

Value Conflicts in Counseling Muslim LGBT Clients: Muslim Counsellors' Experiences

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Abstract— The counselling profession has an affirmative stance towards LGBT clients. It is contradicting to the religious beliefs upheld by majority counsellors in the Muslim society. The difference between the stance of the counselling profession and religious beliefs create value conflicts among Muslim counsellors from the mainstream group. A grounded theory approach was used to explain how Muslim counsellors experience value conflicts in counselling Muslim LGBT clients. In-depth interviews were conducted with six counsellors at Public Institutions of Higher Education (PIHE) in Peninsular Malaysia. The findings revealed that the Muslim counsellors experienced three types of value conflicts; conflicting goals, conflicting roles, and conflicting interests. In overcoming the conflicts, they used three strategies; seeking information, prioritizing religious over professional values, and balancing between personal and professional interests.

Keywords— value conflicts, grounded theory, LGBT clients

I. INTRODUCTION

At present, counselling approaches and ethics widely used by Malaysian counsellors are originated from the United States. For example, Malaysian Board of Counsellors designed the latest Counsellors' Code of Ethics by referring to the American Counselling Association (ACA) Code of Ethics 2005. It has been stated in the Counsellors' Code of Ethics "... This Code of Ethics has been formed, drafted and modified based on the American Counselling Association Code of Ethics 2005..." [1]. Moreover, those who established counsellor education programs in Malaysia were professionally trained in the United States. Thus, the ACA's training models, curricula, textbooks and counselling theories were adopted [2].

The ACA encourages professional counsellors to use affirmative approach when providing counselling services to LGBT clients [3, 4]. Using affirmative approach requires a counsellor to accept, recognize and support the LGBT clients for who they are. Thus, it is prohibited to change the clients' gender identity and sexual preference. On the other hand, mainstream Muslims condemn LGBT individuals as their behaviours are against religious teachings [5, 6, 7]. Hence, Muslim counsellors from the mainstream group experience conflicts between their religious values (non-affirming) and the profession's collective values (affirming) in counselling LGBT clients.

Furthermore, professional counsellors also experience conflicts when providing counselling services to clients who have different values from them [8]. For instance, a heterosexual counsellor and a gay client have different values on same-sex acts. The conflicts happen as the counsellor's religious teachings view the acts as sinful [9]. Conflicts also exist when counsellors and clients fail to achieve mutual agreement on counselling goals [10, 11].

In the field of counselling and psychology, most literature on value conflicts consist of theoretical writings [4, 8, 11, 12, 13, 14, 15, 16]. Some of them provide an overview on the nature of value conflicts and legal cases related to the conflicts [4, 11, 14, 15, 16]. Only a few empirical writings are available on the issue of value conflicts [17, 18, 19]. This indicates the lack of empirical studies conducted on the issue.

Most studies focus on value conflicts that happened in counselling sessions with lesbian, gay and bisexual (LGB) clients or dealing with LGB issues [17, 20, 21, 22]. Some studies highlight conflicts that occurred when counselling clients who are irresponsible, orthodox and practice consensual sexual sadomasochism (BDSM) [10, 22, 23]. Thus, little is understood on value conflicts that occur when counselling Muslim LGBT clients experienced by Muslim counsellors.

II. METHODS

A. Grounded Theory Approach

A "theory" in a grounded theory research is a general explanation of a process, an action, or an interaction originated from participants' views on a phenomenon [24, 25]. However, it is not a "grand" theory such as the theory of human motivation which is applicable to a large number of people or situations [25]. It is also not a "minor working hypothesis" [26] such as a description for students in a school or classroom. Instead, it is a "middle range" [27] theory rooted from numbers of participants which provides a general explanation on a specific phenomenon. In this study, a grounded theory approach was used to explain how Muslim counsellors experienced value conflicts.

B. Participants

Participants of this study consisted of four female counsellors: Madam Diana, Madam Ina, Madam Karimah and Madam Rahmah (pseudonyms) and two male

counsellors: Mr. Nabil and Mr. Shah (pseudonyms). All of them work at a Counselling Services Centre of four selected Public Institutions of Higher Education. Only one counsellor (Mr. Shah) has more than twenty years experiences in providing counselling services, while others have less than ten years of experience. They were purposefully selected based on six inclusion criteria, which are: (a) self-identification as a Muslim, (b) employed as a counsellor or psychology officer in a professional role, (c) possess knowledge of counselling ethics, (d) have experiences in counselling LGBT clients, (e) working at Public Institution of Higher Education (PIHE) in Peninsular Malaysia, and (f) agree to participate in the study.

C. Procedure

Two steps were involved in obtaining participants of this study. First, the researcher used snow-ball sampling approach by inviting a Muslim counsellor known to have experienced conflicts in dealing with LGBT clients to recommend other Muslim counsellors who have had the same experiences. Individuals recommended were contacted to identify their interest in participating in the study, and at the same time, were also asked to recommend other counsellors who have had the same criteria. Next, the counsellors who were willing to participate in the study were contacted via telephone to set the date, time, and venue for the interviews.

All participants were interviewed in six separate settings. In each setting, the researcher used semi-structured interview style with open-ended questions. All the interviews were conducted from one hour until two hours. In order to get an in-depth data, two counsellors had been interviewed twice while another three were interviewed thrice. Due to health issues, a counsellor was interviewed once. Prior to the real interview, the researcher piloted the interview questions to a Muslim counsellor who works in a Private Institution of Higher Education. Then, the researcher modified the interview questions accordingly for the real interview.

Each session was recorded by using a voice recorder and the recorded verbal interviews were transcribed after the interview as suggested by [25]. Immediately after the interviews, analytic memos were written in order to document thoughts and insights and record formulations of themes and meanings [28, 29]. The researcher transcribed the interviews personally to allow for continued immersion in the data, and kept additional analytic memos of the process as well as thoughts and reactions of the data.

D. Data Analysis

In the analysis process, there were three stages of coding, namely; open coding, axial coding, and selective coding. In open coding, the data were reduced into separate parts. In the first phase of open coding, important concepts were identified within the data and each concept was given a descriptive level. As for the second phase, categories and sub-categories of the labelled concepts were created. In axial coding, the data were given meaning by forming relationships between categories. To form the relationships, Conditional Relationship Guide and Reflective Coding

Matrix were created. In selective coding, a storyline was written based on the Reflective Coding Matrix.

III. RESULTS AND DISCUSSION

The results are organized into three core aspects, namely, conflicts in counselling Muslim LGBT clients, challenges in counselling those clients, and strategies in overcoming conflicts and challenges.

A. Conflicts in Counselling Muslim LGBT clients

In giving insights and bringing about positive changes to LGBT clients, the Muslim counsellors were in conflicting situations. There were three conflicting situations that they experienced. The first situation occurred when there were clashes between counsellors' goal and clients' goal. This conflict is called conflicting goals. For example, a male to female transgender client wanted to hide his feminine characteristics but the counsellor wanted him to change them. Another example is when a gay client wanted to fix his homosexual relationship but the counsellor wanted him to discontinue the relationship. Mr. Nabil and Madam Karimah said:

The first thing that he said was to hide his activities... My counselling goal is as usual. I want to bring about changes. The first changes that I want is physical changes.

It means, he wants to improve the relationship... I have to say that the truth is... do not fix it. The best is to discontinue it.

Farnsworth and Callahan [11] categorized counsellor-client value conflicts into four; pre-emptive, adjacent, operational, and unarticulated. Pre-emptive conflict prevents a counsellor and a client from establishing a therapeutic relationship. It occurs at the initial stage of counselling as both counsellor and client have different therapeutic goals. Differences in the therapeutic goals occur due to differences on treatment-relevant values [10]. It means that both of them have different values on appropriate treatment goals to be achieved.

Being in the first conflicting situation led the counsellors to experience second conflicting condition which is called conflicting roles. It happened when there were clashes between their role as a counsellor and as a Muslim. As a counsellor, there was a need to help clients in resolving their issue which is to fix the homosexual relationship. However, as a Muslim, the counsellor had to fulfill religious responsibility by explaining religious view on the relationship. The aim was to influence clients to change their goal from fixing the relationship to discontinuing the relationship. The counsellors explained:

Conflict... For me, my conflict ... roles. Conflicting roles include as a counsellor that needs to follow exactly the counsellor's role... another role is I have to be firm in religious matters. (Madam Karimah)

From my point of view, ... maybe as a counsellor... because the client came with a problem, maybe I needed to help him in resolving the problem. But, on the contrary

I ... observed... I think that was not his problem. His problem... we need to find his real problem. His problem is his wrongdoing. (Madam Ina)

But actually the conflict ... How can I mention what is the real problem of the client...? From our religious perspective... That is my conflict. I guess so. (Madam Diana)

Conflicting interests is the third conflicting condition. The counsellors experienced this type of conflict when there were clashes between personal interest and professional interest. They were interested to explore clients' immoral activities such as prostitutions and homosexual relationships. Thus, they asked many questions to satisfy their curiosity, which is for their personal interest. However, the counsellors realized that they are not supposed to ask questions due to curiosity. This is to observe professional interest which is the clients' interest. The counsellors mentioned:

As a professional counsellor, sometimes we become unprofessional... Because as a professional, we are not supposed to ask questions due to curiosity. Just let him tells us what he wants to tell. Then, we just listen and find alternatives. (Mr. Shah)

But, we have not seen and done what he did. So, we are curious to know about it. When we have the intention... What had he done actually? What have customers done to him? How? When we asked the questions, we want to fulfill our curiosity. (Mr. Nabil)

At the beginning of the session, in reality the interesting part was what he wanted to share on what he did. We just wanted him to share anything that he did. That was what we feel interesting. (Mr. Shah)

Personal values are personal beliefs hold by a person on factors pertaining appropriateness, significance, and preserving integrity [30]. Individuals are rooted from religion, political ideology, family characteristics, ethnic and cultural background [11, 31, 32, 33]. On the other hand, professional values are described as orienting beliefs about what is good and appropriate that lead behavior across professional duties and socialisation [34]. Counsellors' professional values are listed in the ACA Code of Ethics [14]. The Code of Ethics stated clearly that the main duty of professional counsellors is to respect the dignity and promote the welfare of clients [35]. Thus, professional values prioritise clients' needs and interests over counsellors' personal needs and interests.

B. Challenges in Counselling Muslim LGBT clients

Other than being in conflicting situations, the counsellors had also been in challenging situations. The first challenging situations occurred when some LGBT clients came to counselling sessions with an expectation to change themselves. The society also have the same expectations that there must be positive changes in LGBT clients after attending counselling sessions. If there are no positive changes in the clients, they will question it. Madam Rahmah said:

Challenges or dilemmas that I faced... First, I need to face a perception that a client come to change himself. And when seeing a male-to-female transgender client comes to see a counsellor, people will say, "Eh! There are no changes." You know people's perception that when a client comes to see a counsellor, the client will change.

Other than getting high expectations from clients and society, the counsellors also anticipate their clients to go through positive self-change. Thus, the changes is expected to occur in each and every session. This expectation creates fear in the counsellors if clients do not change as they are expected. This is because clients' self-change is not dependent on counsellors' efforts but s also relies on clients' efforts. Counsellors are unable to assist if the clients refuse to apply effort towards change. Madam Ina stated:

The challenge is when we want him to change to be a better person. Then, we are actually afraid... if, client does not change as we expected. Because it is not the counsellor's responsibility fully to bring about change to him... Actually, we want our client to have . . . improvements from initial until subsequent session.

Some counsellors claimed that they have not attended any professional training on lesbian, gay, bisexual and transgender issues (LGBT) issues. They are not exposed to issues related to LGBT in the past when they were studying in higher educational institution and in their present workplace. The counsellors stated:

If it is related to this kind of relationship, I have not attended. (Madam Karimah)

But, training that really focuses on this issue, I think it has not been organized as yet. (Mr. Nabil)

But specific trainings on how to handle LGBT clients for PIHE counsellors have not been organized. (Madam Ina)

In addition, there is no training that expose counsellors to this type of cases. (Madam Rahmah)

No... I think when I was doing practicum, there was no exposure. Then, when I started to work, my friends also did not get exposure on this issue. We did not get any formal exposure that enable us to get guidance on this issue. (Madam Karimah)

Another challenging situation is due to lack of standardized procedures or guidelines to be followed by the Muslim counsellors. These guidelines are important to counsel Muslim clients who are involved in homosexual relationships and transgenderism. Furthermore, most researchers in Malaysia focused their studies on characteristics of transgender individuals. There is no specific techniques and strategies suggested in counselling transgender clients. The counsellors mentioned:

We have no guidelines... So, we have no specific standard to be used by Muslim counsellors in handling these cases. (Madam Diana)

Based on what is available, there is no specific way shown by them on how to deal with LGBT clients. Most of them focus on research or knowledge related to

characteristics of transgender individuals. There are no techniques suggested to deal with these people. (Mr. Shah)

C. Overcoming Conflicts and Challenges

In overcoming conflicts and challenges, the counsellors took initiatives to seek information from several means. Madam Rahmah did self-study immediately after meeting a transgender client for the first time. She studied Western approaches on how to overcome conflicts when counselling a transgender client who wants to undergo sex-change. As she perceived the Western approaches are not suitable to be implemented as a whole, she adjusted the approaches to be in line with her religious values. She described:

What I did, I just conducted self-study. It means, I read lots of research before handling the case. Before the transgender client came... During registration, when I saw his appearance... then, I started the session.

Of course, I refer to Western resources but I do not rely much on it. For Western society, they accept... They accept a man who wants to be a woman... The first thing I did when I read the resources is to evaluate the suitability in the local context. So, I adjusted to suit my client.

The initiative by Madam Rahmah is in line with the first step as suggested in the Model for Ethical Decision Making [36]. Due to the lack of knowledge related to LGBT issue, she gathered relevant information by reviewing professional literature. Knowledge in counselling LGBT clients can be increased by referring to reading materials such as textbooks, autobiographies, and journal articles. In addition, watching documentaries and attending professional lectures related to LGBT issues are also helpful [36].

Some counsellors also consulted others in overcoming conflicts and challenges. Mr. Nabil asked his transgender friends on how to deal with transgender clients. He also obtained additional information on transgender individuals such as hand signals that they use, payment received from their customers and activities conducted. As for Madam Karimah, she consulted her Head of Department (HOD) when handling a case that caused her to experience value conflicts. She asked for opinions on appropriateness of informing religious prohibition to clients in resolving conflicts. Madam Karimah was advised by her HOD to be firm in cases involving religious issues. Mr. Nabil and Madam Karimah mentioned:

Sometimes when I am uncertain, I asked him. I send a message via facebook. "Nyah! How are you doing? If a client has these characteristics, how to deal with him?" "Ooo... He is still new..." I have a transgender friend. Our friendship has lasted a long time. He gave lots of information to me on transgender individuals but I have to call him *nyah*. (Mr. Nabil)

Additional knowledge consists of many things... Hand signals... Payment maybe... His activities... (Mr. Nabil)

So, I cannot do anything. I think I need to consult others. I need to consult my HOD. I told my HOD about this. So, I want to ask a person who has experiences. If I need to handle a case like this, what should I do? (Madam Karimah)

After the session ended, I met my HOD who is much experienced. I asked him, "If I need to deal with a client like this, what should I do? His view... I asked for his opinion. "Do I need to tell the truth?", I asked him. My HOD gave his opinion. "We should have our own stance. Because this is related to religious issue. If it is related to other things, maybe we can agree with what the client chooses. But this thing, we have to inform him." (Madam Karimah)

Seeking consultation as a way to overcome value conflicts is congruent with Step Five in the Model for Ethical Decision Making [36] and congruent with findings of studies conducted by [20, 23, 37]. The findings show that counsellors reported overcoming value conflicts by consulting supervisors, colleagues, and friends. Good consultants have a clear picture on the conflicts, practice an ethical decision-making process and offer the core-conditions of client-centred approach [38]. They provide opportunities for counsellors to discover and be mindful on the impacts of values on the counselling process.

As suggested by her HOD, Madam Karimah overcome value conflicts by prioritising religious value over professional value. She prioritises religious value which is obedient to religious teachings over professional value of assisting a client. Obedient to religious teachings prevents her from helping the client in fixing his homosexual relationship. It also requires her to tell client on religious prohibition towards the relationship. Thus, she decided to advise the client that homosexual behavior is wrong and prohibited by religious teachings. Her action of prioritizing a value over another value is congruent with Rokeach Value Theory [39]. The theory suggested that an individual prioritises important value over less important value in overcoming value conflicts. Madam Karimah believed that religious value (obedient to religious teachings) is more important than professional value (helpful towards client). She mentioned:

But for me, between the responsibility as a counsellor and as a Muslim. I must prioritise my responsibility as a Muslim to give advice and to give reminder. Not scolding him but remind him in a nice way. For me, each counsellor has his own way in influencing clients to accept what he/she said.

Do you know religious view on people who... are involved in this kind of relationship? If you know, okay. If you do not know, I will explain to you.

When the client disclosed that he is involved in homosexual relationship, Madam Karimah told the client that his behavior is wrong from religious perspective. Then, she tried to change the client's behavior by influencing him to discontinue the behavior. From the perspective of Islamic Ethical Approach, she made an ethical decision by fulfilling her moral and social responsibilities towards Muslim [40].

As a Muslim counsellor, she is responsible in preventing a Muslim client from getting involved in a same-sex relationship as it is considered as the worst sinful act in Islam [5]. She stated:

I said ... do you believe that . . . there is punishment for what you are doing now?

What happened to people of previous generations (Sodom and Gomorrah) when they did this? What were the consequences? As for nowadays, what destroyed sinful people? I asked him to think of... Allah's punishment? Such as HIV, sexually transmitted diseases and so on. It is destructive.

However, she has violated the code of ethics by imposing values on her client and having intention to provide conversion therapy [41]. The American Psychological Association Task Force on Appropriate Therapeutic responses to Sexual Orientation provided evidences from recent studies that clients who undergo sexual orientation conversion therapy experienced negative consequences [42]. The consequences are self-reports of anger, anxiety, confusion, depression, grief, guilt and hopelessness. Thus, professional helpers are discouraged to use such therapy and practise as affirmative approach when dealing with LGBT clients.

In overcoming conflicts, some counsellors struggled to create a balance between their personal interest and professional interest. Some counsellors were curious to explore their clients' immoral activities and asked many questions. Consequently, the clients showed uncomfortable signs. To observe the clients' interest and to fulfill their curiosity need at the same time, they allowed their clients to share their immoral activities voluntarily. After the clients shared part of their activities, they asked questions based on what clients told them. The questions were asked gradually and not abruptly. The counsellors stated:

This is natural. In reality, we are curious to know.... At the beginning, I was also the same. But when I thought about it... Eh! This cannot be done as the client was uncomfortable. I tried to pull back. So that it is not obvious that we move forward so fast. So, let him share. So, okay he was comfortable. (Mr. Shah)

In the end, he revealed that... his greatest sugar-daddy is ... VIP. So, I was shock. I still did not capture who is the person. Just ignore it for a while so that I will not resemble as a reporter. (Mr. Nabil)

Give him opportunities to share when he wants to share. Maybe he will cut his story... Plot by plot...But... at last, he will share. It is just a turning point for us to ask questions depending on situations. If we start the story... or there is. . . summary... In the summary, maybe we can include a question. I learnt from that. (Mr. Shah)

In searching for the best strategy to overcome value conflicts, it is necessary for counsellors to prioritise clients' needs, interests and welfare as it is the profession's collective value [8, 14, 43, 44]. Thus, the counsellors should not counsel their clients with many questions as the clients would be uncomfortable. The client's discomfort indicates that their

needs, interests, and welfare have not been observed by counsellors. It also shows that ethical principles of nonmaleficence and beneficence have been violated. Asking too many questions might cause negative and harmful effects to the therapeutic relationships. Clients will feel that counsellors are interested in their privacy.

However, it is crucial for counsellors to create a balance between their personal value with clients' interests as assisting clients in achieving goals that are incompatible with counsellors' personal values has negative effects [11]. Individuals who performed forced compliance actions experienced dissonance that impairs performance in cognitive tasks [45]. As a consequence, negative affect increases and individuals contradict their responsibility [45, 46]. Thus, Muslim counsellors might contradict their responsibility for their acts if they are required to assist clients in achieving goals that not parallel with their religious values.

IV. CONCLUSION

This study has produced valuable insights on how Muslim counsellors experienced and overcome value conflicts in counselling Muslim LGBT clients. They experienced value conflicts as they counsel LGBT clients who are involved in activities prohibited by their religious teachings. The clients are involved in same-sex relationships, cross-dressing and prostitution. Some of the clients also have an intention to undergo sex-change. Thus, the Muslim counsellors experienced conflicts pertaining their clients' action and intention that may contradict with their religious beliefs.

Experiencing value conflicts is not a sign of deficiency or weakness. It is a normal process in counsellors' development when counselling LGBT clients. The clients come to counselling session with expected goals that conflict with counsellors' treatment goals. Conflicting goals occur as clients and counsellors have different values originated from various sources such as religion, culture, education, and socialisation. It is also normal for counsellors to have value conflicts when their religious belief is inconsistent with their belief on professional values. The religious belief is rooted from religious teachings. On the contrary, the belief on professional values is instilled through educational training and professional socialisation. The inconsistency of beliefs cause the counsellors to be in a state of imbalance called "cognitive dissonance" [47].

The findings revealed that all the Muslim counsellors are been exposed to LGBT knowledge both in undergraduate and postgraduate programs. In assisting future counsellors to be competent in counselling LGBT clients, it is vital for counsellor education programs in Malaysia to include LGBT knowledge across curriculum. LGBT knowledge should be taught not only in multi-cultural counselling course but also in other courses. Hence, there is a need to introduce a specific course related to LGBT knowledge. The course should consist of topics related to acculturation, world-view and identity development of LGBT individuals. It is also important to include appropriate interventions, strategies, techniques, and psychological assessment in counselling LGBT clients.

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