Toward a Contextual Reconciliation Framework for Muslim Counsellors Working with LGBTQ+ Clients

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ABSTRACT

This conceptual paper offers a contextual reconciliation framework as a means to better contextualise the patterns and implications of how Muslim counsellors navigate their work with LGBTQ+ clients in religiously and culturally conservative contexts. Utilising an extracted literature dataset of 17 published records from 2013 to 2025, the manuscript reconceptualises a narrow question regarding personal value conflict into one where contextual factors shape an appraisal process, cue a responsive counselling practice, and yield significant consequences. Conceptualisations of structural stigma positioning counsellors for tension between affirmative professional expectations and remaining true to religious or moral commitments, and presenting with competence gaps, weak reference models of practice, limited training opportunities, and inconsistent degrees of institutional support. Practitioners seem to resort to information seeking, value balancing, selective prioritisation, boundary management, and culturally grounded sense making. This framework integrates these insights by structuring them into four interrelated domains: contextual pressures, internal counsellor processes, reconciliation strategies, and practice outcomes. According to the paper, ethical strain is influenced not only by personal beliefs but also by the structures of supervision, educational preparation, culturally safe systems, and broader sociocultural contexts. Finally, five propositions are put forward to inform future theory building and empirical research, with implications noted for counsellor education, supervision, referral practice, institutional policy, and future context-sensitive models of counselling and mental health across a range of Muslim and other religiously conservative contexts.

Keywords: Muslim Counsellors; LGBTQ+ Clients; Value Conflict; Counselling Ethics; Culturally Safe Care.

INTRODUCTION

Counselling work with LGBTQ+ clients constitutes a contentious practice in settings where religion, public morals, and institutional norms heavily determine what is deemed acceptable care (Elzamzamy & Keshavarzi, 2019; Ho et al., 2024; Moffic, 2019; Vu et al., 2022). In these contexts, Muslim counsellors may be torn between multiple competing allegiances to professional obligations, communal requirements, and personal faith while continuing to respond ethically-adequately to client's needs (Da'as et al., 2022; Elzamzamy & Keshavarzi, 2019; Mahmood & Abdallah, 2020). The literature describes value conflict, limitations of expertise, identity negotiation, external barriers to care, and pursuit of culturally safe practice; yet few pull these strands into a single explanatory framework. ("Reconciling Faith and Identity," 2025; Ho et al., 2024; Jamal et al., 2018; Jamal et al., 2020; Vu et al., 2022). To this end, the current paper develops a conceptual framework that connects contextual pressures, internal counsellor processes, reconciliation strategies, and practice outcomes.

LITERATURE BACKGROUND

Conflicting goals, conflicting roles, and conflicting interests among Muslim counsellors working with Muslim LGBT clients (Mahmood & Abdallah, 2020), and the limitation of expertise, transparency concerns, values conflict of the counsellor, and a lack of reference model in sexuality-related counselling practice were also

identified by Jamal et al. Work on counsellor competency (Jamal et al., 2020) suggested that diligence, understanding of clients' concerns, value of religion, and value of humanity were factors contributing to preparation for working with gay and lesbian clients. More thoroughly ethical writing indicates that, because professional ethics can be secular and Islamic moral commitments are in very different categories, Muslim case studies can run into the combine when dealing with sexual orientation and gender diversity (Elzamzamy & Kheshavarzi 2019; Okrey Anderson & McGuire 2019).

Complex factors that contribute to access to care, including stigma surrounding the condition and other possibilities of professional visibility, institutional power, and the presence of culturally safe services (Ho et al., 2024; Vu et al., 2022), also enrich client/community perspectives. Other literature includes the horizons of Arab-Muslim school environments (Al-Hattab, 2021), same-sex-attracted Muslim men (Gany & Subhi, 2018), psychological conflict for transgender individuals (Minty, this volume), and queer Muslim solidarity and co-created belonging in the clinical space ("The Third Space in Therapy," Minty, 2025; "This Being is a Guest House," Minty, 2022; Da'as & Slobodin, 2025). Collectively, these writings suggest that the field has numerous pertinent observations but still lacks an integrated model that explains how contexts influence practitioner appraisal and subsequent appraisals-in-practice ("Reconciling Faith and Identity," 2025; Abas et al., 2025; Mahmood & Abdallah, 2020).

Proposed Framework

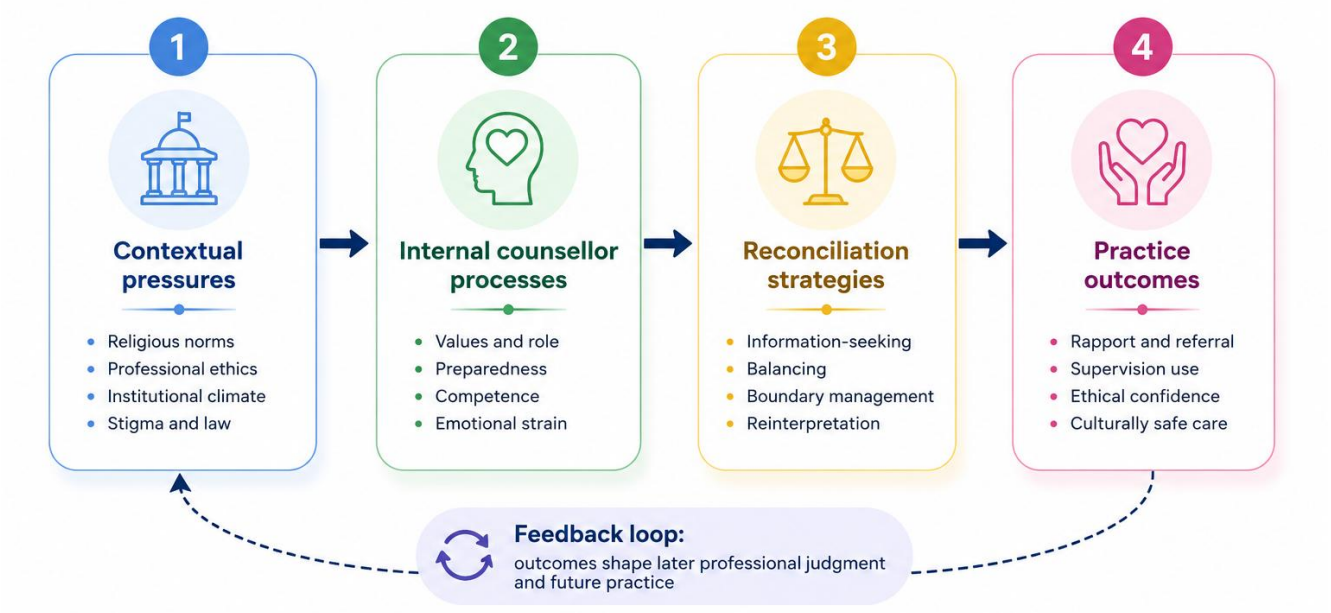

Figure 1. Contextual Reconciliation Framework for Muslim counsellors working with LGBTQ+ clients

Figure 1 illustrates the proposed contextual reconciliation framework. The model proposes that the relational milieu of counselling LGBTQ+ clients in Muslim and other religiously conservative contexts is first contingent on contextual pressures, including religious values, professional codes of conduct, institutional climate, and sociolegal context, inclusive of stigma or acceptance.

These pressures are, in turn, moderated through the counsellor's internal processes of values, competence, preparedness, role perception, and emotional strain. As tensions arise, counsellors can rely on four reconciliation strategies: information-seeking, balancing commitments across the person-application boundary, managing boundaries and reinterpretation.

These strategies subsequently impact practice outcomes such as rapport, referral quality, ethical confidence, supervision use, and culturally safe care. In the feedback loop presented in Figure 2, the experienced outcomes from practice can inform future judgement and subsequent counselling decision making.

Table 1. Domains of the Contextual Reconciliation Framework

Framework domain	Conceptual content	Illustrative citations
Contextual pressures	Religious norms, professional ethics, stigma, institutional climate, and sociolegal context	(Khalid Elzamzamy, 2019; Raneen Da'as, 2024)
Internal counsellor processes	Values, competence, preparedness, role perception, and emotional strain	(Siti Hajar Jamal & Amat, 2020; Siti Hajar Jamal & Nasrudin Subhi, 2018; Syarifah Rohaniah Syed Mahmood, 2020)
Reconciliation strategies	Information-seeking, balancing, selective prioritisation, boundary negotiation, and reinterpretation	(Raneen Da'as, 2024; Syarifah Rohaniah Syed Mahmood, 2020; 2025)
Practice outcomes	Ethical confidence, referral quality, supervision needs, inclusivity, and culturally safe care	(Siti Hajar Jamal & Amat, 2020)

Table 1 summarises the four domains of the Contextual Reconciliation Framework and their conceptual content. This is against the common rule, which states that a text should reference a table before or where it appears. The Contextual Reconciliation Framework is composed of four interconnected domains (Elzamzamy & Keshavarzi, 2019; Mahmood & Abdallah, 2020): contextual pressures → internal counsellor processes → reconciliation strategies→ practice outcomes. Contextual pressures: these encompass legal and social stigma, the ethical codes of various professional organisations, institutional culture, religious mandates, and the availability and visibility of culturally safe (Ho et al., 2024; Moffic, 2019; Vu et al., 2022). Six internal counsellor processes (perceived competence, preparedness, value commitments, role perception identity positioning, and emotional strain) (Gany & Subhi, 2018; Jamal et al., 2018; Jamal et al., 2020).

Strategies to contextualise their faith include information-seeking, a balance between the professional and personal, selective interpretation, navigation of boundaries, humility, authenticity (approximately 2022), and cautious engagement (Mahmood & Abdallah; City of Islam [Islamic awareness media], 2018). The outcome of practice: whether to be ethically confident/uncertain, the ability to develop rapport and referral behaviour and supervision use, inclusivity of a practice environment, and the extent to which experience of care is culturally safe/unsafe for clients (Abas et al., 2025; Ho et al., 2024; Okrey Anderson & McGuire, 2019; Vu et al., 2022). The framework is processual: contextual pressures reflexively shape internal appraisal, which in turn shapes response strategies, and through repeated subsequent outcomes, sequences feed back into future judgment and practice.

Conceptual Propositions

Proposition 1: A greater perceived gap between professional demands and faith-based beliefs leads to more ethical conflict in LGB-related therapeutic work (Elzamzamy & Keshavarzi, 2019; Mahmood & Abdallah, 2020).

Proposition 2: Higher levels of culturally grounded competence and clarity of practice guidance decrease avoidance, confusion, or rigidity with value imposition in the management of strain (Abas et al., 2025; Jamal et al., 2018; Jamal et al., 2020).

Proposition 3: Engagement process (reconciliation strategies) would mediate the link between strain and practice outcomes, with engagement sometimes as important or more important than stressors themselves ("Reconciling Faith and Identity," 2025; "The Third Space in Therapy," 2025; Mahmood & Abdallah, 2020).

Proposition 4: Institutional guidance, supervision, and culturally safe systems exacerbate the impact of ethical strain on practice quality through their effect on unsupported improvisation (Ho et al., 2024; Vu et al., 2022).

Proposition 5: Professional accountability, spiritual literacy, and cultural humility are more likely to yield sustainable counselling responses in propitious practice environments (This Being is a Guest House, 2022; Minty, 2025a; Minty, 2025b; Okrey Anderson & McGuire, 2019).

Implications for Counselling Practice

Based on the framework, teaching for counsellor education should not focus solely on value clarification but rather prompt students to analyse cases where the boundaries between ethics, religious identity, and service context are blurred (Elzamzamy & Keshavarzi, 2019; Jamal et al., 2018; Jamal et al., 2020). In terms of supervision, the literature highlights that supervision must contain structured reflection on referral decisions relating to communication boundaries and role positioning and be wary of passive/avoidant practice (Da'as & Slobodin, 2025; Mahmood & Abdallah, 2020; Minty, 2025b). For institutions, the results indicate that care is rendered more trustworthy for both counsellors and clients only through clear guidance, visible referral pathways, rapport-sensitive practice, and attention to stigma (Abas et al., 2025; Ho et al., 2024; Vu et al., 2022). The importance of spiritual and relational resources for broader model development is also noted in the literature, while highlighting the need for safeguards against coercion and care taken to safeguard client welfare, family context, and identity complexity ("Reconciling Faith and Identity", 2025; Gany & Subhi, 2018; Okrey Anderson & McGuire, 2019; Subhi et al., 2013).

Future Research

Future research should assess whether these four speculative domains represent independent yet interrelated constructs across modalities, including counselling (Da'as & Slobodin, 2025), school psychologists (Ho et al., in press), healthcare providers (Ho et al., 2024), and social workers (Okrey Anderson & McGuire, 2019). Comparative work is also necessary; however, the literature ranges from Malaysia (based on queer Muslim youth's response to conversion therapy), Western secular settings (Kelly, 2025), Arab-Muslim school contexts (Da'as & Slobodin, 2019; Elzamzamy & Keshavarzi, 2025), and broader themes of queer Muslim thinking as a whole, suggesting that limited research has been conducted on how the legal climate and institutional policy or theological plurality may reshape reconciliation processes (Minty et al., in press).

This is imperative so that scholarship does not centre more on practitioners' ordeal in the field while understudying what works to foster occasions of safety, trust, and utility in real-world service settings (Ho et al., 2024; Okrey Anderson & McGuire, 2019; Vu et al., 2022). Longitudinal and practice-based enquiry also would help us assess whether balancing, reinterpretation, humility, and boundary management in spaces where individuals subject to oppression interact with health care professionals enhances rapport, ethical confidence, or accessibility of services over time (also see "Reconciling Faith and Identity," 2025; "This Being is a Guest House," 2022; Abas et al., 2025).

CONCLUSION

This paper argues that Muslim counsellors working with LGBTQ clients can be better understood as a contextual reconciliation process as opposed to simply an isolated statutory value conflict ("Reconciling Faith and Identity," 2025; Mahmood and Abdallah, 2020; Vu et al., 2022). In summary, this framework synthesises existing knowledge regarding ethics, competence, identity negotiation, rapport, institutional contexts, and service availability within a common model that can inform both future theorising and practice (Abas et al., 2025; Ho et al., 2024; Jamal et al., 2020). This way of structuring the literature provides an improved basis for research, training, supervision, and context-sensitive counselling policy in Muslim-majority and other religiously conservative contexts (Elzamzamy & Keshavarzi, 2019; Moffic, 2019).

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