

To Be Well and Trans: Facilitating Wellness in Trans Communities

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Introductions

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Agenda

Terminology & Pronouns

History of Medicalization of Trans Bodies

Liberatory Practices in Counseling

Community Building for Wellness

Resources

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Terminology & Pronouns

- Gender vs. Sexuality
- Pronouns are important
 - Don't know? Ask.
 - Normalize using pronouns in introductions
- Gender-spectrum
- Trans
- Non-binary
- Historical significance of trans-offensive language



Pronoun Reference Sheet

She	Her	Her	Hers	Herself
He	Him	His	His	Himself
They	Them	Their	Theirs	Themselves
Ze	Zir	Zir	Zirs	Zirself
Xe	Xem	Xyr	Xyrself	Xemself
Ze	Hir	Hir	Hirs	Hirself
Per	Per	Per	Pers	Perself

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Trans History in Mental Health

- 1980, DSM-III: "Gender Identity Disorder"
- 1987, DSM-III-R: Retained; "Disorders Usually First Evident in Infancy, Childhood, or Adolescence"
- 1994, DSM-IV: Retained; "Gender Identity Disorder in Children", "Gender Identity Disorder in Adolescents or Adults", "Gender Identity Disorder Not Otherwise Specified"
- 2013, DSM-V: "Gender Dysphoria"

(American Psychiatric Association, 2013)

- Impacts:
- Pathologization & Shifting Lens for Wellness
 - Double Bind
 - Revisioning for a Liberatory System

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Historical Medicalization of Trans Bodies

- Gender Dysphoria vs. Gender Expansive
- Medical enforcement of the binary (e.g., "charm schools/grooming clinics", assumptions re: transition)
- Violence of the compulsory performance of trans narratives of suffering for surgery eligibility
- Medical researchers are often outsiders to trans communities
- Impact on trans communities' access to participation in own discourse



(Stone, 1987)

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Mental Health Impact



- In a national study, 40% of transgender adults reported having made a suicide attempt. 92% of these individuals reported having attempted suicide before the age of 25 (James et al., 2016).
- "Both MTF and FTM hormonal transitions are associated with lower depression, anxiety, and somatization problems" (Ginicola, Smith, & Filmore, 2017, p. 195).

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"(77%) of transgender and non-binary people report hiding or delaying medical transition due to non-affirming workplaces. As a result, many quit their jobs so that they can medically transition..." (Green, 2019).



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Information on Wellness

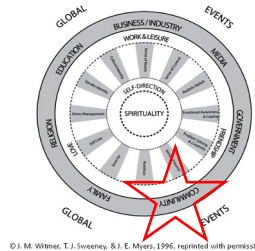
"Wellness refers to a holistic approach in which mind, body and spirit are integrated. It is a way of life oriented toward optimal health and well-being in which body, mind and spirit are integrated in a purposeful manner with the goal of living life more fully" (Myers, Sweeney, & Witmer, 2000).



How is this definition harmful when working with trans clients?

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WHEEL OF WELLNESS



© J. M. Witmer, T. J. Sweeney, & J. E. Myers, 1996, reprinted with permission

Sweeney and Witmer (1991)
Holistic model of wellness and prevention over a lifespan
Precursor for IS-Well model

Proposes five life tasks that are interrelated and interconnected:

Spirituality
Work
Friendship
Love
Self-direction

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Liberatory Approaches to Working with Trans Clients

- ★ Counselors are **not** gatekeepers to gender-affirming care
- ★ Vetting referrals to be trans affirming
- ★ Inclusive Paperwork/Assessments/Procedures
 - Non-binary intake materials, sex vs. gender, chosen vs. legal name, language for bodies
- ★ Educating Ourselves
- ★ Confidentiality
 - Outing
 - Telehealth Considerations
- ★ Visibility
 - Include trans-affirming material in school/office/website
 - Logos (latent messages)
 - Naming spaces/services
- ★ Gender-Neutral/Family Restroom in Building
- ★ Nondiscrimination Policies



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Community Building for Wellness

- Respect and Identifying a Need
 - Name, pronouns, and gender marker changes
 - Identifying safe places to seek assistance and care
- Unlearning/Learning
- Need For Trans Wellness Centers/Physical Gathering Spaces
 - Removes roadblocks to access critical services
 - Increases community and access to other like-minded individuals
- Sharing Resources
 - Housing, Employment, Financial Literacy, etc.
- Advocacy

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Resources for Trans & Gender Spectrum Clients/Counselors

- Folk Healthcare: <https://www.folkhealth.com/>
- Trevor Project: <https://www.thetrevorproject.org/help/>
- LOBT Center of Raleigh: <https://www.lobtcenterofraleigh.org/>
- Community United Against Violence: <https://www.cuav.org/>
- GSA Network: <https://gshanetwork.org/>
- Trans Yoga Project: <http://transyogaproject.com/>

Good reads:

Bornstein, K. (2013). *My new gender workbook: A step-by-step guide to achieving world peace through gender anarchy and sex positivity* (2nd ed.). Routledge.

Chang, S. C., Singh, A., & dickey, I. m. (2018). *A clinician's guide to gender-affirming care: Working with transgender and gender nonconforming clients*. New Harbinger Publications, Inc.

Erickson-Schroth, E. (Ed.). (2014). *Trans bodies, trans selves: A resource for the transgender community*. Oxford University Press.

Stone, S. (1991). The empire strikes back: A posttranssexual manifesto. In K. Straub and J. Epstein (Eds.), *Body guards: The cultural politics of gender ambiguity*. Routledge.

Stryker, S. (1994). My words to Victor Frankenstein above the village of Chamounix: Performing transgender rage. *GLQ: A Journal of Lesbian and Gay Studies*, 1(3), 237-254.

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American Psychiatric Association. (2013). Gender dysphoria. American Psychiatric Association. <https://www.psychiatry.org/psychiatrists/practice/dsm/educational-resources/dsm-5-fact-sheets>

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