



Waikato Journal of Education

Journal website: <http://wje.org.nz>

ISSN 2382-0373

Published by the [Wilf Malcolm Institute of Educational Research](#)



Volume 28, Issue 1, 2023

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Editor: Kerry Earl Rinehart

Cite this article: Collens, P., & du Preez, E. (2023). Lesbian, gay, bisexual, transgender, intersex, and queer concerns in professional psychology education. *Waikato Journal of Education*, 28(1), 141–154.

<https://doi.org/10.15663/wje.v28i1.978>

Link to this volume: <https://doi.org/10.15663/wje.v28i1>

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Lesbian, gay, bisexual, transgender, intersex, and queer concerns in professional psychology education

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Abstract

Best practice guidelines for psychologists working with lesbian, gay, bisexual, transgender, intersex, and queer+ (LGBTIQ+) people and position statements against “conversion therapies” have been published internationally. These call for professional psychologist education to develop competence for work with this community, but studies show variability and lack of inclusion of LGBTIQ+ content in professional programmes in higher education institutions. A critical narrative review examined approaches to the inclusion of LGBTIQ+ concerns in the education of psychologists. A systematic literature search identified 33 papers for review. Synthesis of findings highlighted benefits and challenges of the cultural competence approach to LGBTIQ+ curricular inclusion; a contested pedagogic space relating to religious belief, homophobia, and sexualities; a shift in psychology to include resilience-based frameworks of sexuality and gender diversity; and finally disaggregation of the LGBTIQ+ umbrella with emergence of transgender and gender diversity focused research. Lack of research relating to people with intersex variations and the need for LGBTIQ+ representation/voices in this research area were evidenced.

Keywords

LGBTIQ+; psychology education; psychologist training; psychological practice; curriculum

Over recent decades political action of lesbian, gay, bisexual, transgender, intersex, queer and other diverse sexualities and genders (LGBTIQ+) and human rights lobbying groups spurred a positive revolution in public discourse and constitutional rights. Within the discipline of psychology, a parallel transformation in conceptual and clinical understandings of LGBTIQ+ people emerged. The historic pathologising perspective was challenged and replaced by one that recognises gender, sex, and sexuality diversity (GSSD¹) as normal and healthy variations of human experience (American Psychological Association, 2018 [APA]; British Psychological Society, 2019 [BPS]). However, despite the introduction and implementation internationally of best practice guidelines for psychologists working with GSSD, research indicates systemic obstacles to the provision of culturally competent psychological care for this community. In this regard, a key area relates to the education of psychologists. Issues here include lack of mandatory and inadequate coverage of LGBT content in postgraduate psychology



curricular (Fell et al., 2008; Riggs & Fell, 2010; Rutherford et al., 2012); lack of research and guidance on LGBT curriculum content, design, and development for training programmes (Davy et al., 2015); and lack of training in the healthcare needs of these communities (Adams et al., 2013; Institute of Medicine, 2011; Boroughs et al., 2015; Lyons, 2010).

The need for intersectional frameworks in the education of the psychological workforce to take account of the impacts of colonialism, racism, and of multiple socio-cultural and LGBTQ+ identities has also been highlighted by various New Zealand (NZ) and Australian academics and authors (Tan et al., 2019; Riggs et al., 2015; Treharne & Adams, 2017). During the late 1960s to 1980s the changing political and cultural climate in Aotearoa NZ was the background to increased Māori activism which culminated in the 1975 Land March. This historical period saw the emergence of more liberal political movements, including the gay and lesbian rights movement. Ngahuia Ta Awekotuku and Donna Awatere were influential in supporting a network of Māori women who advocated against racial and sexual discrimination (du Preez & MacDonald, 2016). Significant work has been done to develop postgraduate psychology curricula in Aotearoa NZ for an indigenous psychology (Waitoki, 2016; Britt, 2019); however, there is a lack of research examining the integration of cultural, sexuality, and gender identity concerns in the education of professional psychologists in this context.

The psycho-social health inequities, the need for culturally responsive psychological healthcare, and the issues related to education of psychologists to work with LGBTIQ+ people provide the rationale for the current review. This paper reviews international literature to explore the question: how are the concerns of LGBTIQ+ people addressed in the education of professional psychologists in higher education? Although the aim of this review is not to examine the history of GSSD within Aotearoa NZ, this project has emerged from this geographical context. As such it is vital to acknowledge that sexuality and gender diversity have always been part of Māori culture, that *takatāpui*ⁱⁱⁱ behaviours appear within traditional Māori narratives (Kerekere, 2017), and that silencing of this reality has been related to the effects of colonisation (Aspin & Hutchings, 2007; Kerekere, 2017). The authors of this paper identify within the rainbow/queer community, are university lecturers in Aotearoa NZ, and psychologists.

Methodology

Aim

In this narrative review we examine and identify approaches to the inclusion of LGBTIQ+ concerns in the education of psychologists. Two research questions informed the review: i) what approaches are employed/recommended for the education of psychologists to prepare them to work with LGBTIQ+ people? and ii) what are the issues pertaining to the inclusion of LGBTIQ+ concerns in the education of psychologists?

Strategy for identifying and selecting papers

The methodology for this narrative review was informed by de Klerk and Pretorius (2019), Grant and Booth (2009), and Saunders and Rojon (2011). A systematic search was conducted in May 2020 using search terms derived from previous literature (see appendix 1) and the current authors' expert knowledge. A database search on ERIC, APA PsycArticles, and OvidEmcare returned 821 results. After application of limiters, including published in English language, in a peer-reviewed academic journal and between 2005 and 2020, and removal of duplicates, 117 articles were returned. A search on APA PsychINFO returned 1,481 results, and after application of the previously stated limiters and removal of duplicates, 77 results were returned. Titles and abstracts from the above searches were assessed against inclusion/exclusion criteria (see below) and irrelevant sources were removed. For the next stage

of screening, the full texts of all remaining returns were assessed; this led to identification of eligible papers.

Criteria for inclusion

Papers were included if they met the following criteria:

- a. Provided a response to two key questions:
 - i. What are the approaches employed in the education and training of psychologists regarding LGBTIQ+ people, and/or
 - ii. What are the issues pertaining to delivery and inclusion of LGBTIQ+ content in the training of psychologists?
- b. Focused on psychology in healthcare contexts (e.g., clinical or counselling psychology)
- c. Empirical studies, literature reviews, and expert opinion pieces in the form of commentary, response paper, or theoretical/discussion paper
- d. Interdisciplinary higher/tertiary education empirical research if the sample included psychology students, teachers, programmes, or courses.

Criteria for exclusion

Papers were excluded if they

- a. Addressed “counselling” only, rather than “counselling psychology”
- b. Focused on psychology in non-healthcare contexts, e.g., school psychologists
- c. Focused on veteran or sexual health
- d. Focused on sexual behaviour in general population
- e. Lack of sufficient detail relating to inclusion criterion (a) above
- f. Sample included psychology students, but the focus of the study did not relate specifically to education of psychologists.

After screening for relevance and exclusion of duplicates, 33 papers were identified for inclusion in this review. Four key themes were identified in the literature through an iterative process of repeated readings of full articles, mapping of key content, concepts and ideas, and searching for and identification of patterns of meaning that were significant to the research question.

Findings

Of the 33 papers included, eight were empirical studies (Bidell, 2014; Case & Stewart, 2010; Davy et al., 2015; Fell et al., 2008; Graham et al., 2012; Riggs & Fell, 2010; Rutherford et al., 2012; Sherry et al., 2005) and the remaining 25 included literature reviews, commentary, response, discussion paper, and/or a series of recommendations based on expert opinion (Biaggio, 2014; Bieschke & Dendy, 2010; Bieschke & Mintz, 2012; Boroughs et al., 2015; Case et al., 2009; Cochran & Robohm, 2015; Davis, 2014; Forrest, 2012; Haldeman & Rasbury, 2014; Hancock, 2014; Hope & Chappell, 2015; Institute of Medicine, 2011; Kassel & Martino-Harms, 2014; Lyons, 2010; Lytle et al., 2014; Martell, 2015; Matza et al., 2015; Oransky et al., 2019; Pantalone, 2015; Phillips, 2014; Russell & Bohan, 2014; Shipherd, 2015; Singh & Dickey, 2016; Vaughan & Rodriguez, 2014; Worthington, 2010). All 25 of the non-empirical articles originated from the US, and of the eight empirical studies, four originated from the US, one from the UK, two from Australia, and one from Canada. This highlights a US-centric perspective and a lack of research from Aotearoa NZ. Nomenclature employed in the literature for the target group included “LG”, “LGB”, “LGBT”, “diverse sexual orientations”, “sexual and gender minorities”, “transgender”, and “trans and gender non-conforming” (“TGNC”). There was no reference

to people with intersex variations, revealing a lack of research on the training of psychologists around provision of care for this group of people. The nomenclature and identity terms employed across the studies revealed changes across time; some terms are now “out-of-date” and subject to contemporary critique. In our narrative of findings, the more inclusive and expansive term “transgender and gender diverse/diversity” (TGD) (Tan et al., 2020) will be used, unless terms are referenced to specific sources. Early papers focused on sexualities; in 2009 the first article with a specific focus on transgender people was published. From 2016 there were no publications focusing on diversity of sexuality. This may reflect changes in the field of GSSD research and western social context where there has been growing visibility and recognition of the health and psychosocial needs of transgender people. This change is significant and important and might also render invisible the ongoing research on the needs and experiences of cisgender sexuality diverse peoples.

The articles reported on and discussed a range of pedagogic and curricular approaches and revealed problematics pertaining to inclusion of LGBTQ+ⁱⁱⁱ concerns in the training of psychologists. The four themes identified were

- Multicultural approach and cultural competencies: benefits and challenges
- Values related conflicts: religious belief, homophobia and sexual diversity
- Positive psychology perspectives on sexuality and gender diversity
- Disaggregation of the LGBTQ+ umbrella—TGD curricular initiatives.

A multicultural approach

Many articles referred to pedagogic and curricular approaches to inclusion of LGBTQ+ concerns through the lens of cultural or multicultural competence (Bidell, 2014; Boroughs et al., 2015; Fell et al., 2008; Graham et al., 2012; Hope & Chappell, 2015; Lyons, 2010; Martell, 2015; Matza et al., 2015; Riggs & Fell, 2010; Shipherd, 2015). Definitions and frameworks of cultural competence varied, but the tripartite model of multicultural competencies was by far the most cited (Sue et al., 1982). Some authors extended or reframed the multicultural competencies model, and in doing so distinguished specialist competencies pertaining to psychological work with LGBTQ+ people. Terms used for this included “LGB-affirmative counsellor competency” (Bidell, 2014, p. 133), LGBT competencies (Cochran & Robohm, 2015), and LGBT cultural competence (Boroughs et al., 2015; Pantalone, 2015). Hope and Chappell (2015) extended the model to include two additional domains of psychologist competence, namely action and advocacy. Cochran and Robohm (2015) explored the notion of action not only in relation to student capabilities, but also in terms of action/intervention at the level of faculty and institution. An in-depth review of empirical literature on client perspectives and of literature published by professional associations and experts in the field of psychology gave rise to 28 recommendations for standards to achieve and assess LGBT cultural competence across various levels of psychologist training (Boroughs et al., 2015). That review foregrounded the need for education to constantly evolve in relation to the everchanging healthcare policy, and legislative and socio-political contexts of LGBT lives.

Programme and curricular design

One of the ways that psychologist education has evolved in terms of curricular design has been through employment of this “multicultural lens” in which LGBTQ+ content is included in a diversity or multicultural course/module within a programme (Bidell, 2014; Graham et al., 2012; Sherry et al., 2005). The multicultural course historically focused on race and ethnicity only (Hope & Chappell, 2015), but over the past two decades, course content broadened and now covers a wide range of socio-cultural identities and their intersections. There are competing perspectives relating to the effectiveness

of multicultural or diversity courses for developing LGBTQ+ competencies. One study investigated the relationship between multicultural classes and LGB-affirmative competency and found that the former predicted improved multicultural competence but did not improve LGB-competence (Bidell, 2014). Data was collected through a range of self-report measures, and a sample of masters and doctoral counselling and psychology students ($N=286$) was recruited at nine US universities. A key critique of the multicultural course has been the high variability across courses and lack of sufficient coverage in some courses of LGBT content (Bidell, 2014). A US university-based study (Case & Stewart, 2010) revealed a different perspective. These authors compared heterosexual female student attitudes and prejudice in relation to completion of psychology diversity courses ($N=46$) or psychology courses with no LGBT content ($N=41$). Pre- and post-course measures were used for data collection and results indicated that diversity courses increased awareness of heterosexual privilege and support for same-sex marriage. There was no change on either variable for the comparison group. Diversity courses were thus found to increase student LGBT-cultural competence in relation to the “awareness” domain. However, the authors argued that courses dedicated exclusively to LGBT content might have greater effectiveness, and that infusion across the entire training programme into core courses could expose more students to these concerns.

The latter approach to infusion across programmes (including across courses/modules, supervision and practicum/internships) has been discussed elsewhere (Bidell, 2014; Case et al., 2009). A UK-based qualitative empirical study identified challenges and resistances at the level of policy, faculty, staff, and students (Davy et al., 2015). These researchers argued that infusion across the mainstream curricular could centre LGBT content and make it “more resistant to resistances” (Davy et al., 2015, p. 158). We suggest that this approach might also mitigate the burden of a single multicultural course/diversity-themed module attempting to address wide-ranging identities, competing cultural worldviews, and different forms of discrimination. A both/and curricular approach has also been advocated, with LGBT content to be delivered both in specialist/diversity courses and infused across mainstream curricular (Cochran & Robohm, 2015). Hope and Chappell (2015) proposed that different domains of competence be taught through different learning pathways, i.e., LGBT knowledge and awareness competencies be taught through a single course, but advocacy and action competencies be taught through infusion across the curricular. In summary, competing recommendations on best approaches to the education of psychologists for working with LGBTQ+ were identified in the literature with no definitive perspective emerging.

LGBTQ+ content in the multicultural course: Reinforcing marginalisation?

Critical perspectives in other fields of practice indicate that inclusion of LGBTQ+ content in multicultural or diversity courses only, is a form of marginalisation (Chapman & Gedro, 2009; Frank & Cannon, 2010). The inclusion of these concerns into multicultural/diversity courses might operate to shore up the hegemony of hetero- and cis-normativity of the wider psychology curriculum in which core courses are devoid of reference to diverse sexualities and gender identities/expressions. In a US-based study, only 21% of APA-accredited clinical ($N=61$) and counselling ($N=43$) PhD programmes reported integration of GLB issues into courses that were not specifically multicultural (Sherry et al., 2005). This highlighted the heteronormativity of professional training curricular at that time. The authors found that despite the heteronormativity of the core curriculum, almost a third of participants (training directors) viewed their programme as exemplary in relation to GLB issues. This dissonance, they proposed, might be linked to other programme strengths; for example, strong GLB research programmes or placements at GLB organisations. However, it might also indicate methodological issues of participant bias, socially desirable responses, and lack of an LGBT voice in the use of self-report measures with this participant group. This dissonance reflects findings from another US study of perceptions of clinical internship

training on doctoral programmes accredited with APA or Canadian Psychological Association (CPA) (Rodriguez-Menendez et al., 2017). Findings revealed that students rated the training in preparing them for work with LGBT people significantly lower than did faculty staff. This emphasises the need for research that takes account of a full range of stakeholders, including teaching staff, students, service users, and people who identify with the LGBTQ+ communities.

A further critique of the multicultural/diversity themed course is that these courses are often electives rather than mandatory (Bidell, 2014; Boroughs et al., 2015; Case & Stewart, 2010; Cochran & Robohm, 2015; Matza et al., 2015; Riggs & Fell, 2010). The corollary of such programme design is that students must self-select into study pathways to develop LGBTQ+ competence. However, those who do self-select may be those who already recognise the importance of LGBT mental health concerns (Rutherford et al., 2012), and/or who have attitudes and characteristics that predispose them to higher levels of competency for this group (Riggs & Fell, 2010). As such, the inclusion of LGBTQ+ content into multicultural courses may sustain lack of engagement by students who hold homo-/trans-phobic attitudes.

Multicultural approach and intersectionality

Teaching across diversity of identities and employing frameworks for understanding the intersection of identities was identified as one of the approaches to delivery of LGBTQ+ content in psychology. One study offered reflections on the value and challenges of employing an intersectional approach to teaching two diversity themed courses in a historically Black and Hispanic-serving university (Case & Lewis, 2012). The authors described a range of teaching methods, including inviting panel/guest speakers who identified as Black, trans, queer, gay, and allies. Findings indicated this could foster students' critical consciousness and that some students who pre-course indicated they were "open-minded" or "not bothered" by LGBT people (Case & Lewis, 2012, p. 268), post-course took up the position of LGBT ally and even potential activist. The authors also reported on student resistance to course content as one of the challenges.

Values-related conflicts: Religious belief, homophobia, and sexual diversity

The competing axes of diversity around claims for religious freedom versus the human rights of LGBTQ+ people have confronted educational institutions with a challenge. The education of psychologists has been troubled by the issue of values-related conflicts, where deeply held personal religious beliefs against same-sex behaviours/desires/relationships collide with ethical requirements to prevent discriminatory practices and to provide competent and affirmative healthcare for LGBTQ+ people (Bieschke & Mintz, 2012; Forrest, 2012). This issue was the focus of ten papers in the review, all of which were in the form of commentary, response, and/or theoretical discussion and argument.

In the US some psychologist education programmes affiliated to religious institutions have condemned homosexual conduct and these trainings have been strongly critiqued as contravening the code of ethics and the requirement within cultural competency guidelines to work in an LGBT affirmative manner (Biaggio, 2014). Haldeman and Rasbury (2014) commented that whilst religious identity can be the target of discrimination, it should not be employed to justify discriminatory behaviours/practice towards LGBT people. A review of six US-based APA-accredited programmes in religiously based institutions revealed that the programmes condemned what was referred to as "homosexual behaviour" or "forms of physical intimacy that give expression to homosexual feelings" (Biaggio, 2014, p. 93). This homophobic discourse was highlighted as a major barrier to developing graduates capable of competent practice for work with diverse sexualities. Students are given an impossible educational conundrum: to grapple with the scientific evidence and best practice guidelines

which underpin psychology and are clear that sexual diversity is a normal variation of sexuality and not pathological, whilst being taught it is unacceptable and morally condemned. Biaggio was unequivocal; such programmes should be strenuously challenged for providing learning contexts that violate the scientific foundations and ethical standards of the discipline of psychology.

The psychology profession and education institutes in the US have been subject to intense judicial intrusions into processes of establishing and ensuring standards for psychology training (Forrest, 2012; Haldeman & Rasbury, 2014). Historically this was the remit of mental health and psychology professions (Haldeman & Rasbury, 2014); however, court cases in the US (Keeton v. Anderson-Wiley, 2011; Ward v. Wilbanks, 2010; Ward v. Polite, 2012) were brought by students against institutions in relation to the education requirements regarding practice with sexually diverse clients. These cases centred around trainee psychologists claiming a right to refer or refuse to work with clients of diverse sexualities based on a conflict with their personal religious beliefs (Bieschke & Mintz, 2012; Forrest, 2012; Hancock, 2014; Kassel & Martino-Harms, 2014; Russell & Bohan, 2014). Mandating that a student changes their beliefs is clearly counter to freedom of thought and thus problematic as a resolution to this complex issue. However, psychologists in training are required to learn how to practise competently and ethically with sexually diverse clients, as per the professional guidelines, and therefore education programmes can require students to find a resolution to this conflict (Bieschke & Dendy, 2010). A range of pedagogic and curricular approaches have been proposed in the literature to respond to this issue. These are now discussed.

Educating trainee psychologists on the above court cases has been recommended to develop reflexivity, awareness, and knowledge of the legislative and ethical complexities in this area (Forrest, 2012; Kassel & Martino-Harms, 2014). Recommendations of two key articles that provide in-depth critical analysis of the cases appeared in the literature. One, written by the Director of APA Ethics Office from the perspective of a psychologist and a lawyer (Behnke, 2012), was suggested as a resource for staff involved in policy and curricular development for professional psychology education (Forrest, 2012). This examines the tension between students' rights to religious freedom and institutional/educator responsibilities for the evaluation of student competence to provide non-discriminatory care to all sub-groups of clients (Forrest, 2012). The other by Hancock (2014) was recommended as a teaching resource (Davis, 2014). In Hancock's paper, she provoked the discipline to think about whether the profession should serve the conscience of the individual practitioner or instead whether the practitioner ought to serve the conscience of the profession (Hancock, 2014). The author argued that the autonomy of the profession was being brought into question through politicised action that serves religious privilege. Cochran and Robohm (2015) support the argument that psychology as a profession should prioritise research evidence and data to underpin best practice in work with LGBT people, rather than permitting individual moral and religious perspectives to underpin best practice.

Teaching of the ethical acculturation model in psychology programmes was proposed as another approach (Bieschke & Dendy, 2010; Kassel & Martino-Harms, 2014). This model aims to support students in reconciling personal beliefs of their culture of origin with the values of the psychology profession. Such values include requirement of competence to provide non-discriminatory care to all client populations, including LGBQ. Researchers have argued that students cannot be allowed exemptions from specific training experiences or work with LGBQ clients, as this group represents a common social identity, not a clinical presentation that is rare and therefore outside the scope of a clinician's practice (Hancock, 2014; Kassel & Martino-Harms, 2014).

Bieschke and Mintz (2012) offered another resolution; a revised framework of multicultural competencies that includes two further related psychologist competencies. These were i) "demographic competency" (defined as the competence to work with diverse client demographics) and ii) "dynamic worldview inclusivity" (Bieschke & Mintz, 2012, p. 202). This was defined as the flexibility and capacity to work effectively and respectfully with clients whose worldviews are diametrically opposed to or differ significantly from one's own. The authors suggested that students should have the right to

be informed pre-admission of the requirement to attain these competencies in training, thus allowing potential students to self-select/de-select into applying to enter the profession on this basis.

Positive psychology perspectives on sexuality and gender diversity

Models of psychology historically framed the lives and experiences of people who are sexually and gender diverse through the lens of psychopathology and dysfunction, and more recently through the lens of deficit, with LGBTQ+ people positioned as “vulnerable”, “in need” and with high rates of mental health distress. The latter literature has been important to evidence the negative psycho-social effects of marginalisation and inequalities. However, there has been a lack of curricular content in psychology on the potential for stress related growth (SRG) and resilience in response to experiences of homo/bi/transnegativity (Lytle et al., 2014; Vaughan & Rodriguez, 2014). Vaughan and Rodriguez (2014) advocated for change at the level of psychology as a discipline, calling for inclusion of positive psychology in theory, practice, research, and training to inform understandings of LGBT people. Lytle et al. (2014) offered a specific conceptual integration of models drawing on the three-pillar model of positive psychology (Seligman & Csikszentmihalyi, 2000) and the minority stress model (Meyer, 1995; Meyer, 2003) as an approach to psychology education and practice with LGBT clients. Meyer (2015) argued that resilience was an integral part of any stress model or theory, and therefore should be an essential component to investigations to understand wellbeing and mental health in the LGBT community. Lytle et al. (2014) recommended curricular content to include pathways to building community strengths and positive social institutions to promote positive subjective experiences, resilience, and character strengths in the lives of LGBT people. A response by Phillips (2014) to Lytle et al. (2014) discussed the challenge of operationally defining a positive social institution in relation to LGBT education in graduate psychology and queried a definition that would focus only on inclusion of LGBT issues in assessment and training. The author called for consideration of pedagogic practices and policies that might scaffold particular character strengths and SRG for all students (including cis/hetero-normative and LGBT) in relation to sexual and gender diversity. Phillips (2014) called for engagement of LGBT students in empirical research, to understand how this group experiences psychology education in terms of a positive social institution for LGBT concerns.

Disaggregation of the LGBTQ+ umbrella – TGD curricular initiatives

With the publication of best practice guidelines for psychological practice with TGD people there has been recognition of the particularities of health care and psychosocial needs of this group (APA, 2015). The acronym LGBTQ+ captures several groups that have politically coalesced through a shared experience of discrimination. However, the healthcare issues and research needs for TGD and LGB people were historically elided, with the former being collapsed into the latter (Davy et al., 2015). Additionally, research employing the acronym LGBT often lacked focus on TGD people, thus rendering the latter invisible. In the current review, three articles reported on educational approaches to developing professional competence for psychologists in working with TGD clients (Case et al., 2009; Oransky et al., 2019; Singh & Dickey, 2016). Curricular content recommendations included definitions and terms, pronoun usage, and biased language (Case et al., 2009; Oransky et al., 2019); the minority stress model as it pertains to the lives of TGD people (Oransky et al., 2019; Singh & Dickey, 2016); and clinical evaluation for readiness for medical intervention (Oransky et al., 2019). A focus on development of practitioner reflexivity in training was advocated to support student awareness of cisnormativity, cisgender privilege, gendered experiences relating to power and marginalisation, and issues of self-disclosure in clinical work for trainees who identify as TGD (Oransky et al., 2019; Singh & Dickey, 2016). In one article, the third author identified as “trans” and shared from their own personal

experiences in the educational context (Case et al., 2009). This provided a critical voice in psychology research where the perspectives of TGD people have historically been absent. An interdisciplinary approach to programme delivery for gender affirmative training was also advocated, through including collaborations with and teaching from medical practitioners and social workers (Oransky et al., 2019). This aligns with outcomes from a Canadian study that examined how knowledge gained from experienced LGBT-identified mental health service providers could inform curricular initiatives in medical and healthcare education (Rutherford et al., 2012). A qualitative methodology was used, with a sample ($N=8$) derived from four fields of professional practice, including psychology. The study foregrounded the need for inter-professional and community collaborations between different healthcare disciplines and training programmes, and between healthcare providers and organisations.

Summary and conclusion

This paper provided in-depth discussion of key approaches, themes, and challenges for the inclusion of LGBTIQ+ concerns in psychologist education. We found a dominant US perspective and lack of research from Aotearoa NZ. This highlights the need for research from other socio-geographic regions to develop cultural specific understandings, including addressing the intersection of Māori and other cultural identities in relation to GSSD in psychology education. Most of the empirical studies employed self-report measures for data collection, and limitations here relate to issues of bias. This highlights the need for empirical research that employs data collection methods, measures, and samples that take account of a range of stakeholders, including teaching and faculty staff, students, and most significantly people who identify as LGBTIQ+. Data collection measures employed were dated and not reflective of contemporary constructions of LGBTIQ+ identities. This calls for research to develop measures that reflect current terminologies, the changing lexicon and terms that are used by Māori and Pasifika peoples to address the concerns of this cultural context. Changes over time in relation to the nomenclature employed in articles were reflective of the constantly evolving constructions of identities within these communities. We suggest that psychologist education should include teaching that enables students to understand this rapidly shifting lexicon, the Aotearoa NZ specific use of terms by Māori and Pasifika, and the implications for clinical practice with GSSD people.

A significant absence emerged in this review; there was a lack of research attending to the concerns of people with intersex variations and this foregrounds marginalisation of this group of people within the LGBTIQ+ umbrella. This highlights an urgent need for research in psychology education to explore the needs and concerns of intersex people.

The review revealed benefits, challenges, and competing ideas on the multicultural approach to inclusion of LGBTIQ+ concerns in psychology education. Curricular approaches recommended included teaching through a dedicated specialist LGBT course, through the multicultural course covering wide-ranging socio-cultural identities including LGBTIQ+, and through infusion of LGBTIQ+ content across the core psychology curriculum. One key challenge for psychology educators pertains to the intersection of religious and sexuality identities. Teaching students in the troubled territory of competing and irreconcilable worldviews relating to religiously underpinned homophobic beliefs, and the rights and needs of LGBQ people, was revealed as fraught and complex. A range of pedagogic approaches and resources were identified that can support institutions, staff, and students in understanding the complexities of this contested territory. Since the publication of articles (between 2010 and 2014) that explored this complex area, the BPS published revised best practice guidelines for working with Gender, Sexual and Relationship Diversity GSRD (BPS, 2019), which state that the personal discomfort of a practitioner is an “insufficient reason” not to accommodate or facilitate an identity or practice (BPS, 2019, p. 6). Legislative changes in some countries, including Aotearoa NZ, banning the so-called “conversion therapies” and the publication by national psychology organisations of position statements

opposing these therapies now provide a clear direction for professional psychology education in many regions of the world. Psychological practitioners working on the premise that diverse sexuality or gender identities are problematic and therefore to be changed or treated will find themselves in breach of codes of ethics and in some countries in breach of the law (Gerbut et al., 2020).

This review highlighted the call for re-visioning in the psychology curricular, to move beyond the tradition of a deficit focus, to include strengths, resilience, and positive psychology perspectives in frameworks and practice relating to LGBTQ+ people. Finally, the review revealed a shift in focus in the literature from only sexualities to sexualities and TGD, then to TGD-focused research only. The disaggregation of the LGBTQ+ umbrella reflects changes in social context and in the field of psychology with growing recognition of the specific needs of TGD people. The current authors suggest a need for research that takes a both/and approach. Thus, research that focuses on the meta-level of the communities of coalescence of gender, sex, and sexuality diversity, and research that focuses on the unique concerns and needs of the specific groups within that coalescence.

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Appendix

Search terms employed:

- gay OR lesbian OR bisex* OR plurisex* OR pansex* OR intersex* OR transgender* OR transsexual* OR queer OR genderqueer OR homosex* OR intersex OR sexual orientation OR gender identity OR sexual minority OR lgbt OR lgb OR sexuality OR gender divers* OR sexual divers* OR GSRD OR gender fluid OR transman OR transwoman

AND

- psychological practi* OR psycholog* OR postgraduate psychology OR psychological healthcare practi* OR counselling psycholog* OR counseling psychology* OR clinical psycholog* OR health psycholog*

AND

- education OR training OR curricul* OR teachin

ⁱ The acronyms GSSD, LGBTIQ+ and derivations/truncations of LGBTIQ+ are employed in this article to reflect acronym/s used in the cited literature. Where terms are considered outdated or have been problematised (e.g. transsexual), we have either placed terms in quotation marks or replaced them with contemporary terms that are employed in current literature.

ⁱⁱ takatāpui is an identity umbrella term that embraces Māori of diverse genders, sex characteristics and sexualities, and is related to whakapapa, mana and inclusion (see Kerekere, 2017).

ⁱⁱⁱ The acronym LGTBQ+ reflects the absence of reference to people with intersex variations in the articles.