THE EXPERIENCE OF SETTLEMENT WORK WITH LGBTQ NEWCOMERS

by

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Abstract

The purpose of this research was to contribute to the literature on migration and settlement work for LGBTQ newcomers and the service providers who support them in Canada. The study employed a descriptive phenomenological research approach to answer the following question: “What are service provider’s perceptions and descriptions of their work in supporting LGBTQ immigrant clients?” Interviews were conducted with twelve service providers working in settlement, social work, and counselling psychology, with experience working with LGBTQ newcomers ranging from fourteen months to twenty five years. Participants represented nine languages and five ethnicities, and worked within the Metro Vancouver region of British Columbia, Canada. Utilising Giorgi’s (2009) descriptive psychological phenomenological method, data analysis uncovered three overarching structures that captured participants’ experiences of settlement work with LGBTQ newcomers. These structures included a) service providers’ perceptions of LGBTQ newcomers’ needs and experience, b) organizational issues, and c) personal impact. This study contributes to a greater understanding of the ways in which settlement work is done with LGBTQ newcomers, and sheds light on factors that are both challenging and beneficial to their service provision work. Recommendations for further research are made, as well as specific recommendations for training and counselling psychologists working with LGBTQ newcomers.
Preface

This dissertation is original, unpublished, independent work by the author, M. Suehn. The fieldwork reported in Chapters 3-5 was covered by UBC Ethics Certificate number #H13-00826.
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Chapter One: Introduction

Research Problem

Canada accepted 328,945 newcomers of various immigration and refugee classes in 2014 (Citizenship and Immigration Canada, 2014), and is known internationally as a welcoming place for many lesbian, gay, bisexual, transgender, or queer/questioning (LGBTQ) individuals (Nicol et al., 2014; Citizenship and Immigration, 2011). For any newcomer to Canada, the transition from their home culture into the receiving Canadian culture demands resiliency in mental, physical, spiritual, and often financial resources (Lindert et al., 2009). As such, the cultural transition is often challenging, and many newcomers draw upon family, friends, and available support resources offered by community and governmental agencies for settlement support (Shweitzer et al., 2007). Canada has one of the highest proportions of newcomer to total resident population of any other country, and understandably, a significant body of research upon immigration, cultural transition, and settlement-related work exists (Omidvar & Richmond, 2005). Since there is a large amount of newcomers arriving in Canada each year, it is important that we understand their needs and can develop programming to support their settlement process. However, LGBTQ (lesbian, gay, bisexual, transgender, and queer/questioning) newcomers present with unique needs to the settlement field. Specific cultural competencies and understandings of working with the intersections of migration and sexual orientation and gender identity are required for ethical settlement work (Oba & Pope, 2013). Unfortunately, service providers within the settlement field report a lack of training and knowledge of the specifics of immigrant laws, services, and experiences that are relevant for their work (Martinez-Brawley & Zorita, 2011). It is therefore vital that we explore the needs, experiences, and practice of service
providers who offer settlement-related services to LGBTQ newcomers in order to better understand the work and where training and service delivery can improve.

**Background**

Turegun (2013) describes the origin of settlement work in Canada in the late 1800s with the settlement house movement that was based on Christian social gospel. This movement aimed to alleviate poverty and other social barriers through social reform, and originally targeted ethno-religious groups such as Jewish and Italian immigrants. During the 1970s onward, the federal government began to support settlement services. At the same time, a geographic and demographic shift and diversification in the origin of immigrants occurred.

The Multiculturalism Act became Canadian federal policy in 1972, which defined power inequalities amongst marginalized and mainstream groups as existing, because people of the dominant Canadian culture at the time was perceived to have failed to adequately understand racialized newcomers (Sue & Sue, 2013). The policy also emphasized the importance of providing multilingual services (in languages other than French and English), and on making the field more welcoming and multicultural by deconstructing organizational norms in prioritizing Canadian-English or French-Canadian accents, dress codes, and other mainstream cultural forms of bias (Lopes & Thomas, 2006). According to Turegun (2013), in the 1980s, a federal refugee program was established, and settlement services faced even more diverse and complex newcomer needs, leading to the eventual inclusion of a more established form of social work and professional practice procedure for settlement work. Settlement agencies formed overarching provincial and regional associations to mediate provincial and federal policies on migration and settlement, and advances in training, client coverage, and scope of service continue to develop and adapt to the needs of Canada’s newcomers and federal policy.
Historically as well as within the current cultural context, the goal of settlement work has been to support newcomers’ acculturative adaptation and integrative cultural transition to life in the receiving community. According to Sinacore and colleagues (2009) as well as Berry (2001), a cultural transition is a developmental process undertaken by adults and children alike when they migrate to a new host culture. This transition is said to be successful when individuals are able to achieve linguistic, sociocultural, and psychological adjustment or integration within the new culture. Individual and age-related differences exist in the manner in which newcomers retain their affiliation with their heritage culture and in which they practice integration within the host culture (e.g., Berman, 2006). However, social integration and cultural identity adaptation are two of many intersectional facets of an immigrant’s experience of settlement.

With regard to the current literature on settlement and migration of LGBTQ individuals, several researchers have explored international transit and re-settlement narratives of LGBTQ newcomers (e.g., Chavez, 2011; Jordan, 2010), while others have explored the training, attitudes, basic knowledge, and beliefs of settlement and social service providers who work with newcomers (e.g., Bhuyan et al., 2012; Einbinder et al., 2012). However, there has been no research within the literature that explores the psychological processes undergone by settlement service providers themselves during their service provision with LGBTQ newcomers. Such an exploration would be useful in assessing necessary training, current skillsets and barriers to successful service during settlement work supporting LGBTQ newcomers. Given that social services training programs emphasizes anti-oppressive, activism- and justice-oriented, anti-racist practice models (e.g., Sue & Sue, 2013), it is notable that training programs in social work and counselling psychology fields neglect to provide trainees with the skillset and understanding of
the complex intersectional experiences of LGBTQ newcomers, who, as a group tend to be very marginalized. Increased knowledge in this service area would therefore also be useful for adapting training programs and settlement agency programming to better support this demographic.

Turegun (2013) argues that settlement work is an emerging profession of its own, although deeper professionalization and regulation is contingent upon a philosophical shift in provincial and federal long-term funding regimes to support the sector. To provide further rationale and motivation for professionalization, it is therefore vital to develop and maintain training and programming targeting especially-vulnerable newcomer groups like LGBTQ individuals within service fields that address cultural transition needs of newcomers, such as social workers and counselling psychologists, in addition to expanding traditional settlement worker. Given that the significant barriers of settlement in general are often more complicated for LGBTQ newcomers who may be alienated from mainstream LGBTQ communities (due to racism or classism), and face alienation from conational communities (due to homo/bi/transphobia, or conflicts with cultural roles), this demographic often faces the demands of settlement very much alone (Boulden, 2009). Reports from LGBTQ newcomers indicate their desire to have greater support navigating the settlement system, integration within the community, and emotional and therapeutic support from social service providers who have a nuanced understanding of their ethnic and LGBTQ cultural identities (Chavez, 2011; Boulden, 2009; Lenette & Ingamells, 2014).

The lack of LGBTQ newcomer-specific programming has led some grassroots and community agencies to develop their own preliminary needs assessments for the population (e.g., MOSAIC, 2015; Nicol et al., 2014). Further, some service providers in the field have attempted
to bridge resource gaps by developing informal support networks and list servs. The rising demand from service providers and LGBTQ newcomers themselves for better provider training and service provision has been noticed by advocacy agencies such as the Affiliation of Multicultural Societies and Services Agencies of BC (AMSSA) and the Ontario Council of Agencies Serving Immigrants (OCASI) who have worked to create basic training workshops and resources for settlement workers. However, it is clear that more work is needed in this area, and little is still known about the direct experiences, challenges, and successes of the service providers who serve LGBTQ newcomers and the newcomers themselves in the current socio-political climate.

In her exploration of cultural transition, Valtonen (2008) writes that any understanding of acculturation is inherently incomplete when it fails to take into account the changes undergone by the receiving community during contact with newcomers. For years, the literature has described the increasing diversification of Canada and other large metropolitan communities, and with increased diversity and growth in newcomer populations necessitates progressive change within social support service training programs and agency policies to adapt to and accommodate the needs of LGBTQ newcomers (Osipow & Littlejohn, 1995; Citizenship and Immigration, 2011). By positioning the voices of marginalized group members at the forefront of the research experience, descriptive research that pursues anti-oppressive frameworks can also change the social environments of both academic and general community systems to benefit marginalized groups. However, intercultural contact demands and produces change from all groups in contact, including the dominant cultural group (Valtonen, 2008). As such, it is vital to consider and access the attitudes of the receiving community towards newcomers and to recognize that frontline service providers play an integral role in representing welcoming and competent supports
within the dominant cultural and geographic context (Clevenger et al., 2014). The preliminary literature suggest that a matching language and ethnic identity between client and service provider has been found to predict greater treatment retention and better outcomes from mental health services (Paynter & Estrada, 2009). Resultantly, service providers and their personal backgrounds and the cultures, in addition to the skills they enter the room with, are very important to include in an exploration of their service work with LGBTQ newcomers.

However, there is no literature discussing the demographic and training backgrounds of settlement workers or their attitudes towards LGBTQ newcomers, and how these features might intersect in service practice. Further, when discussing settlement support work, we must explore the impact that the current settlement service system has on the service providers within this system, both on a practice level as well as on a personal level as they encounter similar barriers to settlement as LGBTQ newcomers as proxies or advocates for these vulnerable clients. At present, we have little understanding of the way these service providers understand and do the work with LGBTQ newcomers, where they draw their training and cultural competencies for this demographic, and what their practice needs are for bettering service to our LGBTQ newcomers.

Research Question

My research question is: What are service provider’s perceptions and descriptions of their work in supporting LGBTQ immigrant clients? The purpose of this question was to explore the lived experiences that participants have while offering settlement-related services to LGBTQ newcomers. Participants will have a unique set of experiences that have led them to settlement work and that inform and motivate their training, multicultural competencies, and practice goals for service provision. An exploration of their story is an entry point into a dialogue on how service providers impact the settlement processes of LGBTQ newcomers from the perspective of
individuals who often represent, the dominant culture, and/or are the first contact newcomers may have with the dominant cultural community during settlement. The following investigation sought to explore how the work with LGBTQ newcomers is experienced in terms of participant perceptions of LGBTQ newcomer needs and experiences within the North American community, as well as seeking to explore gaps that participants perceive in their service provision abilities while working with LGBTQ newcomers.
Chapter Two: Review of Literature

The following section begins with a definition of terminology used in the present exploration of service providers’ experiences of settlement work with LGBTQ newcomers. The chapter then presents a review of the current literature related to immigration with a focus on immigration, LGBTQ newcomers, and the training, work practices, and experiences of service providers who offer supportive resources and counselling to these individuals.

Definitions of Key Terms

LGBTQ. It is important to understand the diversity represented within the acronym LGBTQ in order to make sense of the experience of LGBTQ newcomers as well as the service providers who work to support their settlement experience. In the present study, the acronym LGBTQ is used as an overarching umbrella term for individuals who are not heterosexual, such as lesbians, gay men, and bisexual individuals. The acronym also encompasses transgender/transsexual individuals, who, as an umbrella term in and of itself, do not identify as the sex they were assigned at birth, and who may or may not utilize medical procedures to alter body chemistry or physiology in some way. These individuals may identify as a particular gender, which may vary over time or remain static from childhood, or they may not feel an identification with any gender (often known as agender individuals). Individuals who identify with the sex they were assigned at birth are known as cisgender. The sexual orientation and gender identity terminology used in this project follow Western philosophies and queer theories, however, it is important to note that there are diverse cultural, regional, and indigenous understandings and meanings to gender and sexual orientations and identities, and which will be given context in this document as relevant.
The abbreviation “trans” will be used within this document as shorthand to encompass transgender, transsexual, non-binary, agender, genderfluid/genderqueer gender identities, and occasionally is used to include two-spirit indigenous gender identities. The term trans will be used unless specific terminology is needed for context. Individuals who fall under the trans umbrella may adopt personal identifiers as trans, transgender, or transsexual orientations as shorthand for their experiences. Trans individuals also have a sexual identity as lesbian, gay, bisexual, heterosexual, or asexual individuals (an individual who experiences little or no sexual or romantic attraction). Accordingly, lesbian, gay, bisexual, and heterosexual individuals may also be cisgender, which is a term used to denote that the individual identifies with the sex they were assigned at birth.

The term LGBTQ also includes queer, which is a re-claimed political and/or personal identity for any non-heteronormative individual. The term queer may be viewed by individuals as a denigrating slur associated with violent oppression of non-heterosexual and/or cisgender identities, but existed prior to its use as a slur, and has recently been re-claimed by some LGBTQ communities and individuals. The “Q” may also be used to indicate individuals who are “questioning” their sexual and gender identities. The “questioning” identity may also include individuals who wish to align themselves with LGBTQ rights movements but not disclose their own LGBTQ identity to safeguard their personal safety in dangerous environments.

*Heteronormativity* is defined as upholding normative biases toward dominance of heterosexual orientations, such as a non-conscious, default perception of all people as heterosexual until proven otherwise. Conversely, *cismatricity* indicates the default assumption that all people identify with the sex they are assigned at birth, until proven otherwise. These two terms may interact with sexist ideologies about gender and sex roles, and create heterosexist and
cissexist stereotypes that uphold transphobic and sexist gender roles as the default for human gender and sexual orientations. In this manner, *binarism* is the idea that human gender experience exclusively consists of the oppositional either-or categories of male or female. *Homophobia, biphobia, and transphobia* may be defined as the systemic erasure, invalidation, and aggressive attempt to destroy gay, lesbian, bisexual, and trans individuals according to heteronormativity, cisnormativity, and binarism. For instance, more subtle forms of violence and discrimination against trans individuals includes invalidating or erasing trans person’s gender identity by *misgendering* them by using an incorrect or unwanted gender pronoun for a trans person (intentionally or otherwise) or by refusing to use the person’s preferred name or acknowledging their transgender identity. As described above, the Western, historical binary view of female-or-male gender fails to include the variances of human psychology either within Western/White-European societies or within indigenous and racialized societies. All of these forms of sexual orientation and gender identity-based discrimination are present globally and throughout history. LGBTQ discrimination may be culturally variable in symbolic and literal representation, just as LGBTQ identity representation may be equally variable. In short, LGBTQ individuals in any part of the world may be negatively impacted to varying degrees by these systemic discriminations. These negative experiences are often traumatic, and often provide impetus for many individuals to seek refuge via migration to a different country to escape persecution and violence based on gender identity or sexual orientation.

LGBTQ experiences are therefore highly intersectional, and as will be discussed later, are made even more complex by immigration, sexism, and racism. The above terminology is important to understand in order to give context and meaning to the rationale and findings of the study, as without a deep understanding, lay readers unfamiliar with LGBTQ experiences will fail
to fully grasp the intricacies of settlement work and social justice with this demographic. For more information on LGBTQ terminology, see QMUNITY (2013).

**Immigration and Newcomers.** Immigration is the process a person (or family) undertakes to migrate and undergo a geographic relocation to a new country other than one in which they hold citizenship or may personally identify with. An immigrant, migrant, or newcomer may have a permanent or temporary residency status as immigrant, refugee, or asylum claimant. For the sake of brevity and the scope of this study, the term *newcomer* will be used as an umbrella to include immigrants, refugees, and asylum-seekers, unless a specific distinction needs to be made between those groups.

The reasons individuals migrate will vary from person to person, and may be influenced by economic or safety concerns in their home country and in the receiving country. Generally, a newcomer is an individual who undertakes the psycho-social process of cultural transition, whereby they acculturate and adapt to the receiving culture. *Acculturation* is the psychological act of adaptation and adjustment to behaviour patterns or practices, values, rules, and symbols of the new environment. It is important to recognize that acculturation is not an all-or-nothing change, nor is it a one-way change: individuals of both the receiving and incoming cultures are impacted by the contact amongst them (Valtonen, 2008). As a result, both groups undergo changes. For instance, individuals from the dominant (receiving) and minority (incoming) cultures may resist or adopt values, norms, or practices of one or the other culture (Sam & Berry, 2010). In this manner, social and personal identity is affected, and coping skills and strategies are necessary to cope with the stresses that may be associated with immigration and acculturation.

To cope with and adapt to cultural transition over the course of months or years prior to, during, and following a geographic migration, newcomers access support from family and
friends when available. Social support resources offered by the receiving community offer newcomers further settlement support with finding work and skills training or educational resources, language support, medical care, housing, and mental health support, such as counselling or social networking (Sinacore et al., 2009; Yakushko et al., 2008).

**Settlement Work and Settlement.** In the present study, *settlement work* encompasses the bio-psycho-social-spiritual support work that professionals offer to newcomers. These professional service providers work within non-profit organizations (and sometimes as volunteers) that are usually multicultural and immigration-oriented services, or they may be embedded within mainstream community services or health clinics. Although settlement work does include medical services and legal aid, “settlement work” in this study will not include the experiences of service provision to LGBTQ newcomers for medical or legal professionals. Rather, settlement work is understood as support work offered by mental health, community service, and social work professionals who facilitate the bio-psycho-social aspects of acculturation. These individuals may support the provision of and access to legal or medical services for newcomers, but they do not exclusively provide these services. For these workers, the aim of service provision is on supporting the dynamic social, emotional, and personal integration into a receiving community following international migration.

**The Literature on Settlement work and LGBTQ Newcomer Experiences**

When considering the importance of the integration process for the successful adjustment of LGBTQ newcomers, it becomes clear that in order to support this population, we must inform ourselves as to the current sociocultural and psychological trends that exist among them as well as among the service providers who are there to support them. The first section will focus on migration and acculturative adaptation during the cultural transition process, which will then
address the experiences of LGBTQ newcomers specifically. Finally, issues related to settlement work and service provision to LGBTQ newcomers will be presented, with regard to training and practice policies that affect settlement work, social work, and counselling psychology.

**Immigration, Cultural Transition, and Settlement.** Presently, immigration and minority group concerns are a significant and common issue in North America. A large proportion of North American society is comprised of people with immigrant status. The United States reports a population of around forty-million newly arrived, foreign-born people. Approximately 17% (or approximately seven million) of all foreign-born, newly-arrived people in the United States entered the country in 2005 or later (Walters & Trevelyan, 2011). Similarly, 19.8% of Canadians reporting being foreign-born, and between 2001 to 2006, this population experienced a growth increase four times higher than that of the Canadian-born population (Citizenship and Immigration, 2006).

Following a physical migration to a new country, a process of cultural transition describes an individual’s attempts to adapt and includes aspects of personal, psychological, and social development. What constitutes successful cultural transition is a complex and subjective process that may take months or years, but is commonly considered to occur when immigrants are able to find integration within the new culture along the domains of education, employment, and socio-cultural integration (Berry, 1997/2001; Sinacore et al., 2009). The needs of immigrants during cultural transition processes vary depending on numerous factors, such as country of origin, ethnicity and cultural scripts, sexual orientation, accessible support resources (e.g., community contact), and amount of integration and contact with the host culture (Chavez, 2010; Vahabi & Damba, 2013).
According to Citizenship and Immigration Canada’s (2006) longitudinal survey, immigrants in the country who face challenges with settlement experience barriers in housing, medical and mental health services, accessing skills training and education, and employment. Incidence of difficulties were found to be highest for refugees and skilled workers of immigrant classes, with lower rates of experienced barriers occurring for economic classes of immigrants. These newcomers indicated that the sources of their barriers to these settlement areas lay in the high cost of living and other financial burdens, as well as lack of sufficient information and counselling needed to access important resources. Further, language barriers, non-transferable education, and credentials for employment were also indicated to create settlement barriers.

Cultural transition/acculturation and settlement. The process of settlement is commonly understood through the lens of acculturation. In short, acculturation is the newcomer’s adaptation to the culture of a new society (Valtonen, 2008), and is further understood as a set of major life events that may be experienced as challenges to an individual. In this sense, life events (such as migration, resettlement, and contact with a different culture) may act as stressors and provoke stress reactions in newcomers, which is especially true if the newcomer lacks appropriate coping strategies and social supports (Sam & Berry, 2010). Culture can be understood as the “totality of the non-biological activities of a people [which are] directly related to concrete material conditions of existence” (Valtonen, 2008, p.60).

In order to find success in a cultural transition, the literature commonly looks to acculturative styles, which is a framework of psychological processes that is usually applied to individuals of the minority/newcomer culture when in contact with a dominant receiving culture. As Valtonen (2008) argues, however, acculturative styles can also be applied in a two-way interaction model, whereby both dominant and minority groups are affected, and change due to
the intergroup contact. Nonetheless, the acculturative strategies described by Berry (1997) are a common lens through which social service workers and researchers access the underlying processes of cultural transitioning for a newcomer individual. The acculturative strategies are commonly known by the terms integration, assimilation, separation, and marginalization. Integration describes a strategy a person may use which maintains the culture of origin in parallel to the acquisition of a new culture. In contrast, assimilation is a strategy involving the acquisition of a new culture and a rejection of the culture of origin. The strategy of separation describes a person maintaining their culture of origin while rejecting the new culture. Finally, a person who uses the cultural transition strategy of marginalization rejects both the new and origin cultures (Yoon et al., 2013). In other words, individuals may access varying levels of cultural retention, where they may retain valued aspects of their culture of origin such as family, language, and customs (Valtonen, 2008).

Utilization of one particular strategy over another has been associated with different levels of well-being and minority stress in migrant individuals (Yoon et al., 2011). Research has explored how individuals adapt to the acculturative process in terms of their psychological well-being and sociocultural competence. Sam and Berry’s (2010) study of acculturation invokes adaptation as the key psychological process, and is defined as the state that follows from the acculturative changes. Adaptation is therefore commonly used as a measure of health status, communication competence, self-awareness, stress reduction, feelings of acceptance, and culturally skilled behaviours considered advantageous to the individual. Finally, the authors suggest that those who integrate by being engaged in both the larger society and their heritage culture are often better adapted in comparison to those who have an orientation of engagement
toward one or the other culture (characterized by the terms separation or assimilation), or to neither the heritage or larger culture (by use of marginalization strategies).

**Receiving context of immigration.** Immigrants are selected by the government of Canada on the basis of occupational or investment potential, despite the fact that often occupational histories and skills are commonly not recognized by Canadian employers or professional bodies (Statistics Canada, 2005; Omidvar & Richard, 2005). As a result, once in Canada, in part due to the financial burden of the migration itself, coupled with discrimination from potential employers, in addition to mental health and trauma challenges, there are high rates of poverty, unemployment, underemployment and homelessness for newcomers (Statistics Canada, 2005). Temporary immigrants, refugees, and asylum-seekers often have more challenging experiences due to their minimal legal rights and significant barriers to employment and social services (Lee & Brotman, 2011).

According to Omidvar and Richmond (2005), cutbacks and regressive immigration policy have demanded recurrent restructuring of the settlement and social service field, and this lack of stability and dismantling of services has impacted agencies, employees, and newcomer clients. The authors go on to describe how the current governmental funding pattern of contracting non-profit organizations operates on a program-by-program basis (rather than core funding of services) places substantial service limitations on these organizations. For instance, program-by-program contracts greater onus on stakeholders to prove the viability, efficacy, and necessity of each individual program they would like to provide, which forces them to delicately balance government-approved service programming with more closely meeting client needs. Again, successful settlement implies acculturation and adaptation of an individual to their new surroundings, as based on their personal skills, resources, and resilience. However, this process is
also dependent upon the overall capacity of the receiving community to incorporate and accommodate newcomers (Valtonen, 2008). However, smaller agencies within the community are also restricted in their program delivery by specific funding contracting routes because they lack the administrative resources to manage application and service delivery of programming. (Omidvar & Richmond, 2005). The overall impact by this system and immigration policy has been increased poverty, strain on organizations and service providers, and greater isolation for newcomers who are left to navigate the system independently.

**LGBTQ newcomers.** Over recent years, a growing number of researchers have explored the experiences of LGBTQ newcomers as a distinct subset of immigration experiences in general. Much of the literature on LGBTQ migration discusses the health, medical service access rates, and disease transmission patterns of sexual minority individuals who migrate internationally, such as describing the HIV risks, substance use, and psychological health of gay/queer/bisexual Latino men (e.g., Lee & Hahm, 2012). Conversely, other researchers have explored LGBTQ individuals who undergo forced migrations (e.g., Luibheid, 2008), are in binational same-sex relationships (e.g., Kassan & Nakamura, 2013), and who arrive as refugee or asylum claimants in North America after having experienced the traumas of war, torture, and homo/bi/transphobic acts of discrimination and oppression (e.g., Jordan, 2009; Jordan & Morrissey, 2013; Lee & Brotman, 2011).

Much of the research on LGBTQ newcomers comes from North American and Canada in particular, which is notable for accepting a large number of immigrants, as well as for having some of the most LGBT-friendly immigration and refugee legislation in the world. However, these populations still commonly encounter significant systemic challenges when they migrate and make efforts to settle in Canada (e.g., LaViolette, 2012; Rehaag, 2008/2009/2011). LGBTQ
newcomers in North America may face any of the common challenges of being a newcomer including racism, having non-transferable credentials/skills to gain suitable employment, language and financial barriers, family separation and reunification, housing, and finding culturally competent medical and mental health support services (Kiang et al., 2010; Suarez-Orozco et al., 2002; Yakushko et al., 2008).

However, in addition to the typical settlement barriers, LGBTQ newcomers face other physical and emotional dangers and barriers of transphobia, biphobia, and homophobia. Firstly, LGBTQ newcomers (specifically refugees and asylum claimants) often undergo retraumatization within the claimant process, as a result of a lack of support and coping skills to manage traumatic triggers when disclosing their trauma histories during immigration board hearings (e.g., Jordan, 2009/2013). Relatedly, due to experiences of LGBTQ-based discrimination and trauma in the home country and in the receiving country, newcomers may be less willing, comfortable, or safe to disclose their needs and experiences to individuals who represent authority, or to service providers who are not perceived as culturally competent to clients (Chavez, 2011). When newcomer clients decline to disclose important information about their mental health, needs, and physical safety concerns to settlement service providers, these providers may then be less able to assess their clients’ needs adequately to make appropriate service plans or referrals to available services.

Secondly, in addition to the typical experience of isolation, family separation, and alienation, LGBTQ newcomers are likely to have left their families and migrated alone to escape from danger presented by family, friends, or community. Further, their conational community or the dominant cultural community in the new country may continue to represent the similar dangers as those faced in the home country. As a result, LGBTQ newcomers often lack the more
typical social and familial support, that other newcomers might still have access to (O’Neill & Kia, 2012). Apart from the presence of any homo/bi/transphobic discrimination, the conational community within the new country may also be unable to provide cross-cultural knowledge outside of emotional support. LGBTQ migrants may be further isolated or alienated from a mainstream LGBTQ community or settlement agencies based on racist or classist discrimination and/or language barriers (Lee & Brotman, 2011). For example, O’Neill (2010) found that when services are accessed, lesbian, gay, and bisexual newcomers described commonly avoiding speaking with service providers in reference to their private matters of sexuality. These newcomers described fears that Western service providers would assume that any admission of same-sex sexual orientation should automatically subvert and make irrelevant the newcomer’s original ethnic identity in favour of adopting that of the dominant culture. Similar experiences of pressure to choose between an individual’s culture and her/his sexuality occurred in mainstream LGBTQ spaces investigated in Lee and Brotman (2011).

Third, the findings within the LGBTQ identity and newcomer literature also reflect new understandings and expansions to our conceptualization of these experiences. That is, new literature suggests that there is an even greater diversity of gender experience as well as sexual and romantic attraction than has ever been studied (see Kuper et al., 2012). This research highlights a gap in our understanding of sexual orientation and gender in all cultures, let alone Western culture. Given that service providers do not commonly have any understanding of the lived experiences of LGBTQ newcomers, this puts clients at risk of unintentional or intentional discrimination, as providers struggle to assess and meet client needs with depressed understanding of their experience of trauma or settlement in general (Nicol et al., 2014; MOSAIC, 2015; O’Neill & Kia, 2012). Therefore, if service providers make assumptions based
on commonly held stereotypes of LGBTQ and newcomer people, they may fail to adequately and respectfully assess LGBTQ newcomer client needs in a person-centred manner. Resultantly, the literature suggests that they are liable to erase important features of client identity and create experiences of alienation in ways that impact psychological and physical health (Chavez, 2011). Overall, concerns for client safety and needs assessment puts substantial pressure on service providers to have high levels of intersectional cultural competencies, and to understand the intersectional complexity of their cultural and LGBTQ needs (MOSAIC, 2015; Travers, 2010). Without the appropriate skills and resources, service providers have been said to be less able to build and maintain trust and relationship with LGBTQ newcomer clients in order to provide them with appropriate services.

**Settlement Work: Training, Policy, and Practice.** Social work and settlement literature on practice and training emphasizes the lens of human rights and citizenship rights’ approaches to practice, as well as ethnic-sensitive and culturally competent approaches, and preventative approaches (Lopes & Thomas, 2006). Foundational training materials instil in social service workers the value of multiculturalism and multicultural practice competencies, meaning that providers recognize their framework and system is culturally-constrained, and that their services must accommodate and be inclusive of diverse client backgrounds to dismantle oppressive systems that might further marginalize clients (Atkinson et al., 1993; Sue and Sue, 2013). The framework further implicates an expansion of the traditional service provision role to include advocacy and activism to further address systemic barriers for clients. However, while mainstream settlement and social services agencies utilize multicultural counselling and service frameworks, it is largely the domain of grassroots organizations to provide the role of advocacy for the most marginalized clients (Martinez-Brawley & Zorita, 2011).
Currently, as political and community awareness of newcomer issues and needs grow, some authors argue that settlement work as a field is in the process of dramatic change to become an independent profession. To these authors, it seems likely that the field will need to be developed further to meet the needs of growing newcomer populations with the skills settlement workers bring, including expertise and multi-service advocacy and transition abilities to support clients with community integration (Turegun, 2013). For instance, social service providers in Clevenger and colleagues (2014) shared a common belief that there should be legislative policy and programming in place to act as a “safety net” for refugees and other marginalized newcomers, and that the receiving community should recognize the barriers it possesses to basic means of success (such as housing, employment, and mental and medical health support).

**Training.** Despite a focus on human rights in the discipline, training programs for social service workers often neglect to include content on societal attitudes toward LGBTQ individuals, newcomers, or the intersection amongst these identity categories, and thereby have been linked with low competencies and inferior service provision for LGBTQ clients (Einbinder et al., 2012; Lyons et al., 2010). However, low awareness and understanding of the lived experiences of LGBTQ newcomers is common with social services trainees as well as with policy makers and the general public (Nicol et al., 2014). For instance, within both public opinion and policy debates in many parts of the Western world, there are often diverse opinions, misunderstandings, and assumptions of what the term “immigrant” actually means. In many cases, immigrants are commonly envisioned to include asylum-seekers and refugees, without context of residency and naturalization pathways, lengths of stay, geopolitical and economic motivations for migrations, or the impact migration has on families, communities, and individuals (Blinder, 2015). This
definition is therefore highly limited and does not allow for a full appreciation for the systemic forces that impact the lived experience of LGBTQ newcomers.

Further, Bhuyan and colleagues (2012) have argued that what trainees of social work and settlement work are taught about the nature of migrant individuals and immigration policy impacts the way they practice their work later on, and subsequently impacts clients’ perception of being accepted, understood, and helped during the service provision. Similarly, the presence of homophobic attitudes of the educators in social work training programs has been associated with negative attitudes against gay men and lesbian women later in trainees’ careers. As a result, the literature supports a change in training programs to address the societal impact, attitudes, policies toward, and lived experiences of LGBTQ newcomers as a more profound way of teaching such competency and create more meaningful service provision (Bhuyan et al., 2012; Clevenger et al., 2014; Einbinder et al., 2012; MOSAIC 2015).

Finally, while multicultural counselling and social service competencies are more commonly taught in training programs for settlement workers, this competency area commonly neglects to address LGBTQ newcomer issues. Further, some researchers have suggested that LGBTQ competencies may not be suited to traditional multicultural counselling competency training and practice paradigms, given that a much greater amount of psycho-education on human gender and sexuality is necessary for service providers to truly empathize with, understand, and be able to competently respond to LGBTQ client needs in the same way that a provider might respond to multicultural or intercultural client contact (Borrego, 2013). As a result, a specific, targeted preparatory coursework on policies related to, and lived experiences of, LGBTQ newcomers is necessary to expand trainee understanding of intersectional lives and how to meet their needs on an individual and group level. Teaching trainees competencies in
LGBTQ issues has also been posited to be more effective in reducing negative attitudes toward LGBTQ individuals rather than limiting preparatory coursework to the legislative and policy issues regarding the population. This shift in focus to the lived experience of LGBTQ newcomers confronts societal attitudes of discrimination and prejudice against LGBTQ individuals, and allows service providers to more deeply empathize and assess client needs than training in a general awareness of population facts allows (Einbinder et al., Fredriksen-Goldsen et al., 2013)

Counselling Psychology. Commonly, settlement work is associated most heavily with social work, governmental immigration bodies, and multicultural community support organizations, but does not typically recognize the role that mental health professionals like counsellors play in a newcomers’ settlement experiences. Over the past two decades, training and practice guidelines have incorporated social justice frameworks and an expectation of flexible roles into the traditional professional role of therapeutic mental health support (Atkinson et al., 1993; Dworkin & Yi, 2003). Direct social justice experience and the presence of social justice content within training programs is supported in the literature as a useful way to encourage and provide the skills for students in counselling psychology programs to act toward social justice orientations in their careers (Toporek & Vaughn, 2010). Wider awareness of systemic issues on client lives has provoked research and practice guidelines to be written, advising counselling psychologists to, firstly, look inward and examine personal beliefs and prejudices, and secondly, to explore outward to alternative, culturally-relevant counselling techniques and roles. These expanded roles may then ask the psychologist to take on advocacy and bridge roles between services and clients (Chen & Vollick, 2013; Yakushko et al., 2008).
As evident in this shift in training, a deeper demand exists upon practitioners to expand their awareness of an external locus of control as it may exist for marginalized clients who face intersectional systemic barriers, rather than identifying all client barriers as internal limitations of skills, resources, or competencies (Osipow & Littlejohn, 1995). Practically, counselling psychologists can and should be trained in social justice to increase the likelihood of these individuals challenging heterosexism and homo/bi/transphobia in their later professional work and personal lives (Rostosky & Riggle, 2011). As such, social justice becomes a new lens of work for counselling professionals with which to assess client needs and determine appropriate interventions. Resultantly, the shift incorporates social psychology lenses of micro and macro systems and recognizes how individuals exist amongst them, expanding traditional counselling to be applicable and beneficial to a wider client base. These types of training programs change the field by more closely aligning counselling psychologists with social work and other social service fields and set the stage to provide more streamlined care for clients with intersectional challenges. Client empowerment is also facilitated and made possible by the conceptual shift of locus of control from the individual to an outward acknowledgement of societal prejudices and attitudes that work against LGBTQ newcomer clients. Such a shift also builds better holistic relationships and trust between client and counsellor, who may be then positioned as an ally and advocate (Simich et al., 2005; Toporek & Vaughn, 2010; Turegun, 2013).

Finally, an important shift in training and literature in counselling psychology has taken a deeper awareness in treating trauma for individuals who are immigrants and refugees, and whose physical and psychological experiences of trauma may be different than common civilian or non-migrant clients (Maier, 2015). As such, counselling psychology is slowly becoming more able to assess and meet the needs of individuals with complex trauma, such as developmental trauma
accompanied with experiences of war, torture, or homo/bi/transphobic violence further complicated by the settlement process (Asner-Self & Marotta, 2005).

**Experience of the Work.** Only a handful of research studies have explored the experiences of service providers who work with LGBTQ individuals, newcomers, or otherwise. For example, in their survey of service providers who work with LGBT youth, Travers and colleagues (2010) found that out LGBTQ-identifying service providers felt pressure from their agencies to be LGBTQ “experts” and therefore were expected to take primary responsibility in managing the intersectional, complex needs of the LGBTQ youth at the agency. These providers described concern over institutional homophobia or a widespread lack of LGBTQ competency among colleagues perhaps lowering the quality of service. In order to compensate for any reduction in beneficial service from less-competent colleagues, the LGBTQ-competent providers built and drew upon “secret networks” of colleagues for referrals. In other words, where the system and policy was lacking in meeting client needs, individual providers were obligated to step forward and bridge the gap independent of the overarching system. This experience was described in the research as an example of institutional homophobia and resistance to system-wide change. As such, these service providers suggested additional and ongoing training in the area of LGBTQ competency for all agency staff as well as changes in agency policies. Due to an ever-increasing diversity of clients, service providers surveyed in Travers and colleagues’ (2010) study felt that specialized programming for vulnerable groups should be coupled with policy changes that increase the accessibility of relevant services for LGBTQ youth clients. The demand for policy change according to service provider recommendation is both supported by and described as an expected system of change by the anti-racism activism framework (see Lopes & Thomas, 2006).
Similarly, other researchers have explored social workers’ experiences of training and service provision for newcomers. For instance, Clevenger and colleagues (2014) reported that service providers in the settlement field felt motivated in their work by an internal “ethic of refuge.” More specifically, these participants felt driven by a belief in their moral responsibility as community members to reach out and to use all of their skills and resources to help meet the needs of newcomers to the community. Further, in a study conducted by Yan and Chan (2010), social workers reported feeling unprepared for work with newcomers and felt less able to support newcomer mental health needs than other clients. However, these service providers did feel comparatively more prepared and able to support their clients’ immigration status and sponsorship concerns, and to a lesser extent, their cultural adaptation. As such, these social workers indicated that their anti-oppressive training backgrounds were necessary but not fully sufficient to settlement work. They felt that their work demanded a deeper knowledge with regards to immigration policies and available settlement programs, and they also perceived a gap in their preparatory coursework that would offer them guidelines and deeper awareness in how to address client challenges and needs that are unique to newcomers compared to other marginalized groups. A majority of the providers in this study agreed that work with newcomers should require new mandatory or elective coursework in both undergraduate and graduate levels of training on issues pertaining to this demographic. Given that there is little preparatory training for work with newcomers in general, it becomes substantially more imperative for the addition of further coursework on the intersectional nature of migration with sexual orientation and gender identity, given that these clients are often highly vulnerable compared to other client demographics.
Lenette and Ingamells (2014) highlight important gaps in the current area of settlement work and community knowledge, and urge for the expansion of community development. They call for more substantial community-building through settlement agency policy and vision. Recognizing that the current settlement area provides social support and cultural transition experience via social event programming and group experiences, the authors suggest to expand this definition of community. They identify to three vital layers of “community” which must be addressed and connected for progressive service provision. These three layers of community include 1) the immediate geographic surroundings and community; 2) the community of those with shared circumstance, or peers; and 3) those with a shared ethnic identity, or, the individual’s conational community. By increasing the knowledge, skills training, and programming for vulnerable groups at all three levels, all aspects of community can be connected as a supportive force for vulnerable group members. Further, the authors suggest that raising awareness in the community as to the lived experiences and challenges of LGBTQ newcomers would have a beneficial impact on social climate, as well as public and legislative policy. As the current system stands, they argue that vulnerable individuals are often forced to wait until they reach a crisis point before they may access supportive services. The implication of seeing clients only at their most vulnerable point, such as in crisis, at risk of being homeless, or suicidal, means that preventative care and early intervention are not possible. As such, service providers are restricted to triage style support in many cases, and skills, resources, and training are not efficiently utilized to better prepare service providers to meet the needs of LGBTQ newcomers (Omidvar & Richmond, 2005).

Few services exist in the settlement field that are specialized enough, and accessible, to provide support for LGBTQ newcomers with complex needs (Chavez, 2011; O’Neill, 2010)
O’Neill & Kia, 2012). Service providers and settlement agencies in the field are increasingly realizing the need for training and progressive immigration policy, funding, and programming in order to both assess and meet the needs of their LGBTQ newcomer clients. For instance, advocacy groups such as Rainbow Refugee and the Ontario Council of Agencies Serving Immigrants make efforts to reach out to community members and agencies, as well as to legislative bodies and immigration officials to increase awareness and competency with regards to LGBTQ newcomers. Settlement agencies like the Multilingual Orientation Service Association for Immigrant Communities (MOSAIC) and the Affiliation of Multicultural Societies and Services Agencies of BC (AMSSA) have recently applied for funding and subsequently offered short term programming to expand knowledge and training with regard to service needs for clients and training needs for service providers (MOSAIC 2015; AMSSA webcast 2015). However, service providers and settlement agencies are aware of how precarious funding for specialized services, and how challenging it currently is to both meet the needs of clients with trauma needs due to wait lists as well as due to providers with insufficient training and cultural competencies to provide these vital services (Nicol et al., 2014).
Chapter Three: Research Methodology

The present study employed a phenomenological research design to define and explore the phenomenon of settlement work with LGBTQ newcomers. Specifically, the following research question was investigated: “What are service providers’ perceptions and descriptions of their work in supporting LGBTQ immigrant clients?” This chapter explains the underlying research epistemology, the background of the phenomenological tradition of inquiry, and the specific approach selected for this study (i.e., descriptive phenomenology). Further, a rationale will be provided for the suitability of the research design in addressing the research question, and the specific procedures used in this study will be presented, including participant recruitment and selection as well as data collection and analysis. The final section of this chapter will discuss the researcher’s subjective stance in context with the central phenomenon, a parallel description of measures employed to ensure the credibility and trustworthiness of the study, as well as ethical considerations of the research as a whole.

Epistemology

The epistemology guiding this study has its foundations in Michel Foucault’s analysis of thought, knowledge, and expertise (Giorgi, 2009), as related to intersectional feminism and social justice paradigms of research. Central to this epistemology lie the notions of knowledge deconstruction and intersections of cultural identities and social locations (Sinacore et al., 2011). More specifically, beginning with Foucault’s suggestion that social and hierarchical categorization being a method of social regulation that enables “professionals” (e.g., doctors, psychologists, and social workers) across time and cultures to secure their status as “experts,” where knowledge is wielded as imperialistic and often as a method of regulation and control (Gibson, 2010). Accordingly, the intersection of sociopolitical power dynamics (such as gender,
socioeconomic status, race/ethnicity, religion, and sexual orientation) has been the determinant of human truth, meaning-making processes, and knowledge.

Indeed, Kimberle Crenshaw (1989), writing on the multidimensionality of black women’s experience specifically, is credited as the originator of the term intersectionality in feminist philosophy. She argued for the acknowledgement of how intersecting marginalized identities may be erased within the same individual in ways that undermine feminist praxis and social justice. Crenshaw argues that dominant conceptions of discrimination take on a stereotypical and reductive conception that “condition us to think about subordination as disadvantage occurring along a single categorical axis” (p.140). In doing so, mainstream feminist and social justice practice limits the inquiry into human experience and erases and reduces the manner in which multiple marginalized and subordinate identities interact. As such, it is vital for the epistemological backbone of this study to acknowledge intersectionality as key to feminist and anti-racist praxis in human experience.

In order to reject non-intersectional epistemologies, Gibson (2010) incorporates Steven Hick’s social justice-oriented social work framework, to urge service providers in the human services fields to “think through” mainstream “truths,” such as heteronormativity, to avoid creating reductive and simplistic ways of relating with clients, which impose power and ways of being over them. This framework is a balance of self-reflection and individualized, fluid, and counter-positivist ways of understanding identity categories “that inquires rather than categorizes” (p.243) aspects of human life. Taken alongside Crenshaw (1989), the service provider, and in this case, the researcher, must inquire into the individualized lived experience and appreciate the multidimensionality of human life, with special attention toward marginalized identities and the intersections amongst them.
Finally, while intersectional feminist praxis includes anti-stereotyping and oriented away from oppressive and reductive sociopolitical boundaries of identity, such an epistemology would remain incomplete without the inclusion of a justice-orientation that reaches towards systems of oppression outside of the service provider-client (and researcher-participant) dyad (Naples, 2013). Naples (2013) argues for a larger project of feminism that takes on an active, democratic, political consciousness, which shapes conscious and non-conscious action to create change at a localized and global scale. In addition, this epistemology must not be rigid, and must be open to reformulation along a self-reflexive, critical, intersectional lens that takes into account lessons from changing political and cultural contexts. Such a justice-oriented lens critically reflects upon what works “in different sites with attention to systems of inequality that inhibit and strategies that enhance” participation in social projects for democracy and sustainability.

**Phenomenology: Context and Background**

Phenomenology is a branch of philosophy adapted as an important qualitative research framework that describes a scientific methodology prioritizing individuals’ direct experience of phenomena in order to determine their essences and meanings (Bernard & Ryan, 2010). The philosophic and psychological underpinnings of the phenomenological methodology in psychological research were described by Edmund Husserl (1859-1938) in response to Cartesian thought, and were later expanded upon by Heiddegger, Jean-Paul Sarte, Simone de Beauvoir, and others (Moustakas, 1994). For Husserl, the dehumanizing scientific methods used in studying physical phenomena were inappropriate for application to the study of human psychology and action (Wertz, 2005). As such, Husserl believed that in place of neopositivist thought, research and philosophical methodology must respect the biases of everyday knowledge as the basis for the equally powerful subjective truth of human life experience (Moustakas,
Husserl argued that the meanings of a human’s subjective experience of “truth” come from acts of consciousness and intention, illustrating a determinate relationship between an object and an act or process of consciousness (Giorgi, 2009). Meanings, then, are viewed within the framework of intentionality as a process describing the way acts of consciousness are directed toward objects in the environment; upon reflection, one can discover that the conscious act directed toward that object was determinative and specific, and that particular quality is the meaning (Edmonds & Kennedy, 2013; Wertz, 2005).

**Descriptive Phenomenology.** Phenomenology may be separated into two branches: interpretive and descriptive, both of which position the researcher in different ways in reference to the descriptive data collected from research participants. The present study utilizes the descriptive approach of psychological phenomenology put forward by Amadeo Giorgi (2009). The methodology described by this scholar outlines a set of research steps to investigate psychological phenomena, which represent modifications of Husserl’s self-reflexive methods, by prioritizing and grounding the research findings within the data itself rather than on the researcher’s interpretation of that information. Giorgi’s (2009, 2010) descriptive phenomenological methodology fulfills the philosophical requirements of intersectional feminist praxis and social justice orientation by positioning the participant descriptions of the lived phenomenon over the interpretive role or responsibility of a researcher to impose or co-create meaning of that phenomenon.

According to Husserl, all individuals have their own *lebenswelt*, or life-world, of meaning-making processes and objects. In order to pursue an objective analysis and description of participants’ lived experiences (their life-world), the researcher must abstain from relying on a priori knowledge of theory and experience to avoid bias (Wertz, 2005). Such abstentions taken
by the researcher are known as *epochés*, which are abstentions from the researcher’s scientific and personal influences that could bias descriptions of lived experience away from subjective meaning and meaning-making processes. The process of bracketing (or *epoché*) will be discussed in greater depth later during a discussion of the management of the researcher’s subjective stance. Resultantly, the bracketing step of the descriptive psychological phenomenology is known as the phenomenological reduction, which reduces the researcher’s analysis to the description and reporting of the structure of the psychological experiences of participants (Giorgi, 2009). In doing so, the researcher explores and analyzes horizontal factors specific to participants’ personal experiences and psychological interests without advancing a universal element of the experience. However, the exploration of a phenomenon is best pursued with the investigation of multiple participants who have share a common experience. In this case, the central phenomenon of interest is service provider’s perceptions and descriptions of their work in supporting LGBTQ immigrant clients.

**Participants**

The following section presents relevant information regarding participation in this study. Specifically, the criteria for selecting potential participants as well as the recruitment steps undertaken in this research are described.

**Criteria for participation.** According to the research question, the phenomenon of interest requires that service providers with experience providing settlement-related services to LGBTQ newcomers must be directly involved in the research. These participants provided the descriptions of the phenomenon of interest, which constituted the raw data for the study. As such, criterion sampling was used to attempt to select participants who could provide highly detailed descriptions of the phenomenon of interest (Morrow & Smith, 2000). Criteria for
inclusion of a prospective research participant was an individual who can describe their experiences of the phenomenon of interest from the perspective of their lifeworld and from within the natural attitude. The expectation was for participants to be “phenomenologically naïve,” and as such, the raw data must be complex and presented precisely as it is lived with, “thick with its ambiguities and relationships” (Giorgi, 2009, p.99).

Given that the phenomenon of interest is the service provider’s perceptions and descriptions of their work in supporting LGBTQ immigrant clients, the study set out to recruit 10 to 20 adult individuals who a) work as a service provider with newcomers, b) have at least one year of experience working with LGBTQ newcomers in a capacity as a service provider, and c) are comfortable conversing in English in a one-on-one interview with the researcher about their professional experiences working with LGBTQ newcomers. For the purposes of the present study, service providers were included if they work in settlement areas that relate to the social and psychological aspects of settlement work such as counsellors, social workers, and settlement workers. These areas of settlement work were defined as a key aspect of the phenomenon of interest since the bio-psycho-social-spiritual adaptation of a newcomer to the everyday lived experience of a receiving community determines the success and satisfaction of the psychological migration process for many migrants (e.g., Landis, 2011; Shurupova, 2007). Further, “experience working with LGBTQ newcomers” was defined for participants as including direct work with clients who a) identified as on the lesbian, gay, bisexual, trans, and/or queer, b) migrated to Canada or the United States, and c) accessed their services through a settlement agency or came to counselling or social work services with presenting concerns related to migration, settlement, and cultural transition processes.
In order to better explore the experience of service providers in these fields, inclusion criteria for experience with newcomers was left open to include individuals who may be immigrants, refugees, asylum-seekers, or long term / permanent residents who still present to settlement-related services with concerns around cultural transition. Furthermore, the one-year work experience criteria was selected to be able to collect descriptions of the service provision experience from individuals with an initial to more established range of experience with LGBTQ newcomers. Prospective participants were excluded from participation if they provided purely legal or medical support for newcomers, as these areas do not address the psycho-social acculturative and settlement experiences and needs in terms of direct, lived experience.

At the outset, the goal was to recruit 10 to 20 service providers. A review of phenomenological literature suggests that the general trend in a phenomenology is to recruit six to ten participants, given the labour intensive work of analyzing the raw data (Langdridge, 2007; Reid et al., 2005). However, Wertz (2005) suggests that the guiding marker of recruitment and data collection be based on saturation, which is defined as repetition and redundancy in the findings that indicate that a rich phenomenological description has been obtained. Through this lens, data collection concluded at twelve participants. While saturation was judged to be reached at the tenth participant, the final two had the richest experience with the phenomenon of interest (i.e., years of work with numerous LGBTQ newcomer clients within the settlement field). As such, the final two interviews were valuable as an upper limit to check the data of the prior ten participants and confirm saturation had been reached.

**Participant recruitment.** Following approval by the Behavioural Research Ethics Board (BREB) of the university institution, research participants were recruited via snowball sampling, direct contact with settlement agencies and service providers, and poster in post-secondary
and LGBTQ community spaces. During the initial stages of recruitment, an informational letter to organizations and a recruitment poster (Appendixes A and B) were sent out to several settlement, counselling, and post-secondary educational institution centres who offer settlement, social work, and counselling services. Examples of these sites include Family Services of Greater Vancouver, Mosaic Settlement services, Immigrant Settlement Services (ISS) of BC, North Shore Family Services, the Vancouver Association for Survivors of Torture (VAST), the Vancouver & Lower Mainland Multicultural Family Support Service Society, QMUNITY, DiverseCity, the Health Initiative for Men, the American Psychological Association (APA) listserv, the Intercultural Association of Greater Victoria, and several other settlement and mental health agencies in Ontario, Canada.

Thus, service providers and agencies in the settlement field were contacted in Vancouver and surrounding Lower Mainland areas, Vancouver Island, over the APA listserv, and Toronto, Ontario. Contacts at these agencies were provided with information regarding the research project including a description of its scope, significance, contributions, methods, requirements of participants, potential outcomes, and the offer to participate in a gift card draw as honorarium for participation in the research. Contacts were also invited to forward the information to colleagues, and interested parties were asked to contact me directly for further inclusion screening and information about the study. During the course of data collection, I was invited to participate in a networking group for service providers who work with LGBTQ newcomers, and a e-symposium by AMSSA, and my contact information and information about the research recruitment was distributed in these settings as well.

During contact by prospective participants, eligibility was screened via phone or in-person communication (see Appendix C). Questions, comments, and concerns were also invited from
potential participants during the phone or in-person screening, and appointments for interview meetings were also arranged during this time. Participants were also informed that they were free to withdraw from the study at any point with no penalty (for instance, they would be able to stay in the draw for the gift card). Throughout the recruitment process, there were few prospective participants who were ineligible to participate based on their limited experience with LGBTQ newcomers, and there were few unique contact attempts from individuals without my initial introduction of the project to them. Prospective participants who contacted me also frequently asked to have copies of the recruitment materials to pass along to their colleagues and contacts, and also often introduced me to these contacts themselves.

A major challenge that appeared during recruitment was a shortage of interested prospective participants who contacted me themselves. The majority of participants were recruited as a result of cold-calling individual service providers and agencies and speaking with someone in person or over the phone, or via direct referral from a personal contact of mine in the settlement field. As a result, during the slow recruitment and data collection process, an amendment was made to BREB to expand the study’s breadth across Canada and the USA, and accommodations were made to facilitate Skype and phone interviews for distance interviews with participants who may live in rural areas or in other parts of Canada or the United States. However, the final pool of participants was all from the Lower Mainland (Vancouver and surrounding areas) of British Columbia.

**Data Collection**

The following section will outline data collection for the present study. This process required participants to complete an informed consent form, a demographic questionnaire, as well as a qualitative interview.
Obtaining informed consent. I began each meeting with a participant by explaining the informed consent procedures of the research project according to UBC’s BREB requirements. I presented each participant with their own copy of the consent form (Appendix D) and went through the details of the study to outline participant and researcher expectations, contact information, confidentiality and anonymization of data, and the limits to confidentiality. I also asked for a form of contact for each participant, which I explained would be used to contact them later in the study for member checking, and notification of winning the gift card (if applicable). Participants were informed that all aspects of the study were voluntary and they could withdraw at any time without penalty. One of the twelve informed consent procedures was undertaken over the phone, and in this case, a digital copy of the informed consent form and demographic questionnaire were sent between the participant and researcher.

Participant demographics. I began the data collection process with a brief, one-page demographic questionnaire (Appendix E) that participants were invited to fill out independently prior to the interview, with the exception of one phone-based interview who had a digital copy that was filled out after the interview appointment and emailed to the researcher. Participants were invited to respond to the questions in a voluntary manner, and informed that all questions should be answered with respect to their own personal comfort and relevance. As such, some participants left questions about religious affiliation or sexual orientation blank. Participants were not prompted to clarify their responses to the questionnaire, but conversely, they occasionally asked me about the intent and target for particular questions such as how to quantify years of experience.

The qualitative interview. A one-on-one interview was the primary method of data collection with participants in this study. Each participant was interviewed by myself with an in-
depth, semi-structured interview protocol (Appendix F). Each interview lasted sixty to ninety minutes in length based on depth of participant disclosure and the inclusion of any related side-discussion. Interviews were conducted predominantly within participants’ workplaces in a private office, with one interview undertaken in an individual’s home, one via Skype, and two in private spaces of public coffee shops. In the case of public spaces, participants were consulted and checked in with, prior to, during, and following the interview about their level of comfort. Interviews were recorded digitally in two copies using password-protected hand-held devices.

The aim of the semi-structured protocol was to guide participants in providing a description to answer the research question of exploring the experience providing settlement services to LGBTQ newcomers. Generally, interview protocols guide the researcher in asking all participants similar questions in a flexible manner, which can be modified according to details and order of topics covered (Bernard & Ryan, 2010). Giorgi (2009) suggests that a deep literature review should not precede the production of the semi-structured phenomenological interview protocol, so as not to bias the interview subject matter by accidentally or intentionally distancing the service provider’s description from their lived experience, as given within their natural attitude. An initial literature review was conducted in order to get a general sense of the settlement work field, and questions were structured to be open while also directing participants’ attention at times to the work experience in terms of organizational features and collaboration with colleagues and other organizations.

General themes within the semi-structured protocol therefore included: a) warm-up questions for rapport-building; b) examples and descriptions of experiences working with LGBTQ newcomers; c) educational/training and professional backgrounds; d) facilitating and challenging organizational or personal aspects of the work; and e) closing process-related
questions to assess participant interview experience and invite further comments or discussions, which may have been left out of the prior conversation. Overall, questions and prompts were also adapted in vivo to direct participants’ descriptions toward that of their direct experiences of the phenomenon of interest.

Additionally, I attended interviews with a list of local supportive resources (Appendix G), such as counselling resources, should participants feel triggered during interview. The need for such resources was assessed during interviews when sensitive or highly emotional subject matter was discussed, and I checked in with participants when necessary to ensure their comfort to continue the interview or to post-pone it during these moments. In doing so, I drew upon my prior training in counselling psychology and seven years of crisis intervention and suicide assessment experience. Overall, such assessments of safety arose during two interviews, and both participants reported that they were well-supported already for their emotional needs, and were not feeling triggered or overwhelmed by the interview.

Data Management and Analysis

The following section describes the procedures that were followed in managing and analysing the data throughout the study.

Data management. According to Giorgi’s (2009) steps, the researcher begins the descriptive phenomenology by obtaining concrete descriptions of experiences from others who have lived through the phenomenon of interest directly. Such descriptions are usually obtained by verbal interviews with the researcher. The description obtained via interview constitutes the raw data, which describes that individual’s subjective experience according to their natural attitude. Following data collection, the researcher must analyze the data from within the phenomenological reduction, focused on the psychological attitude of the participant in mind, in
addition to that individual’s specific, horizontal context (i.e., positionality, gender, age, ethnicity/race, sexual orientation), which was gathered via the interview and the demographic questionnaire. I transcribed each interview verbatim from the digital audio recordings, verified the transcription for accuracy, and anonymized any identifying details such as organizational, peer, or client names or details. Transcripts, demographic information, and consent forms were anonymized and kept separately within locked cabinets in a secure location, with digital files being password-protected.

Data analysis. Raw data (interview transcripts) were uploaded into the qualitative software called ATLAS.ti. Each transcription was then analyzed using the detailed procedural steps outlined by Giorgi (2009) for Husserlian descriptive phenomenological analysis. The analysis steps included: 1) reading transcripts as a whole; 2) identifying meaning units; 3) transforming meaning units into psychologically sensitive descriptions; and 4) forming the overall structural descriptions. Although Giorgi’s (2009) method for descriptive phenomenology was utilised in this research project, certain adaptations were made to the analysis and data display based on the contributions of other scholars in descriptive phenomenology. Specifically, Creswell (2009) and Moustakas (1994) suggest analysing the meaning units (see next section) and identifying the horizons of the essence of the structure of the phenomenon as including both common participant experiences in addition to unique experiences. This adaptation was applied to the research design due to the diversity of the sample, for instance, in terms of years of experience working with LGBTQ newcomers as well as diversity in field and role of settlement work. Due to this diversity, these multiple lenses of the essence of the phenomenon were deemed to be necessary for a deeper understanding of the essence of the phenomenon. In addition, peer auditing of the
Step 1: Reading over interview transcriptions as a whole. As mentioned above, prior to analysis, each transcript was transcribed and then read over while listening to the audio recording as an accuracy check. The accuracy check reading of the transcript as a whole provided an opportunity for me to immerse myself within the data and get a sense of the description as a whole (Giorgi, 2009). According to Giorgi (2009), the Husserlian phenomenological approach views data analysis as a holistic process as it accepts that meanings found within descriptions “can have forward and backward references and so analyses of the first part of a description without awareness of the last part are too incomplete” (p.128). To proceed with this initial analysis step, the researcher must assume the attitude of the scientific phenomenological reduction, which is a psychological perspective that allows the researcher to be sensitive to the implications of the data description in the context of the phenomenon being researched. At this stage, the goal is not to try to clarify or explicate the global sense of the participant’s description. Also, no physical notes will be taken during this reading; for now, the researcher reads over the description and mentally notes changes in content in terms of “intentional objects of the lifeworld description” given by the participant.

Step 2: Identifying meaning units. Giorgi (2009) advises that the second step of analysis includes returning to the start of the transcript description and segmenting or delineating quotations known as meaning units that speak to an initial psychological meaning-making process. The author further clarifies that while the psychological phenomenological approach is based in holism, a sense of the whole description is made up of the overall sense of the individual parts within the description of the phenomenon. As such, the researcher must adopt
the attitude of phenomenological scientific reduction, within an overall “psychologically sensitive perspective” that is held alongside a continual mindfulness of the specific phenomenon being investigated (Giorgi, 2009, p.129). Thus, each participant interview was broken down into discrete parts (meaning units) during a second full reading where the researcher attended to the psychological process of meaning-making suggested by the participant descriptions. The delineation of meaning units informs the deeper psychological analysis by the researcher in Step 3, which will be discussed later.

In this study, textual delineation and therefore the identification of meaning units was assessed based on the researcher’s judgement of the following features: a) changes in topic within the description; b) the presence of contrasts or comparisons of topics, and c) the use of metaphors, analogies, or examples that may be further described by “indigenous typologies” which are unfamiliar, colloquial words to service providers in the settlement area, or familiar words used in an unfamiliar manner by the participants (Bernand & Ryan, 2010). No deeper analysis of the psychological processes suggested by the description were utilized at this point (see step 3). For the purposes of identifying the meaning units, Giorgi (2009) argues that an individual sentence is a unit of grammar and not necessarily a unit of psychology, since it can be neutral, loaded, or empty of psychological meaning, and as such, a sentence’s psychological meaning alone in addition to in the context (or horizons) of the surrounding description contribute to the meaning found within it. Such a process is also affected by the researcher’s attitude and the psychological sensitivity brought to the analysis activity, which will be discussed in Rigour and trustworthiness (Giorgi, 2009).

**Step 3: Transforming meaning units into psychologically sensitive expressions.** The third step of analysis involves transforming the participant’s raw data, as segmented into individual
units of meaning (Step 2), into an in-depth, second-order description. The purpose of the transformative step here is to highlight specifically the psychological dimension (the psychological implications of the lifeworld descriptions, or the inherent meaning-making processes) of the phenomenon (Giorgi, 2009). In this third step, the researcher returns once more to the beginning of the participant description (that has markings denoting sections of meaning units from Step 2, described above). Each meaning unit segment is analyzed to determine how to make a more exact expression of the psychological implication it suggests to the researcher.

The key feature of the transformative, second-order psychological descriptions of meaning units is the psychological process of *free imaginative variation*, which allows for a reasonable level of invariance among the variable meanings to be achieved by the researcher. Free imaginative variation takes into account that the specific expression, or essence of the particular meaning unit, is influenced and in part determined by the researcher’s psychological attitude. While applying free imaginative variation, the “actually given data” are imagined to be “different from what they are in order to ascertain higher level categories that retain the same psychological meaning but are not embedded within the same contingent facts” (Giorgi, 2009, p.132). This process is held to a level of generality that elucidates the psychological characteristics that speak to the phenomenon of interest. The goal of describing the general psychology of the description is due to the powerful influence of context in addition to the fact that meaning units that speak to highly abstract psychological processes are less grounded in psychological “reality” (Giorgi, 2009, p.132). Thus, the meaning units are transformed into a psychologically sensitive phrase (which suggest the underlying psychological theme). The data is generalized to a certain degree to enable the researcher to integrate the data across all participants into one descriptive structure (see Step 4).
Specifically in this study, a third reading of the participant text commenced, where each meaning unit was read within the context of surrounding units. For instance, thematic relationships beyond simpler grammatical distinctions (Step 2) amongst segments of raw data (meaning units) were now assessed according to linguistic connectors that suggested causal features and relations, such as a participant providing comparisons, time-oriented and spatial relations, becoming circular or repeating descriptions, or providing metaphors and analogies of their experiences (Bernard & Ryan, 2010). Segmentation of themes that related to positive, neutral, and negative aspects of collaboration with colleagues were grouped within an overarching “collaboration” theme and another brief description summarizing the subthemes was compiled. As such, meaning units directly derived from the text data were used as the basis for describing the underlying structure of the service provider’s experience summarily (Giorgi, 2009). For example, a meaning unit describing the experience of a participant’s shared culture with a client was transformed into the second-order descriptive phrase, “Perception of personal impact on LGBTQ newcomers,” and brief notes or examples were included in memos with this transformed meaning unit (or generalized theme) as part of the audit trail (more on this discussed later).

**Peer auditing.** To ensure a high quality of peer auditing, a majority (two-thirds) of the transcripts were verified. Due to the time-intensive nature of the work, two peer auditors from the Counselling Psychology graduate program at the University of British Columbia were recruited required to verify step 3 of the data analysis procedure. Peer auditors were asked to read and sign a consent and confidentiality form (Appendix H). In order to prepare for this step, instructions and anonymized transcriptions were given to two peer auditors for a limited period of time. Procedure for the preparations for peer auditing was as follows: a) following steps 3 and
4 of the data analysis, where subthemes of meaning units were transformed into psychologically meaningful superordinate phrases (or overarching themes), I compiled one list of all transformed meaning units specific to each transcript that was paired with each anonymized transcript; b) a brief description of each transformed meaning unit in the list was included within the lists, in addition to examples and descriptions of the subgroups of raw themes that were taken into consideration for the transformation of meaning units (subthemes); c) transformed theme lists and their associated transcripts were given to peer auditors with instructions to use MS Word Track Changes and comments to highlight sections of transcript text and label the sections according to their perceived reflection of the superordinate themes from the relevant list provided. Auditors were further encouraged to verify the analysis by leaving any feedback and comments about the effectiveness of the themes in notes on the transcripts. In the final step, d) auditors then returned coded transcripts back to the researcher.

As such, auditors confirmed the transformed meaning units in the vast majority of instances. Where a few disagreements occurred, we would discuss the coding, and any persistent disagreements would be brought to a supervisor for final consultation. Any feedback was incorporated into the analysis where relevant, and then the transformed meaning units from individual transcripts informed the horizontal production of transformed meaning units across the entire data set.

**Step 4: Producing the structural description.** In the previous step, individual meaning units (e.g., “Being recruited by colleagues due to perceived LGBTQ newcomer competency”) were transformed by the researcher into psychologically pertinent expressions of thematic meaning, but without technical psychological jargon (e.g., “positive interactions with colleagues”). In this manner, the short thematic description of each meaning unit remains
grounded in the participant’s own words and descriptions. To do so, step 4 required that I
produced a more detailed but brief description of each meaning unit in terms of the underlying
thematic psychological meaning. As well, this was done with regard to related meaning units that
may be connected or contrasted with that particular unit. By connecting or contrasting related
units, I was able to add further elaboration and to give depth to the development of the
transformed structural description of the participant’s meaning-making process, as judged by the
thematic relationships amongst meaning units. Further, this process was informed where relevant
by the feedback from participants during validation and more importantly from verification and
feedback from peer auditors. The psychological goal of this step is to acknowledge and describe
how an individual human being organizes and displays the world to themselves, and how their
behaviour is affected based on that presentation (Giorgi, 2009, p.135). Giorgi (2009) suggests
that the phenomenological procedure known as free imaginative variance be used during this
step in order to allow psychological space from the raw data in order to contextualize the
meaning unit with the more complex, surrounding life-world of the participant to reach a more
general perspective. Also during this process, any remaining specific details of the description
were anonymized within the final summary description as much as possible, while attending to
the need for context and a balance of detail.

During step 3 of my analysis of the raw data, I needed to contextualize several aspects of
the participant description with my own knowledge gathered during the interview and from prior
and subsequent interactions with particular participants in the study. To clarify, four participants
engaged with me directly prior to or following the interview, or as part of the external service
provider networking group. During these additional encounters, no data was collected, but
context was gained into the life-worlds of these four participants and their service provision
work. Additional context included clarification of work roles, needs assessments for clients, and contextualization and further depth was given to specific newcomer challenges with cultural transition, such as references to the more direct lived process of settlement work that were not mentioned by participants but which was invoked by contact with peers during problem-solving group discussions. The additional data allowed me to expand my free imaginative variance to give greater depth to the transformation of raw participant data which may have been more ambiguous or simplified during the interview explication process. For one participant, this additional data also allowed me as a researcher to anticipate and accommodate the participant’s unique tone and style of speech which frequently ended thoughts prematurely or included drastic jumps in topic. The implication of this heightened familiarity with this particular service provider will be further discussed in the peer auditing and review section below.

Consequently, I composed brief but detailed memos of transformative descriptions for each meaning unit, to elucidate the general structure of the phenomenon being explored. Free imaginative variation allowed me to negotiate many of the differences that arose between “partial objects of fulfillment and those objects that fulfill the empty meaning precisely” (Giorgi, 2009, p.133) when gaps and ambiguities occurred in the analysis of the meaning units. The transformative descriptions are also undertaken according to an attitude of intersubjectivity, that is, with an awareness that it must be made “accessible to the critical other” (Giorgi, 2009, p.134) and transferable within the researcher’s and service providers’ community. Transformative descriptions are rooted in the words of participants as directed by the raw data, and are produced without academic external psychological jargon. Further, transformative descriptions of meaning units were not made in a one-to-one ratio, since reference was made to unique statements of psychological meaning within the participant description, in addition to occurrences of
repetitions of meanings, which were subsequently condensed into related transformative descriptions.

**Forming the overall structural description of the phenomenon.** The transformative descriptions of each superordinate meaning unit (e.g., “issues around working with colleagues”) informed the production of a structural summary of the essence of the phenomenon of settlement work with LGBTQ newcomers for each participant. First, a list was produced of the overarching transformed meaning unit descriptions which indicated thematic descriptions of psychological processes. The lists of transformed meaning units (from the beginning of step 4) were then compared horizontally across all participant summaries. Horizontalization of structural summaries across all participants provided a lens to further analyze the general structure of the phenomenon as experienced by all twelve participants to provide as meaningful a description as possible (Giorgi, 2009). Elements of unique and common thematic structures were then used to produce overall thematic summaries for the findings data display. This process resulted in three overarching structures, which combined provided the foundations of the general structure of the phenomenon of service provision for LGBTQ newcomers. These data findings were displayed through a more detailed exploration of each overarching structure (e.g., “issues around working with colleagues”) as broken down into subthemes (e.g., “positive/productive interactions with colleagues,” “negative/unproductive interactions with colleagues”) that are common and/or unique to the participants, in addition to an overall general structure description.

**Rigour and Trustworthiness**

A number of measures of rigour and trustworthiness were taken during throughout study. These measures were chosen to correspond with the epistemological roots of the research and to provide ways of establishing and assessing the quality of the research (Bryman, 2012; Morrow,
Criteria for assessing trustworthiness include credibility (authenticity), dependability (auditability), transferability (fittingness), and confirmability (Bryman 2012; Jackson & Verberg, 2007). Given the nature of descriptive phenomenology, it is important to examine the manner in which the research’s subjective stance was managed throughout the research process. The following section will discuss measures that were taken to uphold principles of rigour and trustworthiness in the research project.

**Researcher’s subjective stance.** As Husserl and Giorgi argue, researchers, being human beings, have personal life-worlds and meaning-making processes influenced by past experiences (Giorgi, 2009). In phenomenology, the reductive natural attitude is dependent upon the researcher being able to put aside personal thoughts, interpretations, and beliefs in order to step into the lived experience of another person. When a researcher carries personal experiences and knowledge into the phenomenon of interest, he/she may introduce bias, in addition to empathising more strongly with some participants than others (Bernard & Ryan, 2010). Bracketing is a process of ongoing engagement with explicating the researcher’s own beliefs and experiences, which is done in tandem with consultation with peers and supervisors, and consistent note-taking throughout the research process. These methods of *epoché* allow the researcher to conduct research with the least amount of external cultural influence as possible.

As the researcher, I must engage in this process to describe some of the experiences that have shaped the ways in which I see myself and the way I view the world around me. In order to do so, I will contextualize my worldview with a brief description of the events that have shaped who I am. I am a white, 27-year-old cisgender woman who identifies as bisexual and atheistic. I am a monolingual English speaker born and raised in Canada to parents and some grandparents who were also born or lived the majority of their lives in Canada, and a grandfather and several
great-grandparents who immigrated to Canada in their youth from Germany and the Ukraine as Doukhobor Russians who were practicing anti-war political protest. I have been raised in a stable nuclear family within a highly ethnically diverse, lower-income metropolitan area of Western Canada. As a result, I have had significant opportunities to navigate friendships and contact with individuals of many different ethnic, spiritual, socioeconomic backgrounds, and ability statuses. The specific community in which I grew up and have lived in largely to this day has been a primary area for new immigrants and low income and working-poor families to reside, with recent residential developments gentrifying the community and adding higher-income families and individuals to the area, many of whom are East and South Asian immigrants to Canada. There has also been a parallel growth of our refugee population from African countries within our community. As a result, I have witnessed some of the ways socioeconomic classes, white and racialized ethnicities, and multicultural communities can interact and affect community-based social justice projects.

Ultimately, the majority of my friendships and experiences with peers in school have been with multicultural communities, Canadian-born peers whose families have migrated to Canada, or who have immigrated themselves and have English as their second (or other) language. Within my nuclear family, I learned to navigate multicultural spaces with respect and openness. This stands in stark contrast with the experiences and beliefs of my extended family members on both my paternal and maternal sides: in these communities, the spaces and discourse were predominantly white, classist, racist, homophobic, sexist, Christian, and rural. Consequently, I felt uncomfortable in this environment and was not very attached to these family members, with my mother being the only emotional and active bridge between our family and our extended family, since my father also distanced himself from his family for the same reasons.
Both of my parents throughout my childhood were highly active and involved in our BC Housing and elementary school communities, in addition to our surrounding community where they engaged in community policing, advocacy for sex workers, and environmental clean-up projects. Both my parents have also been very involved in labour union activities and grassroots democratic participation projects. My father having been a shop steward for several years and a union representative. My older sister and I were always included in the political work of my parents, from supporting electoral reform, taking part in anti-war demonstrations, and community garden projects. These experiences taught me to be mindful of how systems of marginalization and oppression affect some individuals disproportionately. Indeed, I learned that as a female, cisgender, white individual born in Canada, I had the privilege and freedom to be exposed to and participate in political activism, feminism, and anti-oppressive frameworks. Despite my father’s involvement with the Canadian military in his early twenties, I also never faced the risk of being drafted to serve military duty, and I was not pressured by my parents into any particular career or life path that they preferred, including in regard to my sexual orientation. Instead, my sister and I were encouraged and supported in our interests by our very close-knit and enmeshed nuclear family. I was encouraged to identify strongly with Canadian values of multiculturalism, community-mindedness, independence, and democracy and my parents provided my replicable and persistent examples, in spite of multiple occasions of harassment, assault, and bullying that they were faced with for some of their efforts. In addition, my mother and my sister, just short of two years my elder, faced extensive bullying and harassment throughout elementary and high school, whereas in contrast, my own peer-group was dramatically more accepting, open, and understanding in contrast.
As a result, I grew up with an understanding that I was accepted and that I would be able to stay in Canada permanently, and indeed, I had no intention of ever leaving the area I grew up in. Academically and socially I was well-supported and successful, and was able to direct my energies toward academic course that reflected my strength in communication, reading, and writing. At my earliest opportunity, and with many friends alongside me, I switched out of the general French coursework offered by our education system and took up Japanese language classes, which I pursued into my first year of university. Through this class, I was exposed to East Asian philosophical though, Japanese culture, history, and some of the sociopolitical context of Japan and their neighbouring nations. I followed my interest in cultural geography, politics, and history into undergraduate coursework in Latin American and First Nations history, and feminist praxis and gender theory.

To my mind, my most significant interpersonal feature has been intrapersonal: I have been working through social anxiety and shyness since childhood. In order to begin to work on my anxiety, which came to a head during my undergraduate university experience within a campus with more than six thousand students and where I found it all too easy to retreat from social activities, I entered into a mentoring program with a senior student and an alumnus in a field that interested me, which was forensic psychology. Indeed, for several years, I was interested in law enforcement, and via the mentorship, I was able to experience policing with the Vancouver Police Department (VPD) first hand on a ride along in our infamous Downtown East Side and I had the opportunity for a small moment of personal exposure with its single-room occupancy housing and mental illness and substance-entrenched street life for so many residents of the area. Simultaneously to this experience, I begin training with the Crisis Intervention and Suicide Prevention Centre of BC as a crisis counsellor, with the goal of both testing the waters of
counselling as a potential career path, and as a means of working on my phone anxiety. I was
told by VPD constables how valuable the crisis services were to them and the people they serve,
and I felt comfortable and at home on the distress lines, and eventually moved into a senior
volunteer role of training new volunteers. In 2010, I was hired as staff, and I continue to work
there to this day; the experience has given me a wide range of skills including cross-cultural
crisis counselling and communication skills, suicide and risk assessment, cross-professional
consultation and collaborative skills (such as with police officers and ambulance services staff),
and management, leadership, and evaluation skills while still seeking to be as egalitarian and
democratic as possible. During 2010, I worked briefly for Youth Forensic Psychiatric Services
doing entry psychological evaluations, and I also sought out several research assistance positions
with qualitative and mixed-methods projects exploring the lives of bi-national same-sex
immigrants and individuals living with spinal cord injuries and their caregivers. I also applied
for, and was then accepted by the Counselling Psychology Master of Arts program at the
University of British Columbia (UBC), and an offer of admission to the Doctoral program in
Counselling Psychology at the University of Calgary to pursue a career in psychotherapy.

During the course of this research project, I was invited to participate in several
community-based opportunities that are directly related to the topic of this study. Based on my
previous experience on same-sex bi-national immigration and my current research (the subject of
this project), I have been fortunate to have been given the opportunity to participate in a
networking group of service providers who serve LGBTQ newcomers to Canada. In addition, I
have co-written an article for the Affiliation of Multicultural Societies and Services Agencies of
BC (AMSSA) on the unique situation of newcomer women with a colleague and childhood
friend who now does immigration and human rights law. Most recently, I have also participated on the advisory council for AMSSA’s symposium on working with LGBTQ newcomers.

Given my personal and professional experience, I have of course approached and entered into this research with several assumptions. Primarily, I have entered with the belief that there are global systems of imperialistic, capitalist oppression that marginalizes groups of people according to sociopolitical stratification, and I believe that Canada is also an example of a system that discriminates based on race/ethnicity, gender, disability/ability, and socioeconomic status. Secondly, I believe that this system operates along intersections of identity, and thirdly, that individuals who immigrate to Canada who are already marginalized will experience further marginalization in the country if they are racialized, fall along the LGB and trans spectrums, and if they have mental health and trauma challenges. Fourth, I assume that the process of settlement for LGBTQ newcomers faces unique challenges from other groups of newcomers in terms of their lived experience of discrimination and violence from the community and sometimes from service providers. Fifth, I also assume that there is a widespread shortage of settlement resources for LGBTQ newcomers, and I believe that the current federal political system has made and continues to make detrimental changes to social assistance and immigration policy that further marginalizes LGBTQ newcomers, especially trans women, in spite of their resilience. Finally, I believe that it is important to include the voices and experiences of the service providers who work first-hand from “the other side” of newcomers when considering systemic marginalization and policy development.

*Managing researcher’s subjective stance.* The researcher, within a descriptive phenomenological study, is not meant to be a co-constructer of meaning alongside the participant, and as such, his/her subjective stance must be managed and set aside for the duration
of the research project (Giorgi, 2009; Hamill & Sinclair, 2010). Thus, measures must be taken to set aside the researcher’s experiences and knowledge in order to prioritize those of individuals with direct lived experience of the phenomenon who will describe it from their natural attitude. While the total abstention of the researcher’s own biases, theories, and knowledge may be impossible, efforts must be taken to limit this influence as much as possible (Hamill & Sinclair, 2010).

**Bracketing and self-reflexivity.** The core to the adoption of the phenomenological reduction is the process known as bracketing (or *epoché*). This methodological step for bracketing involves a strict and continual process of self-reflexivity, where researchers ask themselves how they came to write the text of the data display, and question if they have adequate self-awareness and self-exposure for the reader to understand the results of the study (Tracy, 2010). Bracketing itself involves delineating and setting aside the researcher’s preconceptions to ensure that they do not shape the data collection or impose meaning on the participant descriptions (Hamill & Sinclair, 2010). As a phenomenological background, the *epoché* process involves two categories of bracketing. The first abstention of the researcher’s preconceptions is the “epoché of the natural sciences” defined by Husserl as the researcher abstaining from incorporating natural scientific theories, explanations, hypotheses, and conceptualizations of the subject matter via the use of bracketing, or suspension of, pre-existing scientific knowledge assumptions (Wertz, 2005). The *epoché* thus demands a return to lived experience (*the natural attitude*) and grounds the researcher’s understanding within that phenomenon of the prescientific life-world (*lebenswelt*) described by an attitude of unreflective attention. Wertz (2005) goes on to qualify that Husserl’s natural attitude is sufficient only for physical scientific research which does not investigate meaning or subjectivity: a
phenomenological science that is interested in subjective human experience and meaning “cannot remain naïve about consciousness.”

To meet this end, the researcher must take on a transformation of attitude, leading to the second *epoché*, the “epoché of the natural attitude.” The natural attitude is a suspension of our “naïve” knowledge and belief in order to focus on the subjective meaning of lived experiences. As Giorgi (2009) argues, this second *epoché* is the modification necessary for scientific psychological phenomenology to accommodate the consciousness of others. Bracketing of prior meaning and knowledge of human life offers the researcher a gateway to attending and reflecting upon *how* the life-world is understood and given meaning by another individual from whom they gather the descriptive data. The second *epoché* and subsequent analyses from the natural attitude enable the researcher to hold his/her own experiences and to empathically enter and reflect upon the lived experiences of others as they offer first-person accounts and until the data analysis and display is complete (Hamill & Sinclair, 2010). This attitude therefore obligates and leaves space for the researcher to investigate and attend to his/her own prior notions of object-meaning, in addition to providing “an intersubjective horizon of experience that allows access to experiences of others” (Wertz, 2005, p. 168) throughout the entire research project.

Hamill and Sinclair (2010) summarize the aspects of preconceptions that are to be bracketed, including: assumptions, judgements, biases and beliefs, experiences and knowledge, and feelings the researcher has toward the phenomenon of interest. This process obligates the researcher to have and use strong self-reflective skills. These authors outline the following steps to pursue bracketing practically, which I followed: 1) write down what the researcher knows about the topic prior to starting the research or literature review, and revisit this list later in the project; 2) leave the literature review until the completion of data collection and analysis; 3) keep
a reflective journal to document thoughts, feelings, and perceptions on the project and issues raised by it; 4) develop an audit trail by providing a framework for establishing trustworthiness in the study; 5) obtain peer and supervisory support and feedback on your interpretations and interview protocol; 6) seek participant feedback; and 7) monitor that literature review themes occur in research findings only when they are supported by data evidence. My process of bracketing was further supported by prior phenomenological research experience where I also practiced bracketing of suppositions and knowledge during the entire course of that project.

**Credibility.** In qualitative research, credibility refers to the accuracy or plausibility of the description of the essence of the phenomenon, and parallels the quantitative research criterion of internal validity as a measure of rigour (Bryman, 2012; Jackson & Verberg, 2007). Walker (2007) suggests that describing the experiences of participants in as faithful a manner as possible is the most critical obligation of the qualitative researcher in fulfilling the credibility criteria. Means of fulfilling credibility include asking participants for member validation of analyses, and constructing an audit trail for another investigator to review (Guba and Lincoln, 1992). As such, credibility and authenticity incorporate important processes such as the audit trail and continually re-grounding within the psychological attitude of the researcher within the raw data of participant descriptions. According to Tracy (2010), credibility in phenomenological research is a measure of “the trustworthiness, verisimilitude, and plausibility of the research findings” (p.842) and authenticity refers to the trueness of the presentation of the participant’s lived experience of meaning-making. In this study, I ensured credibility by creating an audit trail of memos and analysis decisions, and through the use of member checking validation to further ground my analysis and perspective within the psychological attitude of the participants’ raw data.
**Member checking.** Member checking (or *member validation*) is a process used by qualitative researchers to enhance the credibility of the findings. This step of the rigour testing aspects of phenomenological methodology incorporates an additional and different data source, apart from the transcribed interview text and the demographic questionnaire data, in order to provide a further test of quality of the study (Jackson & Verberg, 2007). Member checking is also important for phenomenology in that it ensures an accurate and reflective impression of the phenomenon of interest, by grounding the analysis of the data in information that has been verified and modified by participants themselves (Giorgi, 2009). Member checking, used in parallel with bracketing of the researcher’s subjective stance and peer review of the data analysis, helps the researcher avoid biasing the results with pre-existing knowledge and beliefs about the phenomenon (Jackson & Verberg, 2007).

Member checking in this study proceeded thusly: following step 3 of the data analysis outlined above (transforming meaning units into psychologically sensitive descriptions), I compiled a list of transformed meaning units for each participant text. From this list, I composed brief descriptions of each meaning unit based on the raw participant data and experiences, and used these to produce a three- to four-page descriptive structural summary of the major themes and overall content of each of the interviews. Participants were contacted by email and were sent their descriptive summaries as an MS Word document. Instructions were given to participants as follows: “I have written a summary of what I felt to be the primary themes of our conversation, and I was hoping that you might have some time to look it over and let me know if there’s something I happen to have gotten wrong, or anything that you’d like to add or change. You can either add any desired changes to the document directly or feel free to add any notes in as track changes or just at the bottom (or even in an email)”. Several participants were contacted with a
subsequent reminder of the invitation to participate in member validation, due to changes in contact information, participants being out of town for several weeks, or a lack of initial response within approximately three weeks’ time.

The goal of this step was to measure that I had captured participants’ descriptions adequately, rather than to verify the data analysis. When feedback was given, it was used to inform and adjust the analysis and free imaginative variation with the additional information in mind. Seven participants gave a general response of approval of the summary composed from their interviews. Five participants provided at least three in-line edits of summary details to reflect their preferred wording and to include additional (and often highly specific program-related) information not explicitly included in the original summary. Moreover, three participants went into depth in their written additional feedback, adding further detail on the phenomenon. One service provider provided updates that had occurred within her agency that were a result of her and her colleagues’ development of their first LGBTQ-newcomer-specific service programming in their organization. Any feedback received from participants at any stage in the research process Summaries have not been included as an appendix in this document because they would jeopardize confidentiality, and are not meant to provide validation of the analysis (which is the purpose of the peer audit process).

**Dependability.** Dependability describes both the stability and trackability of changes in the data over time and conditions, and is a parallel for a test of replicability of findings in quantitative methodologies that takes into account the reality that situations and individual experiences change (Guba & Lincoln, 1992; Jackson & Verberg, 2007). As such, the test of dependability describes the extent to which an independent investigator using the same methodology, rapport with research participants, and knowledge of the field would produce the
same findings and observations, and resultantly, is also termed auditability for this feature. To ensure credibility in the present study, I used an audit trail to document the steps taken in the research in addition to documentation and memos of procedure, analysis decisions, and consultations and literature reviews.

**Transferability.** Transferability, or fittingness, is the criterion of trustworthiness that describes the ability of a research report to be utilized in (valuable, or, transferred to) other settings, populations, and contexts (Lewis-Beck, Bryman, & Liao, 2004; Tracy, 2010). In phenomenological methodologies, individuals are acknowledged to engage in independent and intersubjective meaning-making processes and experience personalized truths of their life-worlds. The extent that findings can be transferable from one individual to another is thus dependent upon the similarity of personal and contextual horizons possessed by both individuals and settings (Giorgi, 2009; Jackson & Verberg, 2007).

In a related concept, resonance acts to qualify the transferability of a particular study finding. Tracy (2010) argues that phenomenological qualitative research must possess resonance as a key criteria for strong research practice. Resonance is an indication of how the research “influences, affects, or moves particular readers or a variety of audiences,” the impact of which is created by presenting “naturalistic generalizations and transferable findings” (p.840). To enable the present research project findings to be transferable to other settings and individuals, the observations and transformative, structural descriptions have been provided with a high level of depth and detail so that readers can assess the appropriateness of the transferability of these findings to other settings. In addition, a diverse sample of participants (including a range of sexual orientations, age, cultural backgrounds, areas of settlement work, and years of experience in settlement work with LGBTQ newcomers) provided a similar range of structural descriptions
to allow a diverse and deep presentation of critical comparisons, similarities, and unique aspects of the service providers’ experiences. The data display therefore offers transferable findings to individuals within the settlement field who work with LGBTQ newcomers.

**Confirmability.** Confirmability refers to the objectivity of the data, and is a test of assuring that the data and outcomes of inquiry are grounded in contexts and individuals with direct lived experience of the essence of the phenomenon, and are not a product of the researcher’s imagination (Guba & Lincoln, 1992). As a result, confirmability speaks to the plausibility and sturdiness of the research report, which is mainly indicated by the research report’s ability to be traced back to the original data sources, which indicates groundedness (Lewis-Beck et al., 2004). To test the confirmability criterion of trustworthiness, an independent investigator is often used to trace back through the audit trail (such as using field notes, records, and other research documents) to ensure there is agreement about the meanings described by the data (Lewis-Becket al., 2004; Jackson & Verberg, 2007).

In order to address test that this research report is grounded in the data, the researcher utilized peer audit of the data/audit trail, and consultation with peers and supervisors. Prior to the first participant interview, a sample interview was conducted by myself and a volunteer to practice a related interview protocol regarding immigration and service access; this interview was digitally recorded and given to a research supervisor for feedback and comments. The interview protocol was also given to supervisors for review and feedback, and data analysis included an aspect of consultation with my supervisor.

**Catalytic validity.** Catalytic validity (or catalytic authenticity) acts as a criterion to test the extent to which “action is stimulated and facilitated by the evaluation processes” (Guba & Lincoln, 1992, p. 249). Tracy (2010) addresses the concept of catalytic validity as a feature of
one of several key components of rich qualitative research, where catalytic validity is nested within the marker of “practically significant research” which asks whether the knowledge gained is useful, empowering, and oriented toward social justice and the minimization of injustice. The practical significance of research may then be measured by its catalytic validity, which describes the impact that the research involvement has had on the participants themselves, such as by empowering them or shifting their political consciousness on issues related to the project (Stiles, 1993; Tracy, 2010).

In this study, an energizing effect on participants was observed. For instance, one participant in particular described the inspiration of the research upon her to act. During the interview, the participant described a prior, short-lived attempt to seek out training for service providers and programming to address the agency’s dearth of resources for LGBTQ newcomers, which ended due to lack of organizational support. Following the initial interview, this participant contacted me to inform me that she had collaborated with her project manager to seek funding, training, and to develop programming to meet this need within her agency. She communicated this result to me with the interest of communicating the catalytic validity related to the present research project. Similarly, another participant also extended an offer to myself to support the data presentation at a community and organizational level upon completion of the research, and expressed interest in having the findings of the present study to support the advocacy and political aspect of her settlement work.

Additionally, another two participants reflected during the interview on how they had no prior training or coursework addressing the needs of LGBTQ newcomers within the settlement area, and mentioned at the close of the interviews that they would like to seek some out, now that they had noticed this very specific blind spot in regards to their explicit training. Finally, during
process questions, four participants indicated that they appreciated the opportunity to debrief and think more objectively on their work experiences by describing them to an “outsider” (and indeed, this was the motivation for several of these participants to participate in the research to begin with, as the following quote suggests:

It is always helpful to talk about things that you are very immersed in? That are part of your life? And talking about them is good; it's meaningful, right? I have fun engaging in that, I enjoy it, but it was also, self-reflecting, encourages me to keep thinking. And it's like a re-established commitment, right? A reminder. Yeah I like that. I think in that sense, your work, your approaches so far is already meeting some goals, probably!

**Ethical Considerations**

A number of steps were taken to ensure the ethical conduct of this study. For example, precautions were set in place to ensure confidentiality. Data was anonymized via the use of pseudonyms, codes, and generic descriptions in place of specific examples in some circumstances that might threaten confidentiality, and all forms were kept stored and locked in a cabinet and/or behind password protection digitally. In accordance with UBC BREB guidelines, all forms and research materials will be kept for up to five years and then will be destroyed. Within this study, all participants were given the right to consent to the research and to withdraw at any time without penalty, and were informed during the initial consent process of the low risk of harm presented by their participant in the research. The informed consent was viewed as an ongoing process of giving the participants adequate information regarding the research that they were able to understand and ask questions about, and were reminded throughout of the voluntary nature of their participation. As such, the research was undertaken through a lens of the principles of respect for autonomy, beneficence, and non-maleficence, to be respectful, to do no
harm, and to be of some benefit to participants and their community through their involvement (Walker, 2007). Further considerations were made in light of the vulnerability that participants may have been placed in by being recruited to the study, and efforts were made to avoid exploitation by remaining sensitive to factors that might limit the service provider’s ability to freely participate, such as being respectful of time constraints and being mindful of not pressuring participants in such a way as to make their participation a burden.

Cultural sensitivity. Ethical considerations in phenomenological research have been greatly informed by research of and with indigenous peoples in Canada, the US, New Zealand, and Australia (Liamputtong, 2008). Literature on this topic provides social science researchers with important insight into the cultural sensitivity necessary for doing phenomenological research in general. Specifically, the present study involved data collection and collaboration with service providers from a wide range of ethnicities and cultural backgrounds. Cultural sensitivity involves the researcher knowing the cultural context of the group with whom he/she wish to work, and this sensitivity must be demonstrated competently through appropriate communication of key values, stakeholders, and the willingness to learn (Liamputtong, 2008). In the present study, a portion of personal background information was invited from participants. Based on their comfort level with the topic, participants provided the researcher a brief description and examples of their cultural, familial, and moral beliefs, values, practices, and experiences as they relate to the participant’s present settlement work. This question was expressed to participants as follows: “Would you be comfortable describing your personal or cultural background and how you feel it may or may not come into play in the room with LGBTQ newcomer clients in your work?” The prompt for personal description was also contextualized in terms of the erasure of personal detail that comes with anonymized, transcription of speech; as
such, key demographic and cultural features and beliefs that might be visible in person or within the interview relationship might otherwise have been lost, downplayed, or altered during data analysis unless otherwise explicated. Lastly, the invitation for personal background details also allowed participants to have greater autonomy over their representation within the data, and created greater depth in the descriptions of lived experience. Space was also made for any questions participants might have had for the researcher in terms of personal background, culture or motivations in doing the research project. Steps such as having an open and egalitarian attitude, “a willingness to listen, to be cautious, and to avoid flaunting knowledge” (Liampittong, 2008, p.6) within the interview-participant relationship helped to manage any perception of power imbalances over the descriptions shared by participants.
Chapter Four: Results

This chapter begins with demographic descriptions of the participants who took part in this research. Following Table 1, which will display demographic information gathered from the demographic questionnaires, a breakdown will be presented of the three overarching meaning unit structures that emerged from the data analysis with respect to the essence of the phenomenon of settlement work with LGBTQ newcomers. Each structure is contextualized with a definition and subthemes are explored using illustrative quotations. While Giorgi’s (2009) model of analysis and data display for descriptive phenomenology was utilised as the primary model for this study, particular adaptions were included in order to highlight both common participant experiences as well as unique experiences that were only salient in certain contexts (Creswell, 2009; Moustakas, 1994). These adaptions of the methodology were included in order to ground the analysis in the raw data with regards to the diversity of the sample, such as the years of experience with LGBTQ newcomers as well as the wide range of settlement areas and roles represented by the participants’ experiences. As such, multiple lenses were included within the free imaginative variation process of the analysis in order to create a deeper descriptive of the essence of the phenomenon with regard to these important horizons of the experience. The chapter will conclude with a summary that integrates transformed thematic structures together into an overall summary of the phenomenon of the experience of settlement work with LGBTQ newcomers.

Participant Demographics

Twelve service providers between the ages of 25 to 52 (mean age = 33.75) volunteered to participate in the study. Countries of origin for participants included Canada (N=3), Iran (N=3), Mexico (N=1), Argentina (N=1), the United States (N=1), Thailand (N=1), the United Kingdom
(N=1), and one participant left this question blank. Ethnicities identified on the demographic questionnaire included Persian/Farsi (N=1), Caucasian and white (N=3), Canadian-Iranian (N=1), Canadian (N=1), Thai (N=1), South American or Latino (N=2), and three participants declined to respond to this demographic question. Nine Participants spoke more than one language, encompassing English, Farsi, Arabic, Spanish, Thai, French, German, Italian, and Arabic. All participants currently work and live in the Lower Mainland (Vancouver and surrounding areas) of British Columbia. Areas of employment identified included counselling, social work, settlement services, gay men’s health, youth work, post-secondary, as well as refugee trauma and assistance. Participants’ experience with LGBTQ newcomers ranged from 14 months to 25 years (average time = 8.8 years).

Participants included eight women and four men; three participants identified as gay, one as lesbian, one as bisexual, and one as queer, while five participants identified as heterosexual. With respect to religious affiliation, nine participants reported “none” or “n/a,” two left the question blank, and the four individuals identified as Baha’i (N=1, Buddhism (N=1), and Christian (non-practising; N=1). Seven participants possessed graduate degrees in counselling (N=5) or social work (N=2), a doctoral degree (N=1), and undergraduate degrees (N=4).

When asked why they chose to participate in the research, nine participants reported a desire to bring attention to the issues related to settlement work for LGBTQ newcomers, and to inform future program development and training. Five participants described the research having a personal impact and connection to themselves. Four participants reported wanting to take advantage of the offer to participate as an opportunity to reflect, debrief, and engage in ongoing learning by talking about their work experiences. Another four participants agreed to participate based on their perception and experiences with doing research as a student and the struggle there
can be in finding participants. Additional participant details gathered via the demographic questionnaire prior to interviews are displayed in Table 1 (below).
<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Gender</th>
<th>Place of birth/Ethnicity</th>
<th>Languages spoken</th>
<th>Sexual Identity</th>
<th>Religion</th>
<th>Highest Education</th>
<th>Current Job Area</th>
<th>Yrs of work with LGBTQ newcomers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Niki</td>
<td>52</td>
<td>F</td>
<td>Iran/Iranian</td>
<td>English, Farsi (both fluent; some French)</td>
<td>Heterosexual</td>
<td>Baha’i</td>
<td>MA in Counselling Psych (candidate)</td>
<td>Counselling</td>
<td>11 years</td>
</tr>
<tr>
<td>Terry</td>
<td>49</td>
<td>M</td>
<td>UK/Caucasian</td>
<td>English (1st); Portuguese (2nd)</td>
<td>Gay</td>
<td>none</td>
<td>MSW</td>
<td>Gay men’s health</td>
<td>20 years</td>
</tr>
<tr>
<td>Maryam</td>
<td>29</td>
<td>F</td>
<td>Iran/Canadian-Iranian</td>
<td>Farsi, French, English (Fluent in all three)</td>
<td>Heterosexual</td>
<td>none</td>
<td>MA in Clinical Counselling</td>
<td>Settlement Services</td>
<td>~3 years</td>
</tr>
<tr>
<td>Bahar</td>
<td>34</td>
<td>F</td>
<td>*</td>
<td>English, Farsi</td>
<td>Heterosexual</td>
<td>(blank)</td>
<td>MA in Counselling Psych</td>
<td>Counselling</td>
<td>14 months</td>
</tr>
<tr>
<td>Natalie</td>
<td>29</td>
<td>F</td>
<td>Canada/Canadian</td>
<td>English</td>
<td>Bisexual</td>
<td>Buddhism</td>
<td>MA in Counselling Psych</td>
<td>Counselling</td>
<td>2 years</td>
</tr>
<tr>
<td>John</td>
<td>37</td>
<td>M</td>
<td>Canada/Caucasian</td>
<td>English</td>
<td>Heterosexual</td>
<td>Christian, non-practicing</td>
<td>Diploma</td>
<td>Health clinic</td>
<td>11 years</td>
</tr>
<tr>
<td>Max</td>
<td>33</td>
<td>M</td>
<td>Mexico/Latino</td>
<td>English, Spanish</td>
<td>Gay</td>
<td>none</td>
<td>BSc</td>
<td>Health clinic</td>
<td>6 years</td>
</tr>
<tr>
<td>Taylor</td>
<td>29</td>
<td>M</td>
<td>Canada*</td>
<td>English</td>
<td>Gay</td>
<td>*</td>
<td>MSW (clinical)</td>
<td>Primary Care/Mental Health</td>
<td>6 years</td>
</tr>
<tr>
<td>Name</td>
<td>Age</td>
<td>Gender</td>
<td>Place of birth/Ethnicity</td>
<td>Languages spoken</td>
<td>Sexual Identity</td>
<td>Religion</td>
<td>Highest Education</td>
<td>Current Job area</td>
<td>Yrs of work with LGBTQ newcomers</td>
</tr>
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</tr>
<tr>
<td>Saba</td>
<td>*</td>
<td>F</td>
<td>*</td>
<td>Arabic, English, Spanish</td>
<td>*</td>
<td>none</td>
<td>BA</td>
<td>Refugee settlement</td>
<td>4 years</td>
</tr>
<tr>
<td>Mai</td>
<td>25</td>
<td>F</td>
<td>Thailand/Thai</td>
<td>English/Thai fluent</td>
<td>Lesbian</td>
<td>none</td>
<td>BA</td>
<td>Youth work</td>
<td>2 years</td>
</tr>
<tr>
<td>Stephanie</td>
<td>40</td>
<td>F</td>
<td>USA/White</td>
<td>English, Thai (conversational), French (reading)</td>
<td>Queer</td>
<td>none</td>
<td>PhD</td>
<td>Education, Volunteer – Refugee support</td>
<td>14 years</td>
</tr>
<tr>
<td>Andrea</td>
<td>48</td>
<td>F</td>
<td>Argentina/South American</td>
<td>Spanish, English, French, German, Italian</td>
<td>Loves men</td>
<td>n/a</td>
<td>MA in Counselling Psych</td>
<td>Refugee trauma / clinical trauma counselling</td>
<td>25 years</td>
</tr>
</tbody>
</table>

NOTE: Table contents labeled with an asterisk (*) indicate demographic information deliberately left blank by participants.
Identification of the Structure of the Phenomenon

The goal of this study was to explore the experiences of settlement service provision of counsellors, social workers, settlement workers and other support works who serve LGBTQ newcomers. The main research question asked: What are service provider’s perceptions and descriptions of their work in supporting LGBTQ immigrant clients? To uncover the underlying structure of the phenomenon, data was analysed according to the series of steps outlined by Giorgi (2009). Data analysis produced the following three superordinate structures: perceptions of LGBTQ newcomer needs and experience; organizational issues; and the personal impact of the work on participants. To protect the anonymity of participants and the clients they discussed working with, they have been given a pseudonym and any identifying information has been obfuscated or removed, with relevant clarifying details inserted within quotations using round brackets.

Perception of LGBTQ Newcomers’ Needs and Experiences

Service providers in the study described how their LGBTQ newcomer clients present with a wide array of questions and concerns. Occasionally, as two participants reported, clients view them as experts in Canadian immigration due to their personal experience and perceived position of power. Regardless of service providers’ own backgrounds and current career areas, all participants highlighted a wide range of settlement needs that LGBTQ newcomers face, which they believed organizations must meet and support. Each participant described their understanding of these settlement needs, some of which they are able (or should be able) to meet directly and some of which are better met by other, more specialised, service providers and/or organizations. Broadly, settlement needs for LGBTQ newcomers included housing, social supports, language and communication skills, job searching, and trauma support.
Housing settlement needs of newcomers. Nine participants discussed how fundamental housing is to the integration of LGBTQ newcomers, explaining that it is critical for this need to be met immediately upon arrival. Housing was discussed by nine service providers to be a fundamental, objective measure of basic integration for LGBTQ newcomers that must be met immediately upon arrival. Service providers discussed the role of temporary housing and emergency shelters as well as long term and permanent housing. Six of them described how locating affordable housing occupied a significant portion of their support work with LGBTQ newcomer clients. These participants explained that each short-term or long-term housing option is influenced by the newcomer’s perception of safety and affordability. While LGBTQ newcomers reportedly prefer independent living arrangements, shared housing is much more affordable for them, yet comes with significant interpersonal risk. Service providers explained that locating affordable independent housing options was meaningful because it provided a psychologically and physically safe environment for newcomers who may be or who have been targets of violence, homophobia, transphobia, racism, or other systemic discrimination. Safety was also defined as the openness of the surrounding community to LGBTQ newcomers, and these newcomers feeling prepared with knowledge of their legal rights within Canada, as well as prepared with more nuanced understandings of how the community might be welcoming or intolerant of LGBTQ newcomers.

However, participants explained that shortages of affordable housing in close proximity to settlement organizations means that LGBTQ newcomers have to travel across cities to receive services. Moreover, they noted that LGBTQ newcomers who claim refugee status receive limited assistance from the government, but have complex financial needs due to the arduous resettlement process. As such, affordable means of travel to settlement services is also necessary to
consider when exploring housing options. The six participants whose roles heavily include housing support for newcomers explained that service providers must have an understanding of these quantitative (affordability) and qualitative (physical and emotional safety) housing factors in order to support LGBTQ newcomers. For example, Stephanie, a counsellor with proficiency in three languages who works closely with LGBTQ refugee claimants and asylum-seekers, explained how important it is for her to have contextualized knowledge of safety and housing when supporting LGBTQ newcomers through the settlement process:

And it can also be navigating relationships for those core survival things, like housing or work. Like even, how to suss out a safe roommate? I am really... appalled at how many of our members end up either physically or emotionally abused by roommates! And it is that strange, intersection of being ... precarious because they're living in poverty, they will be, as long as they're on social assistance they're functioning below the poverty line here. And so that really limits housing. And so they have to seek out roommate situations. And there are some... you know, people who prey on vulnerable people! And so that, you know, you've got the basic stuff of being in poverty, and then you've got the stuff of navigating intercultural communication on this, and then racism, and possibly homophobia or transphobia, kind of mixed in with "safe housing."

**Shared language and communication.** Seven service providers reported that they offer settlement services to LGBTQ newcomers in a language other than English (e.g., Spanish, Farsi, Arabic, or Urdu). These participants offer this breadth of language support, as they are bi- or multilingual themselves, and/or use an interpreter. Six of these service providers described how pressing it is for their clients to develop English language learning, including an adequate level of oral and written fluency, in order to be able to access settlement resources and integrate into
Canada more readily. For example, access to English language classes was offered by three participants’ mainstream settlement organizations. Moreover, service providers witnessed how little or no English proficiency effectively blocked access to many mainstream services that decline to use language interpreters or offer English classes to facilitate service provision. In place of interpreters and English classes, bi- or multilingual service providers became highly sought after by clients and other service providers. Additionally, three service providers described challenges they had witnessed when trans newcomers accessing language classes experienced discrimination from service providers without trans-competencies, and who eventually withdrew from language services all together.

As Saba, an English-, Arabic-, and Spanish-speaking settlement worker explained, LGBTQ newcomers are deeply aware that rapid English proficiency is a gateway to accessing a wide range of services and developing valuable relationships with others. Despite being able to provide service in non-English languages to accommodate some newcomers, she witnessed a trans client experience misgendering and transphobia:

[S]he didn't get any education where she came from; she was looking for a job. She came -- she's like, "I would do anything, I would do cleaning." we could not even find a cleaning job for her….And again, because people say "this is the name, who is this guy? Who is this woman with this name?" that's part of it. And she was so stubborn. I mean, I admire her. She was so eager to learn. She would go to the school and they... they would look at her in a certain way. And likely she would feel behind and she would come to me in my office after the school hour, is almost like at the end of... at the end of the day she would come to me immediately, she would come crying. Because she doesn't understand her classes. As soon as she did I would say "okay calm down, calm down." [laughs] She
was like "I'm going to kill myself!" … And it is not my job but I was telling her about apps on learning English, I would be explaining grammar to her…we found a volunteer who was teaching her English. But you know, those teachers .... so she ended up speaking English, by maybe.... within less than one year.

**Social engagement and support.** Similarly, eight service providers identified social support to be an essential aspect of settlement for their LGBTQ newcomer clients. These participants described social support as a newcomer’s ability to obtain social engagement, a feeling of belongingness and connection, and social support from peers and service providers, as they navigate the demands of the Canadian settlement process. Social support from peers was said to include conational cultural communities, if they are felt as safe and accepting to LGBTQ individuals. However, service providers witnessed frequent challenges to clients’ integration and acceptance within mainstream LGBTQ spaces, or within their conational cultural communities. Accordingly, participants described social support and engagement to mean integration and identification of newcomers with mainstream, LGBTQ- and/or conational spaces for the attainment of settlement needs. Integration into community spaces was dependent upon the perceived accessibility of communities, as affected by classism, racism, homophobia, and transphobia. Moreover, four service providers with awareness of mainstream LGBTQ spaces viewed these Canadian environments as less friendly and accessible to individuals from ethnic minority backgrounds and/or those living in poverty, who experienced racialized and classist alienation. Service providers identified depression-like symptoms as a consequence of alienation from mainstream, LGBTQ and/or conational communities alike.
Expressing this sentiment, Natalie described how many of her LGBTQ newcomer clients who also represent an ethnic minority group face integration challenges both into mainstream LGBTQ and conational communities:

Overall, the particular clients that I'm thinking of were later, late 20s, early 30s, and expressed huge isolation in the community -- the LGBTQ community here. And they were in very populated areas of [large city] that have very -- what I thought, vibrant queer scenes? And just sharing that -- if they do participate in queer events or what have you, that they were "the other." That they were always-- not only did they have the hat of being "the gay guy," but they were also "the gay Iranian guy." And through that, they were "the other" in their queer community and when they were put in their cultural community, they were "the other" in that community as well. Yes they're Iranian, they're with their Iranian friends, but they're the only gay Iranian. And so, they -- for that specifically, they talked about the feelings of isolation in both groups, and not being a part of "a group." And that was also linked to depression diagnosis.

**Employment.** Four participants highlighted how important it is for LGBTQ newcomers to secure employment when they arrive in Canada in order to provide for themselves and integrate into their new environment. However, service providers witness how many LGBTQ newcomers arrive with limited or non-transferable education and skills, as a result of homophobic, transphobic, and sexist discrimination in their home countries. These participants explained that some clients need deeper support in the job search process, as they struggle with language proficiency for job interviews, for example. They also noted that employers are more inclined to hire newcomers who have a fairly fluent level of English proficiency.
Moreover, these four service providers discussed barriers such as poverty and homelessness, which are becoming much more prevalent and apparent each year, necessitating better employment support and opportunities to meet LGBTQ newcomers’ settlement needs. They explained that highly skilled newcomers with English proficiency who pass as male or female will often experience a straightforward job-search process. For these newcomers, their employment search is efficiently supported by mainstream settlement and career-focused services that centre on interview skills and resume writing. On the other hand, participants witnessed how clients with less or no English proficiency or transferable skills faced greater challenges in finding work, and as such do not benefit from mainstream employment services. These challenges were heightened for trans newcomers, who often face transphobic discrimination from potential employers.

Maryam, a settlement worker who supports LGBTQ refugee newcomers, highlighted the intersection between English fluency, physical presentation, and employability – factors which are not addressed by mainstream employment supports:

Participant: I mean for the employment sector and employment settlement work -- that doesn't matter. You can see all these offices and different kinds of positions, employment worker, care facilitator, like they have different kind of things and lots of work in doing that. All what they do is to help you with resumes, how to present yourself. And likely if you know how to do that, if you have a level of English, if you have a level of expertise, the background, education, likely you don't need all these things. You will find a job. You will find a job!

Interviewer: Eventually…? 
Participant: Yeah but you will find a job! I mean, even for [store name] or whatever, if you present yourself well, without resume, likely they will hire you! [laughs]… But…This client who was, just to give the outline, she was, she didn't get any education where she came from; she was looking for a job. She came -- she's like, "I would do anything, I would do cleaning." we could not even find a cleaning job for her. … And again, because people say "this is the name, who is this guy? Who is this woman with this name?" that's part of it. And she was so stubborn. I mean, I admire her. She was so eager to learn.

**Trauma and counselling support.** Eight service providers reported that they have direct contact with LGBTQ newcomer clients who have extensive trauma histories and experiences of retraumatization here in Canada. They discussed the manner in which this trauma impacts clients on a psychological level (i.e., difficulties sleeping as well as feelings of depression, isolation, and suicidality) as well as on a relational level (i.e., challenges trusting and connecting with service providers). Moreover, they explained how the resettlement process requires refugee claimants to share their stories multiple times immediately after arriving in Canada. This process occurs with strangers (e.g., Canada Boarder Services hearing members, attorneys) and LGBTQ newcomers are not emotionally prepared for this experience. Service providers disclosed that it is their responsibility to prepare and support clients through this challenging process. In order to prevent further harm and retraumatization from occurring, four service providers discussed how important it is to teach LGBTQ newcomers skills such as emotional regulation and personal boundary setting when sharing their stories with others (e.g., settlement service providers, attorneys, Canada Boarder Services members, peers).
For instance, Taylor, a clinical social worker and counsellor in a multidisciplinary clinic, spoke to the prevalence of trauma in the LGBTQ clients he sees, and the ways organizations are being restructured as a result:

Participant: I think that, there -- and it's constantly changing, everything is constantly changing. And I think our role is constantly changing in the clinic, and the needs are constantly shifting. And you know, I think that the biggest shift has been away from -- well, it's been towards people. Like, a lot of my clients have like really significant post-traumatic stress disorder. It's been a need that's been identified, and it's also something that I'm seeing a lot of clients that have those sorts of um, experiences.

Interviewer: Are those needs being met? Because it sounds like, you've said it's been identified and it's big right now...for whatever reason.

Participant: I think it was big before. I just don't think it was maybe as acknowledged. Is the need met? No. Which is probably why I'm seeing these clients, right? So there's not a lot of services for people who have experienced trauma, especially if they're from another country.

**Barriers to meeting LGBTQ newcomers’ settlement needs.** All participants discussed the reasons why LGBTQ newcomers struggle to meet their settlement needs. Participants explained that barriers to accessing services and meeting settlement needs ranged from clients’ perception of mental health and emotional risk, a lack of programming, and limited availability of language interpretation. These barriers were understood by ten participants to be related to a systemic lack of LGBTQ- and culturally-competent service providers, with five service providers describing a sense of isolation and needing to independently build their own networks of LGBTQ newcomer-competent colleagues to make service referrals. Specifically, three service
providers felt that a significant barrier to meeting client settlement needs was the persistent and widespread lack of LGBTQ newcomer-inclusive service mandates and programming within settlement organizations. This was especially apparent for service providers when exploring potential housing and employment situations for their clients. Conversely, three participants feel there are enough skilled service providers in the settlement field to meet LGBTQ newcomer settlement needs; however, the persistent barrier for newcomers is that it is challenging for newcomers to locate them on their own, in addition to shortage of financial resources to allow service providers them to reach more newcomers.

Finally, a significant barrier for service shortages of service providers is the lack of awareness and skill training in culturally specific trauma and its impact on serving LGBTQ newcomers’ settlement needs. For instance, one participant described how she often experiences LGBTQ clients’ frustration and challenges upon being referred to CBT-based trauma groups that are not equipped to accommodate non-domestic and immigration-related trauma. In these cases, the service provider witnessed clients feeling out of place, alienated, unable to connect with peers in the group, and unable to utilize the skills and tools described within the group due to the misalignment with their needs and the group goals. Indeed, histories of complex trauma were also remarked upon by three participants as a factor in the appearance of personality-disorder-like symptoms. These symptoms make it difficult for clients to connect with and trust service providers. In these circumstances, organizations may not be prepared to work with clients who are “challenging” in this manner, and subsequently they may prematurely withdraw services; alternatively, clients may feel uncomfortable accessing services while coping with complex trauma symptoms independently, and thus may also withdraw from services prematurely. For
example, Andrea described the prevalence of complex trauma, and her belief in the obligation and necessity of trauma competency in service providers:

But we're trying to really kind of debunk this myth of settlement and counselling [as separate]. Of course there are very specific things about what we do, right? All these modalities and this quality of listening that counselling has as its core. But trauma-informed services, flow services a little bit more. And that's what's going to make the work easier, for settlement workers and now not just talking about [settlement support agency], any agency that does settlement can feel more sure that "okay yeah the conversation is okay. Yeah I need that information for the form, but I recognize the sort of importance of knowing" -- so, into [agency name], collecting the person, give her some signposts to keep moving, and those skills we all need to have. We're all doing trauma-informed work, we all need to be doing that.

**Organizational Issues**

The following section describes participants’ perceptions of organizational involvement and program mandates, including their experiences with the visibility and drop-out occurrences of LGBTQ newcomers from their organization’s service programming. Further, a description of participants’ perceptions of the gaps in program funding, LGBTQ competency training, resources, and language support will be presented. Finally, the recent changes within participants’ organizations in response to client needs is discussed.

**Agency goals, mission, and service providers’ roles.** All twelve participants provided in-depth descriptions of the organizations they were involved in as well as the service areas addressed by each of their professional and volunteer affiliation. For example, eight participants described how their organization mandates include reference to serving the mental and physical
health of LGBTQ individuals specifically, with the larger service goals of settlement work and/or mental and physical health creating the intersection for service to LGBTQ newcomers. Six service providers understood their work with LGBTQ newcomers to primarily mean mental health support for depression, anxiety, and trauma. Within their agencies, five settlement workers defined their mainstream agency service goals to mean person-centred, multidimensional cultural transition orientation, and advocacy support in securing housing, employment, filling out paperwork, and English language proficiency. Overall, five participants’ service mandates and goals expanded service provision to include the families and partners of clients, and understood health to mean social integration and community connection by providing social and skills-based group programming.

All twelve service providers described their organizations’ attempts to provide holistic, person-centred, integrated health models. These models reportedly address the settlement needs of marginalized individuals and families in a bio-psycho-social-spiritual and political advocacy model. In fact, six participants defined their organizational mandate to include community integration that hinges on both professional and peer volunteer support and mentoring of LGBTQ newcomer clients. Six participants also explained how group-based programming was an integral aspect of their service provision, primarily for addressing mental health and trauma needs, as well as language skills and other cultural integration and orientation.

For example, Terry, a bilingual social worker who manages programs for a multidisciplinary organization supporting queer, gay, and bisexual men, explained how important community integration is for LGBTQ newcomers, and the systems-based health model that guides his work:
So we're a volunteer organization, we have very few staff. But the staff manage lots of volunteers. …And so, we get some immigrant and refugee population that, I think, two-edged sword: if it's a refugee, possibly they really want to support their legal process, by saying “I'm completely integrated into an organization whose in the community, whose...” and it's that, you know, having to prove that "I'm gay" to the judge, right? Without the judge seeing a sex tape or something stupid, right? …And the other way is that they're new and they just want to get connected. So they come and work out how to get connected through volunteering …or just through our social groups. …So we work with a determinative health model – So, the idea with social health is that people build a small group network, like you would have a family support network. So if people don't have a family support network, they need to build a new one. So four or five people around you that you trust deeply; and then that affects your health outcome. Connection to community is the next level that will have some effect on your health outcome, and then connection to wider society. And the belief that you're part of that society has a health outcome. So if we can work on those in terms of the health determinants, and focus on that's what our social group is aiming to do, what tends to happen is we build up quite a large group, and the core disappears.

**Visibility of LGBTQ Newcomers.** All twelve service providers described a wide range of visibility issues for LGBTQ newcomer clients within their organizations. Population visibility was defined as the frequency of contact between participants and clients who described themselves as LGBTQ newcomers, or whom participants suspected may be, given the demographic characteristics presented and the needs sought from the organization. Visibility also included service providers’ awareness of the presence of LGBTQ newcomers who were clients
of other service providers or who were seeking other programing within the organization, but whom the participants were not serving directly. Six service providers in mainstream settlement organizations explained that despite their direct experiences with a handful of LGBTQ newcomer clients, the overall visibility of this demographic in their organizations was low compared to other categories of clients. On the other hand, five participants described frequently working with LGBTQ newcomers within organizations that also happened to actively present themselves as serving vulnerable, LGBTQ, and/or newcomer populations, and those that offer social and peer group services.

For six service providers, visibility of LGBTQ newcomers within their organizations communicated trust and safety between client and service provider. This was especially meaningful to eleven service providers who explained that demographic questionnaires and inclusion criteria to access programming within their agencies do not assess LGBTQ newcomer demographics quantitatively. Indeed, seven participants explained that they find it incompatible with their therapeutic and settlement work to ask clients directly if they are LGBTQ newcomers. They describe how knowing the status of LGBTQ newcomer clients typically fulfills service providers’ curiosity without advancing service provision per se. Instead, all service providers described feeling it was more effective to orient therapy around concrete goals and presenting concerns of clients unless status or identity issues became directly relevant to that work.

For example, Stephanie, a counsellor with some proficiency in two languages (in addition to English), explained how visibility of LGBTQ newcomers’ identities comes into play within their group work:

I think there's a mix. I mean, I have no idea how many people that don't make it to [group name]; god knows. And then I'm sure I know that there are people who ... it's not like we
ask people, as we -- I mean, we do our round of introductions and we don't say "and what is your identity?" I mean, we've had people who come and ... I don't know until I'm in the [refugee claim] hearing room with them that they identify as trans. Like, they may be that careful about it in the group? You know, and if I'm not the person they've chosen to confide in one on one -- usually, people will kind of pick one of us to kind of confide in, and we hold that part of their story? If I haven't been that person but they've asked me to come to the hearing room -- and that does happen, sometimes? -- it's like, oh, okay, so gender fluidity is part of their claim!

**Client retention.** Client barriers to initial access of settlement services, such as language barriers or waitlists, are not the only challenge for LGBTQ newcomers who seek settlement support. Participants described a wide range of experience with LGBTQ newcomer clients who succeeded in accessing services. For instance, nine service providers explained that LGBTQ newcomer clients often accessed their services in times of crisis, and noted that their service provision would end when clients felt integrated within the community or when a specific crisis was overcome. Additionally, five participants explained how service provider-facilitated safety is an important factor in client retention. Specifically, these participants witnessed LGBTQ newcomers drop out of services because they felt unsafe due to peer discrimination or because they were misunderstood or unsupported by service providers. On the other hand, safety was recognized as not solely within the control of individual service providers, and often had to do with discrimination from the surrounding community context. For instance, three service providers explained that if settlement services are located close to a client’s co-national cultural or spiritual community, newcomers might consider those services to be less accessible due to
fears of violence and other discrimination, especially within the context of a LGBTQ newcomer accessing an HIV/AIDS health clinic or LGBTQ-oriented service.

For example, Saba, a trilingual settlement worker in a mainstream settlement agency that offers English language classes, discussed on how visibility and dropout of LGBTQ newcomers within services are affected by the perception of safety:

When I'm doing settlements there, in the language centres, that's when I see the visibility [of LGBTQ newcomers]. Um, but, it's maybe because they're already being helped by another organization? Or it may be, uh, because, I mean, they're still in the process of, maybe not feeling comfortable enough to, um, to say it? To talk about it? If they are--identify as lesbian, bisexual, or gay? … So just recently I worked with a lady who was uh, had transitioned from male to female, and … I was guessing that there were some mental health issues there as well, that she was dealing with... but she didn't feel accepted; she didn't feel accepted within the [language class], within the students. She always felt like she was different? Um, and then the teachers were not able to -- these are some things that she would say: that she was not understood by her teachers, that they didn't really sympathise with her and understand her needs. So at the end, because she was, the teachers were seeing that she was being disruptive in class, and that she also had some issues with other cultures, other ethnicities? So then she decided, they had a talk with her and she decided not to stay at [the class] anymore, and she said that "I want to be somewhere where there are more people like myself."

Settlement service provision gaps. All of the participants talked about the importance of adequate training and programming resources relevant to LGBTQ newcomers’ settlement needs. These service providers witnessed limitations in terms of their own service provision as well as
organizationally across the settlement field. Indeed, five participants shared experiences of being recruited by colleagues and/or clients of colleagues to provide additional service work based on recognition of their LGBTQ newcomer competencies. Recruitment by newcomers and colleagues was understood by participants to indicate the gaps in LGBTQ newcomer-relevant training and resources within the mainstream settlement field. The impact of gaps in funding and other resources was also described by the participants and will be presented below. Finally, the importance of language competency among service providers was addressed.

**Funding.** According to seven service providers, their organization’s funding sources and agreements played an important role in limiting their ability to adequately serve LGBTQ newcomer clients. More specifically, they explained how funding limitations restrict service provision to brief counselling and settlement timelines as well as to newcomer clients with particular residency statues (e.g., services being exclusively accessible to permanent residents or government-assisted refugees). In addition, six participants explained how conscious they were of the political and social impact of their programs when they applied for funding to develop LGBTQ-specific programming for newcomers. The careful consideration necessary for funding applications was thought to have a significant impact on participants’ ability to provide service programming as non-profit organizations. Five service providers described how important it was to have clear mission statements that would be acceptable to both funding bodies as well as being useful to LGBTQ newcomer clients. However, five participants felt resistance from organizational and institutional levels to address the needs of LGBTQ newcomers. These service providers explained that the primary cause of the resistance was adherence to a “conservative” interest, such as to avoiding having “mainstream” clients feel alienated by the acknowledgement and inclusion of LGBTQ newcomers specifically within organizational programming or
mandates. However, three providers felt that their agencies needed to do more, at an organizational level, to meet the settlement needs of LGBTQ newcomers by including training, interpretation, programming, and recognition of this population within their service mandates. Lastly, three service providers described the impact of precarious or recently lost funding and how uncertain funding patterns constrain their ability to develop long-term programming specific to LGBTQ newcomers.

For example, Andrea, a multilingual counsellor for trauma survivors, explained the impact of funding challenges on her agency:

...and many changes that we're working on were sped up by the funding crisis! And then another challenge that we need to face on a day to day basis is not just working in this field and with this population: refugee trauma, is how to provide evidence-based... hm? Fundable services that we still know are aligned with approaches that work for people? And for people from all over the world? Not people who are active in school or [indiscernible], you know? So modalities that are facing how the brain works, which are evidenced-based in many ways, but some of them -- some of the ones that are super evidence-based may not work with the body very much, and they should. So, how as an organization... to make those decisions? And keep first things first? A focus on what is good for the client and then what the funders need to hear. But of course we will need to say and put out there what we are doing, and believe in what we are doing.

Training and skills. All twelve participants described this factor to include possessing the awareness and skills necessary to support LGBTQ newcomers through their settlement processes according to their realistic lived experiences in the receiving community. These skills included an understanding of the intersections amongst racialized identities, sexual orientations, gender
identities, as well as safety within communities and housing situations. As mentioned earlier, this safety play an important role in access, retention, and success of LGBTQ newcomers in settlement services. More specifically to LGBTQ competencies, three service providers emphasized how important training in inclusive vocabulary and pronoun sensitivity is for clients, as service providers and other support staff who may create unsafe spaces for LGBTQ newcomer clients by misgendering them or behaving in discriminatory ways (i.e., homo/bi/transphobic, sexist, or racist).

Eleven service providers disclosed having no formal, academic training in their post-secondary and graduate work prior to working in this field. However, ten service providers explained the necessity of accessing training specific to LGBTQ newcomers in order to prepare for this work. Eight participants described drawing from personal experience as an immigrant and five drew upon their personal knowledge as members of the LGBTQ community to support their work. However, seven participants described feeling unprepared for the work in that learning has come day by day and from each LGBTQ newcomer client. In terms of formal training, four providers explained how helpful it was to receive training in LGBTQ newcomer-related topics from their organizations, which largely consisted of inclusive language, and trans-specific knowledge and resources, but did not include reference to work in newcomer settlement contexts. Further, one service provider explained that her preparatory formal training for this work consisted of personal research, which was motivated by her personal and volunteer involvement in the field prior to becoming a professional service provider herself.

For example, Andrea, a multilingual trauma counsellor, explained the importance of inclusive vocabulary and LGBTQ-competency training for all service providers:
Participant: …and that’s another thing, working with interpreters with these clients, we get lots of reactions through interpreters. There needs to be lots of, how can I say, I don't know if it's right to call it education but it is education, but in a more profound sense of the word. Like having this type of conversation like you doing this research and shedding light, because I have lots of barriers to finding interpreters to do the work.

Interviewer: To finding good interpreters?

Participant: Yes! Without getting this "he, she, he ... she..." and not catching herself, you know? Or in between sessions, "yeah I was seeing him." ...well, I'm trying to address that with the interpreters, but that's a whole different chapter!

**Resources.** Service providers defined resource gaps in terms of a shortage of LGBTQ newcomer-competent service providers (especially those who were multilingual or had access to interpreters), LGBTQ newcomer-specific programming, and/or the language resources with which to meet client needs. Eleven service providers understood these settlement resource gaps as a major challenge in the work. In the pursuit of offering culturally-competent holistic support services, eight participants described the impact of stretched resources and organizational (and personal) expectations on service providers to extend their activities beyond their primary work roles in order to mitigate shortages. Four service providers achieved their professional organizational mandates of providing culturally competent, human-centred, anti-oppressive practice by participating in volunteer work and advocacy independently.

In addition, all twelve service providers explained how important it was to have access to LGBTQ newcomer-competent service providers for referrals. Seven participants described their personal efforts to build a network of trusted colleagues and programs for client referrals. However, five participants felt it was challenging to locate agencies and providers with the
necessary competencies and resources, which were also impacted by long waitlists. The impact of having a limited resource network to draw upon was described by participants as feeling isolating, with one participant describing the experience as feeling like “independent silos” of knowledge and skills. Two service providers explained how the availability of resource networks prepared by their agency has made their service provision easier. Further, for service providers who assessed the suitability of other organizations as potential referrals for clients felt that there was inconsistency in the definition of inclusive practice guidelines used by other agencies. That is, three participants explained how services might openly self-describe as inclusive but lacked any programming for LGBTQ newcomers or training for their service providers, or were unaware of the presence of LGBTQ newcomers accessing their services.

For instance, Natalie, a monolingual counsellor who works at a mainstream organization and volunteers with a LGBTQ organization, explained her process of exploring resources for settlement work with LGBTQ newcomers:

Participant: [The agency] has spent, I don't even know how many hours. They’ve put together this huge book, and they call every single resource to find out, not only are they LGBT-friendly, are they trans-friendly, are they, like specifics: are they just putting up a rainbow sticker on their wall and saying "oh yeah we support everybody!" We're more like, "No, do you have training? And is the training up to date, and is it mandatory?" And things like that. So usually, [the agency] is really great because we have so many people working in different areas. We have like a youth support team, we have an outreach worker. So, pretty much, every client, because they have so many specific needs, we usually just bring it to the table when we have either a counselling meeting once a month for supervision, or I'll just informally walk into a room and be like "hey, I have a client who is XYZ, who do
you know could be able to support them for ABC?" So I guess it's more informal? We have the resource book, I can go through it, it's like a phone book. So I usually, that's my backup, and the first would be just informal. And I find a lot -- working within the LGBTQ community, everything is informal. Like, there is a lot of things on websites and in practice, but it's much faster if you can find like a contact through something, phone them up, and have a conversation, than like apply for a referral, be on a waitlist...

Interviewer: Why do you think that is? Why is it different?

Participant: I think...[pauses]. Because...this group has been so isolated? And has had so much suffering that I think the members of the community, for the greater part, really want to find ways to make things accessible. Because a lot of the people who are working in the programs are like the grassroots level. They have seen how hard it is, for the access? And I think it's just like, a passion. I truly believe-- and I think that's like kind of the calling of the work. I think, people who find themselves in these positions aren't there for a paycheck.

[laughs]

**Multilingual language support.** Multilingual and interpretive service provision was also identified by ten participants as a necessary resource for settlement work with LGBTQ newcomers. These individuals described how challenging service provision can become when many organizations choose not to work with interpreters and/or only offer service in English and/or French. Seven service providers described their personal or organizational ability to offer multilingual or interpretive service provision to LGBTQ newcomer clients. Indeed, six participants described how meaningful their personal multilingual skills were to clients. That is, these service providers were solicited by colleagues, other organizations, and clients in order to
provide additional English proficiency support as well as to supplement ongoing settlement work.

For example, Max, a transition worker in a multidisciplinary medical clinic, described how the need for multilingual service providers leads other services to recruit him to volunteer his skills in his free time:

[Not] only, not here, but like in other clinics that they would call me like, "oh would you mind coming and meeting a client? … And it's like "well, I'm not like an emergency response team -- we are not an emergency response team in general? I mean, if I can go at time, if I don't have any other appointments booked, I would love to come. Again, I can go and assess if it may be a good referral for [my program]. And if not, I can just introduce myself and say "hey I'm just going to be helping today, just with translation." I don't need to get into "I'm not going to help you because you're not eligible for my team." I don't need to disclose all that information. "I'm just here for translation, but I work closely with the clinic, so that's why I'm here."

**Changes in programming.** While describing the current programming and organizational mandates they work with, eleven service providers explained the importance of assessing and meeting client needs on an on-going basis. In doing so, these individuals discussed recent changes their organizations have gone through to better support LGBTQ newcomer clients. Six service providers described being directly involved with encouraging and developing new programming, language support, and training for LGBTQ newcomer competencies. Three service providers explained how their work towards increasing training and service provision included being responsible for funding applications to governmental and other organizations, as well as collaborative efforts and networking with other organizations in the field. However, ten
participants explained how homophobia and transphobia created resistance to their efforts to adapt services to the needs of LGBTQ newcomer clients; these providers described resistance to change efforts as coming from funding bodies, program directors, colleagues, and other settlement organizations alike.

Nine service providers expressed a desire to see further changes and growth in training and service provision for LGBTQ newcomers in their helping profession and related organizations. These individuals explained that better collaborative networks and support amongst providers and organizations would be a benefit to the settlement area as well as service providers and their clients. Of course, such efforts are said to require greater funding to widen resource accessibility, alongside LGBTQ newcomer-specific training and programming. For example, Saba, a trilingual settlement worker in a mainstream settlement agency that offers English language classes, described her efforts to change the service provision culture of her agency:

Participant: Yeah, and actually, a colleague and I, we've been talking about these things, these issues, and training around working with clients from the LGBTQ community, and like, she has pushed the human resources to have training for all employees at [current agency] as to how to work. You know, you have training like workshops on "how to work with people with mental health issues, how to work with people with different cultural backgrounds." So we are pushing for more training in the area of how to work with people in the LGBTQ.

Interviewer: Okay so this is a really current, new kind of initiative here.

Participant: Yeah, it's new. And I hope that it actually happens. [laughs]

Interviewer: Yeah! How are you feeling about the climate around this? Does it feel like this is being welcomed, or what's your take on it?
Participant: Um, I feel like yeah....I feel uh....from when I have conversations with some of my colleagues, yeah. I feel like people feel like they need it.

**Personal Impact**

Participants’ personal backgrounds emerged as a significant theme in this study, and this context helps to deepen the descriptions of their work with LGBTQ newcomers. There was great diversity among participant demographics, particularly with respect to service providers’ ethnicity and sexual orientation, as well as the amount of experience they had working with LGBTQ newcomers. Personal background information (e.g., ethnicity, sexual orientation, and gender) was queried through the qualitative interviews and was discussed by participants as important contextualizing aspects of their work experience and goals for clients’ settlement processes. Three subthemes were identified within this category, including participants’ goals for settlement work with LGBTQ newcomers, their perceptions of which services are most meaningful to clients, and the impact this type of work has on them personally.

**Personal clinical goals.** Participants defined the sub-theme pertaining to clinical goals for settlement work with LGBTQ newcomers according to their specific area of work. For example, successful outcomes for clients meant they were housed, had employment and/or other funding support, a functional level of English proficiency, a social support network, were connected with a service provider network, and had well-managed mental health. To attain these concrete service goals, all twelve service providers described the core of their clinical settlement work with LGBTQ newcomers to mean offering open, empathic, genuine acceptance; coupled with a willingness to be present and attentive to unique client needs. Participants explained how important connection and rapport is with LGBTQ newcomers, which was understood to provide a gateway to all other services and referrals. Further, all participants explained the necessity of
self-reflection and becoming aware of, and putting aside, any assumptions they might make about clients based on stereotypes, generalizations, or shared personal cultural or LGBTQ backgrounds as their clients. To set aside biases and assumptions, all service providers described the necessity of an appreciation for and openness to listen to the complexity of lived experiences for their LGBTQ newcomer clients.

Nine service providers described the importance of flexibility in their work, which included offering extra settlement services (e.g., support with paperwork, language learning, or interpretation) that went beyond their personal service mandates. This flexibility also meant supporting LGBTQ newcomer clients on colleagues’ caseloads when necessary. These participants explained how important resourcing and connecting clients to other organizations and providers was for their service provision goals. These participants felt it was beneficial for clients to be connected with a network of supports rather than only reaching out to one service provider for all of their settlement needs. Further, for seven of the individuals that participated in this study, clinical goals included an increased willingness to reach out to and work with LGBTQ newcomers over other clients, especially if that person was ineligible to access other services. The motivation to provide extra services to LGBTQ newcomer clients was explained as an appreciation for the unique challenges faced by this population.

For example, Taylor, a monolingual clinical social worker and counsellor in a multidisciplinary clinic explained his clinical goals to support social health and help clients feel connected to the community, the challenges he experiences:

And coming [to the clinic], can make you feel like you belong here. And it can help, and it can be a piece of it. But for you to feel like you belong here... you need to do what works for you and you need to connect to the community in other ways. We're really accepting,
and we can offer lots of things and we can do lots of things, but you know, we're not *it*.
And we don't work for people, some people. We can't, um.. we can't support that. … I
think that in an ideal world, I wish that there was more of a ... like more of a bridge
between the services that we provide and services for new immigrants and refugees. ... The
image I have is us like "hand-hold", because it can be really scary going to new places.
Especially when you don't know them, and you don't know what people's experiences are
going to be like. And you know, it's also unsettling for me to refer someone to something
or to encourage them to go somewhere and to not know who's on the other end, and to not
know what their experience is going to be. … So, you know again, we don't want to foster
dependence, but we want to encourage people to connect and where is that balance? So...if
people aren't connecting and they're not reaching out then they're not getting -- what are the
barriers? What's stopping them? I don't have time to get into the nitty-gritty of those,
oftimes, if I'm not seeing them regularly. So, I can't do it.

**Impact on clients: What helps most and least?** All twelve service providers described
their perception of the work from the clients’ side, with regard to the “fit” of available services
and cultural competencies of service providers. In terms of perceptions of personal fit with
LGBTQ newcomer clients, five participants described their sense that colleagues without
LGBTQ newcomer competencies posed a barrier to successful service provision, and might
cause clients to have experiences of feeling judged and misunderstood. Four participants
explained how offering advice from a position of authority was also unhelpful, even though
some newcomers would ask for advice based on their perception that the service provider had
insight thanks to their own cultural transition experience. These participants recognized where
the limits of their settlement competencies, and explained how they would resist offering advice
and instead referred clients to speak to other providers more specialized in the legal or housing aspects of settlement. Finally, participants who worked as traditional settlement workers explained that least helpful aspect of their service provision included filling out paperwork (which they recognized many support workers could also help with), and mentioned that while clients might feel very supported and understood, they might still not find success in service provision when resource barriers arose (such as being unable to find affordable or safe housing).

Further, six service providers explained their sense that use of appropriate self-disclosure of shared experiences or cultural knowledge (or even disclosing a lack of expertise) was helpful to clients since it helped to create safety and restructure perceptions of power in the room, and to normalize client struggles. Additionally, five participants described the challenge for clients who built exclusive dependence and reliance upon a single service provider or program that offers a shared cultural understanding, since services are not usually accessible on a long term basis or outside of service appointments. As such, they explained how important it is to bridge support to a network of services by using their shared cultural knowledge and client rapport to explore safety concerns that might be barriers to accessing other services that might be more specialized to their needs.

Specifically, the assumption or communication of shared knowledge or lived experiences was described as a gateway to safety and deeper connection between service provider and client. For instance, six participants described how having a shared ethnic or cultural background with LGBTQ newcomers was often experienced by clients as a relief since there was a communication and assumption of shared understanding and connection with the service provider that might streamline rapport or culturally competent service delivery. Furthermore, four participants who identified on the LGBQ spectrum but who did not share cultural or ethnic
backgrounds with their clients described how their sexual orientations also offered a foundation of safety in the relationship based on the service provider’s self-disclosure and non-judgemental attitude toward sexual or transgender identities. Indeed, all twelve service providers explained how their non-judgemental framework for service provision was instrumental for building trust and allowing clients to feel safer opening up to them about their needs and experiences.

For example, Bahar, a bilingual counsellor who works for a mainstream family support agency and volunteers as a counsellor at a LGBTQ-specific organization, commented on the positive impact that having a shared cultural-religious background has for her service provision:

So I lived in Iran for 20 years… And it's the same in a lot of Arab countries… And even though not all of [my clients] are Persian, I still can understand it from the cultural-religious piece. So...it helps me understand them better. And again, I know what their countries are like. So it's quite helpful! When [my clients] hear that I'm also Muslim, coming from a Muslim country, and I understand what they've been through or how their experience has been like-- it really helps to create that relationship with the client. … I think one of the things that I've been really fortunate with was that piece of not being judgemental. So I think as soon as they read that, that opens up a door for them to start talking.

On the other hand, three service providers described that a shared cultural connection and/or experience with immigration to Canada implied some risk of being perceived or falling into the expert role with clients. In particular, these participants felt that many clients reached out to them personally due to the perception of a successful lived expertise and a source of advice. However, these participants described the importance of referring clients back to their specialized case workers for specific immigration-related, expert knowledge.
For example, Bahar (above) went on to explain how her understanding of Muslim clients might be a barrier to understanding her clients, and described how she uses respectful curiosity mediates the temptation to feel like an expert due to a shared cultural background:

For example, I know a lot about Muslim cultures. … But again, if I assume that I know everything about how that has influenced that client, I might go completely wrong. Because maybe that client's family is different from the general population. So, if I generalize and don't ask enough questions, or I'm being curious about that client's life, I can give them completely-- or I can guide them into a very wrong path. So I think one of the least helpful thing one can do is not being curious enough, or ask a lot of question to understand their story? And then just-- the not listening enough. …I think one of my tendencies, sometimes, is to talk more than I listen? Because I feel like, sometimes I know, okay, I've heard enough and now I can… start guiding? And then I have to catch myself.

Then you know, this session is about them, it's not about me.

**Impact on self.** Eleven service providers explained how their work with LGBTQ newcomer clients impacted them personally. Descriptions of personal impact included emotional connection and empathic identification with aspects of clients’ struggles, and motivation toward activism and building change in settlement organizations to better support LGBTQ newcomers. For ten providers, settlement-related work with LGBTQ newcomers allowed them to reflect upon their own social positions, privilege, and beliefs. Being able to self-reflect in such a manner strengthen their understanding and ability to act from an anti-oppressive practice framework.

Five service providers described experiences with client suicidality, which was explained as understandably upsetting and was usually met with high levels of organizational and peer support in the aftermath for participants. Experiences with client suicidality was also described
as having an impact on participants’ motivation to grow in their skills and to deepen their empathy for the clients’ situations.

Five participants who had personal experience with migration to Canada or with coming out experiences as LGBTQ individuals described a desire to give back to the community and to newcomers by offering the types of support they had lacked or appreciated in their own lives. These individuals understood the impact that their Further, four service providers explained their desire to reach out more to this population as a result of recognizing that few resources are available to support LGBTQ newcomer needs. Additionally, two participants described having been supported by the organizations they now work or volunteer with as service providers. These two participants described how giving back through their work with marginalized clients such as LGBTQ newcomers was personally meaningful to their sense of self as politically-minded and anti-oppressive advocates with a particular type of social and cultural power to speak for the rights of vulnerable individuals. One participant also explained that being able to offer multilingual services had developed her personal meaning-making process during cultural transition to life in Canada.

As an example of participants’ understanding of their cultural or social positions, Stephanie, a counsellor with proficiency in three languages who works closely with LGBTQ refugee claimants and asylum-seekers, explained how racialization, age, and whiteness come into play in service provision, and described her awareness of how her power is perceived by clients:

One of the ways that I think my whiteness comes into the interaction -- and this may be an age and race intersection? I'm noticing more of the members starting to call me "ma'am?" This did not happen five years ago! [laughs] and I'm needing to sort of say, "we ... we don't need to do that here." [laughs] You know, there's certainly a deference or ... kind of
showing respect -- and you know, when I was closer in age to most of the claimants that wasn't coming up as much? But now that I'm both white and older? I, that's coming up more? … I mean, it's a funny one, because we kind of pride ourselves at being an intergenerational group … And so, in terms of age, I think it's a reasonably fluid group? But the racialization and whiteness isn't... I'm very cognisant of how I use my power in the room in terms of -- I will get listened to. [laughs] There's another one of our volunteers, uh, he's [of Middle Eastern descent], and he'll say the same thing. And will look to me to kind of confirm or check. So the power of whiteness shows up in the room, there's no doubt about that. That's also part of our reason for, like, we're working towards getting more of our facilitators and board members and things like that to be people who come from refugee backgrounds themselves. In our board, we're now about two-thirds people who have come from refugee backgrounds or racialized in some way.

**Activism.** Ten service providers described how activism is a very important part of their personal and professional lives. They explained how their clinical goals are founded upon anti-oppressive frameworks, which impacts them on a personal level as well. Participants’ explained that these anti-oppressive frameworks and parallel worldviews developed from experiences growing up in addition to prior training, such as in social work. These ten participants described the importance of an integration of anti-oppressive work within professional and personal experiences, which was commonly explained as activism and congruence of professional and personal ethics. Seven participants described participating in activism and anti-oppressive practice at organizational levels, by sitting on committees and boards, and by networking with other agencies to encourage and spread training and resources for LGBTQ newcomer competencies and programming. Four service providers described taking on anti-oppressive
work in their personal lives, through conversation with friends, family, and their communities to challenge homophobia, biphobia, racism, sexism, transphobia, and other oppressive frameworks. These activities were explained as important to the participants’ service provision and to combat experiences of burn out and as a form of self-care.

For example, Niki, a bilingual counsellor with a multicultural services organization, explained how her own personal background and worldview influences her work with marginalized clients today:

Participant: I think because I was -- I grew up as a minority, I don't know, I have always had tendency towards marginal groups! So, like, in Iran too, we have certain poets who would speak against the taboos, right? So from very young age, even from elementary, I would read those poets! [laughs] You know, I think that gave me the essence of who I am-- I don't know who started it or who gave me those books but... my parents were really into books and they would always buy us books and we had many, many books at home. And I loved poetry and literature.

Interviewer: It sounds like there was something very political-- political action with reading those kinds of literature and all those kinds of poems.

Participant: Yes, absolutely. And I was always looking for people who would be seen as trouble-makers or just had something to say, or you know...

Interviewer: Do you feel like you pull any of that into your work now?

Participant: Yes, oh yes, very much! I think so yeah. They always say that I am very gentle and I have a lot of empathy-- and I know I can become quite fierce when there's injustice! So I have recognized that in my work as well.
**Burn out.** Six service providers described experiences associated with burn out associated with their settlement service provision with LGBTQ newcomers. Burn out was explained as a feeling of being overwhelmed, believing that their service represented the “end of the line” for many clients, and a sense of pressure to be as prepared as possible for the complex challenges of the work. Three service providers described feeling they were engaging in “too much counselling” at an earlier point in their work, and explained how important it has been for them to use stronger personal and clinical boundaries with clients, and to take on fewer cases and work demands in order to support their own self-care. Burn out was described by two participants as being associated with feeling unprepared for the work with LGBTQ newcomer clients; the onset of burn out symptoms occurred early into their settlement work experience and was managed by developing support and referral networks with other providers, and therefore becoming aware that they are not or do not have to be the sole supports for clients with complex needs. Additionally, two participants explained how important taking time off from the work and accessing their own support resources (such as spending time with family or meditating) on an ongoing basis has been to cope with experiences such as client suicidality.

For example, Andrea, a multilingual counsellor for trauma survivors, explained how systemic resource shortages places significant burden on front-line service providers to fill these gaps. She also described the importance of service providers having self-awareness and congruence in their personal and professional activities:

Participant: The previous trauma, the one that brought them here, coupled by their shock, really enhanced by all the limitations to services, the shortage of services, all the crises in the sector, the immigration policies, the latest changes; so there's still lots that we can do! But well... and this I was going to say, this is the most... exhausting and potentially
burdening part of our work. The one that can render us ready to burn out is not the stories! Of course you need to take care of yourself; vicarious trauma happens. We know it, we need to know and not forget that we know? So we need to take care of our self. But then again the best way for me to take care of myself is not just doing my yoga, which I do, or play with my children, that only doesn’t do it for me. It is great, but the best way to stay sane and to be able to keep doing the work is the political animal, and all that part of being. Interviewer: Acting it, being it.
Participant: The activist. I mean, I see myself as the clinician, yeah. But not so much only as a clinician but also as an activist, that uses this -- how do I say, this milieu, this ... means. And in that way, this work I’m doing here, really helped me as a new immigrant here. I was saying "eh, I can keep writing my story, by helping others write theirs, with someone else in the room." And that keeps me close to my clients! With the differences in our stories, right? But that's the big piece that can be very burdening for us.

**Structure of the Experience of Settlement Work with LGBTQ Newcomers**

The fourth, and final step in the descriptive phenomenological method is the amalgamation of each participant’s structures into an overall summary that is meant to describe the way in which the central phenomenon is experienced (Giorgi, 2009). Given that three overarching structures emerged from the data analysis, the following summary aims to weave these structures together into a broad comprehensive description of the phenomenon of settlement work as given by the service providers who participated in this study. According to Giorgi (2009), the production of an overall summary illustrates the integration of the overall structures as they are horizontalized across the data set. In order to create the summary, the researcher much examine how the constituents of the three primary theme structures persist across the data set, and which
would cause the structure to collapse with its removal from the analysis. As such, the following section represents a holistic depiction of the most salient components of the experience of settlement work with LGBTQ newcomers within a structural summary intended to highlight the essence of the phenomenon of interest.

**Settlement Work With LGBTQ Newcomers**

The experience of settlement work with LGBTQ newcomers was described as supporting a combined process of concrete settlement such as obtaining housing and employment, in addition to ‘softer skills’ such as language proficiency, mental health, and social support that offered deeper gateways to newcomers’ integration into their new communities. Participants reported how this service provision work experience was deeply affected and informed by client needs and vulnerabilities, awareness of challenging settlement barriers and limited service resources, as well as the intimate connection between client and service provider. Participants discussed how their awareness of LGBTQ newcomer needs was a ubiquitous point of orientation in their work: when offering settlement related services, they acknowledged that they must always be aware of the general experience of LGBTQ newcomers, as well as being open to individualized needs and experiences. Their service provision was then adapted around this orientation to the lived experiences and reality of LGBTQ newcomers.

An understanding of LGBTQ newcomer experiences was vital to settlement work with this vulnerable population. Participants were aware of a wide range of needs and associated barriers to accessing services that would fulfil those settlement goals. The most foundational and urgent settlement need was to find affordable, safe housing. Ideally, housing must be within easy travel distance to other support services in the community. The receiving community must also be open to welcoming LGBTQ newcomers. For housing to be affordable, shared housing situations were
often necessary. In these situations, newcomers required support in assessing the suitability of a potential roommate, but often do not have the flexibility, skills, or support to make many decisions on their own. To be homeless for LGBTQ newcomers put trans newcomers at significant risk of assault and harassment compared to other LGBQ newcomers, who also may face discrimination within shelters or on the street. Police may not be seen as empathetic supports due to prior traumatic experiences or conservative systems in newcomers’ home countries. However, roommates and landlords similarly often pose risks to LGBTQ newcomers by abusing or otherwise exploiting vulnerable newcomers into dangerous situations such as into the sex trade. Further, newcomers who are living with trauma or mental illness often feel unsafe and misunderstood by roommates.

The second vital area for LGBTQ newcomer settlement includes two interwoven needs: employment, and language proficiency skills. Newcomers are often able to access language classes at mainstream settlement agencies, however, educators and peers often put LGBTQ newcomers at risk due to their lack of LGBTQ cultural competency. Similarly, when newcomers seek employment, English proficiency is a requirement, and often the skills a newcomer may possess from their home country are not deemed transferable to a Canadian employment landscape. Further, many LGBTQ newcomers have experienced trauma and have had to hide most of their lives, and as such, they may not have had opportunity to access basic education, which places them again at further disadvantage in the new country. Lastly, mental health and social support is vital for LGBTQ newcomers to fully feel integrated within their new communities. However, most social service providers lack the cultural competency or language abilities to appropriately form therapeutic relationships with these vulnerable clients. The general and conational communities of LGBTQ newcomers also be sources of homo/bi/transphobic
violence and discrimination that other newcomers do not face. Many LGBTQ newcomers turn to Canada as a welcoming refuge for LGBTQ individuals; however, for racialized LGBTQ newcomers, who are also often living in poverty or are spiritual, there are often experiences of alienation, othering, and discrimination from the mainstream (cisgender, white, middle- or upper-class) gay male or lesbian communities.

With LGBTQ newcomer needs at the forefront of their awareness, participants described attempts to offer settlement-related services to the best of their abilities while keeping careful attention to all available personal and agency resources. Participants linked their work and service goals again and again to LGBTQ newcomer needs and barriers and the organizational features that helped and hindered service provision. All participants were keenly aware of the limited organizational resources and funding that made LGBTQ newcomer-competent services scarce, plagued by long waitlists, or unable to support newcomers lacking English proficiency. While participants felt comfortable reaching out to colleagues for support, and often built their own resource and referral networks, service providers noticed discomfort from some conservatively-minded colleagues, supervisors and funding bodies when participants advocated for developing LGBTQ newcomer-specific programming. Further, participants who were known to possess LGBTQ newcomer competencies were often sought out by colleagues in the field to take on extra clients or volunteer their skills with language and cultural competencies.

Participants recognized that many clients also sought them out specifically over colleagues due to a perception that they had shared cultural knowledge or would be otherwise non-judgemental. Participants felt that non-judgement, avoiding advice-giving, offering psychoeducation and linking newcomers with available resources facilitating safe peer support groups were the most helpful services they offered to clients. Alternately, participants felt that their less helpful service
included filling out basic paperwork, or being able to offer therapeutic or social support but simultaneously being unable to help clients overcome service and systemic barriers to settlement resource as a result of ubiquitous limitations in resources.

Ultimately, participants described how this work requires an underlying awareness of providers’ own personal presence, power, hope, and growth in the room in order to be better service providers. Settlement work with LGBTQ newcomers requires personal skills in adaptability, non-judgement, open-mindedness, and multicultural counselling/service competencies. On a personal level, participants appreciated the impact that their skills in showing acceptance, normalization, psychoeducation, advocacy, and non-judgement had on their LGBTQ newcomer clients. Participants reflected upon their personal backgrounds and explored the ways in which their earlier training and life experiences influenced the manner in which they approach their LGBTQ newcomer clients. For many, participants described feeling a pull toward social justice and activism, of reaching out and trying to help vulnerable groups in one manner or another. Despite their best intentions and open-minded personalities, however, the vast majority of participants described lacking any preparatory training or education in serving LGBTQ individuals, let alone in supporting the complex intersection of LGBTQ identities and immigration. Participants also expressed concern that no preparatory specific coursework on LGBTQ newcomer competencies exists in training programs or within settlement agencies. Further, having a shared ethnic identity as their clients was not always beneficial, as the temptation to prematurely believe they understood a clients’ situation and needs had to be set aside the help of with open-minded curiosity, humbleness, and empathy. As a result, participants perceived the vital necessity for service providers to possess LGBTQ newcomer competencies,
and reported that their own skills have come only through lived experience supporting their LGBTQ newcomer clients.

The lived experience of settlement work with LGBTQ newcomers had a noticeable impact on participants’ own senses of self, privilege, and personal growth. For LGBTQ-identifying participants or those with experiences with immigration to Canada, there was often a recognition of privilege and power in the room with clients. Participants also identified having had accessible social support in their own lives that was noticeably absent from their clients’ experiences both pre- and post-migration. For Canadian-born individuals, feelings of shame and guilt sometimes came with the realization of difference and power, as they reflected upon how their lives might have been different if they lived elsewhere in the world. For the majority of participants, their experience working with LGBTQ newcomers impacted them so profoundly that they felt increased motivation and inspiration to be more active in their personal communities to combat homo/bi/transphobic prejudice and discrimination, and to advocate for better services and training for service providers. Their work included the formation of informal networking groups amongst colleagues, as well as collaborative efforts to develop funding and programming to fill the service gap for LGBTQ newcomers.

The other side of the work experience for participants included discussions around managing their personal behaviours and presentations in sessions with LGBTQ newcomers to create a deeper sense of safety and to reduce the power or authority they held over clients as much as possible. Further, service providers expend incredible emotional energy while supporting client struggles and barriers while seeking settlement. As well, they are personally affected by being witness to LGBTQ newcomers’ stories of abuse, torture, and rejection from friends and family. In doing this work, participants described frequently feeling unprepared,
overwhelmed, and occasionally distracted from the primary focus of service by the myriad and complex challenges that LGBTQ newcomers face. Symptoms of burn out were regarded as understandable given the “stretch” participants experienced through their work. In order to manage these symptoms, participants drew upon their social community and families, practiced mindful meditation, pursued further therapeutic skill development, used physical exercise, and involved themselves in social and community projects aligned with their social justice values. These activities offered participants a sense of congruency in their personal and professional identities, which was further encouraged when they were able to witness clients finding successes and resiliency in their settlement process.
Chapter Five: Discussion

Introduction

Using a descriptive phenomenological methodology, the purpose of this study was to explore service providers’ perceptions and descriptions of their work in supporting LGBTQ newcomer clients. In this chapter, I position this study’s findings within the context of the current literature on service provision with LGBTQ newcomers. I will present a summary of the inquiry as well as a discussion of the three overarching descriptive structures of the phenomenon, including the manner in which they support, grow, and interact with existing research. Finally, strengths and limitations of the study are outlined, followed by directions for future research.

Summary of Inquiry

The goal of this study was to contribute to the literature and on-going community dialogue on service provision with LGBTQ newcomers in Canada by inviting the perspectives of front line service providers to contribute their experiences to the picture. Using a descriptive phenomenological method of inquiry (Giorgi, 2009), the study asked: What are service provider’s perceptions and descriptions of their work in supporting LGBTQ newcomer clients? Over the course of a year, twelve service providers in settlement-related work (including settlement worker, counselling, social worker, youth work and community liaison and transition) from the Lower Mainland of British Columbia, Canada volunteered to share their experiences. Explicitly hoping that their experiences would expand the abilities of the field to support LGBTQ newcomers, these twelve service providers spoke to their perception of LGBTQ newcomer needs, organizational issues with the work. Participants provided rich descriptions of the challenges and successes of what it is like to support the settlement process of LGBTQ
newcomers, and the direction they would like to see the field head in the future to better meet the needs of this population.

Each element of the participants’ experiences were carefully examined, and transformed into transferable meaning units that allow them to be meaningful to other service providers supporting the settlement needs of LGBTQ newcomers. The analysis of participant descriptions produced three superordinate meaning units (or general themes). These three superordinate meaning units represented the most salient aspects of their experience, and together, provide the overarching structure of the phenomenon. The structures included: a) service providers’ perceptions of LGBTQ newcomers’ needs and experience, b) organizational issues, and c) personal impact. The following section explores these structures more deeply, as well as the overarching structure of the project, and the ways in which they both support previous research and contribute to the literature in the area of settlement and counselling work with LGBTQ newcomers.

**Contributions to the Literature**

**Settlement Needs of LGBTQ Newcomers**

Regarding the settlement needs of their LGBTQ newcomer clients, many participants were aware of a wide range of general and unique needs and challenges for particular subgroups of the overarching LGBTQ demographic. For instance, some participants felt that higher socioeconomic status and white cisgender gay men and lesbian women had higher rates of success and fewer settlement barriers. Alternatively, individuals from ethic minority backgrounds commonly experienced intersectional barriers such as racism within mainstream LGBT spaces, and financial insecurity to access settlement resources. Such trends have previously been documented in the literature (e.g., O’Neill & Kia, 2012). Interestingly, trans men
and bisexual cisgender women were not commonly described without specific prompting from the researcher. In part, this perception is likely related to the lower visibility (and therefore client contact and salience) of out trans men and bisexual women that participants described within their settlement agencies. However, experiences of barriers for trans men and bisexual women included general invisibility to providers as well as biphobia from client peers and organizationally in residency application procedures (e.g., Barker et al., 2012; Rehaag, 2008). On the other hand, many service providers spoke in-depth on the unique barriers faced by trans women specifically (e.g., Jordan, 2009). In general, a ubiquitous need was to locate LGBTQ newcomer-competent settlement services, which is documented as an important need within the literature (Chavez, 2011; O’Neill & Kia, 2012).

Regardless, participants involved with traditional settlement work attended and spoke more often to the housing challenges faced by clients, and had more direct ability to comment on the dangers of shared housing and emergency housing situations. Conversely, participants offering therapeutic and mental health support more often described focusing their work on the emotional impact of migration, as well as earlier and continuing experiences of discrimination and trauma. These participants, and providers who did not have multilingual proficiency, were also less likely than settlement workers to comment on the barriers of English proficiency, which is likely due to how most of their own clients were required to meet a basic level of language proficiency to access their services, and as such, this settlement need became less salient. All providers described the emotional cycle of hopefulness and hopelessness that their clients passed through; Lenette and Ingamells (2014) similarly describe “a line between resilience and despair” (p.93) that their group of refugee women participants walked. In the present study, participants
provided witness and support as clients struggled, showed resilience, and found success in their receiving communities.

Participants provided descriptions of their work that highlight missing knowledge from the literature, such as their attempts to prepare for and be mindful of the potential abuse newcomers could face from roommate or landlords in housing situations. They were also mindful of the disconnect between the lived reality for LGBTQ newcomers and what settlement workers commonly understand those experiences to be, which implicates their ability to adequately prepare their clients to deal with realistic situations. For instance, unique societal threats are created in response LGBTQ newcomers’ intersecting identities in ways that settlement services and immigration policy are often incapable or ineffective in addressing. Further, the inability to access many settlement and medical services in a shared language, and to feel free from transphobic microaggressions and other discrimination presented substantial barriers for potential clients. Similar barriers have also been documented within the literature (e.g., Chavez, 2011; Simich et al., 2005). The present study also highlights participants’ perceptions of the lack of shared skill competencies for work with LGBTQ newcomer within their fields. As a result, participants heard from clients that they felt unsupported in their personalized and intersectional needs due to providers lacking a more nuanced understandings of their experiences (Jordan, 2009; O’Neill & Kia, 2012). Participants were aware of a common lack of understanding of LGBTQ experiences and vocabulary training in their colleagues, and this awareness appeared to be linked with participants’ fear that colleagues might be too hesitant or unable to assess and meet their client needs fully. Participants also feared that clients may not be comfortable disclosing LGBTQ experiences with their colleagues due to their lack of training and cultural competency. Additionally, providers associated negative stereotypes of personality disorder
symptoms with widespread misinterpretation of trauma symptoms for LGBTQ newcomers, which then negatively impacted service providers’ abilities to meet client needs. Similarly, service provider misunderstandings of trauma as it occurs for LGBTQ refugees was also reflected in the literature (Jordan, 2010).

Organizational Issues

At an organizational level, participants’ affiliated settlement and counselling organizations seemed to uphold service mandates promoting acceptance of diversity and minimizing service barriers to vulnerable groups. At a personal level, their organizational mandates matched their personal goals and frameworks toward anti-oppressive settlement work. Multicultural and anti-oppressive orientations to service provision are most often reflected by social work training and practice paradigms, but are more recently also being included in counselling psychology literature (Lopes & Thomas, 2006; Sinacore et al., 2011; Sue & Sue, 2013). Such social justice oriented orientations were also discussed in the wide range of service provider roles and training represented in the present study. While all providers felt that their organizations offer vital and essential transition services for newcomers, there appeared to be a sense of disappointment and frustration for most participants given the lack of explicit programming training, or acknowledgement of the presence and needs of LGBTQ newcomers, whom they perceived as being in need of such services. Further, providers experienced a continual struggle in justifying their funding needs when it came to essential trauma- and social integration-based programming (Berry, 1997; Maier, 2015). Sam and Berry (2010) argue that social competence is a key factor of acculturative success and adaptation, and accordingly, found that service providers noticed the healing and generally beneficial effect that group-based services had for their clients. While applying for funding for non-profit work, there seemed to be a very careful and self-conscious
mindfulness undertaken, likely to balance the needs of vulnerable clients against the often conservative funding bodies who lacked familiarity with both bio-psycho-social-spiritual newcomer needs as well as limited or stereotypical LGBTQ knowledge. It is also likely that negative governmental attitudes towards immigration and especially vulnerable migrant populations over the past decade have increased scrutiny on service provider funding applications and have contributed to recurring program and funding crises. Participants in the present study provided descriptions of frustration and urgent redistribution of professional resources and organizational budgets that have put services and resources for LGBTQ newcomers in jeopardy. The impact of these attitudes appears to be closely linked to experiences of burn-out and service provider isolation, when service providers are unable to find LGBTQ newcomer-competent resources to form networks of support for their clients.

**Gaps in services, resources, and funding.** All participants felt challenged and limited in their ability to utilize appropriate resources to meet client needs. They identified gaps in services, resources, and funding, which made it difficult for them to access necessary training and to provide appropriate referrals to more competent, specialised services. Together, the literature highlights a pervasive service shortage for LGBTQ newcomers across North American settlement services (e.g., Chavez, 2011; Sinacore et al., 2011), and the present study describes the experiences of frustration, isolation, and desperation felt by providers in the face of these gaps within the Metro Vancouver area of British Columbia, Canada. Similarly, the literature highlights settlement services that vary and are accessible depending residency and financial status (e.g., O’Neill & Kia, 2012; Tiven & Neilson, 2009), and the present study describes the wide range of personal and professional skills that providers draw upon to make services more accessible and beneficial to clients. This research also describes how challenging it can be for
service providers to assess whether or not their clients are LGBTQ newcomers, when they are not open to disclosure or service provision goals are not directly related to disclosure of LGBTQ newcomer identity, such as for accessing language skills training in most cases. With regards to disclosure, the literature draws attention to the lack of a common, clear understanding of the term “immigrant”, with the term most commonly being associated in public perception as refugees and asylum claimants (Blinder, 2015) The current study also illustrates the fluid concept of “immigrant” since service providers commonly discussed how their indirect assessments of newcomer status in clients, and how settlement issues were still relevant even for second generation newcomers or clients who had been in Canada for many years, and as a result, do not fit the “typical” newcomer definition. The implication may be that having a clear, common understanding of the term “immigrant” can affect public perception and policy around asylum-seekers and refugees in particular, and which services are available to them (Blinder, 2015).

Participants then described how knowing a clients’ newcomer status impacted their ability to make suitable referrals, especially since many service require specific residency requirements for clients to access them.

Participants in this study recognized how challenging it can be for newcomers to navigate the settlement system independently, which they are often forced to do. They empathized with client confusion and described how mainstream program mandates often leave many individuals with intersectional needs without a clear path to supportive resources. The importance of social support to newcomers was similarly documented in the literature (Simich et al., 2003; Simich et al., 2005). Finally, it appeared that professional roles are often obliged to expand beyond primary service mandates in order to sustain or allow any service provision to occur. Participants often became social and professional supports for many of their clients, even outside of their regular
caseloads (e.g., taking on clients of colleagues informally due to language proficiency or LGBTQ competency gaps).

**Gaps in training.** All but one of the individuals who participated in this study described having little to no prior training in supporting the settlement needs of LGBTQ newcomers. This lack of specific training and coursework has been reflected across counselling psychology and social work programs (Einbinder et al., 2012; Sinacore et al., 2011). One participant described her desire for a “frequently asked questions” resource to help service providers with knowledge and understanding of LGBTQ newcomer experiences, including guidelines to respond to challenging questions about the safety and acceptability of LGBTQ newcomers’ feelings and behaviours within the receiving community. This request illustrates the variability that exists among service providers in terms of their understanding of LGBTQ terminology or experiences. It seemed that other participants filled this gap by actively seeking out training or had personal experience as members of the LGBTQ community. Regardless, the majority of service providers in this study felt they could confidently draw upon their multicultural competencies including rapport- and safety-building. Their more general skills were also utilized in order to continually reflect on their assumptions about LGBTQ newcomers to reorient service goals around client needs rather than service provider assumptions or stereotypes. The culturally competent service providers in this study actively pushed for further training, service programming, and networking amongst settlement agencies and this was likely motivated by their awareness of the widespread lack of training for settlement work with LGBTQ newcomers.

Despite the presence of a few recent practice guides in the literature (e.g., MOSAIC, 2015; O’Neill, 2010; Tiven & Neilson, 2009), service providers described utilizing documentaries and more experienced colleagues to develop their LGBTQ newcomer competencies. Further,
participants’ learning and skills also grew with each new LGBTQ client they served. This experience helped them to learn the lived realities of this population as well as elucidate and challenge personal biases, stereotypes, and assumptions. Furthermore, service providers also learned to foster self-reflexivity for better relationship and rapport with future clients. This finding has not been addressed in the settlement literature, where the focus of study for service provider attitudes has been on vulnerable clients’ perceptions of the service provision experience as it relates to service providers’ prior training experiences (Bhuyan et al., 2012; Einbinder et al., 2012).

**Changes in programming.** Most participants in the present study had specific goals in mind for training and programming, which they were currently seeking or working toward (e.g., Dialectical Behaviour Therapy training to better support client trauma needs or LGBTQ-specific competency development). Others felt unsure where their competency and knowledge gaps lay and understood that this was likely due in and of itself to their low cultural competencies with LGBTQ newcomers. However, these individuals felt ready to adapt in response to ever-changing, complex client presenting problems. Recent changes in the settlement area fill some gaps in training and service provision (e.g. MOSAIC, 2015), but all participants described a continual personal and community-oriented process of seeking the improvement of skills and services. As an example of precarious funding, the MOSAIC (2015) “I Belong” pilot project was the first of its kind within the agency to offer focus groups with clients and service providers to assess perceptions of settlement work with LGBTQ newcomers, as well offering LGBTQ newcomer support programming. The project experienced the impact of precarious funding when the program they implemented, which was designed to function in the short term but to be sustainable as permanent programming for LGBTQ newcomers, was not granted a funding
extension past its initial six month contract as they had hoped it would. The project, despite its short duration, also illustrates a successful and impactful attempt at offering targeted programming to assess the needs of clients and expand supportive spaces specifically to LGBTQ newcomers.

**Personal Impact**

As described above, the organizational service provision mandates that stressed multiculturalism and anti-discriminatory practices were highly aligned with participants’ personal goals and motivations for their work with LGBTQ newcomers. Their desire for changes in programming, training, networking, and collaboration were influenced by insight gained via personal experiences as members of marginalized groups (e.g., sexual orientation, religion, or cultural/ethnic identity), and by experience with and training on LGBTQ newcomers. The lack of academic training and service provision guidelines on LGBTQ newcomer experiences seems to be strongly associated with participants’ sense of being unprepared and overwhelmed by organizational pressure to provide resources. Additionally, this sense may have also led to a feeling of personal responsibility that necessitated the extension of participants’ unique personal skills (such as language proficiencies or resource mapping) and offering services outside of regular hours or case assignments. Such findings are not addressed as yet in the literature on service provision with LGBTQ newcomers.

Alternatively, participants were also highly attuned to the impact that their personal backgrounds, presentations, and symbolic power had on their relationships with clients. Descriptions of the work illustrate how providers are aware of and manage any of their physicality, heterosexuality, and/or whiteness as it influences the power and relationship with clients. Providers were able to fall back on multicultural counselling competency training, which they adapted to
provide sensitive and respectful work, and present themselves as trustworthy allies. Thus, general skills acquired from counselling and social work training programs seem to provide the groundwork for trainees to become exposed to experiential social justice learning opportunities. Further, it is clear that skills in self-reflection and understanding concepts of power and privilege are highly relevant to any type of work with marginalized groups, and may be especially powerful for work with LGBTQ newcomers (MOSAIC, 2015; Simich et al., 2005; Toporek & Vaughn, 2010).

**Burn out.** Participants were encouraged to speak explicitly about the personal impact they experienced in response to their work with LGBTQ newcomers. As such, it was clear that both positive and negative emotions were evoked from their work with this population, which seemed to motivate participants to continue to seek out more training and resources to better support clients. Negative experiences included symptoms of burn-out, vicarious trauma, grief, shame, as well as uncomfortable awareness of personal privilege. A similar type of two-sided response to witnessing trauma work has been described in the literature on secondary trauma symptoms, where “vicarious resilience” is defined as a unique and profoundly motivating reaction to the work (Hernandez-Wolf et al., 2015). Also known as catalytic validity, vicarious resilience is reflected by an increased awareness of privilege, marginalization, and oppression by service providers in response to trauma recovery work with LGBTQ newcomers (Pack, 2014). The low incidence of secondary trauma symptoms discussed by participants may be due to mitigating personal factors, such as the social justice-oriented and anti-oppressive activities, which they undertake within their organizations, communities, and personal networks to minimize work-related feelings of helplessness or hopelessness.
Specifically in terms of burn-out, some participants felt invigorated by the “stretch” they experienced in all of the professional, volunteer, and personal efforts involved with their work. At the same time, others noticed signs of burn-out in themselves, changed their behaviours, and reorganized their personal expectations as helpers. Recruiting peer and organizational support and debriefing was also key to managing pressure, and this finding provides greater depth to the literature around obtaining personal counselling, supervision, and working within teams in response to vicarious trauma (e.g., Lenette & Ingamells, 2014; Lopez & Thomas, 2006; Pack, 2014; Sue & Sue, 2013).

**Activism.** The majority of providers in this study described taking on active roles in combating sexism, racism, homophobia, biphobia, and transphobia in their personal and professional lives. Indeed, the majority of participants described a sense of identity as an advocate, and a desire to minimize the suffering of vulnerable groups. In the present study, participants exemplified a wide range of racially and sexually diverse individuals at different levels of the organizational hierarchy. In terms of anti-oppressive and anti-racist progress in organizations, Lopes and Thomas (2006) describe how “agents of change” within organizations are most often individuals who have the least power, are often racialized (and may have some white allies), or advocate for the least powerful by bringing up issues of racism and transphobia to middle and upper levels of the organization. The authors suggest that individuals acting as agents of change are often unsupported by organizational policy in their efforts to combat racism and other oppressive systems. Participants in the present study similarly felt that their organizational policies were inefficient at receiving or responding to their recommendations and request for training and more inclusive practices targeting LGBTQ newcomers. Participants within the present study described their reflections upon and intentions to pursue and expand
organizational mandates that currently uphold multiculturalism in general in order and to change assessment documentation materials to be more inclusive and responsive to diverse client needs. The literature also documents social service providers pursuing increased inclusivity and the deconstruction of systemic barriers as a function of the core principles of social work theory and settlement work itself (Sue & Sue, 2013). Similarly, participants also described a sense of freedom and obligation to step forward and advocate for clients and provider training, and it appeared that the risks from any organizational or community backlash against these changes felt manageable and bearable. As a result, these service providers disclosed being in a unique position of safety and power, which was a situation that differs from the literature’s documentation of human rights advocates in other parts of the world who challenge social and cultural norms of gender and sexual orientation (IGLHRC, 2005).

**Significant Findings**

The present study provides rich descriptions regarding the complex demands of settlement work with LGBTQ newcomers. It also highlights the profound personal impact the work has on service providers themselves. Participant descriptions highlight a knowledge gap in the literature around sufficient preparation of service providers to work with LGBTQ newcomers: participants indicated a consistent feeling that they lack sufficient preparatory training and knowledge to do the work. Further, there has been little exploration into how the practical work is being done or experienced by service providers, especially when serving vulnerable LGBTQ newcomers. Participants in this study provide an answer for where service providers are accessing important competency skills and how they are resourcing themselves generally to better meet the needs of their clients. This process seemed to be driven by urgent necessity in response to the challenging
and complex nature of the work, likely exacerbated by precarious funding and negative governmental attitudes toward supporting especially marginalized newcomers.

For example, participants have offered descriptions of how service providers from multiple organizational levels manage the work expectations, negotiate funding applications and program development, and facilitate interdisciplinary collaborative efforts in order to expand training to meet the needs of LGTBQ newcomers. The personal impact of the settlement work on service providers has motivated and reinforced them continue doing this work and pursue growth in the field, to better serve this population. The work calls upon high levels of resilience, flexibility, and often ingenuity with regards to the constantly changing service field and precarious funding resources. This study also sheds light on the pervasive lack of nuanced understanding of the direct, lived experiences of LGBTQ newcomers, on the part of service providers and society. Relatedly, participants highlight resistance to training and program development for LGBTQ newcomers from some conservative agencies, which refuse to acknowledge the presence of this demographic within their services. They also illustrate the personal impact the erasure and underfunding of the field has on providers, where their sense of frustration and personal hurt represents a unique finding of this study. Further, this research suggests that a nuanced understanding would be useful for service providers to offer competent and effective services. This including offering psycho-education to all clients about the rights of LGBTQ newcomers in Canada to combat racism, sexism, transphobia, and homophobia. Finally, results of this study highlight the necessity for all settlement workers to understand complex trauma presentation, including the role of interpreters and administration, who may inadvertently reproduce oppressive frameworks.
**Strengths and Limitations**

Within the current psychological literature, the majority of available research on LGBTQ newcomers has, for good reason, focused on prioritizing the voices of this marginalized group in order to highlight their needs and experiences of cultural transition (Jordan, 2009/2010; O’Neill, 2010; O’Neill & Kia, 2012). A smaller body of research has explored the attitudes and beliefs of settlement and other services providers who work with marginalized groups, such as LGBTQ or newcomer individuals separately (e.g., Bhuyan et al., 2012). The present study addresses a heretofore missing area in the literature, by centering the discussion on the experiences, psychological processes, organizational issues, and personal impact of the service providers themselves. These descriptions position both service providers and LGBTQ newcomers as affected by, and integral to, the work and the settlement field. As such, results of this study provide practically applicable information, as it sheds light on the requested, and necessary, training and the organizational supports for service providers. In parallel, this research offers previously missing information for deconstructing many barriers to service access for LGBTQ newcomers.

This research project and the descriptions produced within it are also strengthened by the fact that the sample consisted primarily of individuals who were often already self-motivated and active in their communities to advance training, research, service provision. The descriptions of the experience of settlement work with LGBTQ newcomers is deepened by the active involvement these participants engage in while changing community attitudes and awareness with regards to the complex and unique challenges of settlement work with LGBTQ newcomers. Although these individuals held largely homogenous social justice and anti-oppressive and competency training about LGBTQ newcomers in the settlement field, this highly motivated and
specialised group of service providers provides an in-depth view of the practice, training backgrounds and needs, and service issues that surround settlement work with LGBTQ newcomers in the Metro Vancouver area of British Columbia, Canada.

The use of in-depth, semi-structured, anonymized interviews and snowball sampling allowed for participants to describe their professional and volunteer experiences with LGBTQ newcomers in settlement-related work. These descriptions were strengthened by the diversity among participants, including factors of gender, sexual orientation, ethnicity and personal background, field of work and training, and multilingual proficiencies. Importantly, this study also included individuals with a wide range of experience supporting LGBTQ newcomers. Further, while saturation was reached after the tenth participant, the substantial depth of experience offered by the final two participants allowed for a greater description of the phenomenon and provided validation of the earlier interviews.

Multiple means of rigour and trustworthiness were used in this study, including bracketing to manage the researcher’s subjective stance, member checking, as well as peer auditing and consultation. The study also established catalytic validity through the prioritization of participant descriptions. Additionally, the exploration of their work with LGBTQ newcomers inspired further self-reflection and motivated several service providers to pursue organizational change and to think differently about their work with this population. These measures of rigour and trustworthiness add to the credibility, dependability, transferability, and confirmability of the study (Shenton, 2004). Moreover, they allow the research findings to be useful to academic and service provider communities due to their collaborative, inter-subjective structure, and applicability to training and practice (Giorgi, 2009).
This study provides insight into the phenomenon of settlement work with LGBTQ newcomers, yet there are some limitations to consider. For instance, recruitment for this study was slow and many providers and agencies did not respond to recruitment efforts, so a largely amount of potentially eligible participants were not considered or screened for inclusion in the study. Further, this study does not include descriptions of settlement work experiences from individuals who struggle to feel successes in their work, or those who do not have clients who feel comfortable disclosing their newcomer and/or LGBTQ identities. Further, results of this study does not include descriptions from individuals who actively and openly express sexist, homophobic, transphobic, or racist attitudes regarding LGBTQ newcomers, which creates a very homogenous, politically-minded, progressive group of service providers. Some slight variation in the demographics of the group comes from four participants who expressed some degree of unfamiliarity with LGBTQ experiences and terminologies, and who desired further training in this area due to their confusions and uncertainty about the actual lived experiences of this group. Finally, the present study included the perspective of individuals from a relevantly small geographic area in contrast to the total recruitment area; however, the diversity of settlement roles and years of experience represented by the participants has provided deep descriptions, which are likely transferable to similar geographic areas and populations in North America.

Implications for Counselling Training

The literature on settlement work and cultural transition offers general guidance for counsellor training in the areas of multicultural counselling competencies as well as more specific needs of LGBTQ newcomers (e.g., Arredondo & Toporek, 2004; O’Neill, 2010; Sue et al., 1992). The present study extends guidelines for trainee skill development in the domains of awareness of power, political action and identity, and attentiveness and flexibility to diverse
client needs for intersections of LGBTQ newcomers (Arredondo-Dowd & Gonsalves, 1980). For example, the necessity for politically-minded activism efforts are important skills that should be taught in parallel to basic multicultural counselling competencies in supporting LGBTQ newcomers through the process of settlement. The present study adds depth to the literature on intercultural service provision training, as it includes descriptions of diverse service providers’ perceptions of the training and practice guidelines for settlement work with LGBTQ newcomers. The diversity represented within the descriptions offered by the participating sample allows the essence of training for settlement work with LGBTQ newcomers to be viewed through multiple lenses of practice and theory.

Social work and counselling psychology programs should be prepared to serve LGBTQ clients whether they are newcomers or naturalized citizens. As such, they should include foundational knowledge of LGBTQ terminology and experiences in their communities, as well as the awareness that LGBTQ experiences may vary culturally and geographically. It is necessary to highlight the importance of mental health support for LGBTQ newcomers, as this demographic commonly experiences high levels of trauma, social exclusion, multiple intersections of systemic oppression (as racialized, non-heterosexual, and/or transgender individuals), as well as experiences of war, forced migration, and more general migration stresses and losses (e.g., Triven & Neilson, 2009). Consequently, LGBTQ newcomers are likely to access counselling for support with a range of mental health needs such as depression, anxiety, trauma, or personality disorder-like symptoms, and counselling psychologists must be prepared for the often complicated barriers and experiences which clients seek to overcome during settlement.
It is therefore important for counselling psychologists to be prepared to conceptualize settlement support work as possibly extending beyond the immediate counselling relationship, and for trainees to be prepared to reflect, manage, and respond to differences in power and to understand the political meaning behind their actions with regards to this marginalized group. While individuals with social work backgrounds in the present study had training in social justice and anti-oppressive practice, others had no such preparation, and this was especially true for counselling professionals. As such, it is vital for counselling trainees to be taught skills to be sensitive to assessing and supporting migration as well as LGBTQ-related traumas on a culturally appropriate level. Such training is necessary to allow trainees to be aware of which interventions and therapeutic frameworks may be relevant, as well as to recognize when more specialized referrals are necessary for ethical service provision.

Basic training that is often not included in counsellor training programs includes the deeper understanding of the lived experiences of LGBTQ and newcomer individuals. While some reference may be made to multicultural and LGBTQ competency, it is important for trainees to access knowledge regarding the lived experiences of racialized, migrant, and LGBTQ individuals, and to have an understanding of the ways these identities intersect globally as well as within their local communities. The present study suggests that important training for counsellors and other settlement workers includes both the legal protections (such as in regards to harassment and assault, as well as employment and housing discrimination law), as well as the lived reality of LGBTQ newcomers. This understanding allows trainees to go forward to be able to be self-reflective on their assumptions, biases, and beliefs around LGBTQ newcomer experiences, and to provide psychoeducation and normalization for client struggles. For example, one participant described her desire for trainees and service providers to hear directly from
LGBTQ newcomers about the harassment and challenges they face in housing situations, employment, and on the streets in their communities. Such a framework therefore obligates trainees to be prepared to prioritize and empathize with intersectional and marginal client experiences. Trainees should expect to extend their activities and awareness beyond the counselling room to facilitate realistic, applied, social justice projects within client communities to better support their mental health and cultural transition (Toporek & Vaughn, 2010).

Participants in the present study also expressed their desire for counsellor and psychiatrist trainees to have a wider, more complex understanding of trauma, and its presentation for individuals who have experienced torture, war, rape, and forced migration. To this end, trainees should be provided with the knowledge on bio-psycho-social-spiritual effects of trauma in order to provide psycho-educational resources and better referrals to clients. Required knowledge should also include developmental trauma related to cultural stigmatization of LGBTQ individuals, as well as understandable losses of trust in systems of law enforcement as protectors (especially police and governmental bodies). Basic trauma education for settlement work with LGBTQ newcomers should include awareness of how trauma affects basic cognitive, autonomic, and social processes, and may present as symptoms of personality or developmental disorders, and as such, body-oriented therapy modalities are said to be an asset (e.g., Maier, 2015).

Lastly, in addition to training in self-care, awareness of burn-out symptoms, and management of such challenges, it may also be important for trainees to be cognisant of the fact that persistent exposure to trauma work may allow for vicarious resiliency (Hernandez-Wolf et al., 2015; Pack, 2014). As such, it may be helpful for trainees to understand the reality of burn-out, and in turn, develop the ability to identify symptoms for themselves and adapt self-care strategies as necessary. These skills are important, not just as a means to manage vicarious or
secondary trauma symptoms, but also as a pathway to vicarious resiliency through exposure to trauma work. As such, this approach may work well in parallel with anti-oppressive training to better support practitioners as well as clients.

**Implications for Practice**

The present study provides many implications for ethical and culturally sensitive practice with LGBTQ newcomers seeking support throughout the process of settlement. In general, present guidelines call upon service provider to draw upon their diverse skills and multicultural competencies, empathy, and active listening in order to build a safe and trustworthy relationship with clients (Yakushko et al, 2008). The diversity of the participants in the present study benefits settlement work with LGBTQ newcomers by allowing this multifaceted work to be viewed through multiple practice and theory lenses. It is vital to incorporate multiple frameworks and lenses to the field in both practice and training as these lenses provide needed depth and interdisciplinary insight and participation guidelines from the wide variety of providers involved in the field at all levels of the work. For instance, participants in this study advised that service providers should continually monitor their own therapeutic and practical goals for clients, to ensure that they actually align with their presenting concerns and goals. Providers should also continually monitor their own assumptions, biases, and beliefs about LGBTQ newcomers in order to be consistently present and attentive to client needs and experiences (Shannon, 2014). As such, it is important to recognize that being a trustworthy settlement support is an active, ongoing role. Often, a wide range of skills are demanded of service providers in this complex, important work.

Settlement work with LGBTQ newcomers should also be recognized as requiring language support or multilingual proficiency greater than English and French. Any interpreters
incorporated into the therapeutic work should be screened and monitored for discriminatory attitudes, which may pose harm to clients (e.g., consistently misgendering clients). Interpreters should also be stable individuals whom clients feel comfortable with, which may mean they are conational community members or otherwise (Shannon, 2014). Service providers should also actively petition for multilingual interpretive support within their own agencies where possible in order to reduce language barriers for clients. Shannon (2014) also advises settlement workers to ask direct, open questions about mental health and past experiences early into the counselling relationship, to prevent clients from acclimatizing to their symptoms and experiences when supports could be realistically available to improve their quality of life. However, participants in the present study described being mindful of maintaining a respectful balance with LGBTQ newcomers who may feel stigmatized, judged, or unsafe by direct questions about sexual orientation or gender identity. They stressed the importance of the relationship as guiding practice to know when and how to ask questions about experiences related to migration or LGBTQ issues. In either case, informing clients about resources that might be available to them is vital to aiding transition into a network of providers (as opposed to relying solely on one individual or resource) or to a more specialized service for that client. Providing psycho-education about mental health and common effects of trauma also normalizes and destigmatizes some client experiences.

While Maier (2015) suggests that clients will not be prepared to enter therapy if they experience social isolation or exclusion from important family systems, many LGBTQ newcomers experience this precise challenge of traumatic isolation. For example, it is typical for LGBTQ newcomers to experience being cast out of, or to experience extreme danger from, conational communities and even their immediate families. Dangers also present themselves
within shared housing situations in the receiving community. However, the present study indicates that many LGBTQ newcomers are able to access counselling and other support resources in spite of depressed social competencies and actual risk of encountering peers or service providers who lack LGBTQ newcomer competencies. The resiliency of these clients needs to be supported by every service provider that they encounter. It is also important for service providers to be prepared to speak out and uphold service mandates of acceptance and multiculturalism to ensure the safety of LGBTQ newcomers within organizations. Indeed, this requires the presence of organizational mandates and service providers who are willing and skilled enough to uphold such principles of safety, acceptance, and multiculturalism for all clients at the agency.

In addition to needing expertise in trauma presentations and multimodal and body-orientatated modalities of therapy and service provision, practitioners must also be mindful of experiences of vicarious trauma and burn out. The literature indicates that more frequent contact with clients with high levels of traumatic experiences is associated with secondary trauma symptoms in service providers (e.g., Robinson-Keilig, 2014). As such, they must be attentive and aware of what these experiences present as, and how to manage these trauma-related and emotionally-draining service experiences. Participants in the present study indicate that useful strategies include balancing caseloads more effectively as well as locating supportive relationships with peers and supervisors to debrief and access additional resources. Moreover, many participants found it to be a fulfilling, meaning extension of their work, to cultivate social justice and activist-oriented activities outside of clinical work. These strategies were utilized in parallel to more traditional self-care activities, such as reconnecting with family and engaging in mindful activities like yoga or exercise.
Indeed, as indicated in the previous section, there are parallel positive effects on service providers who experience clients’ resilience during trauma recovery work, which is known as vicarious resilience (Hernandez-Wolf et al., 2015). The diverse sample of service providers in the present study described these types of experiences of invigoration from client successes through multiple disciplinary lenses, and noticed changes in their self-care behaviours, personal awareness, insight, and goals in parallel to LGBTQ newcomers’ experiences (Pack, 2014). As such, service providers should seek out training specific to LGBTQ newcomers and connect with other organizations and service whenever possible, in order to manage the scope of work demanded of them and to provide ethical, culturally-competent, multimodal support to meet client needs.

**Directions for Future Research**

While this study begins to address the gap in the research literature that describes service providers’ perspectives and experiences on the provider side of LGBTQ newcomer settlement, there are several important areas to pursue for a deeper knowledge of the phenomenon. These future areas of research are informed by Lenette and Ingamells’ (2014) view of community building at three levels (geographic community, peers of similar experience, and peers of shared ethnicity). As such, directions for future research should seek to expand current knowledge to develop progressive and informed training and policy changes that addresses all three levels of community integration of LGBTQ newcomers. Additionally, it is also worthwhile to expand Lenette and Ingamells’ (2014) community model to address the needs of service providers engaged in settlement work with LGBTQ newcomers. Lenette and Ingamell’s (2014) model of community integration for settlement service providers would therefore describe the geographic community level of their service area, their community of peers with shared experience, and the
individual’s community of shared ethnic identity, which, extended to service providers, may also be used to describe the service provider’s surrounding providers within the settlement field. This area of future research also relates to Turegun’s (2013) argument for the increasing professionalization of settlement as an industry which calls for organization, accreditation, and a more unified approach across grassroots and mainstream non-profits.

Initially, at the level of the geographic community for both service providers as well as LGBTQ newcomers, research and training of service providers should include a foundation on Indigenous histories and thought for empowering marginalized clients and community members. In doing so, this first area of future research and practice includes social justice perspectives on power, place, and decolonisation as it pertains to the specific historical and present community context of the area of work (Nicol et al., 2014). Such research would also incorporate an intersectional framework with Indigenous Nations with regards to settlement and rights for immigrants and refugees specifically (MOSAIC, 2015). Secondly, it is important that research focusing on service providers themselves seek to further investigate the current level of LGBTQ newcomer competency, and to explore areas of weakness to inform the development of needed training topics and methods. As such, research should also seek to develop accessible training routes and methods to reach both new trainees as well as workers already within the field.

In order to increase trainee and current service provider competencies, a third area of research might include descriptions of settlement needs and work attained via focus groups composed of LGBTQ newcomers, service providers, and/or combinations of LGBTQ newcomers with service providers/trainees and policy makers. This area of research exploration would offer additional descriptions of settlement work and experience, as well as inform the development of programs and policies to more efficiently and meaningfully deconstruct power
dynamics between client and providers. Similar to the MOSAIC (2015) “I Belong” pilot project, focus groups would also be a means to integrate and strengthen community links among service providers who serve LGBTQ newcomers, policy makers, and newcomers and other community members.

The fourth area of future research would address the service providers’ peer community. In order to facilitate service provision from an agency and service provider perspective, further research should be undertaken to describe the manner in which providers are currently networking and collaborating in informal and formal networks. This area of study could then be expanded by exploring how to effectively build collaborative, sustainable bridging projects amongst service providers. The goal of this work is to increase ways to make efficient service structures and connect and streamline specialized service provision to meet LGBTQ newcomer needs, as well as to mitigate provider experiences of alienation, isolation, and burn out through social connection and support in the work.

Finally, few studies have explored LGBTQ newcomer settlement work on an interdisciplinary or multimodal scales to determine barriers and keys to collaborative success among service areas. Future research using mixed-method assessments would greatly add to the literature on the presence and needs of LGBTQ newcomers within mainstream settlement agencies, as well as adding to our knowledge of where gaps in training and service provision lie for service providers within settlement organizations. Mixed methods approaches were described as a desirable method of research when speaking to funding and policy-making bodies by several participants in the study. Utilizing both narratives and descriptions of human experiences, alongside contextual statistics of service usage, available resources, and needs assessments,
multimodal research will offer a meaningful way to support both newcomers and service providers.
References


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LaViolette, N. (2012). Sexual minorities, migration, and the remaining boundaries of Canadian immigration and refugee laws. In S. Pashang, D. Douglas, and A. Go (Eds.), *Unsettled settlers: Barriers to integration,* (pp.29-54) Toronto, ON: De Sitter.


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Appendices.

Appendix A: Recruitment Letter

Recruitment Letter to Community Agencies

THE UNIVERSITY OF BRITISH COLUMBIA

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Recruitment Letter to Community Organizations

Principal Investigator: Dr. Anusha Kassan, Adjunct Professor, Ph.D., Counselling Psychology Program
Co-Investigator: Megan Suehn, M.A. student, UBC
School: Department of Education and Counselling Psychology, and Special Education – The University of British Columbia
Project Title: Service providers' accounts of working with gender & sexual minority immigrant clients.

Hi there,

My name is Megan Suehn and I am a third-year Master of Arts student in the Counselling Psychology Program at the University of British Columbia (UBC). As part of the requirements for a degree in a Masters of Arts, I am conducting a research study on the experiences of service providers who work with sexual and gender minority immigrant clients.

I am contacting you to see if your organization is interested in helping me recruit participants for this research project. I am hoping to interview 15 to 20 service providers (such as counsellors, social workers, or settlement workers) who have at least one year of experience working directly with immigrant clients who identify as bisexual, lesbian, or gay (or who are sexual minorities but use a different sexual orientation label, or no label entirely), or clients who are gender minorities (such as trans women and men, or identify as genderqueer, etc). Once all data has been collected, participants in the study such as yourself will be entered into a draw for a $100 gift card as a token of appreciation for your time and support.

If you would like to hear more about my research, I would be happy to meet with you in person or speak on the phone or via email. For now, I’ll include a brief description of why I am passionate about this research topic and why I think it is important and valuable for the participating individuals. Finally, I have also outlined what participation in the research will entail. Please feel free to read the entire document or contact me directly for more information.
What is this Study About and Why it is Important

The purpose of this study is to learn more about the experiences of service providers, such as settlement workers, social workers, community support workers, and counsellors, who have a common shared experience of providing service to sexual and gender minority (GSM) immigrant clients. In order for counsellors and mental health practitioners to support our GSM immigrant clients on a wider scale, it is important that we have a good understanding of what the experiences are in working with this population. Up until now, little academic research has focused on the experiences of service providers as they work to support these vulnerable populations. Of the studies that exist on GSM immigrants, most have focused primarily on identifying access rates to medical service by these populations, or have asked sexual minority immigrants to describe their general experiences of immigration as a whole without looking closely at their experiences with service providers here. Other studies suggest that directly accessing GSM immigrant populations for recruitment in studies poses challenges since these participants represent an invisible and vulnerable population. Further, few studies access the experiences of service providers to uncover their shared experiences and perceptions of working with GSM clients in a professional capacity. Our study will allow service providers the opportunity to talk about their own experiences, share their point of view, and determine which parts of their experiences have been most significant in their work with GSM immigrants who have accessed their support services. The aim of this study is to give workers a chance to share their stories so that we can find out what their lived experience is in this work, and how we can better support service providers as they work with GSM immigrants.

Who is conducting this Study?

I will be the primary researcher in this study, and I am working under the supervision of Dr. Anusha Kassan, adjunct professor at UBC. I’m currently a second year M.A. student in Counselling Psychology, with a Bachelor’s degree in Psychology. In addition to my academic training, I have 4 years’ professional experience working with GSM and heterosexual clients and users of crisis and counselling services in the Lower Mainland of BC. As well, I have been trained in qualitative research, and have 3 years’ experience working with queer immigrants in qualitative research.

What the Project Involves and Project Methods:

Interested service providers can reach me at the contact information included below. Once contacted, I will do a preliminary phone (or email contact, if necessary) screening to make sure that they are eligible for the project and that they have a clear understanding of what it entails. If we both agree to move forward then they will be invited to meet with me at a private location at UBC or another agreed-upon private location (such as a participant’s home or office, or over a Skype phone or video call) and I will go over the study and consent process; when consent is given, I will ask the participant to fill out a brief demographic information form about their general background. Once this is done I will engage the participant in a confidential interview which will have a digitally-recorded, largely open-ended format and which will allow them to share as much about their experiences of working with GSM immigrant clients as they feel comfortable doing. This interview will last around an hour, depending on how much she/he would like to share. Following the interview, I will transcribe the interview describing the participant’s experience and do a qualitative data analysis to compare common and unique themes across all of the data as they speak to the experience of working with sexual minority clients. All participants will be entered into a draw for a $100 gift card as a token of appreciation for their time.
Participation in the study is voluntary and the participant may withdraw at any stage of the research; entry into the draw will not be withheld if participants withdraw their consent later.

Dissemination of Information, Consent and the Right to Withdraw:
The information I gather will be included in my final thesis and possibly in additional articles that may be published in academic journals. I am also happy to forward a copy of my final findings to your organization. The identities of all participants will be kept strictly confidential and will not be revealed on any document. Consent to be part of this research is completely voluntary and participants can stop an interview at any time or not answer an interview questions. Participants are also free to withdraw from the study at any time without explanation.

Contact Information:
Your assistance and support in recruiting participants would be greatly appreciated. If you have any questions, concerns, or would like to speak to me further about anything, you can reach me at:

[contact information redacted].
Appendix B: Recruitment Poster

Recruitment Poster

Are you...

⇒ A counsellor, social worker, settlement worker, or other service provider to immigrants?

⇒ Do you have at least 1 year experience working with gender & sexual minority immigrant clients?

⇒ Interested in sharing the story of your experience?

If yes, you might be eligible to participate in a study on service providers & gender & sexual minority immigrants!

What will I have to do if I participate?
We want to learn more about what it’s like for you when you work with gender & sexual minority people who have undergone immigration. We invite you to share your story and experience with us in a private, confidential interview!

Why should I participate?
We understand that your time and story are precious, so we want to enter you in a draw for a $100 gift card! In addition, by sharing your story, you are helping community members and other service providers better support gender & sexual minority immigrant clients.

Want to learn more about this study?
Contact Megan Suehn, MA student at the University of British Columbia


Appendix C: Screening Questions

Participant Screening Questions

When interested individuals contact me to learn more about the study, I will engage them in a friendly, brief and confidential conversation that will help me to determine their fit for this particular project. With their permission, I will ask the following questions:

1) Are you 19 years old or over?

2) Are you a service provider who works with immigrants? (if yes, what is your current occupation?)

3) Do you have at least 1 year of experience in working with gender & sexual minority immigrants (i.e. as clients) in your capacity as a service provider?

4) Would you be comfortable conversing in English with the researcher [myself] about your professional experiences in working with gender & sexual minority immigrant clients in a confidential, one-on-one in-depth, 1 hour-long interview?
Appendix D: Consent Form

THE UNIVERSITY OF BRITISH COLUMBIA

Department of Educational and Counselling Psychology, and Special Education
The University of British Columbia, Faculty of Education
2125 Main Mall
Vancouver, BC V6T 1Z4 Canada
Tel. 604.822.0242 Fax. 604.822.3302
www.ecps.educ.ubc.ca

Consent Form

Title of Study: Service providers' accounts of working with gender and sexual minority immigrant clients

I. Study Team

Principal Investigator: Dr. Anusha Kassan, Adjunct Professor, Ph.D., Department of Educational and Counselling Psychology, and Special Education of the Faculty of Education at the University of British Columbia (UBC). Contact Information: [contact information redacted]

Co-Investigator: Megan Suehn, Master of Arts (M.A.) student, Department of Counselling Psychology of the Faculty of Education at UBC. This research is part of Megan’s thesis requirement for completing a M.A. degree in the Counselling Psychology Program. Upon completion, the thesis will be a public document that can be viewed through the UBC library. Contact Information: [contact information redacted]

II. Invitation and Study Purpose

Why we are doing this research?

The purpose of this study is to learn more about the experiences of service providers in their work with gender and sexual minority (GSM) immigrant clients. In order for other community organizations, service providers, and counsellors to better support service providers in their work with GSM immigrant clients, it is important that we have a good understanding of what your experiences of working with this special population of immigrants have been. So far, the experiences of working with GSM immigrants as settlement workers, social workers, counsellors, or other newcomer service providers, have not been a primary focus in academic research, so not much is known about this area of work. The goal of this study is to develop an in-depth understanding of what it’s been like for you providing these vital support services. The purpose of the study is to collect descriptions of lived experiences of service providers via confidential interviews; these interviews will help researchers and other service providers learn about what your lived experience of working with these clients has been, and how we can better support you in this work.

III. Study Procedures
What happens if you say “Yes, I want to be in the study”?

If you say yes to participate in this research, you’ll be invited to meet with the co-researcher listed above in person or via Skype phone or video call. You’ll meet with the researcher for a one-on-one interview at the University of British Columbia (UBC) campus, or at a convenient, private, and quiet meeting place such as your office or your own home; if an in-person interview is not ideal for you, a Skype video or Skype phone interview can be facilitated instead. The researcher will go over this consent form and ask for your consent to participate; if you say yes, you’ll be asked to fill out a brief demographic form which will ask about your general background. If a distance Skype interview has been arranged, the forms can be faxed or sent and filled out/signed electronically. Next, the researcher will invite you to share what your experience of working for at least one year with GSM immigrant clients has been like in a one-on-one interview, in English. The interview will likely last for forty (40) to ninety (90) minutes. You will be asked some follow-up in-depth questions throughout so that the researcher can understand your experiences better. Some possible topics of the interview will include your educational background and experiences working with sexual minority immigrants, as well as things you think have been most or least helpful in your work with these clients. The interview will be digitally recorded and later transcribed by the researcher. A summary of your interview and personal results will be emailed to you in a few weeks with an invitation for you to provide feedback on the data in terms of the accuracy and representativeness of your experience. At the end of the study, you will be entered into a draw for a $100 gift card as a token of appreciation for your participation in this study.

At the end of the study, themes that have been analysed from your description of your working experience with sexual minority immigrant clients will be compared and contrasted with those of other service providers. The important themes and aspects that arise from the interview transcripts will be analysed and a summary of these overall experiences and themes will be composed as part of the data display later on. Your identity and any information you share with the researcher will be kept confidential and anonymized.

Your participation in any and all parts of this research is entirely voluntary, and you may choose to refuse to answer any question or withdraw at any point from the study without any penalty. If you withdraw your consent to participate at a later time, you will still be eligible for the gift card draw.

All research material and information will be kept confidential and separate from your identifying information. The transcriptions, interview recordings, and analysis data will all be kept in a locked cabinet at UBC only accessible to the primary investigators (whose contact information is at the top of this form), and/or in a password-protected, encrypted digital file. During the analysis stages of this research project, a peer reviewer within the Counselling Psychology Masters program at UBC will be given time-limited access to anonymized transcripts of interviews which will not be linked to your identifiable details; this person will provide a validation of the research analysis procedure. After five years, all study materials for this project will be destroyed.

III. Study Results

Information gathered from this study will be reported in a graduate thesis that will be used to complete the school requirements of the co-investigator. The main study findings may also be shared at academic meetings and conferences, and may be published in an academic journal or magazine for other people to read. Your name and identity will not be shared in any presentation or publication. If
you would like to receive a report on the findings, you can leave your contact information with the researcher.

IV. Is there any way being in this study could be bad for you?

The researchers do not think that there is anything in this study that could harm you or be bad for you. There is a possibility that some of the questions they ask or the topics that you discuss together may seem personal or uncomfortable, and might be upsetting to you. You do not have to talk about a specific topic or answer any question if you do not want to, and you are free to withdraw from the study at any time. The researchers will have a list of community agencies and supportive services that you can access if a troubling topic comes up that you would like extra support for.

V. What are the benefits of participating?

This research will contribute to the knowledge base on working with immigrant GSM clients and have sought access to support services from providers such as you. In the future, others may benefit from what we learn in this study, such as other service providers who encounter GSM immigrant clients in their work who might find it helpful to better understand your own experience and points of view from having worked with these types of clients, as well as community and educational program developers who can use your experiences to inform their work for future generations of service provider training and work. Additionally, it will provide an opportunity for you to talk about your experiences in a safe and confidential environment. You may also be helped in this study by the opportunity to give voice to your experiences of some things, and this can provoke feelings of relief and increased self-awareness for you as you think back on your experiences in supporting GSM immigrant clients.

VI. How will your privacy be maintained?

Your confidentiality will be respected. Information that discloses your identity will not be released without your consent unless required by law. All documents will be identified only by code number and all study materials will be kept in a locked filing cabinet at the UBC Department of Education and Counselling Psychology and Special Education. Digital recordings and files will be kept encrypted and password-protected. Only the principal and co-investigator of this study will have access to all of these materials. As part of the peer review process of this study, a peer in the Counselling Psychology Masters program at UBC will be given time-limited access to interview transcripts with identifiable information removed; when the review process is complete, the transcripts given to the peer reviewer will be destroyed. **Further, it is UBC’s policy that after five years from the start of this research project, all materials for this study will be destroyed.** When reported, your stories will be associated only with a generic description of your role as a support provider.

**Note for Skype or cell phone interviews:** In general, these technologies are a less secure means of communication than landlines, although Skype-to-Skype calls are encrypted. If you choose a Skype interview, your data will be less secure and confidentiality cannot be guaranteed in the same manner as an in-person private interview just by the nature of the security of the connection. As with in-person interviews, during any Skype or phone interviews, audio will be recorded by the interviewer only for transcription purposes.
Legal limits to confidentiality:

There are some limits to the researcher’s ability to maintain your confidentiality. At any point in the study, a) if you reveal that there has been an incident that involves abuse and/or neglect of a child or an elderly person (or that there is a risk of such occurring), b) if you disclose any imminent risk of harm to yourself or someone else, please be advised that the researcher must, by law, report this information to the appropriate authorities.

VII. Will I be compensated for my participation in this study?

As a token of appreciation for the time you’ve spent participating in this study, you will be entered in a draw for a $100 gift card as thanks. If you choose to withdraw from the study at a later point, you will still be eligible for the gift card draw.

VIII. Who can you contact if you have questions about the study?

If at any point before, during, or after the study you have questions that about this study, please feel free to contact the principal investigator or co-investigator, whose names and contact information are listed at the top of the first page of this form.

IX. Who can you contact if you have complaints or concerns about the study?

If at any point you have questions or concerns about your rights as a research participant and/or your experiences while participating in the study, please feel free to contact the Research Subject Information Line in the UBC Office of Research Services at 604-822-8598 or if long distance, e-mail RSIL@ors.ubc.ca or call toll-free 1-877-822-8598.

X. Consent and the Right to Withdraw

Taking part in this study is entirely voluntary. You have the right to refuse to participate in this study. If you decide to take part, you may choose to pull out of the study at any time without giving a reason and without any consequences; you will still be entered into the gift card draw as a token of appreciation. You have the right not to answer any questions that you do not want to answer. You can also choose to take a break at any time during the interview.

Your signature below indicates that you a) understand what the study involves; and b) you consent to participate in the research; and c) you have received a copy of this consent form for your own records.

“I understand and consent to my participation in the study.”

___________________________________    _________________________
Participant Signature           Date

____________________________________
Printed name of the participant signing above
☐ Check box if you are interested in receiving details of the research findings at the completion of the study.

How can you be reached to send you the research findings? (mailing address, email, telephone)

This contact information will also be used to contact you if you are drawn as the winner of the gift card!

Contact information:

________________________________________________________________________

________________________________________________________________________

Signature of Investigator: These are the terms under which they will conduct research.

____________________________________  __________________________

Signature of Investigator                Date
Appendix E: Demographics Questionnaire

Demographics Questionnaire

THE UNIVERSITY OF BRITISH COLUMBIA

Department of Educational and Counselling Psychology, and Special Education
The University of British Columbia, Faculty of Education
2125 Main Mall
Vancouver, BC V6T 1Z4 Canada
Tel. 604.822.0242 Fax. 604.822.3302
www.ccps.educ.abc.ca

Participant Demographics Form

Please answer the following questions by filling in the blank sections and circling answers where appropriate. If you need any help or to clarify any of the questions, please feel free to ask the researcher. **All questions are voluntary, and all information provided will be kept strictly confidential.**

1. Date of Birth: __________________    Current Age: ___________

2. Gender: _______________

3. Sexual Orientation: ____________________________

4. Place of Birth: ____________________________

5. Ethnic & Cultural Background: ____________________________

6. Religious affiliation, if any: ____________________________

7. Languages spoken and level of fluency: ____________________________

8. Highest level of education and degree/ diploma/etc attained:
   __________________________________________________________________

9. Years of experience working as a service provider with immigrants: ___________

10. Years of experience working as a service provider with sexual minority immigrants:
    __________________________________________________________________

11. Current area of employment: ____________________________

12. Current job title: ____________________________

13. Previous area of employment: ____________________________

14. Previous job title: ____________________________
15. How did you hear about this study?

_________________________________________________________________

_________________________________________________________________
Appendix F: Interview Protocol

Interview Protocol

T H E U N I V E R S I T Y O F B R I T I S H C O L U M B I A

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2125 Main Mall
Vancouver, BC V6T 1Z4 Canada
Tel. 604.822.0242 Fax. 604.822.3302
www.ecps.educ.ubc.ca

Research Question: “What are service providers’ experiences of working with sexual minority immigrant clients?”

Topic A: Warm-up questions
1) Can you tell me a little bit about yourself?

Topic B: phenomenon of interest
1) Can you tell me about your experience of working with people of sexual minorities who have immigrated to Canada?
2) How visible are discreet sexual orientations to you in your service provision?
3) Are some sexual orientation categories less visible than others?

Topic C: Educational and occupational history
1) Can you tell me a little bit about your educational and occupational history?
2) How did you come to specialize in working with immigrant clients?
3) How did you come to work with immigrant clients who are also sexual minorities?

Topic D: Most and least helpful aspects of service provision
1) What do you think is most helpful to immigrants who are sexual minorities who seek your service [counselling, settlement services, other support]?
2) What do you think is least helpful to immigrants who are sexual minorities who seek your service [counselling, settlement services, other support]?

Topic E: Multicultural competency and service provision experience
1) What kind of training, education, or preparation have you found helpful [to yourself] in how you work with sexual minority immigrant clients?
2) What are other sources of support that can be helpful to working with sexual minority immigrants?
3) How would you describe the difference, if any, in how you work with sexual minority clients compared to other types of clients?

   Topic F: Counsellor cultural factors
   1) How would you describe your cultural background?
   2) In what ways (if any) does this impact your work with sexual minority immigrants?

   Topic G: process questions
   1) What was this interview like for you?
   2) Was there anything helpful (or not) about our discussion?
   3) Is there anything else you’d like to share about yourself and/or our work?
   4) What prompted you to participate in this study?
Appendix G: Referrals

Referrals

Crisis Intervention and Suicide Prevention Centre of BC – Distress Services
Vancouver: 604-872-3311
Sunshine Coast/Sea to Sky: 1-866-661-3311
Mental Health Support Line: 310-6789
Seniors Distress Line: 604-672-1234
Online Chat Service for Youth: www.YouthInBC.com
Online Chat Service for Adults: www.CrisisCentreChat.ca

CHIMO Crisis Services
120-7000 Minoru Boulevard, Richmond, BC, V6Y 3Z5
Phone: 604-279-7077

Family Services of the North Shore
General Counselling
101-255 West 1st Street, North Vancouver, BC, V7M 3G8
Phone: 604-988-5281

Family Services of Greater Vancouver (FSGV)
Richmond Office
Vancouver Kingsway Office
202-1193 Kingsway, Vancouver, BC, V5V 3C9 Phone: 604-279-7100
Phone: 604-874-2938

SUCCESS (United Chinese Community Enrichment Services Society)
Family and Youth Counselling Services
28 West Pender Street, Vancouver, BC, V6B 1R6
Phone: 604-408-7266

Oak Counselling Services Society
949 West 49th Avenue, Vancouver, BC, V5Z 2T1
Phone: 604-266-5511

OPTIONS Community Services
Family Counselling
9815 140th Street, Surrey, BC, V3T 4M4
Phone: 604-584-5811

University of British Columbia (UBC)
New Westminster Counselling Centre
821 Eighth Street, New Westminster, BC, V3M 3S9
Phone: 604-525-6651

Simon Fraser University (SFU)
SFU Surrey - Counselling Centre
9484 122nd Street, Surrey, BC, V3V 4M1
Phone: 604-587-7320

SUCCESS Richmond Service Centre
Caring Place, 220-7000 Minoru Boulevard,
Richmond, BC, V6Y 3Z5
Phone: 604-279-7180
Appendix H: Peer Review Confidentiality/Consent Form

Peer review confidentiality and consent form

THE UNIVERSITY OF BRITISH COLUMBIA

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The University of British Columbia, Faculty of Education
2125 Main Mall
Vancouver, BC V6T 1Z4 Canada
Tel. 604.822.0242 Fax. 604.822.3302
www.ecps.ubc.ca

Peer Reviewer Confidentiality & Consent Form

Title of Study: Service providers’ accounts of working with sexual minority immigrant clients

I. Study Team

Principal Investigator: Dr. Anusha Kassan, Adjunct Professor, Ph.D., Department of Educational and Counselling Psychology, and Special Education of the Faculty of Education at the University of British Columbia (UBC). Contact Information: [contact information redacted]

Co-Investigator: Megan Suehn, Master of Arts (M.A.) student, Department of Counselling Psychology of the Faculty of Education at UBC. This research is part of Megan’s thesis requirement for completing a M.A. degree in the Counselling Psychology Program. Upon completion, the thesis will be a public document that can be viewed through the UBC library. Contact Information: [contact information redacted]

II. Invitation and Study Purpose

Why we are doing this research?:

The purpose of this study is to learn more about the experiences shared service providers in the Lower Mainland have when they worked with sexual minority immigrants. In order for other community organizations, service providers, and counsellors to support service providers and LGBTQ newcomer clients better, it is important that we have a good understanding of what workers’ experiences of supporting this unique population of immigrants are. So far, the experience of working with sexual minority immigrants as settlement workers, social workers, or counsellors have not been included as the primary focus in academic research. The goal of this study is to develop an in-depth understanding of what it’s been like for service providers offering settlement and other support services, such as counselling. The purpose of the study is to collect descriptions of lived experiences shared by service providers; these stories will help researchers and other service providers learn about what the lived experience of working with LGBTQ newcomer clients is, and how we can better support these workers.
III. Study Review Procedures

The reviewer will be an individual trained in qualitative interviewing and research such as a colleague in the CNPS MA program, and will be required to sign this form of confidentiality and participation in the peer review process.

Following the completion of each transcript analysis by the research co-investigator resulting in a list of thematic categories and corresponding meaning units (sentences or paragraphs of text), the peer reviewer will be given the transcript and related thematic content analysis for that participant’s experience. The research data given to the reviewer will have all identifying details removed or anonymized. The peer reviewer will read over the transcript once, and comment on the adequacy of the researcher’s thematic content analysis in meeting the research question, which asks, “What are the experiences of service providers who work with LGBTQ newcomer clients?” The peer reviewer will provide feedback to the researcher following this review process of each transcript and transcript analysis.

All research material and information will be kept confidential and separate from the participants’ identifying information. The original transcriptions, interview recordings, and analysis data will all be kept in a locked cabinet at UBC only accessible to the primary investigators (contact information at the top of this form), except during the peer review process: during the review stage, the reviewer will be given the necessary research materials (transcript and content analysis digital documents or hard copies) on an encrypted, password-protected memory stick. No copies may be made of the research materials. Following review’s completion, the memory stick will be returned to the study investigators in a timely manner, and/or all documents and files used by the individual will be deleted.

IV. Consent agreement

Your signature below indicates that you a) understand what the study review involves and the level of confidentiality you must follow; b) you consent to participating in the review aspect of the research; and c) you have received a copy of this confidentiality form for your own records.

“I understand and consent to my participation in the study.”

___________________________________  __________________________
Peer reviewer Signature                  Date

____________________________________
Printed name of the participant signing above

Signature of Investigator: These are the terms under which I will conduct research.

____________________________________  __________________________
Signature of Investigator                  Date