



"RISKING THE KIDS" VERSUS "DOUBLE THE LOVE": COUPLE-COUNSELLORS IN CONVERSATION ON LGB PARENTING

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Abstract

The literature on lesbian, gay and bisexual (LGB) affirmative psychotherapy suggests that heterosexist and homophobic discourses persist in the accounts of counsellors and therapists (Milton, Coyle & Legg, 2005) and that these may particularly cohere around the issue of same-sex parenting (Moon, 1994; Phillips, et al., 2000). The current research demonstrates that this was the case in focus group discussions with counsellors working for a UK relationship therapy organisation. Many participants drew on discourses of same-sex parenting as 'risky', reproducing arguments about the 'danger' of potential prejudice that such children may face and the 'necessity' of differently gendered role models (Clarke & Kitzinger, 2005). However, these were sometimes challenged within the discussions, particularly with the offering of an alternative discourse of children of same-sex parents experiencing 'double the love'. The potential of such discussions to resist heterosexist discourses is considered as a possible direction for counsellors' on-going professional development training.

Introduction

The literature on 'gay affirmative therapy' demonstrates that some psychotherapists and counsellors fail to offer their lesbian and gay (LG) clients¹ the conditions for an accepting therapeutic relationship (e.g. Davies 1996). Milton and Coyle (1999) found many inaccurate assumptions about LG people amongst the therapists they interviewed. Moon (1994) reported that only half of the heterosexual female

¹ Much of the cited research spoke only about lesbian or gay people, therefore sometimes the acronym LG (lesbian and gay) is used and sometimes LGB (lesbian, gay and bisexual). Unfortunately it was beyond the scope of the current research to consider broader trans and queer issues.

counsellors she interviewed felt able to help lesbian clients own a positive identity. Furthermore, none had received training in LGB issues, even though all counsellors stressed the importance of exploring their own attitudes before counselling LGB people. This lack of appropriate training has been reported across various training courses and therapeutic approaches in the UK (e.g., Iantaffi, 2006).

Ritter and Terndrup (2002) locate their handbook of affirmative psychotherapy in the context of the prevalence of cultural heterosexism: the assumption that "heterosexuality is superior to, or more natural or healthy than, other sexualities" (Davies, 1996, p.24). Such heterosexism can clearly be seen in wider debates around 'same-sex' parenting². Victoria Clarke and others have extensively studied the ways in which people talk about same-sex parenting in research discussions (e.g., Clarke, 2005) and on television talk-shows and documentaries (e.g. Clarke & Kitzinger, 2005). The notion that children are likely to experience homophobic bullying is most frequently deployed to attack same-sex parents (Clarke, Kitzinger & Potter, 2004; Ellis, 2001). Alongside this is the construction of same-sex parents as deficient, utilising the argument that both male and female role models are necessary, and that children of same-sex parents are 'missing out' and risk experiencing 'confusion' about their own gender and sexuality (Clarke & Kitzinger, 2005; Benkov, 1995; Stacey & Biblartz, 2001).

² The phrase 'same-sex' parenting is used throughout this paper to refer to LGB couples of the 'same' sex who parent children. Again, we recognise the problems with the concept of 'same' sexes (situated as it is in a binary understanding of sex/gender) and the fact that we fail, here, to consider gender-queer or trans parents or those who parent in setups other than monogamous couples. See Riggs (2006) for a detailed consideration of some of these issues.

In the 1970s and 1980s such arguments were regularly used in court cases to deny custody to parents in same-sex relationships (Clarke & Kitzinger, 2005). In 1976, Rhodes Boyson MP voiced the dominant discourse of the time when he said that "children have a right to be born into a natural family with a mother and a father. Anything less will cause lifelong deprivation of the most acute kind" (cited in Golombok et al., 1983, p.562).

In recent years there have been considerable political and legal shifts regarding same-sex couples and parents. In the UK these took the form of the Adoption and Children Act (2002), which enabled same-sex couples to adopt and foster children, and the Civil Partnership legislation (2005), which offered legal recognition of same-sex relationships. However, Clarke (2006) reports that the UK Human Fertilisation and Embryology (HFE) Act (1990) still requires that clinics take account of the 'need' of children for a father. The British Government in 'Supporting Families' (Home Office, 1998) still describes marriage between two opposite sex people as providing the best environment for children. Very recently the Roman Catholic Church in Britain demanded 'freedom of conscience' from the Equality of Services Act regarding sexual orientation (2007) to exclude their adoption agencies from offering gay and lesbian people the right to be considered as adoptive parents.³

Psychological research on the children of same-sex couples has played a vital role in the challenging of problematising discourses. Researchers such as Susan Golombok and Fiona Tasker provided evidence that was used successfully to challenge pathological views in custody cases, and their research supports the claim that children brought up in lesbian families are as well adjusted as those brought up in heterosexual families (e.g. Golombok, 1999; Kershaw, 2000; Patterson, 1992) and do not show 'atypical gender development' (Tasker & Golombok,

1997). More recently the perception that such children will inevitably be rejected by peers has also been challenged (Tasker & Golombok, 1997; Patterson, 1992).⁴

However, as Kitzinger and Coyle (1995) and many others have pointed out, arguing for the rights of LGB people on the grounds of their similarity to heterosexual people is problematic: it has the potential to reinforce heterosexism by forcing LGB lives into heterosexual patterns and erasing and problematising those aspects of LGB life that do not conform to these. Stacey and Biblarz (2001) relate this specifically to research on same-sex parenting, challenging the "defensive conceptual framework" involved in arguing that the children of same-sex parents have the same developmental outcomes as those of heterosexual parents (p.159). They identify several beneficial differences for children brought up in single gender households including suggesting that LGB parents can produce more egalitarian role models and presenting research that their children demonstrate a broader understanding and acceptance of the wide variety of gender and sexual practices in society.

Clarke (2006) similarly presents alternative available discourses on lesbian parenting regarding 'male role-models'. Liberal discourses tend to emphasise lesbian parents making efforts to provide such role-models in the form of family and friends, implicitly accepting the premise that such role-models are necessary. Clarke presents the emergence of a more critical discourse which questions the assumption that 'both gender' role-models are necessary and celebrates the value of lesbians and gay men as "non-traditional role models" (p. 32) who might provide alternative gender possibilities for children. However, Clarke recognises that liberal discourses may be deployed strategically. For example, Hicks (2000) found that lesbians who were most conforming to heterosexual lifestyle patterns were

³ See Millbank (2003) for an overview of the political and legal situation in Australia.

⁴ See Kershaw (2000) for a thorough review on the research on effects on children of living in a lesbian household.

privileged by those assessing potential foster and adoptive parents.

Turning once again to the arena of counselling and psychotherapy, few people have specifically researched discourses around same-sex parenting within such groups. However, some general research on therapy with LGB clients has touched on this issue. Milton and Coyle (1999) found examples of child and family specialist therapists assuming that LG issues and training were not relevant to them, suggesting that it was not even considered that LG and parent identities could overlap. Phillips et al (2001) found that psychotherapists "lacked awareness that many gay people have children and the support of extended families and that many heterosexual people do not" (p. 83). Galgut (1998) found that a larger proportion of older counsellors and therapists, and those with a religious belief, did not support adoption or the use of artificial insemination by lesbians.

Hicks (2006) suggests that the issue of lesbian and gay parenting "still has many 'empty spaces,' that is, questions that must be raised, researched, debated" (p. 86). The current study, then, is an attempt to go some way towards filling one 'empty space' by exploring the discourses drawn on by relationship counsellors when discussing the issue of same-sex parenting. It was clear from discussions that this was, indeed, a major area of contention where previous discourses of 'equality' sometimes broke down.

The Study

A total of 27 relationship counsellors took part in six focus groups. Only 3 participants were men, 2 of them in the same group. Each group had two sessions, each of which ran for an hour.

The participants were self-selected, representing just over a third of the workforce of in each of three regional centres of a UK relationship counselling organisation. They all worked on a

sessional basis with self-presenting clients who had relationship difficulties and who contributed to the costs of their counselling.

Counsellors for this organisation are not involved in gate-keeping for adoption agencies or working with the UK courts or health services. However, their ways of working with LGB clients (including those planning, and already with, children) were considered important because the organisation is open to those in LGB, as well as heterosexual, relationships and also to LGB counsellors.

The focus group discussion sessions were audio-taped and transcribed by the first author to encourage 'immersion' in the data (Jefferson, 1984; McLeod, 2001). The names of participants were changed and the organisation anonymised to protect individuals.

The transcripts were analysed by the first author using discourse analysis (Parker, 1999; Potter & Wetherell, 1987) to examine the counsellors' responses. Discourse analysis asserts that we construct our realities, our "versions of the world" (Hepburn, 2003, p. 176), through our choice of language and words in everyday talk, in order to achieve something in our interactions. The researcher's detailed reading of and thoughtfulness about the data can reveal many different layers of meaning and linguistic devices used to structure arguments or descriptions. Commonly-held discourses in society are drawn upon by groups and individuals through talk at different times to serve different purposes.

The research question "What do you think about lesbian and gay people having children?" was one of several LGB issues posed in the focus groups. However, as previously mentioned, it was one where discourses of 'equality' particularly seemed to break down, and also where there were interesting attempts made to resist, as well as reinforce, heterosexist discourses. The first author found herself, as moderator of the groups, also participating in the discussion from time to time, often

to challenge or to comment on what was being said. She attempted to reflect on and analyse her own interventions where this occurred, using a reflexive approach as advocated by Etherington (2004).

Analysis

The analysis is structured into three sections. First, constructions of same-sex parenting as deficient are considered under the heading 'Risking the Kids'. More affirmative discourses are then presented under the heading of 'Double the Love' (both of these being phrases used by participants in the discussions). Finally, the way in which dialogue within the discussions sometimes resulted in the challenging of certain discourses and the offering of alternatives is presented, drawing together the previous two strands in relation to the specific issues of IVF and donors for same-sex parents.

'Risking the Kids'

The first quote, from Diane, exemplifies the dominant cultural discourse introduced above: that 'role-models' from both genders are necessary in child-rearing:

Diane: I guess there are many people who would say um they're not going to be able to give a proper role model of man and woman.

Here Diane uses the externalising device of 'what many people out there think', rather than 'owning' the statement about gender role models, as she may be concerned that such opinions will not be approved of by the group. The hesitation 'um' suggests that she is pausing before giving what could be labelled by the others as a prejudiced view. The externalising device also serves to provide consensus and corroboration for her statement (Wooffitt, 1992).

By the use of the word 'proper' Diane draws on the discourse of 'correct' parenting roles which are presumably to be understood as being biologically determined, fixed according to gender, and inviolate. This same dominant cultural

discourse was expressed in two of the other groups. Here Diane does not consider an alternative discourse, which would suggest that there is more than one way to be a man or a woman and that this may in fact be socially and culturally determined (Weeks, 2003; Kitinger, 1987).

Viv also draws on a similar concern that same-sex parents may leave their children confused about 'gender issues':

Viv: I suppose my issues are a little bit about the children and how do they understand gender issues. (pause then continuing) How do they? What do they think, erm what do they think would be right for them?

Viv expresses reservations about what the children might think would be *right* for them. This is put across as two questions to the group, one after the other: 'how do they?' 'what do they think?' to engage the listeners in considering the implications of what might be 'right' (meaning 'correct') for such children. It is, however, difficult to discern what Viv is referring to in her use of the word 'right'. It may be that she is suggesting that there is a 'right' or 'correct' way of being male/female. Or it may be that she is suggesting that to be 'right' is to be heterosexual, rather than lesbian, gay or bisexual. There is also a footing shift here as she moves from her own view to the children's view – 'how do they?' What were initially her own view of parenting gender issues are then transferred and become the child's issues.

Elsewhere in the discussions, participants were invited to discuss a list of common beliefs regarding gay people. In the following example the discourse of concern over potential discrimination from children's peers came up:

M.E: (reading from a list) Gay people should not have children? There's a feeling we agreed with that to some extent, or you did Leila?

Leila: Yes I do wonder what the children would have to go through.

Viv: I don't see why gay people couldn't be very good parents.

Leila: I think they could be excellent parents. Excellent.

Viv: Yes. It is the children I think I worry about.

M.E: And you would worry as much about children of disabled couples, mixed race couples?

Viv: I think they are going to come across prejudice just in the same way.

M.E: So therefore they should not have children?

Viv: No I didn't say that. It's where I've got a problem.

Here Leila's first word is 'yes' and she appears to be agreeing that gay people should not have children. Such children are seen as having to 'go through' something, suggesting an 'ordeal' which implies endurance, patience, courage, and hard work. Following this, the emphasis on 'excellent parents' is surprising. This example of extreme case formulation (Pomerantz, 1986) could be deployed to protect Leila against being perceived as prejudiced by others in her group, rather like the common stake inoculation 'I'm not homophobic, but...' (Gough & Edwards, 1998).

The listener is left wondering how an 'excellent' parent is defined, or indeed would be recognised. As Winnicott (1964) - a theorist who is drawn upon later in the discussions - argued, parents only need to be 'good enough'. Leila's concern for the children seems strange because, if the parents were 'excellent', the children would presumably be enabled to deal with any prejudice they may face.

Viv describes herself as 'worrying', which is perhaps intended to demonstrate to the listeners that she is 'caring' and concerned about the children, but when challenged she recognises her inconsistency in discriminating against gay people, but not disabled or mixed-race couples. However, as Clarke (2005) points out, the equation

of same-sex parents with disabled ones is not an unproblematic one.

'Double the Love'

In answer to the question about lesbian and gay parenting, Carol responded:

Carol: They are flesh and blood like we are. They have the same feelings, they have the same aspirations in life, I mean. Why should we say that just because their sexuality is on a different spectrum to ours that they shouldn't have children?

Here Carol constructs her position as the obvious way that anybody would think and feel about this topic. Although she uses 'them and us' terms, Carol draws upon an inclusive discourse about the common humanity of everybody including LGB people. She uses a questioning device in a baffled sort of way - why anyone should question this right to have children - to construct and invite consensus and corroboration. She is appealing to the other participants' 'common-sense' to construct her comments as factual and legitimate and present her view as one shared by everybody (Wooffitt, 1992). However, with her use of the words 'we' and 'they' and 'ours', Carol also draws on the heterosexist societal discourse assuming that everyone in the group is heterosexual. The rights of same-sex couples to parent are also situated in their ability to be similar to heterosexual people (Stacey & Biblarz, 2001).

Carol then goes on to challenge the previously discussed perception that children need differently gendered parents as role models, presenting an alternative discourse of multiple role-models:

Carol: Well children have role models throughout their life. They have male or female teachers, they have male or female friends and friends of friends and there are lone parents aren't there, so there are parents who bring up children on their own and there are grandparents to model on. Often fathers who are away for a long period of time you know, they are working on oilrigs and things, they are not always at home so you will have to use the role models that are around in society.

Here Carol draws on the wider discourse that both gender role models are indeed necessary for adequate parenting (Clarke, 2004) and that it is a social requirement that same-sex parents are expected to provide a 'virtual heterosexuality' (Hicks, 2006, p. 89) and to ensure that their children acquire traditional gender roles through contact with male and female figures. Carol's mention of single parent families and families where one parent works away from the home seems to open up the potential for homes where there are not both male and female genders present. However, there is still the assumption that children need both gender role-models somewhere in their lives.

Josie, in a different discussion, drew upon an alternative discourse that recognises that the skills of nurturing children may appear in someone of either sex:

Josie: It's the loving skills, it's the parenting skills, it's the nurturing skills, the enabling skills, the affirming skills, that can be in men as well as in women.

There were murmurs of agreement from the group following this dramatic repetition of the word 'skills' to present a strongly affirmative viewpoint. A similar point was made by Leila, below, when she compared 'good' same-sex parents to 'bad' heterosexual parents (those who are abusive or in violent relationships). In the above example 'skilled parenting' is detached from the gender of the parent. Below it is detached from their sexuality. Same-sex parents may be skilled and opposite-sex ones may not be.

Leila: I think once they got older I think they would probably value them for being the parents that they were, (Viv – yes) but in that transition from, thinking about my own kids they had to be the same as everyone else's but that may be short-lived and maybe that's not a good enough reason to say that, to deprive them of having children and deprive the children of having really good loving parents, probably much better than heterosexuals who row and fight and there's abuse and that.

Here Leila also suggests that same-sex parents may be preferable (or not preferable) at certain stages of development, reiterating the discourse of concern over peer-bullying, but limiting that only to a certain period of a child's life. Here she draws upon her own 'expertise' as a parent to demonstrate that the period where children 'had to be the same as everyone else's' is short-lived.

Some participants recognised that society makes parenting difficult for same-sex couples, rather than the couples themselves being problematic. Colin responds that it is society 'out there' that has the problems:

Colin: Yes. I think there's a few doors to be knocked down. I mean I do take that point that you know you can have same-sex couples in a very committed relationship and you know any kids of that, you know, might get double the love you know,

Maureen: That's true!

Colin: (continuing) as opposed to a whole load of sort of people who we see through our doors being bloody miserable and kids ignored and goodness knows what else. So you know, I know what choice I would make, but it must be hard because you are sort of knocking down sort of doors and prejudices there. I am sure that they are still there.

Again, the construction of 'good' same-sex parents versus 'bad' heterosexual parents is deployed here. However there are also elements of Hicks' (2000) good/bad same-sex parent discourses where 'good' same-sex parents are presented as being in 'committed relationships' (a common heterosexual ideal, Barker & Ritchie, forthcoming 2007). There is no recognition that the open relationship structures common within LGB communities (Blumstein & Schwartz, 1983) may provide an alternative framework for parenting (see Pallotta-Chiarolli, 2006).

"Risking the Kids" Versus "Double the Love"

In this final section, the ways in which dominant discourses are presented and challenged is examined in relation to one particular discussion of the use of in vitro fertilisation and donors in same-sex parenting. This provides a particularly good example of homophobic and heterosexist discourses being resisted within dialogue between participants.

Reservations regarding IVF were expressed strongly by Maureen:

Maureen: I'm not sure. I'm confused about that erm because I think that there's so much going on in our society in terms of in vitro fertilisation and erm insemination by donor and now it's beginning to be understood that children do have difficulties if they have been born through erm

M.E: IVF.

Maureen: (continuing) Yes, and so I'm not sure about what would happen to the children erm living in erm a gay or lesbian homosexual - I'm struggling with the language as well aren't I? - relationship and for me I don't think we can take risks with the children.

Maureen uses 'generic vagueness' as a stake inoculation device - 'I'm not sure' - and pauses before presenting the view that same-sex parenting puts children at 'risk'. She alleges that all IVF children have difficulties, but there is an additional but unspecified risk if the children have same-sex parents. Her hesitation over the appropriate language to use suggests a lack of prior exposure to LGB affirmative discourses. Maureen goes on to add:

Maureen: I'm not sure about erm (pause) gay and lesbian people choosing to have babies through a donor, because I think that's more about their need than it is about the child's need. And I think we have to be very careful about what happens with children.

The use of the word 'choosing' is key here because it presents gay and lesbian parenting as a choice, whereas

heterosexual parenting is often presented as a 'natural' part of a human life or as a human 'need' (e.g. in commonly accepted developmental psychology perspectives, Barker, 2007). The suspicion that something (the listener might speculate a life-threatening event) might 'happen' to the children emphasises risk and danger again.

Sheila challenges the construction of same-sex parenting as a 'choice', rather than a 'need', in her response to Maureen:

Sheila: Turning it up-side down, don't the parents-to-be, have needs and if those needs can be fulfilled, can they be considered quite deeply?

Maureen: I'm sympathetic to their needs erm, but I think the rights of the children have to come first.

Maureen expresses sympathy to the parents but extends the discourse to include a child's perceived 'rights'. Sheila goes on to push Maureen on whether it is same-sex parenting particularly that she sees as problematic:

Sheila: It's not that they're the same-sex carers - that's not an issue?

Maureen: I don't know whether it is or not frankly, because I don't know whether it is for the child or not. I don't know whether a child needs (pause) erm a mother and a father ideally. I mean lots of children don't have that and there's nothing we can do about it, but I think it's a definite erm decision for lesbian women for example, to choose to have a baby and I don't know that I'm in favour of that and [raising her voice] I don't know generally whether I'm in favour of it and I know it causes a lot of distress to erm couples, erm heterosexual couples who can't have babies, but I don't know whether erm our approach to it now is the right one.

Maureen pauses and uses 'I don't know' as an uncertainty token (Potter, 1987) several times in her answer. This hesitancy seems designed to present her as not-prejudicial, as does her repeated mention of that she is also concerned about IVF use by heterosexual couples. However it is clear that it is the 'choices' of

same-sex parents that are constructed as particularly problematic as Maureen draws in the common discourse of children 'needing a mother and a father'. She later brings in an authority figure to establish legitimacy, stating that she is drawing on Winnicott's (1964) theories in this contention.

Sheila then asks if adoption would be acceptable for same-sex parents. Maureen responds:

Maureen: I think that would be fine actually. Yeah yeah. I think I'd be quite happy with that. But I don't feel there is a sufficient body of knowledge, I mean it's only if it happens we can get that body of knowledge, but I still don't think there is a sufficient body of knowledge for us to know what the outcome is going to be, cos children don't particularly like to be different either, do they?

The need for expert evidence and the problematising of 'difference' (implicitly referencing the discourse of peer discrimination) are deployed together here to suggest that adoption also should not be made automatically available to same-sex parents. It is interesting that Maureen's previous display of lack of knowledge about LGB issues and research (evidenced by her confusion over appropriate terminology) is replaced here by a clear expert position that there is not a sufficient 'body of knowledge' on LGB parenting. Such deployment of 'scientific rhetoric' in debates on same-sex parenting was also found in Clarke's (2001) research.

The following kinds of phrases were frequently used by Maureen and Viv in their separate groups to explain how they felt when asked to think about the topic of LGB parenting:

"I need to explore that more for me."

"I don't know but..."

"It's where I've got a problem"

"I know its not a particularly popular thing that I've said and I need to explore it a bit more, but that's how I feel about it at the moment."

"No, no I'm realising that now as I think about it."

"I'm not sure. I'm confused about that erm..."

It seems, from this, that the challenges being made to the positions they took encouraged them to self-question and potentially offered alternative discourses for them to draw upon when discussing these issues.

Conclusions

The majority of the focus group participants were broadly affirming of same-sex parenting, acknowledging that societal prejudice was the major problem facing same-sex parents and their children. However it appeared that heterosexist and homophobic societal discourses are still drawn on, particularly by some of the older and more experienced counsellors (supporting Galgut's 1998 findings). It is concerning that these counsellors, a few of whom were supervisors, relied strongly on limited personal experiences of LGB people, or on pathologising psychodynamic discourses (Milton, Coyle & Legg, 2005) to inform their discussion.

The dominant discriminatory discourses highlighted by Clarke (2001; 2005; 2006) and others were found across all the discussions: the discourse of the need for both gender role models and the discourse of concern about children's discrimination at the hands of their peers. However, these were challenged by liberal discourses that children of same-sex couples have other role-models in their lives from both genders, and by more critical discourses that presented 'parenting skills' as not being tied to gender or sexuality, and proposed that children of same-sex couples may experience 'double the love'.

It was evident that none of the participants in any of the groups were aware of research spanning the last twenty-five years on same-sex parenting and its outcomes (e.g., Golombok, Spencer et al., 1983; Golombok & Tasker, 1996, 1997; Stacey & Biblarz, 2001). Although 'scientific rhetoric' was employed

(Clarke, 2001), this was to advocate caution about same-sex parenting rather than to support it. It is therefore important that future training incorporates this research and makes it available to counsellors and therapists. Ritter and Terndrup's (2002) handbook of affirmative therapy includes a detailed chapter on therapy with 'families with a gay, lesbian or bisexual parent' which may be useful, as may the American Psychological Association (2000) guidelines which also mention parenting.

Discourses of 'parenting rights', what is 'best for the children' and 'good' versus 'bad' parenting were employed across both discriminatory and affirmative accounts of same-sex parenting to support the positions being offered. Even in affirmative accounts, heteronormative assumptions were perpetuated that 'good' same-sex parents would be close to heterosexual ideals (Stacey & Biblarz, 2001), particularly in relation to monogamous commitment. It is clear that training in this area needs to cover the diversity of LGB lives and communities rather than simply presenting a normalised version of these.

The organisation whose members took part in this research continue to develop their counsellor training on issues of practice with LGB clients. Given the present study it seems particularly important to direct older counsellors to ongoing professional development in this area rather than focusing purely on those new to counselling.

It should be recognised that participants in the research were only a proportion of the counsellors operational (in 2003-2004) and it must be acknowledged that others in the organisation may have spoken differently. Further research could usefully examine the organisational literature, training material and workshops of such organisations in detail to explore which discourses are perpetuated and challenged on an institutional level, and how these relate to counsellors' own accounts.

The safety of the focus groups seemed to enable participants to be open with the more discriminatory discourses that they drew on, giving others an opportunity to challenge these and offer more affirmative discourses. Those who acknowledged their own doubts, confusions and prejudices frequently recognised that they needed to change these. All the counsellors asked for more training and expressed that, given the lack of this, they found the focus groups beneficial and wished they could have more time to discuss these issues. We suggest that focus groups themselves can be a useful way forward for LGB awareness training of relationship counsellors, "making the unspeakable not only speakable but also accountable" (Peel, 2002, p. 260).

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