supervisor stated that she wanted to do this in our supervision as well! She then proceeded to place herself on the continuum and label herself: “heterosexual.” This felt so absolutely validating and supportive that I was never afraid or anxious to bring up anything in supervision with her!
Throughout this lengthy and intense project I have found corroborating
evidence in my own life of the lack of knowledge and support for LGB
individuals, including LGB psychologists-in-training. As a “doctoral candidate in
psychology,” and as a supervisor myself, I hope to continue to add to the literature
and awareness of the needs of the LGB supervisee.
Hello,

My name is Cheryl Stolz, M.A. I am a doctoral student in Counseling Psychology at the University of North Dakota. I am contacting you to ask for your help in my dissertation research on experiences of gay, lesbian, and bisexual counseling and clinical psychologists-in-training in supervision. Eligible participants include doctoral-level counseling and clinical students who have had at least two semesters of clinical supervision.

I ask that you please forward the attached message to all students within your department. As not all individuals are “out” as gay, lesbian, or bisexual, sending this email to all students allows each individual the opportunity to self-select to participate in this study. If you require more information or have any questions, please contact me directly at cheryl.stolz@und.edu.

Thank you,

Cheryl L. Stolz, M.A.
Doctoral Student (Ph. D.)
Department of Counseling Psychology
University of North Dakota
Montgomery Hall 326
Grand Forks, ND, USA 58202
cheryl.stolz@und.edu

Dear Counseling or Clinical Psychology Graduate Student,

Your assistance is requested for a research study being conducted at the University of North Dakota. The study is being conducted by a doctoral student, Cheryl L. Stolz, M.A., under the faculty advisement of Dr. David Whitcomb.

The current study hopes to explore the experiences of gay, lesbian, and bisexual (GLB) counseling and clinical psychologists-in-training in supervision. Eligible participants include doctoral-level counseling or clinical students who have had at least two semesters of clinical supervision. The participants will be interviewed via telephone with regard to their experiences, with the interview taking approximately 1 to 2 hours. Regardless if you choose to participate or not, you may enter your name into a draw for $100 U.S.
Please note that participation in this study is completely voluntary and anonymous; name and other identifying information will not be linked to the responses in any way. Access to any data will be limited to the principal investigator, the faculty advisor, and the individual transcribing the interviews. All data will be stored in a password protected computer, under the control of the principal investigator. Results of this study will be helpful in furthering the understanding of GLB psychologists-in-training experiences and barriers as they develop as mental health professionals and in their GLB identity.

Interested participants can contact the principal investigator, Cheryl Stolz, at cheryl.stolz@und.edu. Thank you for your time and consideration of this matter. Your participation is greatly appreciated.

If you have any concerns or questions regarding completing this study or the results of this study, please contact the principal investigator, Cheryl L. Stolz at cheryl.stolz@und.edu. Alternatively, you may contact the faculty advisor, Dr. David Whitcomb at david_whitcomb@und.edu.

Sincerely,

Cheryl L. Stolz, M.A.
Doctoral Student (Ph. D.)
Department of Counseling Psychology
University of North Dakota
Montgomery Hall 326
Grand Forks, ND, USA 58202
cheryl.stolz@und.edu

This research study has been reviewed by the Institutional Review Board, University of North Dakota. For questions regarding the rights as a research participant, please contact the University Office of Research Development and Compliance by phone (701) 777-4278.
### APPENDIX B
PARTICIPANT DEMOGRAPHIC SUMMARY TABLE

<table>
<thead>
<tr>
<th>Part. #</th>
<th>Gender</th>
<th>Race/Ethnicity</th>
<th>Program of Study</th>
<th>Type of Program</th>
<th>Program Location</th>
<th># of Semesters of Supervision</th>
<th># of Supervisors</th>
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## APPENDIX C
### PARTICIPANT SEXUAL ORIENTATION AND SASO TABLE

<table>
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<tr>
<th>Participant #</th>
<th>Gender</th>
<th>Sexual Orientation</th>
<th>Years “Out”</th>
<th>Sexual Interests</th>
<th>Sexual Orientation Identity (“I consider myself...”)</th>
</tr>
</thead>
</table>
| P1            | F      | Queer/Bisexual     | 11          | 3              | 1. Very homosexual  
2. Mildly heterosexual  
3. Completely bisexual |
| P2            | M      | Gay/Queer          | 15          | 3              | 2. Very homosexual  
3. Not at all heterosexual  
4. Not at all bisexual |
| P3            | F      | Lesbian            | 5           | 3              | 2. Significantly homosexual  
3. Slightly heterosexual  
4. Slightly bisexual |
| P4            | F      | Lesbian            | 4           | 2              | 2. Very homosexual  
3. Slightly heterosexual  
4. Slightly bisexual |
| P5            | M      | Gay                | 6           | 3              | 2. Very homosexual  
3. Slightly heterosexual  
4. Slightly bisexual |
| P6            | F      | Lesbian            | 17          | 3              | 2. Very homosexual  
3. Slightly heterosexual  
4. Slightly bisexual |
| P7            | F      | Lesbian            | 15          | 3              | 2. Very homosexual  
3. Slightly heterosexual  
4. Slightly bisexual |
| P8            | F      | Bisexual           | 8           | 5              | 2. Moderately homosexual  
3. Moderately homosexual  
4. Completely bisexual |
| P9            | F      | Lesbian            | 5           | 2              | 2. Very homosexual  
3. Not at all heterosexual  
4. Not at all bisexual |
| P10           | F      | Bisexual           | 23          | 5              | 2. Significantly homosexual  
3. Moderately heterosexual  
4. Very bisexual |
| P11           | M      | Bisexual           | 7           | 4              | 2. Significantly homosexual  
3. Moderately homosexual  
4. Very bisexual |

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<thead>
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<th>P12</th>
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<tr>
<td>P14</td>
<td>M</td>
<td>Gay</td>
<td>17</td>
<td>2</td>
</tr>
</tbody>
</table>

Sexual Interests and first question of Sexual Orientation Identity:
1. I have had no sexual interests during the past year
2. Exclusively homosexual
3. Predominantly homosexual, only incidentally heterosexual
4. Predominantly homosexual, but more than incidentally heterosexual
5. Equally heterosexual and homosexual
6. Predominantly heterosexual, but more than incidentally heterosexual
7. Predominantly heterosexual, only incidentally homosexual
8. Exclusively heterosexual

Questions 2, Sexual Orientation Identity, response items:
1. Not at all homosexual
2. Slightly homosexual
3. Mildly homosexual
4. Moderately homosexual
5. Significantly homosexual
6. Very homosexual
7. Completely homosexual

Questions 3, Sexual Orientation Identity, response items:
1. Not at all heterosexual
2. Slightly heterosexual
3. Mildly heterosexual
4. Moderately heterosexual
5. Significantly heterosexual
6. Very heterosexual
7. Completely heterosexual

Questions 4, Sexual Orientation Identity, response items:
1. Not at all bisexual
2. Slightly bisexual
3. Mildly bisexual
4. Moderately bisexual
5. Significantly bisexual
6. Very bisexual
7. Completely bisexual
APPENDIX D
TOPICS OF INTERVIEW

Questions that will be asked in the interview process will be comprised of the following topics:

(a) Where you are in terms of being “out” as an LGB.

(b) What your overall experience in graduate school has been like.

(c) What your overall experience with supervisors has been like.

(d) Coming out to supervisors.

(e) Impact of coming out/not coming out to supervisors on your work.
APPENDIX E
FOLLOW-UP SUPERVISION QUESTIONNAIRE

(1) Where you are in terms of being “out” as a LGB? (Do SASO scale)

(2) What have your overall experiences been like in graduate school?
   As an LGB psychologist-in-training, what has been your overall experience in graduate school in terms of (a) support, (b) barriers, (c) progress?

(3) What have your overall experiences with supervisors been like?
   As an LGB psychologist-in-training, what has been your overall experience with supervisors within your training? What salient feelings have been evoked?
   What are some things you would hope for from your supervisor in terms of support?
   To your knowledge, have you ever worked with an LGB supervisor?
   a. If so, has the concordance/discordance of sexual orientation between you and your supervisor ever been discussed in the relationship?
   b. If so, how was it addressed/discussed?

(4) Have you come out to your supervisor(s)?
   What was it like/Would it be like to come out to supervisors?
   c. How was coming out/might coming out be met by a supervisor?
   d. If you have come out as LGB to your supervisor(s) how has your relationship changed since that time? (Burkard, et al., 2005).

(5) What, if any, impact of coming out/not coming out to supervisors has this had on your work as a psychologist-in-training?
   As an LGB psychologist-in-training, how has your supervisory experience impacted your work/could impact your work with clients who either identify as LGB or are questioning their sexual orientation?

(6) What, if any, impact has these supervisory relationships had on how you see yourself as LGB?
APPENDIX F
THE SELL SCALE OF SEXUAL ORIENTATION

Biological Sex
1. What is your biological sex (choose one answer): a. Male  b. Female

Sexual Interests – The following seven questions are asked to assess the intensity and frequency of your sexual interest in men and women. Consider times you were: 1) sexually attracted to a man or a woman; 2) had sex fantasies, daydreams or dreams about a man or woman; or 3) were sexually aroused by a man or woman.

2. During the past year, my sexual interests have been (choose one answer):
   a. I have had no sexual interests during the past year.
   b. Exclusively homosexual.
   c. Predominately homosexual, only incidentally heterosexual.
   d. Predominately homosexual, but more than incidentally heterosexual.
   e. Equally heterosexual and homosexual.
   f. Predominately heterosexual, but more than incidentally heterosexual.
   g. Predominately heterosexual, only incidentally homosexual.
   h. Exclusively heterosexual.

Sexual Orientation Identity – The following four questions are asked to assess your sexual orientation identity.

3. I consider myself (choose one answer):
   a. I do not identify with any sexual orientation.
   b. Exclusively homosexual.
   c. Predominately homosexual, only incidentally heterosexual.
   d. Predominately homosexual, but more than incidentally heterosexual.
   e. Equally heterosexual and homosexual.
   f. Predominately heterosexual, but more than incidentally heterosexual.
   g. Predominately heterosexual, only incidentally homosexual.
   h. Exclusively heterosexual.

4. I consider myself (choose one answer):
   a. Not at all homosexual.
   b. Slightly homosexual.
   c. Mildly homosexual.
   d. Moderately homosexual.
   e. Significantly homosexual.
f. Very homosexual.
g. Completely homosexual.

5. I consider myself (choose one answer):
a. Not at all heterosexual.
b. Slightly heterosexual.
c. Mildly heterosexual.
d. Moderately heterosexual.
e. Significantly heterosexual.
f. Very heterosexual.
g. Completely heterosexual.

6. I consider myself (choose one answer):
a. Not at all bisexual.
b. Slightly bisexual.
c. Mildly bisexual.
d. Moderately bisexual.
e. Significantly bisexual.
f. Very bisexual.
g. Completely bisexual.
APPENDIX G
PARTICIPANT QUESTIONNAIRE

Please note that answers to all questions are strictly confidential. However, if you are uncomfortable answering any of the following, you are not required to respond. Your participation is entirely voluntary.

Age: _______

Gender: M ____ F ____ Other ______

Race:  African American/Canadian ______
Asian American/Canadian ______
Caucasian ______
Hispanic ______
Native American/Aboriginal ______
Other ____________________________ ______

Sexual Orientation:
Gay ______
Lesbian ______
Bisexual ______

Program of Study:
Counseling Psychology ______
Clinical Psychology ______

Degree(s) Conferred to Date:
B.A. ______
M.A. ______
Other ____________________________

# of Semesters of Supervision: ______

# of Supervisors: ______
APPENDIX H
CONSENT FORM

You have been invited to participate in a study concerning how doctoral psychology students experience supervision. The principal investigator of this study is Cheryl Stolz, M.A. of the University of North Dakota, Department of Counseling. The purpose of this project is to come to a more in-depth understanding of how gay, lesbian, and bisexual doctoral students in psychology experience supervision, and whether sexual orientation has been discussed or been an issue in supervision. The study consists of interview questions that will focus on understanding gay, lesbian, and bisexual doctoral students' perceptions of supervision in light of sexual orientation issues as a whole. Additionally, participants will be asked to complete a short demographic form as well as a identity development questionnaire. Together, the research will take approximately 2 hours. The interview will be audiotaped and transcribed, but your name will not be on the tape, transcript, or write-ups related to the study. We will send you the transcript of the interview (once completed) for your review, clarification, and/or correction. The principal investigator will contact you by phone (15 minutes) for this feedback a week after you receive the hardcopy of your transcript.

Your participation in this study will help psychology professionals better understand minority issues in supervision. In turn, it is hoped that this information will better inform training models within psychology. Benefits to you include the opportunity to reflect on your experiences as a psychologist-in-training.

The principal investigator will actively safeguard your confidentiality in this study by not associating your name with any of the tapes, transcripts, or forms that you fill out, and conducting the study in private. Additionally, the audiotapes will be completely destroyed within 12 months of the interview (and stored in the meantime in a locked and secured cabinet). Likewise, survey data and transcripts will also be stored in a locked and secured cabinet for a period of at least three years, then shredded and destroyed. Informed consents (this form) will be collected separately and stored separately in a locked file, then destroyed after at least three years as required by law. Only the principal investigator, her advisor, select faculty at UND, and those who make sure researchers respect the rights of research participants (Institutional Review Board auditors) will have access to the data. There is a small chance that some of the information asked about may cause some discomfort. You may choose to skip any of the questions asked during the interview and may stop the interview at any time.

Your decision to participate in this study is strictly voluntary. If you have any concerns or questions about the study, please address them with the person interviewing you, or contact Cheryl Stolz (701-777-9768) or Dr. David Whitcomb (701-777-2729). If you have any additional questions you can contact the University of North Dakota Institutional Review Board at (701) 777-4278. Thank you for your consideration!
I have read and understand the above information. I have also been given a chance to ask any questions I have and feel they have been answered to my satisfaction. A copy of this form has been given to me for my records. By signing below I agree to participate and understand that I may stop the interview at any time.

<table>
<thead>
<tr>
<th>Date</th>
<th>Name of Participant (please print)</th>
<th>Participant Signature</th>
</tr>
</thead>
</table>

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REFERENCES


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