

## Welcome to the Gender Affirmative Consultation Group of Nevada

***We are so glad you are here!*** This is a group of psychotherapists, social workers, medical professionals and other service providers sharing the following goals: 1) to increase the quantity and accessibility of accurately trained, Gender Affirmative providers, and 2) to create a richly diverse, supportive and effective learning environment for Gender Affirmative care. We will be meeting monthly starting March 2021.

***New participants and new practitioners should read the outline and general guidelines to our meeting prior to attending your first meeting.*** These guidelines have been formed to provide a streamlined opportunity to learn and connect with other practitioners. In addition, new practitioners should read from the resource list to begin to understand their role, complications and resources available to develop a competent practice treating transgender/ gender-expansive clients. In conjunction with the monthly meeting, regular consultation and attending related conferences you can build a solid foundation to work well within this population. This work is ongoing for all professionals in the field as the field and resources are continuing to grow and change.

The origins of this group were to support Mental Health Clinicians in writing letters to meet the current requirements for medical intervention in Gender diversity care. Though this remains a primary focus, this group will also include case consultations, resource knowledge sharing, referrals and theoretical questions/discussions. There is a lot to learn, so please do not hesitate to ask for support. For example, if a client asks you for a letter and you do not have experience with letter writing, please request assistance from a group member with experience.

***Our shared goals are best achieved when a safe, curious and supportive environment is created in conjunction with an open mind.*** Ten years ago, you could tell if someone was somewhat competent if they used the term PGP (preferred gender pronoun), that term is no longer used. As this field develops everyone has to be humble enough to take new direction/ information/correction. Being open to this process can be the most rewarding but a little uncomfortable at times. Updates in language, treatment protocols and social economic issues can be challenging. Keeping that open mind stance will assist you in providing the best care for your clients/patients and prevent even the most well-intentioned biases. This can be true for no matter your own gender identity. Even trans practitioners can be biased and be blinded by their own lived experience as time goes on. Be willing to make mistakes.

This group is privileged to include an increasing diversity of members including transgender/gender non-confirming (TGNC) clinicians. ***As group participants we agree to listen to, learn from, and respect the personal and professional experiences that trans clinicians bring to the table, including an ongoing effort to own and learn about cisgender privilege.*** We are also committed to being aware of race, class, age, ability and other privileges that impact our ability to see and respond affirmatively to our clients and our colleagues, and work to center the experience of providers in the group with other oppressed and marginalized identities. Inevitably, this process will result in unintentionally saying something that is inaccurate, clinically inappropriate, and possibly even hurtful to (some) people and a group member may respond to give you that feedback. Although it is difficult, please do not let fear of feedback silence or shut you down, as both making the mistake and an open response to feedback about it are critical for the learning process for everyone in the room. If you are discussing a client in a case please follow the case presentation form at the end of this packet. Be aware that we are a small community. If you know the client and feel it would be a conflict of interest, please let us know so that we can call you back into the meeting after that case is discussed. Please remember all clients are human and to tread lightly in group discussions about any case.

***Some suggestions about how to best take advantage of feedback include:***

- Remain open, curious and receptive. Group members are expected to give feedback with respect and kindness.
- If you do not feel comfortable asking a question of the entire group, ask an individual member to consult.
- If there has been a personal difficulty between group members during a meeting, we strongly encourage follow-up via phone or email contact between the parties involved.

**Thank you for your commitment to serve gender expansive clients. We look forward to your participation!**

## General Information About the Consultation Group

### ***Meetings***

Meetings are held from **12:30-2pm on the first Wednesday of every month**, via Zoom (a link will be sent out the week of). The priority is case consultation but will also have time for questions, resource, referral, announcement and discussion topics. The Presentation Outline at the end of this packet provides guidance on presenting cases. These meetings serve as ongoing training for participants, but in order to keep them free and accessible, no CEUs or supervisory hours are offered. However, several facilitators are available for one on one consultation, supervision, and CEU courses – please reach out via email if interested.

### ***Meeting outline***

Meetings start with a quick self-introduction of everyone in attendance, including information about: how many openings they currently have, whether they accept insurance & which plans, and if they have a case, question, topic discussion, or announcement. The priority of each meeting is to provide case consultation and ethical guidance, but questions, announcements or discussion topics will be attended to at the moderator's discretion.

### ***Member Expectations***

Expectations include: (1) regular monthly meeting attendance; (2) commitment to ongoing training; (3) concerted effort to unlearn cis-normative binary socialization; (4) commitment to supporting low- income trans folks by providing 1-2 very low fee spots or taking Medicaid insured clients; (5) providing \$60 (or less) evaluations and letters of support for gender affirming care.

### ***Leadership***

The leadership team currently consists of: Dr. Sage Rian, CPC, LPC; Laura Baker, MFT; JJ Lee, CPC, LADC; Dr. Mary Minten, MFT; and Vic Campbell, LMFT. Leadership team responsibilities include: facilitating or arranging for facilitation of meetings, interviewing proposed members and providing new members with initial support as needed, maintaining communication and arranging for meeting space. We are open to other joining the leadership team, please inquire.

### ***Communication***

Members share information through group email. New members share contact information and basic information about their practice with the leadership team, which is then added to an updated contact list for members. You will be placed on the provider list once you have completed six meetings and one letter under the consultation of an experienced provider (or you may reach out to the group facilitators for this).

#### ***Emails sent to group members should pertain to trans therapy related items, including:***

- a. need for a therapist who can take a client
- b. need for a trans-affirming non-therapy referral: doctor, voice person, attorney, etc.
- c. a trans-related resource or event that would be beneficial to most or all people in the group
- d. responding to a meeting announcement (we all like to know if you'll be there)
- e. a trans-related question you need help with
- f. a big personal announcement (e.g., moving or taking time off practice)

If sending a request for a provider or a question related to a client issue, please be very careful to not give information that could identify the client, but put request in terms of provider or type of information you need. (e.g., "Need therapist for adolescent anywhere in the county, sliding scale \$100 max" or "Looking for trans-affirming adult psychiatrist in Carson")

## Training Guide

### 1. Conferences

Group participants are strongly encouraged to attend the many gender related conferences held in Nevada, California, and worldwide. Gender related language, hormone protocols, surgical options, research, and community resources are evolving at a rapid rate. Staying current with concerns relevant to your clients' care will be facilitated by attending at least one gender related conference per year. Most conferences offer a professional development track for clinicians.

Conferences to consider attending include:

- *Gender Spectrum*: <https://www.genderspectrum.org/>
- *USPATH/WPATH*: <https://www.wpath.org/>
- *Gender Odyssey*: <http://www.genderodyssey.org/>
- *National Trans Health Summit*: <https://prevention.ucsf.edu/transhealth/education/nths/>
- *Do Something Identity(ies) Conference*: <https://vanethanlevy.com/conference/>

### 2. Self-Study

The following online educational materials include videos, audio presentations, and other information. Online materials can provide an understanding of current legal, medical, and societal issues, as well as the history of transgender people. ***Please complete a training on the WPATH Standards of Care 8 prior to your first meeting.*** The Affirmative Couch has an affordable course (\$29 full fee; \$24 for therapists working at non-profits; \$19 for students and interns) that is eligible for 2 CEs credit, along with a plethora of other self-guided clinical trainings: <https://affirmativecouch.com/course/wpath8/>

You may also be interested in the depth, 5 week training on transition, surgery, and medical care: <https://affirmativecouch.com/course/gender-affirming-medical-and-surgical-treatment-for-therapists/>

***Read trans narratives:*** It is critically important to hear/read a variety of gender expansive voices. Ask about good books, videos, and blog posts, and dive into the lived experience of transgender & non-binary people of different gender identities, ages, and racial and cultural backgrounds.

These books are a good start:

- *A Clinician's Guide to Gender-Affirming Care: Working with Transgender and Gender Nonconforming Client.*; Drs. Sand Chang, Anneliese Singh, & Lore Dickey
- *The Transgender Teen: A Handbook for Parents & Professionals*, Stephanie Brill
- *Before We Were Trans: A New History of Gender*, Dr. Kit Heyam
- *Life Isn't Binary*, Drs. Meg-John Barker & Alex Iantaffi
- *How to Understand Your Gender: A Practical Guide*, Drs. Alex Iantaffi & Meg-John Barker

### 3. Local Resources

- *Our Center*, provides a variety of support groups, education, and social events for 2SLGBTQIA+ people in Reno
- *Inclusive Counseling*, run by our facilitator Laura Baker provides therapy, education, and training
- *Northern Nevada HOPES*, provides wraparound care for mental, physical, legal, financial, and interpersonal needs
- *St. Paul's Episcopal Church*, is an explicitly 2SLGBTQIA+ congregation
- *Reno Planned Parenthood*, provides medical care including HRT and transition support
- *Nevada 211*, is an alternative to 988 that provides help, advocacy, personal support, and referrals

#### 4. Online Resources

- Legal Document Changes, *National Center for Transgender Equality*: <https://transequality.org/documents/state/nevada>
- Language & Writing Guidelines, *Radical Copyeditor*: <https://radicalcopyeditor.com/2017/08/31/transgender-style-guide/>
- Sexual Health, *Safer Sex for Trans Bodies*: <http://www.hrc.org/resources/safer-sex-for-trans-bodies>
- Autistic Clients, *Dr. Nick Walker*: <https://neuroqueer.com/neurotypical-psychotherapists-and-autistic-clients/>
- K-12 Students in Transition, *HRC*: <https://assets2.hrc.org/files/assets/resources/Schools-In-Transition.pdf>
- Youth HRT, *Dr. Johanna Olson*: [https://www.kidsinthehouse.com/teenager/sexuality/transgender/understanding-cross-sex-hormone-therapy?qt-more\\_videos=1#qt-more\\_videos](https://www.kidsinthehouse.com/teenager/sexuality/transgender/understanding-cross-sex-hormone-therapy?qt-more_videos=1#qt-more_videos)
- Youth in Transition Series, *Reuters*: <https://www.reuters.com/investigates/section/youth-in-transition/>
- Detransitioning, *Dr. Devon Price*: <https://drdevonprice.substack.com/p/detransition-is-gender-liberation>
- Youth & Gender Media Project: <http://youthandgendermediaproject.org/>
- Family & Youth Resources, *Gender Spectrum*: <https://www.genderspectrum.org/>
- Know Your Rights in School, *GLSEN & ACLU*: <http://www.glsen.org/sites/default/files/Know Your Rights.pdf>
- Legal Rights Outside of School, *Lambda Legal*: <https://legacy.lambdalegal.org/publications/getting-down-to-basics>
- Trans Survey Info, *National Center for Transgender Equality*: <https://ustranssurvey.org>

#### 5. Informed Consent & Letters of Support

*Informed Consent (IC)*: The IC model is an accepted Standard of Care practiced worldwide and supported by WPATH. It is a model which respects the bodily autonomy of trans adults and which does not pathologize being transgender/ non-binary by insisting on a mental health diagnosis for access to care. ***Many clients will come to you hoping to find you working with and aware of this model of care. We strongly encourage you to seek consultation in writing these letters of support when they are needed. We are here to assist you.*** More info: <https://icathorg.wordpress.com>

**Thank you!**

***We appreciate your commitment to serving gender expansive clients  
& look forward to your participation in group consultation***

## Appendix: Case Presentation Outline for Consultation

*\*Always omit client's name or use a pseudonym for confidentiality*

1. **Feedback Needed:** state the question or issue you would like the group to address about this case
2. **Client Conceptualization:** provide background information about the case/client
  - Demographics – gender, sexuality, age, race/ethnicity, religion, living situation, etc.
  - Support Systems – relevant home, family, career, and social relationships
  - Diagnoses & Conceptualization – documented diagnosis and your clinical impressions
  - Treatment & Assessment – identified patient, modality, session focus, counseling theory
  - Other relevant information to your question (e.g., physical/medical issues, trauma history, etc.)