Understanding Education in Sexuality Counseling from the Lens of Trainees: A Critical Examination and Call for Increased Attention and Training

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Although sexuality counseling is an essential component in counselor education training, research demonstrates that counselors lack competence and willingness to explore sexuality issues with clients. Counselors must be ready to address sexuality issues to provide comprehensive and culturally competent care. Sexuality counseling education needs further exploration to inform future training and educational standards. This qualitative study uses thematic analysis to examine 524 reflective journals of counselors-in-training (CIT) engaged in a sexuality counseling course to inform future education, training, and clinical practice standards in this area. This study revealed themes reflecting common ways CIT matured personally and professionally through sexuality counseling education and identified critical factors and barriers that enhanced and hindered learning outcomes.

Keywords: sexuality, counseling, counselor education, CACREP

Introduction

Sexuality is an innate part of the human experience, impacting individuals throughout the lifespan (DeLamater & Friedrich, 2002). Throughout development, the expression of sexuality is a part of wellness and well-being. Myers, Sweeney, and Witmer (2000, p.252) define wellness as:

a way of life oriented toward optimal health and well-being, in which body, mind, and spirit are integrated by the individual to live life more fully within the human and natural community. Ideally, it is the optimum state of health and well-being that each individual is capable of achieving.

Wellness is inclusive of sexuality and sexual health. Despite the normalcy of sex as a construct and component of wellness, sexuality and sexual health issues remain stigmatized, even within the counseling profession (Montejo, 2019). Clients struggling with sexual dysfunctions are often hesitant to discuss or openly disclose sexual concerns, which leaves clinicians less likely to clinically diagnose these concerns (Cleveland Clinic, 2020). Further, research has shown that many clients lie about sexuality issues in counseling (Blanchard & Farber, 2015). This reticence, in turn, leaves the task of broaching sexuality-related concerns to the counselor.

One of the most significant limitations in sexuality counseling is the lack of well-trained professionals to address this area’s growing need effectively (Montejo, 2019). Behun et al. (2017) reports uncertainty regarding counselors’ competency in working with client concerns related to human sexuality. Research has shown that unless specifically requested, mental health professionals avoid addressing, diagnosing, and treating sexuality issues in session, which includes sexuality growth and training opportunities due to personal discomfort (Hanzlik & Gaubatz, 2012; Miller & Byers, 2009; Ng, 2007). As a result of this discomfort, clinicians frequently evade dialogue about sexuality issues (Burnes, Singh, & Witherspoon, 2017; Dupkoski, 2012; Harris & Hays, 2008), particularly when the concerns extend beyond their content-based knowledge, further inhibiting client disclosure and dialogue around sexuality-related issues.
issues (Hanzlik & Gaubatz, 2012; Kelsey, Stiles, Spiller, & Diekhoff, 2013). Similarly, when counselors believe that they received inadequate training to work with the LGBTQIA+ community, they are more likely to refer personal life experiences to make up for their educational shortcomings (Owen-Pugh & Baines, 2013). Counselors must examine personal sexological worldviews (including beliefs, attitudes, and biases about sexuality shaped over a lifetime via societal, cultural, and political systems) to ensure that their personal biases do not interfere with the therapeutic relationship (Buehler, 2016; Sitron & Dyson, 2012). When these concerns are left unaddressed, the therapeutic relationship is impacted negatively, causing clients to experience greater shame and stigma regarding their sexuality-related concerns (Sanabria & Murray, 2018).

Sexuality knowledge and education increase sexual comfort, promote sex-positive attitudes in counseling, and decrease anxiety within sexuality dialogue (Juergens, Smedema, & Berven, 2009; Zeglin, Dam, & Hergenrather, 2017). Research has highlighted the need for sexuality-focused training to alleviate professionals’ discomfort that prevents their willingness to discuss sexual issues with clients (Harris & Hays, 2008). Yet, after an extensive search for the purpose of this study, research that focuses on sexuality, comfort, and knowledge of counselors in training (CITs) appears to be sparse in the counseling literature. Jeurgens et al. (2009) conducted a study to comprehensively understand clinical rehabilitation graduate students’ willingness to discuss sexuality with clients. Findings from this study demonstrated that sexuality knowledge, education, and attitudes toward the sexuality of persons with disabilities impacted their comfort and willingness to discuss sexuality with clients (Juergens et al., 2009). The literature has pointed to various rationales for students’ uncertainty when initiating sexual conversations with clients, including a lack of knowledge in training and preparation, counselor bias, and hesitation regarding competent and affirming language choices and comfort levels (Harris & Hays, 2008; Miller & Byers, 2010; Troutman & Packer-Williams, 2014).

While the reasons for CITs’ avoidance and discomfort with sexuality issues vary, there is consensus on the utility of integrating a sexuality class at the graduate level to help CITs develop knowledge and skills to work with sexuality issues (Harris & Hays, 2008). Scholars have suggested that including didactic sex counseling training in graduate programs is crucial, as professional counselors need to be prepared to address all dimensions of client sexual health (Blount, Booth, Webb, & Liles, 2017; Burns et al., 2017; Troutman & Packer-Williams, 2014). Given the challenges identified in the literature and the need for this critical aspect of human development to be addressed in counseling, examining student experiences in graduate counseling training may be essential to inform pedagogical practices and improve training standards.

### Ethics and Training Standards

Counselors look toward the American Counseling Association (ACA) as the overarching resource for professional connectedness and knowledge source for all counseling specialties. The ACA also provides counselors with the knowledge and ethical standards to act professionally and ethically as members. The ACA Code of Ethics (2014) encourages cultural competencies and non-biased practice within the profession. Since sexuality is a core aspect of human identity, counselors face multicultural implications and ethical obligations when working with clients presenting sexuality concerns. Sanabria and Murray (2018) encourage counselor education (CE) programs to include sexuality in their conceptualization of cultural issues by bringing attention to sexuality, the role of culture, and marginalized groups, such as LGBTQIA+ people. However, counseling programs often teach CITs to refer clients to other clinicians or specialists if they lack competency for a sexuality concern, which may harm the therapeutic relationship if a referral is made after rapport has already been built (Miller & Byers, 2010). These acknowledged biases (e.g., LGBTQIA+ prejudices) and unacknowledged biases (e.g., using inappropriate terminology, only focusing on male pleasure or sexual satisfaction, etc.) towards sexuality issues present an ethical concern and further marginalize clients, who may perceive these experiences as microaggressions (Shelton & Delgado-Romero, 2013).

The literature has pointed to the inadequacy of human sexuality education in graduate counseling and counseling psychology training programs (Burnes et al., 2017; Dermer & Bachenberg, 2015; Hanzlik & Gaubatz, 2012; Sanabria & Murray, 2018). The Council for Accreditation of Counseling and Related Educational Programs (CACREP, 2015) does not require specific coursework in human sexuality. However, it does state the following: students must be aware of the “etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders” (Section 5.C.2.b; p. 24); “human sexuality and its effect on couple and family functioning” (Section 5.F.2.e; p. 31); and “the impact of disability on human sexuality” (Section 5.H.2.h; p. 36). Dupkoski’s (2012) review of CE syllabi within the ACA-ACES Syllabus Clearinghouse discovered that “57 out of 395 syllabi, or 9.4%, included the word ‘sex’ in their content, but only four courses—about 1%—explicitly focused on sexuality;” with one course focusing on counseling sexual minority clients and three courses focusing on human sexuality (p. 5). Issues of gender and sexual diversity, sexual health and functioning, and intimacy can be interwoven throughout many CACREP curriculum courses. Although these course additions could significantly bridge the gap in sexuality counseling training, counselor educators are tasked with attending to logistic challenges, such as effectively managing the already
overflowing syllabi across CE programs. Educators have discretion about the depth and breadth of course content, which may perpetuate the imbalance consistently found in sexuality counseling (Miller & Byers, 2009; Wiederman & Sansone, 1999). Given its widespread prevalence in mental health settings, sexuality counseling is a critical competency for counselors across all disciplines.

Research Needs Related to CITs

Counselor educators must support all CITs with developing competency and confidence in treating human sexuality issues (Dupkoski, 2012; Juergens et al., 2009; Mallicoat, 2014; Zeglin et al., 2017). There is a need better to understand CITs’ attitudes and perceptions regarding sexuality counseling education. By understanding what challenges they face, CE pedagogy and training can be tailored, thus enhancing CITs’ preparation to broach sexuality issues in clinical settings effectively. In an extensive review of relevant literature, the authors found many articles addressing specific topics of sexuality, but few articles examining sexuality counseling educational standards, competencies, challenges, continuing education, exploration of counselor sexological worldviews, or development for CITs in these areas. Zeglin et al. (2019) completed a content analysis on the top three counseling journals and found limited research informing counseling practice on sexuality-related issues, with almost half of the literature focused on sexuality identity development. This research gap leaves CITs and clinicians who seek to advance knowledge in the domains of sexuality counseling competencies with limited resources.

Furthermore, a longitudinal study on sexuality research found that counseling professionals’ exposure to sexuality research is primarily quantitatively (Hargons, Mosley, & Stevens-Watkins, 2017). Qualitative and mixed methodologies considerably add to the research by giving a voice to the lived experiences that span diverse perspectives and backgrounds of sexuality, ethnicity, race, gender, etc. Qualitative research helps uncover how cultural and societal messages differ and inherently impact sexuality (Hargons et al., 2017). Burns et al. (2017) noted that increasing the production and publication of qualitative sexuality research would provide an evidence base where programs can further develop the courses or assignments in the curricula to prepare trainees to better intervene with sexual issues. Hargons et al. (2017) also call for increasing mixed methods and qualitative research to improve the scientific basis for sexuality training and coursework. Zeglin et al. (2017) stress that to comprehend the scope of the problem in sexuality counseling training and find effective and efficient methods of providing this education, continued research is essential.

Present Study

This study addresses the research gap by exploring CITs’ experiences within sexuality training in CE to consider factors that influence learning. Student journals can be an excellent information source for identifying cognitive, perceptual, and affective experiences while also improving learning outcomes by connecting theory and practice (O’Connell & Dyment, 2011). Counselor educators can use reflective journaling as an activity to understand CITs’ growth and development. In counseling courses, journaling helps students practice self-reflection, promote self-awareness, and develop counselor identity (Burnett & Meacham, 2002; Sperry, 2010). Journaling has also become a critical factor in increasing counselor self-knowledge, development, and maintenance of psychotherapeutic competence (Sperry, 2010). As an educational tool, reflective journaling is advantageous because it offers a qualitative means of strengthening the relationship between the instructor and CITs, thereby improving CITs’ learning via an ongoing adaptation of course content throughout a semester (O’Connell & Dyment, 2011).

To explore the experiences of CITs in a master’s level sexuality counseling course, the authors used a qualitative methodology with a thematic analysis design to gain a deeper understanding of the factors that impact students’ learning and experiences. The investigation of CITs’ course experiences, without focusing on pre-selected outcomes, will help determine the course’s impact and highlight personal and professional experiences that helped increase CITs’ comfort while also informing future CE pedagogical practices and training standards. Thus, the investigators analyzed reflective journals to obtain a broad understanding of students’ experiences. Specifically, the authors examined the following research questions: (1) How do CITs in a 15-week sexuality counseling course reflect on their learning experiences, and what are their shared experiences? and (2) How do CITs personally and professionally perceive their course participation, course content, engagement in experiential activities, and readiness to engage in sexuality counseling?

Methods

Using a phenomenological lens, the researchers explored CITs’ experiences in four graduate-level sections of an experientially based sexuality counseling course. Each semester was 15 weeks long and was structured around chapters from a well-known sexuality counseling textbook, in addition to student-selected readings from a pre-approved list. Each student spent three hours in class per week, which consisted of experiential activities, course dialogue, and educational content delivered via lectures. As per the course syllabus, students who did not opt into the experiential activities were asked to collaborate with the professor to identify alternative assignments that would enhance their learning while also
Participants

Counselors in Training. All 66 students were enrolled in a master’s level sexuality counseling course within a CACREP-accredited graduate program in Florida. The data was collected from four sections of a Human Sexuality Counseling course spanning over a two-year timeframe. This period was considered the point of saturation because it allowed the researchers to gain a broad sample across the various degree programs. All groups were enrolled with the same professor, using the same textbook, experiential activities, guest speakers, and assignments. There were two different doctoral-level graduate teaching assistants assigned to each course during the given semester. The participants were required to take the course as part of their degree requirements (M.Ed. or Ed.S.) or had enrolled to take the course due to state licensure requirements. All students in this study had completed the following standard core counseling classes before enrollment in this course: lifespan development, psychopathology, group counseling, ethics, counseling diverse populations, and family counseling.

The inclusion criteria in the study included: (1) CITs in a CACREP-accredited program in any track (school, clinical rehabilitation, mental health, or an educational specialist degree); and (2) those in the counseling field with a master’s degree and seeking additional training hours for credentialing. Seventeen of the 66 participants were non-degree seeking students already in the counseling field and needing the course for mental health licensure in the state. Of the remaining participants, 19 participants were enrolled in the clinical mental health counseling degree, 13 in the clinical rehabilitation counseling degree, 12 in the school counseling degree, and five in the educational specialist degree. Fifty-six participants self-identified as female, and ten self-identified as male. Concerning race and ethnicity, the following were the self-selected identities within their course reporting: 22 unspecified (not Hispanic or Latino), 19 White (not Hispanic or Latino), 16 Hispanic or Latino, 8 African American or Black (not Hispanic or Latino), and 1 Asian or Pacific Islander (not Hispanic or Latino). The age range of participants spanned from 25–64 years of age, with a mean age of 36.

Research Team. Researcher reflexivity is a critical factor in qualitative research (Berger, 2013). The research team consisted of one counselor educator and two doctoral students, all identifying as cisgender women. The principal investigator is a counselor educator and associate professor in a CACREP-accredited counseling program, identifying as a white. She was the instructor of record for all of the human sexuality counseling courses examined in this study. The motivation for this study was influenced by her many years of experience teaching this course, which led her to realize how critical the course content is in preventing harm to clients in future practice. The other two researchers are doctoral students and graduate teaching assistants within the same CE program. One researcher served as a teaching assistant for this course during one of the semesters that data was gathered for use in this study. The other researcher is a teaching assistant but has not served in that role for this sexuality course. One of the doctoral student researchers identifies as Latina, and the other identifies as White. All three researchers have a background and experience in clinical mental health counseling, with research interests in sexuality counseling, infidelity, LGBTQIA+ issues, gender, supervision, and multicultural competencies.

Data Sources

CITs were required to complete a reflective journal every other week as a course requirement. The journal is intended to be a process and reflective journal for students to share experiences inside and outside of class relating to the course content and to reflect upon their learning experiences with sexuality counseling. The reflective journals targeted part of the course’s goal and were denoted in the syllabus as an activity to “demonstrate an understanding of human sexuality issues encountered in professional counseling practice, as well as to increase awareness of one’s perceptions, attitudes, values, and beliefs regarding sexuality that could impact future work.” The specific assignment in the syllabus was as follows:

Students should reflect on the readings, guest lectures, in-class activities, required books, or assigned experiential and immersion activities. Each week denoted, you are to write a two-page, reflective journal log entry about what you learned from your textbook reading assignment, course discussions, experiential activities, guest speakers, or any other course-related activity. These journals are to cover your process and growth as a counselor, your thoughts and feelings about the material, or other process questions that still may come up for you. Be sure to integrate course concepts and terminology to reflect what they were learning and practice the intentional use of non-biased language. These should be process-focused reflections that do not restate content, but yet process your experiences with the content and activities.
There were eight journal assignments overall. Due to some students not completing the assignment during certain weeks, 524 total journal entries across 66 participants were examined for this study.

**Procedures**

The study was conceptualized about a year after all of the courses had ended. The data was part of the academic record and stored on a campus e-learning platform. No data was collected, accessed, or solicited until after an application was submitted to the University Institutional Review Board (IRB) requesting permission to collect and use the de-identified writings, which are part of the academic record. The study was later approved by the university IRB under category four, noting “this project does not meet the definition of human subjects research according to federal regulations. Therefore, it is not under the purview of the IRB.” Only after receiving this letter from the IRB was the data accessed and the study began. The journals were de-identified and grouped by week. Then the demographic information for students’ self-reported gender identity, race/ethnicity, age, and degree tracks was extracted without identifiers from the data management platforms. All journals were reviewed to ensure that identifying information was not located anywhere. There were two years of data, resulting in eight files with 66 or fewer journals for each of the eight assignments. Each assignment had a unique identifier assigned to it and was referred to when checking for trustworthiness and providing examples of developed codes and themes.

**Data Analysis.** The data were analyzed according to thematic analysis’s basic principles, including identifying, analyzing, and reporting themes within a complex data set while engaging in reflexive dialogue about emerging themes (Berger, 2013; Clarke, Braun, & Hayfield, 2015). Thematic analysis explores the themes that develop as critical to describing the phenomenon (Clarke et al., 2015). The study’s purpose was not to formulate a theory, so a phenomenological approach allowed for a comprehensive understanding of students’ course experiences and factors that helped and inhibited personal and professional growth. We followed these steps while coding: (a) familiarization with data, (b) generating initial codes, (c) searching for themes among codes, (d) reviewing themes, (e) defining and naming themes, and (f) producing the final report (Clarke et al., 2015).

Our approach was data-driven or inductive, in that we identified patterns that emerged from CITs’ journals rather than using a theoretical lens (Clarke et al., 2015). We chose this approach because of the lack of educational requirements for sexuality counseling and the dearth of qualitative research on student training experiences in sexuality counseling. Part of data familiarization was reading through all of the journals, noting initial ideas, and then reading through again (Clarke et al., 2015).

The broad research questions guided the initial coding process. Initial codes were generated by first examining sentences, paragraphs, and pages to extrapolate broad and meaningful concepts. All journals were first coded individually by each researcher and then collapsed by the journal assignment. Every week for eight consecutive weeks, team members separately developed initial codes, then met together to discuss sets of consensus codes and generate themes for each journal set. At the end of each meeting, the codebook for each journal set was drafted and then revisited the following week. The researchers reached a consensus for each theme and sub-theme before moving onto the next set of journals.

As researchers, we strived to create a trusting environment where biases and discrepancies were discussed freely and always followed up on each meeting to reaffirm consensus. The team met after all eight journal sets were coded with initial codes and themes. From there, we generated a thematic map from all eight weeks of data. Finally, we further collapsed and refined the themes while providing clear names and definitions for each theme. The final thematic map consisted of four themes and three subthemes. All three researchers had to agree on a theme before the thematic map was finalized.

**Trustworthiness.** The researchers address various components of rigor outlined in counseling qualitative research to ensure trustworthiness (Clarke et al., 2015). Before beginning this study, the research team examined preconceived notions and biases that could interfere with the data interpretation. This included acknowledging positionality, personal experiences with sexuality counseling education, and beliefs regarding the importance of this training in the CE curriculum, which could bias or skew how the journals were interpreted. The research team immersed themselves in the data and literature pre- and post-coding analysis. They met weekly to triangulate the data, develop codes, and ensure intercoder reliability. The themes emerging among the codes were discussed, and a consensus was reached. Last, the researchers named and defined themes and codes which produced the report. This process further assisted in data confirmability. All researchers kept an audit trail each week as they developed their codes. Additionally, each researcher has varying clinical experience and professional expertise in different aspects of sexuality, enabling dialogue of different viewpoints on codes and emerging themes. They further established credibility by linking themes and definitions to extract examples and quotes from multiple participant journals, which provided a rich description of the original research questions (Clarke et al., 2015).

**Findings**

Using a qualitative approach of thematic analysis within the students’ reflective journals allowed for the identification
of four main themes. The themes identified were: (a) personal development, growth, and awareness; (b) professional growth, development, and awareness; (c) critical factors that impact sexuality education; and (d) barriers to learning, which yielded three specific subthemes: encapsulation and fused beliefs, unacknowledged bias, and resistance. These themes reflect on the common ways CITs personally and professionally experienced growth throughout the course while also revealing common areas that challenge students and need to be addressed throughout the curriculum. In this section, we will describe each theme and subtheme.

**Personal Development, Growth, and Awareness**

This theme described the common ways CITs experienced personal growth throughout the course. Students regularly conveyed a heightened awareness of their perceptions and biases regarding sexuality, gender issues, personal sexuality concerns, behaviors, and the impact of sexual history. Culture, religion, and political factors were consistently discussed and referred to as factors that shaped their personal sexual values, beliefs, and morals. One example is noted below:

Even though I consider myself very open to homosexuality, I guess that I was not as open when it included myself. I am surprised to see these old “cultural and religious” ideas coming through for me. However, I am happy that this class has pointed this out to me and changed my attitude about homosexuality in relation to self. My immersive experience at the Pride Center was helpful in this regard.

When students shared their growth or development, they clearly identified and expressed those emotions related to their own sexual experiences while acknowledging and exhibiting insight into their lack of awareness. The feelings consistently included: shame, guilt, fear, excitement, surprise, and uncertainty. Within this theme, the students’ comfort and discomfort regarding sexuality issues were consistently conveyed. This often included students’ reflections on how they had grown and experienced greater comfort in their own sexuality, which continued to emerge as they engaged in the course content. One student described her comfort around a dialogue about sex with others:

I think the more we talk about sex, the more comfortable we will be talking about it with other people, like our clients... Although I said last week I am comfortable talking about sex, I feel more comfortable after seeing that presentation.

Students also expressed their emotions around the course content as the course progressed:

The very first change I noticed was that I no longer felt embarrassed or awkward completing the assessment. I remember feeling uncomfortable and feeling like I had to hide the assessment from people... When I first completed the assignment, I was worried about sharing and exposing my honest responses, as I feared to be judged for my biases and beliefs. I now learned that we are all entitled to our own beliefs... I now understand that feeling comfortable in the field of sexuality is essential for a strong and profound therapeutic alliance.

**Professional Development, Growth, and Awareness**

This theme is similar to the one noted above, but expressly addressed factors that impacted students’ professional growth and development concerning their future roles as professional counselors. In their journals, students consistently demonstrated increasing insight into the ways that sexuality education will help shape their future professional interactions and advocacy work with clients. These students also actively practiced using affirming language and inclusive concepts (e.g., using the term “partner”) while demonstrating awareness for the necessity of continuing education in sexuality. One student explored this further:

The website "Go Ask Alice" was also helpful in the Q’s and A’s section. Looking through the questions posted by different visitors, I found myself wondering about similar concepts. It was comforting learning information about concerns that have crossed my mind in a confidential manner... Furthermore, I believe that developing such website advocates for human sexuality and promotes society to view such concepts as natural and inevitable components of human life.

These students continually noted the importance of the course’s content for professional development and recognized potential areas for future countertransference. More importantly, they used reflective journaling to make professional development plans to address potential countertransference areas. There was a persistent connection and awareness that sexuality education is a needed part of their training to be culturally competent counselors:

What comes to mind immediately relates to last week’s learning log and not passing judgment on clients exhibiting atypical sexual behaviors or sexual habits, some of which could be cultural. Our speaker said "don’t yuck someone’s yum if it is not harming anyone, consensual, and not illegal.” Not allowing the actual acts to interfere with my ability to treat clients with those specific issues will be an ongoing process, but I feel
that what I learned in this course is a great start and a great motivator to further educate myself around issues related to sexuality to enhance my ability to provide the best possible culturally alert care to my clients. Those who actively engaged in the course were willing to discuss professional emotional experiences emerging from the course content. The most frequently expressed feelings related to the course content and newly acquired knowledge was excitement, confusion, surprise, curiosity, and gratitude during the learning process, as well as professional comfort or discomfort with the course material and its counseling application:

I was not happy about reading an additional book for the course outside of the text. But I read Becoming Cliterate: Why Orgasm Equality Matters–And How to Get It. I learned so much personally and professionally. I will never be fearful of talking with women about their own sexual pleasure if that is a topic that needs addressing.

Critical Factors Impacting Sexuality Education

This theme is based on students’ repeatedly identified points as the most critical factors that need consideration in sexuality counseling and education. Students consistently noted the impact of societal influences on sexuality education across the lifespan. There were reoccurring statements that spoke to the importance of accessible and developmentally appropriate sexuality education and training. Students frequently discussed societal bias, double standards, and gendered views as factors that impact sexuality education. Education was considered vital to debunk sexuality myths, normalize dialogue about sex, and view sex through a cultural lens. The examples below speak to the societal norms of sexuality and the importance of sexuality education:

I am a grown woman in my 40’s and I had no idea that I knew so little about STDs and sexual functioning. I have never even considered the impact of mental health disorders like depression and anxiety on sexual functioning.

Another critical factor within this theme was the importance of CE programs’ inclusion of this course in the required curriculum, including active and experiential learning activities to engage learners in sexuality counseling when appropriate. The students frequently and consistently attributed personal learning and growth as a counselor to the course activities where they were engaged and immersed in experiential learning. These were the most popular activities in the course, and during those weeks, journals showed the most personal and professional growth compared to other weeks.

The two examples below, and some included above, convey the importance of immersing in experiential activities.

After attending an SLAA meeting, I was surprised to find out that individuals who attend fall under the category of difficulty making and building relationships with others! This new knowledge allowed me to reevaluate the stigma society suggests, as there is so much more behind the term “addict.” I would not have learned any of this if I did not have to attend an SLAA meeting.

The more exposure I get to various sexuality topics, the more comfortable and open I am becoming. This new eagerness to learn more and dismiss what society considers normal is helping me accept individuals’ sexual choices and will transfer into me helping clients work through issue.

Barriers to Learning

The last theme encompassed the commonly expressed barriers and challenges found within students’ journals that prevented or limited growth in the area of sexuality counseling. These views typically stemmed from rigid and inflexible opinions, attitudes, beliefs, and behaviors. There were three subthemes in barriers to learning. The first subtheme was encapsulation and fused beliefs. These were barriers that regularly caused students to have a restricted view of sexuality based on acquired messages from society, families of origin, and personal experiences with sex and sexuality. Often, students connected the information, activities, and assignments to personal religious beliefs, values, culture, and morals to justify their opinions:

Much of this has to do with the stigma attached to the type of people I believed frequented these stores (adult stores) and a fairly staunch northeastern, Roman Catholic upbringing. Within my culture (Haitian), the topic of sex is never discussed. My parents did not talk about sex in our home because they were very traditional and religious.

The next subtheme within barriers to learning was unacknowledged biases. Several students unknowingly made statements or judgments about sexual behaviors, sexual orientation, habits, preferences, gender, etc., which implicitly or explicitly were biased. Examples included a lack of awareness when using discriminatory language, the inability to use inclusive language appropriately, and divergent personal standards of acceptable sexual behaviors for themselves versus others. Some examples of these statements from different students are:
- The first questions I asked my brother when he told me he was gay was is he using protection? Is he being treated well? Is he using good judgment?
- I also visited a few porn and sex novelty shops along the road trip for the earlier class assignment. My wife must have thought I was quite the perv on that trip.
- I think homosexuality is acceptable and I am proud to live in a country where people can (to some degree) express their own individuality without the kind of fear and persecution that those in other countries may experience. At the same time, I would feel quite uncomfortable if someone of the same sex were to make an advance at me.

The last subtheme within the theme, barriers to learning, was categorized as resistance. These students were unwilling to engage in deeper material processing beyond face value and inclined to focus on content vs. process in their journals:

I went to the drag show for my immersive experience. I sat in the back, I spoke to no one and left as soon as it was over. I was not a fan.

Further, these students avoided engagement in activities that could cause discomfort in active and passive ways despite growth fostering opportunities. For example, one student exhibited their resistance when describing their evident discomfort with continuing to explore part of an adult store with what the student noted as “more raunchy and explicit items”:

My husband tried to coax me inside. I protested, saying I had fulfilled the requirement for the assignment, as I had technically entered and explored the store. Further investigation was, therefore, unnecessary.

Other students expressed significant challenges in learning the content because they used the course as a personal outlet. For example, several students overly shared personal information that should be explored in therapy and impacted their ability to recognize potential countertransference areas:

My last two partners cheated on me and cheating is something that down to my core I know to be wrong and not allowed in a relationship. I would be fine working with couples that expressed infidelity if they wanted to stop the behavior. So I think I am fine working with this population and wouldn’t be biased.

Discussion

Sexuality is an innate part of human development that impacts mental and physical health and is integral to one’s well-being. Research evinces that, often, clinicians either avoid the discussion of sexuality issues (Burnes et al., 2017; Dupkoski, 2012; Harris & Hays, 2008) or are often unwilling to explore or ask about sexuality concerns (Hanzlik & Gaubatz, 2012; Kelsey et al., 2013). With a lack of confidence and willingness to discuss sexuality issues on the part of clinicians and clients, this leaves massive deficits in a client’s mental health and wellness needs that should be addressed. Sexuality counseling training standards are not consistent within CE programs (Blount et al., 2017; Jennings, 2014; Southern & Cade, 2011; Zeglin et al., 2017). The lack of emphasis placed on sexuality counseling education and training standards has the potential to impact clinicians and client care (Burnes et al., 2017; Dupkoski, 2012; Juergens et al., 2009; Mallicoat, 2014). Insufficient training in sexuality counseling threatens clinical competency development in this domain and quality assurance standards within the profession (Behun et al., 2017; Blount et al., 2017; Jennings, 2014).

The first theme, “Personal Development, Growth, and Awareness,” suggests that routine, self-reflective practice was found to be a meaningful learning technique or tool to gain an awareness of CITs’ biases and perceptions of sexuality when working with clients. Counseling professionals can often decrease their discomfort with sexuality dialogue or “taboo” topics by increasing their self-awareness and reflecting on personal value systems, ultimately creating a safe space for clients (Gelso & Hayes, 2007). As a course assignment, journaling can accomplish this task because it promotes self-awareness, comfort, course dialogue, and counselor identity development (Burnett & Meacham, 2002; Sperry, 2010). This theme consistently conveyed the value of CITs to go beyond content and book knowledge to examine the factors shaping personal sexual values, beliefs, and morals (i.e., cultural, religious, political, etc.). Training programs can prioritize the counselor’s exploration of sexual worldviews and their potential impact on the therapeutic process (Buehler, 2016; McGlasson et al., 2013) using techniques, like journaling, to help students separate personal views vs. client needs. Personal counseling or supervision can help CITs separate personal views, attitudes, and biases about sexuality, so they do not permeate counseling sessions.

Similarly, the second theme, “Professional Development, Growth, and Awareness,” indicates the importance of engaging CITs in the content and facilitating applied learning to produce professional growth. Within this theme, the significance of this course was consistently expressed from the student’s perspective. A desire from CITs to engage in more intentionally focused sexuality work was conveyed, including case conceptualizations and dialogue. This theme
supports the importance of using case conceptualization and self-reflective practice routinely in CE training (Sperry, 2010). Those who increased their professional comfort in talking about sexuality were able to recognize and confront countertransference directly. Researchers have shown that when working with issues of sexuality or challenging sexual behaviors that produce anxiety, engagement, and countertransference, management skills can be used to decrease counselor anxiety, countertransference, and negative feelings (Cartwright, Stark, & Mountain, 2018; Gelso & Hayes, 2007). Additionally, education increases comfort around discussing sexuality issues (Harris & Hays, 2008). This finding further supports the need for increased and specialized education in and training in the field (Burnes et al., 2017; Montejo, 2019; Zeglin et al., 2017) and adds the significance of having educational content that is inclusive of experiential learning activities and immersive experiences.

The third theme, “Critical Factors Impacting Sexuality Education,” highlights factors that influence sexuality education across the lifespan, namely societal factors and access to sexuality training to debunk societal biases, myths, and stigma. This theme further augments why it is important for CITs to examine personal sexological worldviews during training and learn how to set aside societal norms, values, and biases around sexuality and gender (Buehler, 2016; Sitron & Dyson, 2012). The importance of experiential learning’s impact on student insight, awareness, knowledge, and cultural competence in CE was conveyed within this theme. Arthur and Achenbach (2002) note the critical impact of immersive and experiential activities on cultural competence in counseling. This needs to extend into all course content areas. Experiential learning, community engagement, expert speakers, and immersion activities were critical in bringing about change for students in this course. Thus, experiential activities related to sexual diversity should be included in multicultural counseling courses or other courses where the information is applicable.

Finally, the fourth theme, “Barriers to Learning,” comprised the factors that limited growth in the domain of sexuality counseling, namely CITs’ rigid views and negative behaviors. This theme was vital because it illuminated the ways CITs struggle and can inform future educational practices. The absence of an explicit sexuality training course or space within CE programs may challenge counselors and leave them with feelings of discomfort, which could be triggering when sexuality issues arise (Kleinplatz, 2013). However, the students in this sample were in explicit sexuality counseling training, leaving us as researchers to wonder, if some of our students struggled throughout the course, how pervasive are these issues for students who do not have a course dedicated to sexuality counseling? Three significant subthemes emerged as present barriers for some of the students. In CE, educators infuse cultural competence into all courses and respect for varying cultures, though research finds that “sexual culture” is often omitted (Blount et al., 2017; Sanabria & Murray, 2018). This theme also illuminates the need for sexuality and the culture around sex to be further explored and highlighted in courses so CITs can work through these barriers. Exploring sexological worldviews in a variety of courses and creating activities that challenge students to dig deep will assist with encapsulated views.

Dialogue and self-reflective practice can also assist in finding areas of unacknowledged bias and resistance. Sexuality continues to be an area of diversity in which bias is not directly addressed, regardless of training standards (Sanabria & Murray, 2018). Discomfort with sexuality issues in therapy can result in counselors’ avoidance behaviors (Burnes et al., 2017; Dupkoski, 2012) and feelings of abandonment by clients. To alleviate discomfort, CITs can participate in desensitization activities to find ways to become more open and inclusive of sexual behaviors, attitudes, lifestyles, etc. Desensitization will allow CITs to challenge their values and worldview (Buehler, 2016; Sitron & Dyson, 2012). Overall, this theme’s findings reaffirmed the importance of sexuality education in CE training programs pertaining to developing standards for cultural competence. Specifically, sexuality training may be enhanced by the inclusion of desensitization activities and personal exploration.

Implications for Training, Practice, and Standards

To date, training programs have inadequate and varying sexuality standards in graduate counseling programs (Behun et al., 2017; Blount et al., 2017; Burnes et al., 2017). This study poses several implications for the field, including informing training and educational practices across CE programs, specific course standards, and teaching techniques. Given the prevalence of sexuality-based concerns in counseling and that sexuality is part of wellness and lifespan development, competency in this domain is essential. In this study, the students experienced barriers (a significant theme) and were required to take the course. This finding leaves additional unanswered questions, such as whether these same barriers are more pervasive for those who are not required to have this training. For this reason, CE programs need to advocate for mandating a course dedicated to training students in sexuality counseling concepts. In addition, CE programs must be deliberate in implementing and infusing sexuality counseling education into specific syllabi and finding enough time to dedicate to this culturally complex area. This intentional infusion of content needs to critically examine the core classes to find the most appropriate way to integrate this material into existing course goals. Comfort, willingness, and engagement were part of the critical factors that influenced CITs’ education. Research has shown that more exposure to sexuality issues increases therapeutic comfort (Zeglin et al., 2017). Assignments such as experiential
activities (such as sitting in on an open sex and love addictions group) and cultural immersions (with groups that are non-heteronormative and gender normative) will assist with the challenge of exposure while also enhancing learning, decreasing bias, increasing insight, and reduce anxiety and countertransference (Cartwright et al., 2018; Gelso & Hayes, 2007; Harris & Hays, 2008; Zeglin et al., 2017).

A further consideration for this study includes that participants all took the standard core counseling courses (i.e., multicultural counseling, ethics, psychopathology, etc.). Yet, many were still challenged and struggled in areas of personal and professional growth in sexuality counseling. When examining the journals chronologically, there was tremendous growth from the beginning to the end of the course. If this course had not been required, these students may have missed out on critical information or may not have challenged their subjective sexological worldviews. The study illuminates and supports the literature that calls for CE programs to examine the current state of CITs’ development concerning sexuality in their core curriculum (Dermer & Bachenberg, 2015) and critically analyze ways to expand CITs’ future learning in other course content areas. If programs do not have a dedicated course and intentionally focus on sexuality, their students are at a deficit.

Personal counseling and additional clinical supervision can also assist CITs in decreasing anxiety and increasing comfort and confidence. Ethically, counselors should also seek out individual therapy when faced with recognized countertransference or when faced with issues that could impact their professional decision-making (ACA, 2014; Standard A.4.a and A.4.b) to avoid potentially harming clients and imposing values. Individual therapy will also assist in processing it from areas of discomfort and working through anxiety that could prevent counselors from broaching issues of sexuality (Gelso & Hayes, 2007). CITs and those in practice should seek out supervision and additional resources and training when working with diverse clients and issues (such as sexuality concerns) with which they are unfamiliar (ACA, 2014; C.2.a; C.2.b). Supervision helps counselors navigate challenging client issues effectively while also decreasing discomfort and managing countertransference (Gelso & Hayes, 2007). Although direct supervision was not provided in this study, offering feedback on journal assignments and processing interpersonal concerns when discussing challenging content fostered CITs’ growth and professional development in this area.

**Limitations and Future Research**

Although the study’s findings present significant implications for counselor educators, there exist several limitations. The qualitative analysis was conducted on previously written student journals that were course directives. The reflective journals were inherently evaluative; therefore, social desirability and attaining a good grade may have influenced the reflections, potentially skewing the findings. Additionally, each instructor will have their theoretical framework and worldview from which they teach. This philosophy and approach to teaching, and the content they choose to include, can considerably impact that learning process. Thus, the professor’s pedagogical approaches and selection of inclusion activities may have affected the course’s overall outcome.

The data was collected from a CE program in a southeastern university that requires human sexuality to obtain licensure as a mental health counselor in the state. Therefore, findings in other states that do not require the course could yield different thematic results. Other programs may have more or less sexuality counseling content infused in other areas of their curriculum, which compensate for learning differences. The participant pool spanned three different degree track programs (clinical mental health counseling, professional school counseling, and clinical rehabilitation counseling) and included unlicensed professionals to practice within the state, which could have affected the themes found in this study. Lastly, the present study focused on a large sample of 66 students with about eight journal entries per student, totaling 524 journal entries. As such, future research could focus on interviewing a smaller sample of students, providing a more in-depth exploration into counseling students’ needs to broach sexuality more confidently and competently. Research exploring pedagogical approaches that are the most effective for students to learn and understand issues of sexuality needs to be examined. Additionally, a content analysis may be conducted to further examine how accredited programs without a sexuality counseling course meet training standards and CITs’ needs. A more comprehensive understanding of the barriers for counselors and CITs that prevent them from broaching sexuality issues requires further insight so that education programs can prepare students for addressing these critical sexuality issues.

**Conclusion**

Counselor educators are tasked with preparing CITs to serve their clients in an ethical and culturally responsive manner. Although human sexuality is not commonly conceptualized as an essential component of CE programs, the present study illuminates critical sexuality counseling education implications. The authors hope that the study’s findings can normalize common CITs’ experiences during sexuality counseling courses and encourage counselor educators to empower students to engage in the learning process actively, thereby positively impacting clients and destigmatizing sexuality-related concerns. Sexuality is part of wellness and well-being (Myers et al., 2000). This study revealed many critical components that helped students broach sexuality issues and grow professionally while promoting client wellness in areas of sexuality. We hope that coun-
sor educators will incorporate targeted activities in the CE curriculum to facilitate learning in this critical area required to be a multiculturally competent counselor. Finally, this study’s findings highlight the potential need to revisit professional training standards and advocate for increased focus on sexuality counseling inclusion within CE curriculum.

References


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