Supporting Transition

Integrated Care and Collaboration in Gender-Affirming Services
Gender-Affirming Services

- What are gender-affirming services?
- Why are they important?
- Many transgender individuals leave therapists who are not affirming and who do not understand their needs and concerns.
- Numerous studies indicate high rates of discrimination against transgender people in medical and public service fields (Grant 2011).
The National Association of Social Workers 6 core values include:

- Integrity
- Competence
- Service
- Social Justice
- Dignity and Worth of the Person
- Importance of Human Relationships

How do gender-affirming services speak to each of these values?
A History

- There are accounts of non-binary gender identity as far back as Greek Mythology.

- Patients reporting discomfort with the gender assigned them at birth are noted in medical literature dating back to the mid-19th century (Koh 2012).

- Despite this history, gender dysphoria and non-heterosexual orientations were considered forms of sexual deviance well into the 1950s.
In 1980, the DSM-III first provided gender identity diagnoses in the form of “Gender Identity Disorder” with the specifiers of “transsexual,” “non-transsexual,” and NOS.

The DSM-IV removed the specifiers and simply offered “gender identity disorder.”

The DSM-5 reflects the current diagnosis of gender dysphoria, and also contains updated language referring to “assigned gender” rather than “sex.”

The DSM-5 removed gender dysphoria from the “sexual disorders” category and placed it in its own category instead.
Gender Dysphoria

- This diagnosis represents the most updated option for supporting gender transition through psychotherapy.

- The diagnosis represents the distress experienced by individuals as a result of the gender they were assigned at birth.

- It provides a number of possible ways that distress can manifest including social isolation, depressed mood, anxiety, dissociation, and disgust with aspects of the body that are representative of the gender assigned at birth.
Important Considerations

- Not all transgender clients will meet criteria for gender dysphoria.

- Many transgender clients will seek general mental health services unrelated to their gender identity. Do not make assumptions!

- Everyone has a different path, and dysphoria can manifest at any time in a person’s life.

- The desire for gender-affirming medical interventions can also present at any time in a person’s life.
The Gender Unicorn

Gender Identity
- Female/Woman/Girl
- Male/Man/Boy
- Other Gender(s)

Gender Expression
- Feminine
- Masculine
- Other

Sex Assigned at Birth
- Female
- Male
- Other/Intersex

Physically Attracted to
- Women
- Men
- Other Gender(s)

Emotionally Attracted to
- Women
- Men
- Other Gender(s)

To learn more, go to: www.transstudent.org/gender

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The World Professional Association for Transgender Health

- Standards of care for supporting gender transition are set by the World Professional Association for Transgender Health (WPATH).

- The WPATH standards provide a thorough understanding of the gender dysphoria diagnosis, how it has evolved, and various gender-affirming interventions that can be utilized to alleviate gender dysphoria.

- The full text of the WPATH standards can be found at: https://www.wpath.org/publications/soc
Social Transition

- WPATH defines social transition as “changes in gender expression and role, which may involve living part time or full time in another gender role consistent with one’s gender identity.”

- Social transition can include transitioning to gender-affirming name and pronouns.

- Social transition may also include an external gender presentation that is more representative of the individual’s gender identity.

- Social transition may also include coming out as transgender to close friends and family.

- Remember that gender identity and presentation are different and social transition looks different for everyone.
Transgender Youth

- WPATH Guidelines include information on supporting children, adolescents, and their families.

- Research indicates that young children may exhibit gender dysphoria that does not always persist into adolescence and adulthood.

- Approximately 12-27% of children exhibiting gender dysphoria will experience a persistence into adolescence.

- If dysphoria persists into adolescence, it is extremely unlikely to desist without medical intervention and gender transition support.
Supporting Transgender Youth & Families

- Transgender children experiencing puberty of the gender they were assigned at birth are at very high risk for depression and suicidal ideation.

- Transgender teens in unsupportive environments have very high rates of suicide.

- Working to support children between the ages of 10 and 15 and their families in understanding the transition process is crucial.

- Why is this age range so important for transgender youth?
Pubertal Blockers

- Pubertal blockers are a medical intervention that presses the pause button on puberty.

- They can give youth and families a few years of breathing room to determine if gender dysphoria persists and determine the best course of action.

- They are 100% reversible at any time during the process.

- [https://www.youtube.com/watch?v=io6SfkqUGBo](https://www.youtube.com/watch?v=io6SfkqUGBo)
Hormone Therapy

- After social transition some individuals choose to seek hormone therapy to introduce the hormones of the gender with which they identify.

- These hormones are provided by an endocrinologist who does extensive lab work to ensure safety and minimal health impacts.

- Many insurance companies and/or medical providers require a letter of support from a mental health provider for hormone therapy.

- Many effects of hormones are reversible, some are not.

- Research shows that 99.9% of individuals who choose to seek hormone therapy exhibit no regret about the decision. Many also experience a reduction or elimination of dysphoria symptoms after starting hormones (Spack 2011).
Gender-Affirming Surgeries

- After hormone therapy, some individuals choose to seek gender-affirming surgery.

- This can include breast reduction or augmentation, changes to internal or external genitalia, facial features, body contouring, and other interventions.

- Many of these surgeries are performed by plastic surgeons.

- Insurance providers and doctors typically require a letter of support from mental health providers to move forward with surgery.
The Role of Mental Health Providers

- Assist clients in exploring gender identity, role, and expression
- Address the negative impact of gender dysphoria on mental health
- Alleviate internalized transphobia
- Enhance social and peer support
- Improve body image
- Promote resilience
- Provide letters of support
Roles with Transgender Youth

- Understand the importance of early intervention
- Educate families about risks and benefits of pubertal suppression and hormone therapy
- Support families in understanding challenges associated with puberty in transgender youth
- Encourage incorporating the entire family system into the transition process
- Connect with providers and resources specializing in transgender youth
Social Support

- Offline and online peer support resources, groups, or community organizations for support and advocacy
- Offline and online supports for friends and family
- Resources for medical interventions
- Resources for name and gender marker changes on identity documents
**Suggested Language**

- Sample letter provided
- Include diagnostic codes
- Use language of “natal gender” or “assigned gender” and “identified gender”
- Reference compliance with WPATH standards of care
- Indicate support and plans for ongoing treatment participation
Coordination of Care

- Obtain release of information for provider requesting letter

- Ensure that the release allows for written and verbal communication and includes all necessary information.

- Coordinate with the provider requesting the letter on a consistent basis.

- Explain the letter and the gender dysphoria diagnosis to your client in a thorough and compassionate manner.

- Continue coordination with medical providers as the client moves forward.
Concerns

- Rest assured that following the WPATH standards of care as well as the ethics and guidelines of your profession provide protection to you as you provide clinical support.

- Supporting clients in accordance with WPATH standards of care is the most ethical and appropriate intervention with transgender clients who are seeking gender-affirming medical services.

- It is not ethical to refuse to work with clients in these situations or refer them out to another provider simply due to your discomfort.

- You will see an increasing number of clients seeking these services. It is your ethical responsibility to respond in an affirming and competent manner.
Continuing Education

- We have only scratched the surface of appropriate and ethical mental health support for transgender patients.

- Ethical guidelines include continuing education to ensure cultural competence and awareness of diverse populations.

- Seek out new workshops and trainings devoted to transgender healthcare and reducing disparities.

- Encourage your agencies and organizations to host trainings for all your staff to be more gender-affirming.
Action Plan

- What are your main takeaways from this training?
- What will you do differently in your practice moving forward?
- What questions do you have about gender-affirming interventions?
Resources

- One N Ten: http://onenten.org/
- PFLAG Phoenix: https://www.pflag.org/chapter/pflag-phoenix
- Spectrum Medical Group: https://www.spectrummedgroup.com/
- Trans Spectrum of Arizona: https://tsaz.org/
Citations


