



ACT
Government

Guidance to support gender affirming care for mental health

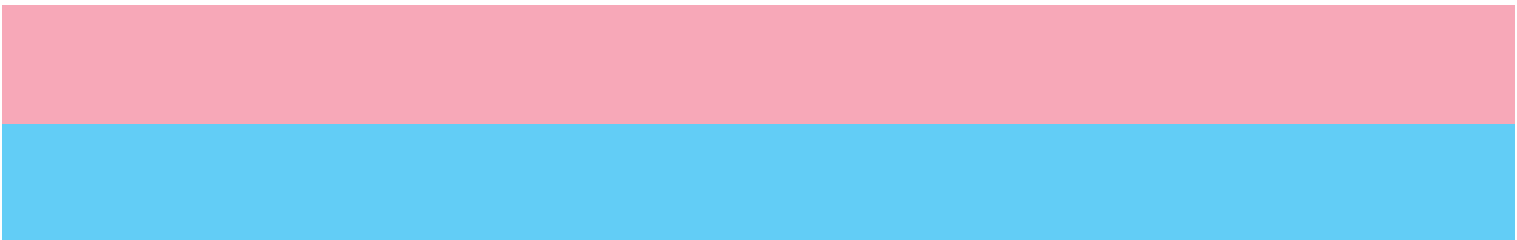


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Acknowledgements

Many people and organisations contributed to the development of this guidance and we thank the members of the ACT Gender Affirming Guidance Working Group for their community leadership and commitment to this work. We also thank the trans and/or gender diverse members, their families, General Practitioners (GPs), Mental Health Practitioners and Psychologists who gave up their time to contribute their valuable insights and guidance.

These guidelines build on previous work that has been undertaken by A Gender Agenda (AGA).

We note the following organisations represented on the Working Group:

- » [A Gender Agenda \(AGA\)](#)
- » [ACT Health Directorate \(ACTHD\)](#)
- » [The Office of LGBTIQ+ Affairs \(CMTEDD\)](#)
- » [The Office for Mental Health and Wellbeing](#)
- » [Meridian \(formerly AIDS Action Council\)](#)

The guidelines were developed on Ngunnawal Land and the ACT Government acknowledges the Traditional Owners and Custodians of the lands and waters upon which we work; we pay our respects to Elders, past, present and emerging, and honour the unbroken connection and ancient expertise First Nations peoples hold on country, across water systems, and the living environment.

We also acknowledge and respect trans and/or gender diverse people with lived experience of mental illness who generously share their experiences to help inform a more inclusive approach to mental health care.

Dr Elizabeth Moore
Coordinator-General,
Office for Mental Health and Wellbeing
October 2021



ACT Health



The Office for
Mental Health
and Wellbeing



Glossary^{1,2}

We would like to acknowledge that language in the trans and/or gender diverse communities is constantly changing. All terms mean something unique and specific to the person using them. There are also many culturally distinct terms that are used which we have not listed but which should be respected and recognised.

The following terms are not exhaustive of the many terms and definitions used by, and about gender diverse and transgender people. We have chosen the terms that are most pertinent to this guidance. A more comprehensive guide is available from TransHub.

Agender - Someone who does not identify with any gender.

Cisgender – When a person's gender identity is the same as that assigned to them at birth (male or female). 'Cis' is a Latin term meaning 'on the same side as'.

Gender affirmation – The personal process or processes a trans and/or gender diverse person determines is right for them in order to live as their defined gender and so that society recognises this. Transition may involve social, medical/surgical and/or legal steps that affirm a person's gender. Affirming gender does not mean changing gender, 'having a sex change' or 'becoming a man or a woman', and transition is not the same as being trans. A trans and/or gender diverse person who has not medically or legally affirmed their gender is no less the man, woman or non-binary person they have always been.

Gender identity - A person's innermost concept of self as a boy/man, a girl/woman, a blend of both or neither. One's gender identity can be the same or different from their sex assigned at birth.

¹ adapted from [Australian Standards of Care and Treatment Guidelines](#) for trans and gender diverse children and adolescents.

² ACON's Language Guide: Trans and Gender Diverse Inclusion: www.acon.org.au/who-we-are-here-for/transgender-people

Gender expression - The external presentation of one's gender, as expressed through one's name, clothing, behaviour, hairstyle or voice, and which may or may not conform to socially defined behaviours and characteristics typically associated with being either masculine or feminine, neither or a combination of both.

Gender fluid - A person whose gender identity and/or expression varies over time.

Gender dysphoria - Gender dysphoria is a complex term with a number of distinct uses. It is commonly used by trans and/or gender diverse people themselves to describe a negative experience or feeling associated with the discrepancy between how they identify and their body, and/or the gendered way they are perceived or treated by others. Gender dysphoria is also a term that is used in medical and clinical contexts to either refer to specific diagnosis (set out in the DSM-V) or to describe a particular medical understanding of the gender incongruence a trans and/or gender diverse person may experience.

[See more information on "Gender Dysphoria" on page 26.](#)

Intersex/People with variations in sex characteristics - People who are born with physical or biological sex characteristics (sexual anatomy including genitals, reproductive organs, hormonal patterns and/or chromosomal patterns) that are more diverse than binary medical and social definitions for male or female bodies^{3,4}.

Legal affirmation - Legal affirmation describes affirming your gender when working with legal and legislative systems, including: updating your name or gender marker at work, school, or on identity documents, your rights in various settings, and being affirmed while working within systems like the police, prison, and immigration.

LGBTIQ+ / LGBTIQA+ - is an umbrella term respectfully used to refer to the diversity of individuals that are lesbian, gay, bisexual, transgender, intersex, queer and / or asexual identifying. Increasingly, organisations are adding an "A" for asexual to the LGBTIQ+ or LGBTQI+ initialisms. The most straightforward definition of asexual is a person who experiences no sexual attraction; however, there are many variations within this group.

Non-binary gender - Genders that sit within or outside of the spectrum of the male and female binary. A person might identify solely as non-binary or relate to non-binary as an umbrella term and consider themselves genderfluid, genderqueer, trans masculine, trans feminine, agender, bigender, or something else.

Social affirmation - The process by which a person changes their gender expression to better match their gender identity.

Transphobia - The fear or hatred of trans and/or gender diverse people or people who do not meet society's gender role expectations.

Trans and/or gender diverse or TGD - These are inclusive umbrella terms that describe people whose gender is different to what was assigned at birth. Trans people may position 'being trans' as a history or experience, rather than an identity, and consider their gender identity as simply being female, male or a nonbinary identity. Some trans people connect strongly with their trans experience, whereas others do not. The processes of transition may or may not be an important part of a trans or gender diverse person's life.

³ Black, E., Bond, K., Briffa, T., Carpenter, M., Cody, C., David, A., Driver, B., Hannaford, C., Harlow, E., Hart, B., Hart, P., Leckey, D., Lum, S., Mitchell, M.B., Nyhuis, E., O'Callaghan, B., Perrin, S., Smith, C., Williams, T., Yang, I., & Yovanovic, G. (2017) 'Darlington Statement: Joint consensus statement from the intersex community retreat in Darlington,' March 2017. Sydney, NSW.

⁴ [Darlington Statement – Darlington Statement](#)

Introduction

Mental health support is something that people of all genders may need at some point in their lives. Nearly 1 in 5 people in Australia will experience some form of mental health condition in the next year, a number that is expected to be even higher for trans and/or gender diverse people⁵

When trans and/or gender diverse people require mental health support from General Practitioners (GPs) or mental health specialists, it is often for similar needs that any person may require: however sometimes it will be associated with their specific experiences of being trans and/or gender diverse.

Trans and/or gender diverse people face significant barriers in navigating the medical and mental health systems⁶. Trans and/or gender diverse people report receiving better mental health care experiences when the practitioner is knowledgeable about gender diverse and transgender health care. However, currently in Australia there are more trans people than our trans-friendly healthcare providers can serve⁷.

This is where you and your service can help. There is a need to increase the number of health professionals and services who have the skills required to serve trans and/or gender diverse populations⁸.

This guide is designed to support providers of mental health care to be able to deliver their services in a gender affirming way to support the needs of trans and/or gender diverse people.

⁵ National LGBTI Health Alliance Report

⁶ Acevedo-Polakovich I, Bell B, Gamache P, Christian A. Service Accessibility for Lesbian, Gay, Bisexual, Transgender, and Questioning Youth. *Youth Soc.* 2013;45(1):75-97.

^{7,8} TransPathways Report

Purpose of the guidelines

When trans and/or gender diverse people receive gender affirming care, they feel supported, respected and heard. Gender affirming care is respectful, aware and supportive of the identities and life experiences of trans and/or gender diverse individuals.

The purpose of these guidelines are to assist medical, nursing, allied health professionals and mental health practitioners (across primary care, non-government services and tertiary mental health services) to provide gender affirming health care.

There are multiple ways these guidelines can be used to support a professional towards becoming more gender affirming.

Here are a few examples:



To support professional development and learning by providing useful information and resources.



To provide guidance to practitioners to be supportive to an individual seeking to affirm their gender.

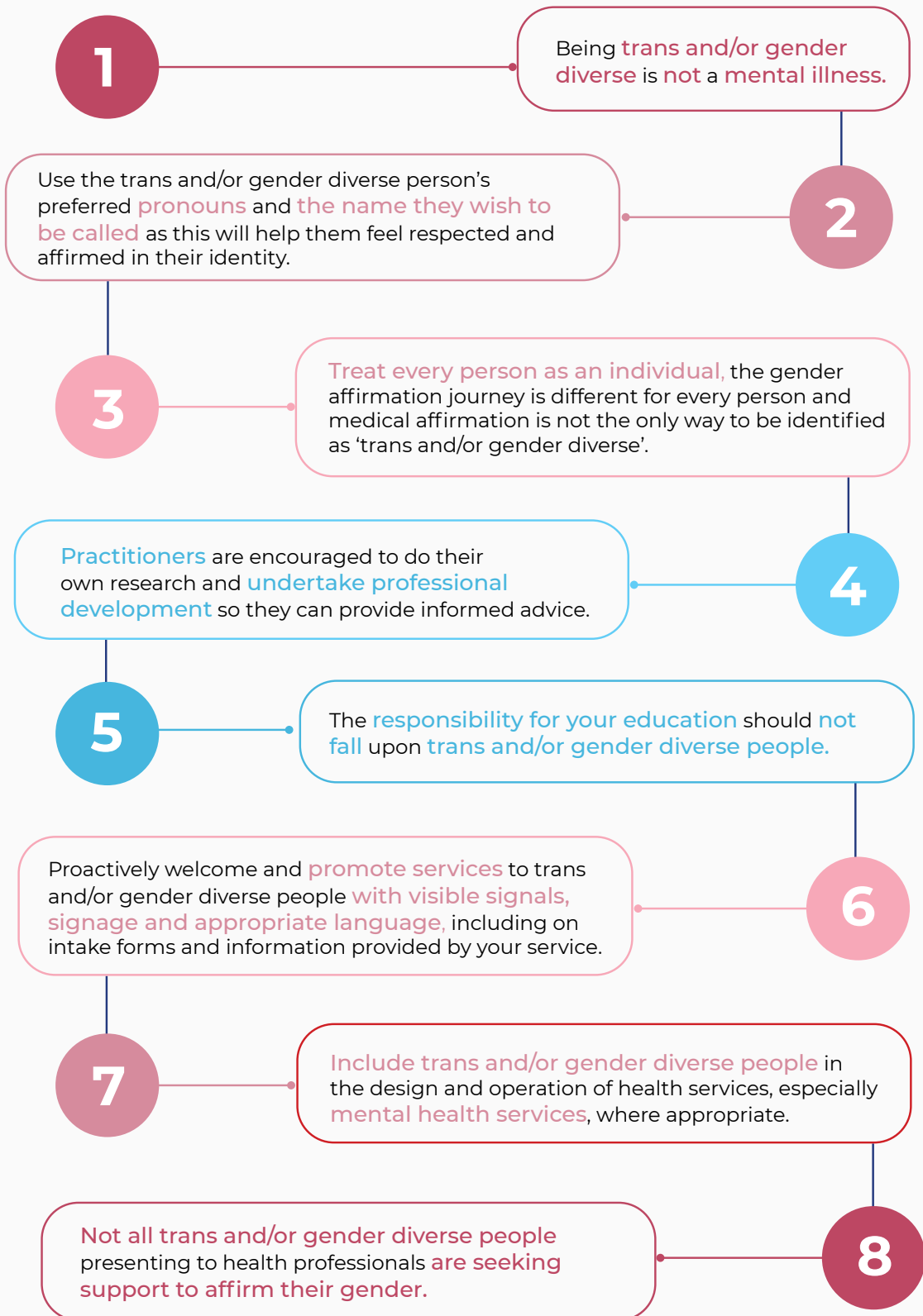


Act as a resource to link practitioners with the relevant legislation, knowledge and training opportunities to support your practice.

These guidelines are not designed to provide professional advice on what clinical care and treatment to deliver, rather they seek to provide guidance on how to deliver the chosen clinical care and treatment in a gender affirming way.

Given the many different roles across medical and mental health services that this guide is covering, the term **practitioner** is used as a broad descriptor for all people delivering mental health care.

What are the key messages?⁸



⁸ Key messages have been adapted from [Supporting trans and gender diverse children and their families](#).
- Emerging Minds

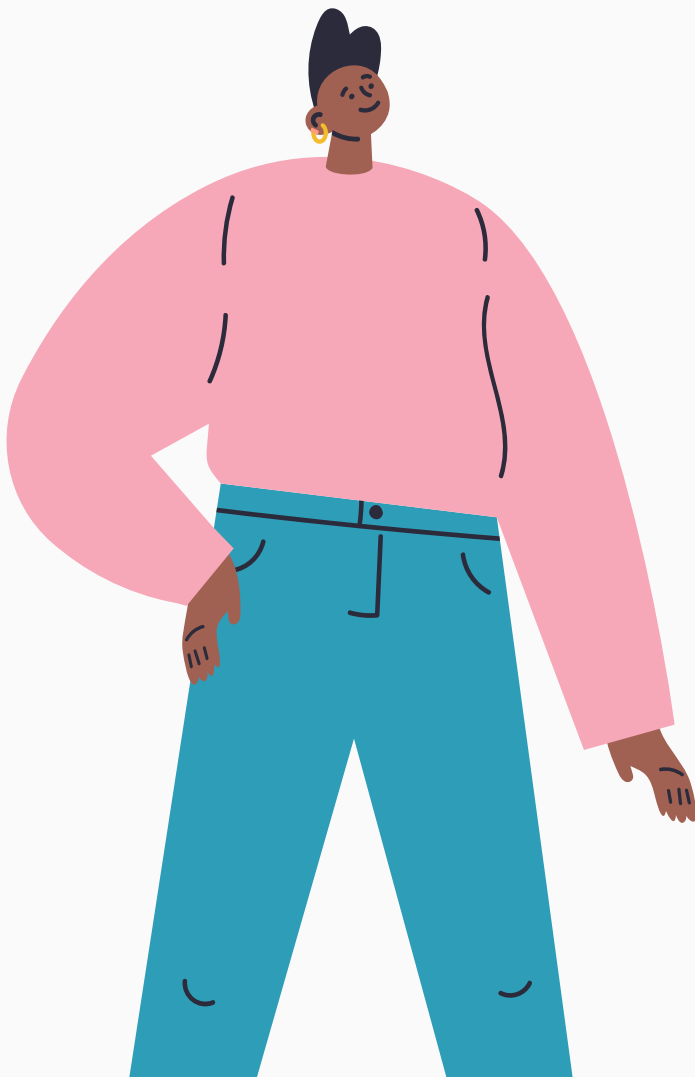
Who are trans and/or gender diverse people?

Trans and/or gender diverse people

are those whose gender is different to the sex that was assigned to them at birth. Some trans and/or gender diverse people may position 'being trans' as a history or experience, rather than an identity, and consider their gender identity as simply being female, male or nonbinary. For others, being transgender is an important part of their identity. Being trans or gender diverse is different to sexual orientation, and trans people might be gay, straight, bisexual or any other sexuality.

Gender affirmation describes the journey or process for a person, from their original legal sex to the gender with which they identify (whether binary or non-binary). The processes of gender affirmation may or may not be a major part of a trans and/or gender diverse person's life. It may be a short, well-defined period of life, or they may perceive it as an ongoing journey without a clearly defined or known end-point.

When trans and/or gender diverse people come to your health services, their gender identity may or may not be relevant to them in seeking care. Transition may be a journey that is ahead of them, something they are currently experiencing, or something in their past.



What do we know about trans and/or gender diverse people's experience of mental health and mental health care?

Around half the trans and/or gender diverse population will experience anxiety, depression or both at some point in their adult lives, and this is up to three quarters for young people.

Unfortunately, many trans and/or gender diverse young people report self-harm or suicide attempts⁹. Trans and/or gender diverse people of all ages can experience stigma, discrimination, or violence that might impact on their mental health. For example, trans and/or gender diverse adults are four times as likely to experience sexual violence or coercion than the general population¹⁰.

Accessing care can be difficult for trans and/or gender diverse people and is especially difficult for young people. Parents and families play an important role in support, and research shows that young people with supportive families are more likely to report better mental health compared to those without support¹¹. A lack of family support can also make it difficult to access health services¹². Many trans and/or gender diverse people report that they feel isolated from medical and

mental health services, and around two-fifths have said that, when they did reach out to a service provider, their gender identity was not understood or respected.

This, according to research, affects their willingness to engage with services, with a survey showing around 70% of trans and/or gender diverse people declined to access a crisis support service when they experienced acute mental illness or a personal crisis¹³.

Despite these concerning figures, we know that trans and/or gender diverse people are incredibly resilient in response to adversity. Some have found ways to cope with negative experiences, and some receive the support that they need. We know young people with supportive parents report faring better on a range of indicators, including less suicidal ideation, better mental health and were more likely to access mental health services. We also know that health services and mental health services can make a difference through providing gender affirming care and a safe space for these individuals.

⁹ Eckstrand, K.L. & Potter, J. (2017). Trauma, resilience, and health promotion in LGBT patients: What every healthcare provider should know, Springer.

¹⁰ <https://www.lgbtiqhealth.org.au/statistics>

¹¹ Writing themselves in 4 National Report: 20; Trans pathways, <https://www.telethonkids.org.au/projects/trans-pathways/>

¹² Trans pathways <https://www.telethonkids.org.au/projects/trans-pathways/>

¹³ Waling, A., Lim, G., Dhalla, S., Lyons, A., & Bourne, A. (2019). Understanding LGBTI+ Lives in Crisis. Bundoora, VIC & Canberra, ACT: Australian Research Centre in Sex, Health & Society, La Trobe University & Lifeline Australia.

What kinds of care might you provide to trans and/or gender diverse people?

Trans and/or gender diverse people may need or seek out a practitioner for one or more of the following types of support¹⁴:

1. General mental health issues:

Trans and/or gender diverse people may experience the same rates of common mood disorders (bipolar disorder, schizophrenia etc) that are seen in the general population, as well as potentially increased rates of some conditions as a result of chronic minority stress, stigma and discrimination.

2. Exploration of gender identity, sexual orientation, and expression:

This includes support in exploring one's gender identity, and in some cases sexual orientation, coming to terms with this identity, self-acceptance and individuation, and discovering ways to actualise this identity in the world.

3. Coming out and social transition:

This includes support in coming out to family, friends, and co-workers, dating and relationships, and developing tools to cope with being trans and/or gender diverse in a sometimes transphobic society.

4. Seeking a professional report :

This includes preparation and development of reports that may be required in some cases as part of a trans and/or gender diverse person seeking medical gender affirmation, such a hormone therapy or surgery. This is generally an assessment of capacity to provide [informed consent](#) to medical treatment, or in some instances documentation of a patient's history of [gender dysphoria](#). In some circumstances, a declaration from a practitioner may be required in support of a legal change of sex on either a birth certificate or passport.

To access links to these forms:

- » [Access Canberra – Doctor or Psychologist Declaration in support of a change of sex](#)
- » [Passports.gov.au - Declaration: gender change in travel document](#)

¹⁴ Guidelines for the Primary and Gender-Affirming Care of Transgender and Gender Nonbinary People, Center of Excellence for Transgender Health

What are the enablers and barriers to mental health care for trans and/or gender diverse people?

Enablers

- ✓ Practitioners that are trans and gender affirming and knowledgeable.
- ✓ Available and accessible peer-support and peer-navigation services.
- ✓ Information on services that are inclusive, safe, and affirming.
- ✓ Integrated, wrap-around care.
- ✓ Choice of providers.
- ✓ Services delivered in a timely manner.
- ✓ Flexible service delivery options.
- ✓ Outreach services to people at risk.

Barriers

- ✗ Lack of affordable mental health care.
- ✗ Limited availability of trans and gender affirming knowledgeable practitioners.
- ✗ Pathologising being trans or gender diverse.
- ✗ Having to retell their story and re-live their trauma.
- ✗ Navigating the complexity of the mental health system.
- ✗ Being dependent on non-supportive parents for making/attending appointments.
- ✗ Living in a rural/regional area.

Guiding Principles for supporting trans and/or gender diverse people

National Mental Health Standards¹⁵

The standards emphasise desired outcomes for people with a mental illness, their carers and the wider community. They reflect the rights, dignity and empowerment of individuals. They also provide guidance on how to involve people with a mental illness, their families and carers in service planning, delivery, evaluation and improvement.

Principle	Actions for medical and mental health practitioners
<p>Mental health services should promote optimal quality of life.</p>	<p>Practitioners that promote good mental health and wellbeing for trans and/or gender diverse people:</p> <ul style="list-style-type: none"> • Understand that people are more likely to experience positive life outcomes when they receive support that is affirming of their gender identity. • Seek to identify and address the institutional barriers for trans and/or gender diverse people within their organisation. • Promote social change that reduces the negative effects of stigma, prejudice and discrimination on the mental health and wellbeing of trans and/or gender diverse people.
<p>Services are delivered with the aim of facilitating sustained recovery.</p>	<p>Practitioners that help to restore mental health for trans and/or gender diverse people with mental health concerns/illness:</p> <ul style="list-style-type: none"> • Seek to understand how stigma, prejudice, discrimination, and violence affects the mental health and wellbeing of trans and/or gender diverse people. • Support trans and/or gender diverse clients to obtain fair treatment and services in accordance with their rights and entitlements.

¹⁵ <https://www1.health.gov.au/internet/publications/publishing.nsf/Content/mental-pubs-n-servst10-toc>

Principle	Actions for medical and mental health practitioners
<p>Mental health treatment, care and support should be tailored to meet the specific needs of the consumer.</p>	<p>Practitioners that provide treatment, care or support to trans and/or gender diverse people with mental health concerns/illness:</p> <ul style="list-style-type: none"> • Provide ethical, high-quality, inclusive, and person-centred care and support to their clients. • Understand that being a trans and/or gender diverse person is not a mental illness. • Seek to understand how the person’s mental health concerns may or may not be related to their gender identity and the psychological effects of minority stress. • Use the person’s preferred name and pronouns and have open and transparent conversations about systemic barriers and solutions to these where and when relevant. • Self-reflect and are aware of how their own attitudes about and knowledge of gender identity and gender expression affects the quality of care they provide to trans and/or gender diverse people and avoid the use of stereotypes or other forms of bias.
<p>Mental health treatment, care and support should impose the least personal restrictions on rights and choices of the consumer.</p>	<p>Practitioners that support rights:</p> <ul style="list-style-type: none"> • Deliver mental health care that is evidence informed. • Understand and apply the concept of informed consent when and where appropriate. • Understand and apply the law prohibiting conversion therapy.
<p>Consumers have the right to have a nominated carer involved in all aspects of care. Role, needs, capacity and requirement of carers are recognised.</p>	<p>Practitioners that support consumers and carers:</p> <ul style="list-style-type: none"> • Understand how parenting and family formation take a variety of forms and the impact of this on trans and/or gender diverse people. • Facilitate carer, ally and family support associated with more optimal mental health outcomes.
<p>Participation of consumers and carers in development, planning, delivery and evaluation of mental health services is encouraged.</p>	<p>Practitioners that build inclusive services:</p> <ul style="list-style-type: none"> • Involve trans and/or gender diverse consumers and/or organisations in the process of creating a gender affirming service. • Promote a collaborative approach with coordination of care from general practitioners, private specialist practitioners and community-based clinicians and peer workers.

Improved knowledge and understanding of gender identity and expression

Practitioners are encouraged to develop competence in working with trans and/or gender diverse people by seeking up-to-date basic knowledge and understanding of gender identity and expression.

Gender

While sex refers to the physical sex characteristics of a person (including chromosomes, genitals, and gonads), gender refers a sense of self, of who a person is, and how they interact with and relate to the world. An understanding of [gender identity and gender expression](#) is fundamental to the provision of affirmative care for trans and/or gender diverse people. Respecting and supporting trans and/or gender diverse people in authentically articulating their gender identity and gender expression, as well as their lived experience, can improve trans and/or gender diverse people's mental health, wellbeing and quality of life¹⁶.

Practitioners are encouraged to reflect on their own views and beliefs about gender and how these may influence their understanding of the spectrum of gender identities and gender expressions that exist, and that a person's gender identity may not be in alignment with sex assigned at birth. By doing this practitioners can increase their capacity to assist trans and/or gender diverse people, their families, and their communities to achieve optimal quality of life¹⁷.

You can access more information on [trans-affirming language here](#). The guide explains key terms and offers examples of language that can help build safer, more inclusive environments for trans and/or gender diverse communities.

Stigma, discrimination and marginalisation

Some trans and/or gender diverse people have limited access to visible, positive role models. As a result, they may be isolated and must cope with the stigma of gender nonconformity without guidance or support, worsening the negative effect of [stigma on mental health](#)¹⁸.

Practitioners may assist trans and/or gender diverse people in exploring their unique gender identity and gender expression. Trans and/or gender diverse people, partners, families, friends, and communities can benefit from education about the healthy variation of gender identity and gender expression, and the incorrect assumption that gender identity automatically aligns with sex assigned at birth.

A trans and/or gender diverse person's experience of gender may also be shaped by other important aspects of identity (e.g. age, culture, race/ethnicity, sexual orientation), and different aspects of identity may evolve as the person continues psychosocial development across the life span. At times, a trans and/or gender diverse person's intersection of identities may result in conflict, such as a person's struggle to integrate gender identity with religious and/or spiritual upbringing and belief.

¹⁶ Witten, 2003

¹⁷ Lev, 2004

¹⁸ Fredriksen-Goldsen et al., 2014; Singh, Hays, & Watson, 2011

Mental illness

Being trans and/or gender diverse does not necessarily in and of itself cause anxiety or mental illness. However, the experiences of discrimination, marginalisation and stress (about when and how to come out or disclose trans status not just initially to friends and families but when meeting new people in the future), and of being forced to be and act in ways that do not align with their true sense of self can cause distress for trans and/or gender diverse people.

Mental health concerns experienced by a patient should not be automatically assumed to be related to their gender identity. Trans and/or gender diverse people may be seeking mental health care for a number of reasons.

Trans and/or gender diverse people do experience the background rates of mood disorders and other psychiatric conditions seen in the general population. While some may be seeking specific assistance for gender-related themes, others are seeking assistance with depression, anxiety, or other clinical concerns unrelated to their gender identity¹⁹

Further information on lived experience of trans and/or gender diverse people's experience of stigma, discrimination and marginalisation can be found here:

- » [Writing Themselves in 4 National Report](#)
- » [Trans Pathways Report](#)
- » [From Blues to Rainbows](#)

¹⁹ Guidelines for the Primary and Gender-Affirming Care of Transgender and Gender Nonbinary People Transgender-PGACG-6-17-16.pdf (ucsf.edu)



Improving the delivery of mental health care

Practitioners are encouraged to develop competence in working with trans and/or gender diverse people and their families by learning how to interact respectfully and without judgment.

Gender affirming care

Understanding and using a person's chosen name and pronouns is vital to the provision of affirming and respectful health care. It is important to consider a patient's right to choose whom, how and when they disclose their gender. While some patients will have a preference for the people involved in their care to use one preferred name and pronoun, there are other patients who may only disclose these to specific people, whether they be friends, family or care providers. Consider discussing what name and gender are entered into a patient's record, and what the preferred names and pronouns are used in referrals, e.g. a patient may be comfortable disclosing in a mental health care plan where they may choose not to in a referral to an orthopaedic surgeon.

To develop your knowledge in working with trans and/or gender diverse people, practitioners are encouraged to examine their own personal beliefs regarding gender and sexuality, gender stereotypes, trans and/or gender diverse identities, in addition to identifying gaps in your own knowledge, understanding and acceptance²⁰. This self-examination may include exploring your own gender identity and gendered experiences related to privilege, power,

or marginalisation, as well as seeking consultation and training with other professionals who have expertise in working with trans and gender diverse people and communities.

The University of Melbourne has developed a module for health practitioners funded by the North Western Melbourne Primary Health Network (NWMPHN) and endorsed by The Australian Professional Association for Trans Health (AusPATH) to promote more inclusive and responsive service provision for trans and/or gender diverse people in mental health care settings, you can access the free [online training here](#). Practitioners are also encouraged to visit [Transhub's](#) digital information and resource platform to access information on gender affirmation and health services for trans and/or gender diverse people.

Practitioners delivering gender affirming care will utilise evidence-based therapeutic approaches and strengths-based goals to provide support, advocacy, and referral pathways where appropriate. Competence in working with trans and/or gender diverse patients will involve an awareness and sensitivity to the cultural and contextual challenges faced by minority client groups. As well as some knowledge of common psychological and mental health issues affecting these groups, their prevalence and etiology, risk assessment concerns and how to provide culturally responsive assessments and interventions. This may include professional assessment and/or awareness of conditions and issues known to impact trans and/or gender diverse people at a higher rate than the general population including but not limited to, living with HIV or substance misuse, domestic/family violence and sexual assault etc.

²⁰ American Counseling Association [ACA], 2010

Capital Health Network has a useful guide for GPs without experience or specialisation in trans and/or gender affirmative healthcare called Trans HealthPathways ACT and SNSW. Whilst this platform is not available to the public, any healthcare professional operating within the ACT will be able to access it through the [HealthPathways system](#).

[A Gender Agenda](#) run the Canberra Transgender Care Network and they are a group of healthcare professionals that have a commitment to the quality care of trans and/or gender diverse people. Their aim is to improve care in the ACT region through improved referral networks, learning from each other, mutual patients and advocating for better local services. If you would like to join the group or would like more information you can email them @ canberratranscarenetwork@gmail.com.

Trauma informed mental health care

Gender affirming mental health care should be trauma informed in its delivery, with an understanding that many patients may present with complex trauma histories with interpersonal, social and medical systems-based trauma experiences²¹. Trauma informed care and training for all staff and providers can enhance care engagement and health outcomes.

[Trauma informed care](#) is a framework that aims to support people to feel safe, overcome their fear of harm or betrayal and build trust between clinicians and patients. [TransHub](#) has a number of resources and information that practitioners can refer to on trauma informed care when working with trans and/or gender diverse people.

Affirming environment and client focused processes

Practitioners are encouraged to make their service welcoming and inviting by providing strong visual messages. You could do this by hanging inclusive posters and providing helpful pamphlets that are accessible. Meridian has developed a large range of posters and other resources for the mental health and community health sector to support practice these are [listed here](#).

Practitioners are encouraged to use appropriate intake forms that ask questions about the persons gender in a trans affirmative way and to also consider what information and data regarding sex, gender and sexuality (if any) is appropriate to collect. The [ABS Standards](#) provide a useful baseline for this but should be contextualised to balance any reporting requirements with rights to privacy to ensure that unnecessary data about these is not required from clients, and that trans and/or gender diverse people have the ability to choose when they disclose this information. Suggested appendices include intake forms, strategies to support gender affirmation on Electronic Medical Record (EMR) systems (e.g use of alerts to identify a patient's name and pronouns, detailed comment on Medicare billing and naming etc). Client forms should include options for pronouns and a preferred name that is different to their other documentation.

Transhub's fact sheet on [questions to ask a doctor](#) may be helpful for practitioners to use as a guide to consider how gender affirming their service is.

²¹ Machtinger EL, Cuca YP, Khanna N, Rose CD, Kimberg LS. From treatment to healing: the promise of trauma-informed primary care. Womens Health Issues Off Publ Jacobs Inst Womens Health. 2015 Jun;25(3):193-7.

Young people

Practitioners work in ways that respect and uphold the autonomy of the young person, taking into account their capacity and competence to give informed consent, and specific circumstances allowing clients the opportunity to participate in decisions about the type of services provided to them. For more information on how you can support young people please [go to page 23](#).

Older adults

It is important to understand that older adults are a diverse group, and normative changes in ageing may be positive as well as negative and are not necessarily related to pathology or a client's gender.

Practitioners are encouraged to be aware of the ways in which discrimination by health care providers in community or residential services and facilities can lead to negative mental health outcomes for older trans and/or gender diverse people and this can increase social isolation. For further information on providing competent and affirming services for older adults you can [access further reading here](#).

Informed consent protocol for hormone therapy or medical transition

Health services need to respectfully balance considerations of privacy, autonomy, confidentiality and informed consent, and legal requirements. An informed consent protocol for hormone therapy or medical transition promotes a cooperative relationship between individuals and service providers and aims to put decision-making in the hands of trans and/or gender diverse individuals themselves. Informed consent emphasises education in order to enhance the individual's capacity to make informed decisions about their body. By doing so this type of practice seeks to reduce many of the unnecessary barriers facing trans and/or gender diverse people in accessing medical transition options. For more information on informed consent protocols please [go to page 27](#).

Illegal and harmful practices

[Conversion therapy](#)²² - in the ACT a person commits an offence if they perform a sexuality or gender identity conversion practice on a protected person. A sexuality or gender identity conversion practice means a treatment or other practice, the purpose, or purported purpose, of which is to change a person's sexuality or gender identity. A protected person is a child or a person with impaired decision-making capacity in the relation to the matter. You can find further information on the [ban of conversion therapy here](#).

²² [Sexuality and Gender Identity Conversion Practices Bill 2020 | Bills](#)

Addressing broader social and environmental factors

Environmental and social stressors can greatly impact mental health. Trans and/or gender diverse people are more likely to live in poverty, be discriminated against in employment, and be victims of violence than cis gender people. Trans and/or gender diverse people also face higher rates of family loss, and homelessness. Trans and/or gender diverse people with intersecting identities such as race, ethnicity, disability or socioeconomic status face increased likelihood of adverse life events²³.

Practitioners may be able to assist trans and/or gender diverse people in accessing the relevant social service systems. For example, practitioners may be able to assist in making referrals to other health care providers and housing resources that are affirming and affordable, and/or locating affirming religious and spiritual communities. Practitioners may identify appropriate resources, information, and services to help trans and/or gender diverse people in addressing workplace discrimination, including strategies during a social and/or medical transition for identity disclosure at work.

For those trans and/or gender diverse people who are seeking employment, practitioners may help them to develop strategies about how and whether to share information about gender history. They may also work with employers to develop supportive policies for workplace gender transition or to develop training to help employees adjust to the transition of a co-worker²⁴.

For further information on the social and environmental factors that might impact trans and/or gender diverse people you can read: [Blueprint for a coordinated response to the health needs of LGBTIQ people, their families, and communities in the ACT](#).

²³ From Blues to Rainbows Report

²⁴ Guidelines for Psychological Practice with Transgender and Gender Nonconforming People American Psychological Association

Addressing impact of stigma and minority stress

Stigma and [minority stress](#) can deeply impact trans and/or gender diverse people. A non-judgmental stance toward gender diversity is critical to help to counteract the pervasive stigma faced by many trans and/or gender diverse people and provide a safe environment to explore gender identity, mental health issues and the broader impacts of stigma and discrimination.

Peer support from other trans and/or gender diverse people has been shown to buffer the negative effect of [stigma on mental health](#)²⁵. Practitioners should familiarise themselves with trans and/or gender diverse peer support services or community groups to be able to information and referrals to these.

Practitioners may also facilitate emotional processing of these experiences and work with the person to identify supportive resources and possible courses of action. Specific needs of trans and/or gender diverse people will vary and may include developing self-advocacy strategies, navigating public spaces, seeking legal recourse for harassment and discrimination in social services and other systems.

Additionally, trans and/or gender diverse people who have been traumatised by physical or emotional violence may need specialised therapeutic support.

²⁵ Bockting et al., 2013



Mental health care for trans and/or gender diverse young people

Support at an early age can have important long-term positive mental health benefits for trans and/or gender diverse young people and decrease their chances of poor mental health outcomes, such as depression, eating disorders, self-harm and suicidal ideation as they grow older²⁶.

Whilst many trans and/or gender diverse young people and their families will benefit from some form of psychological support, the level of support required will depend on the clinical and psychosocial circumstances.

There is growing evidence to suggest that for children, family support is associated with more optimal mental health outcomes. Young people with supportive parents report faring better on a range of indicators, including less suicidal ideation, better mental health and were more likely to have access to mental health professionals. Spending time with friends and engaging in positive recreational activities assists many trans and/or gender diverse young people to feel better. Trans and/or gender diverse young people are more likely to be involved in activism and more than half of this group reported they felt better as a result.

What issues are the child and family likely to encounter (and how can they contribute to their mental health)?

Once a child has decided to affirm their gender, they may want to begin the 'coming out' process. Depending on the individual this could include telling their extended family, friends, school and other support networks. This does not have to happen all at once. For some individuals, 'coming out' may have significant implications for their safety and relationships with family and/or cultural institutions (it is worth noting that this may be the case for adults as well as children and young people). Talking about when, how and who to tell, and developing a plan with the child can help to reduce their anxiety.

As a practitioner, you may make referrals and contact with parents and/or carers for various purposes. It is vital to ensure that you have a conversation with the child before making any referrals or contact, as this will give the child a sense of agency and control over their gender identity and 'coming out' experience. For example, you should provide the child with an opportunity to decide which name and/or pronouns may be used with particular people. In centring the child in this conversation, you can support and affirm their identity whilst letting them control the way they share this with others. A [gender affirmation template](#) can be used by practitioners to help facilitate this conversation.

²⁶ Strauss, et al., 2017; Smith, et al., 2014

Support for children and young people

Practitioners working with young people need to prioritise the child's wellbeing and carefully consider when and how the family and the young person's school are involved.

Be aware of, and sensitive to, the individual challenges that young people may face due to familial, social and cultural contexts including such issues as racism, prejudice, discrimination, bullying, violence and distress. Practitioners can support young people to minimise the impact of these issues and provide appropriate assistance to young people as they navigate through these difficulties.

Where appropriate, practitioners may connect with professionals within the school system to build awareness and support the needs of their clients.

Support for parents and families

Family support is crucial to children's mental health. Parents and family members of trans and/or gender diverse children often struggle with this new knowledge, providing assistance and information to parents and carers will help them to support their child.

[The Trans Pathways Report](#) revealed that the 65% of young people who reported a lack of family support also showed higher rates of suicidal thoughts, desire to hurt themselves, suicide attempts, self-harm, reckless behaviour and diagnoses of eating disorders, anxiety, depression and PTSD²².

Parents and family members may experience a range of emotions, including confusion ("how did this happen?"), guilt ("what did I do wrong?") and often grief (they are now raising a child of a different gender and perhaps a new name). Parents and family members can also feel worried for their child, this can play a role in the acceptance journey.

Parents might be concerned about what the future holds for their child in terms of possible discrimination for example experiencing bullying at school, or rejection from extended family. They may initially show less acceptance and be in denial rather than think about how they might navigate these issues. In time though, many parents will also feel relief and happiness as they see the positive changes in their child who is being supported to be the gender that they identify as.

Practitioners can make time to engage in conversations with parents about how they are feeling, acknowledging that it might take some time to process the things that their child is communicating to them or that they might benefit from seeking mental health support for themselves. Finding other parents to talk to and educating themselves can be helpful for parents and professionals.

Encourage parents to take the time to listen without judgement and as openly as they can to what their child is saying, this will help to build their understanding. Suggest they ask open and respectful questions to their child and try to listen without debating or arguing. This will encourage a safer space for conversation and help everyone to understand each other. Parents will also need support to navigate respectful conversation with other family members / siblings to understand.

There are a number of useful [resources and practical tools](#) that have been developed by Emerging Minds that can be used by practitioners to support trans and/or gender diverse children, parents and their families.

The next pages provide an overview of the current pathways to gender affirming hormones or surgery.

Supporting a trans and/or gender diverse person to access gender affirming hormones or surgery

Not all trans and/or gender diverse people will want hormones or surgery and you may not be needed to support them with this aspect of care. However for some this is vital, so it is helpful to have a general understanding of this pathway and what may be involved to be able to discuss and help patients understand even if you are not required to provide such assessments or reports. However, it is helpful to have a general understanding of this pathway and what may be involved to be able to discuss and help patients understand even if you are not required to provide such assessments or reports.

Where practitioners do need to provide the kind of support stated here, seeking out training opportunities or supervision from an experienced practitioner will help you gain knowledge and the skills needed. For further information and professional advice, you can also read the following resources to assist you:

- » [World Professional Association for Transgender Health \(WPATH\) Standards of Care](#)
- » [Equinox Consent Protocols](#)
- » [TransHub](#)
- » [Australian Standards of Care and Treatment Guidelines](#)
- » [Guidelines for Psychological Practice](#)

Gender Dysphoria

In the past any access to gender affirming care, including hormone therapy and surgery, required a diagnosis of gender dysphoria by a Psychiatrist. Gender dysphoria is defined in the [5th edition of the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders \(DSM-5\)](#). Under this definition, gender dysphoria in adults and adolescents is a diagnosis characterised by a marked incongruence between gender identity and one's assigned sex at birth.

This usage of gender dysphoria as a diagnostic term is complicated by the informal use of the term gender dysphoria by trans and/or gender diverse people themselves to describe an adverse feeling they experience in relation to their gender, body, or how their gender is perceived by others. The complexity of using a single term, gender dysphoria, in multiple ways as both diagnosis and description has led to significant confusion by both practitioners and trans and/or gender diverse people about the pathways and requirements to access gender affirmation.

While gender dysphoria continues to be a possible diagnosis, the current Standards of Care Version 7, developed by WPATH and endorsed for use in Australia by AusPATH, do not require a formal diagnosis of gender dysphoria in order to access either hormone therapy or surgery for adults. Instead, the current Standards of Care Version 7 require documented evidence of persistent gender dysphoria in the more general sense. This is generally documented in an assessment that is typically carried out by a mental health professional.

Surgery typically requires documented evidenced of gender dysphoria and an assessment of capacity to consent. This is laid out in in the Standards of Care Version 7, though some individual surgeons may have specific requirements beyond the WPATH Standards.

Informed Consent Protocol for Gender Affirming Hormones

Access to hormone therapy can also be provided through an informed consent protocol which offers an alternative pathway to the Standards of Care Version 7 and is increasingly being adopted throughout Australia. Thorne Harbour Health has developed an informed consent protocol, titled [Protocols for the initiation of hormone therapy for trans and/or gender diverse patients](#), which has been endorsed for use in Australia by AusPATH. An informed consent protocol such as this does not focus on the issue of diagnosis but rather on patients' ability to understand and provide consent to receiving gender affirming medical intervention. This distinction is important as trans and/or gender diverse people do not understand themselves or their experience of gender dysphoria as something to be diagnosed or assessed by an outside professional.

Under an informed consent protocol a primary healthcare provider, such as a GP, or sexual health physician, will discuss and confirm with the patient a history of gender dysphoria or incongruence, and counsel the patient about the effects of hormone therapy to obtain their informed consent. While mental health professionals may be referred to for further counselling and support, the major difference between the Standards of Care Version 7 and an informed consent protocol is the order of this. In an informed consent protocol, engagement with mental health professionals can take place at the same time as the initiation of hormone therapy, whereas the Standards of Care Version 7 require psychosocial assessment prior to the initiation of hormone therapy.

Because psychosocial assessment prior to initiation of hormone therapy is not mandated for all trans and/or gender diverse people in informed consent protocols and is only required in some cases, the use of an informed consent protocol can assist in reducing barriers in accessing gender affirming hormones, including financial costs and waiting times at mental health services.

While informed consent protocols are increasingly being accepted as the best model for providing access to gender affirming hormones, they are not appropriate in all cases and healthcare providers who use an informed consent protocol will not use it in all cases. Depending on individual circumstance and other health factors, it might be more appropriate for a primary healthcare provider to refer to a mental health professional for further support and assessment prior to the initiation of hormone therapy. This is especially true in cases where severe coexisting mental health problems may impact capacity to provide consent. Where an assessment is required, the time taken from first engagement to the initiation of hormone therapy can vary greatly depending on the patient's individual circumstances and the knowledge and confidence of the clinician. This could be just a handful of sessions or it could take many months. In some circumstances difficulty in finding an appropriately qualified mental health professional, as well as time in organising for referrals to be sent between clinicians can cause significant and unnecessary delays to accessing hormone therapy, often at a high cost to the patient's mental health. Addressing these issues where you can is important.

Resources

The resources listed here are only a handful of those available to trans and/or gender diverse people. For the purpose of these guidelines, we have used the ones that are the most relevant to the content shared.

Australian Standards of Care and Treatment Guidelines - for trans and/or gender diverse children and adolescents

Emerging Minds

- » **Supporting trans and/or gender diverse children and their families:** Resource provides an overview of ways to support a child who is questioning their gender identity.
- » Creating a welcoming and safe organisation for trans and/or gender diverse children and their families: [Checklist for allied health services](#).
- » **Trans and/or gender diverse support referral matrix** - Making appropriate and culturally safe referrals is crucial to supporting trans and/or gender diverse children and their families. This matrix includes suggestions for websites and organisations to further your understanding about supporting trans and/or gender diverse people.

LGBTIQ+ Health Australia - Supporting healthy lesbian, gay, bisexual, trans/transgender, intersex, queer and other sexuality, gender, and bodily diverse people and communities throughout Australia and the world, free from stigma and discrimination. [LGBTIQ+ Health Australia](#) has a knowledge hub with [free online resources](#).

Meridian - Has developed a large range of posters and other resources for mental health and community health sector works to support practice – these are [listed here](#).

Facilitated a co-design process with LGBTIQ+ people to design a service model that would respond to their mental health needs and address the barriers to mental health services that they experience. You can read more information about the [service model here](#).

Navigating Gender Affirmation in the ACT – Practical information to support the medical, social and legal aspects of transition, developed by A Gender Agenda (AGA).

TransHub – ACON's digital and resource platform for trans and/or gender diverse people, loved ones, allies and health practitioners.

Further Reading, Training and Professional Development

AusPATH – E-Learning Modules:

To promote more inclusive and responsive services for trans and/or gender diverse people in primary health care settings.

Australian Journal of General

Practice: For more clinical information about supporting the health of trans and/or gender diverse patients in the context of Australian general practice.

Community HealthPathways ACT and SNWS:

This localised pathway, aimed at GPs, provides advice on psychological support, medical treatment, including the initiation and management of hormone affirming treatment, and ongoing health and screening needs for transgender and/or gender diverse people.

From Blues to Rainbows: Mental health and wellbeing of trans and / or gender diverse young people in Australia

Providing Competent and Affirming Services for Transgender and Gender Nonconforming older adults:

Outlines approaches for competent and affirming service provision.

The University of Melbourne - Mental Health Care for Trans and/or Gender Diverse and non-binary people

modules: This free module is designed for a range of health professionals to become familiar with and sensitive to the diverse terminology, experiences, issues, standards, and referral pathways with respect to trans and/or gender diverse and non-binary patients. The overarching purpose is to promote more inclusive and responsive service provision for trans and/or gender diverse people in mental health care settings.

Trans Pathways Report: The report summarises the main findings of trans pathways and contains recommendations to help improve the mental health of young trans and/or gender diverse Australians.

Writing Themselves in 4 National Report: This report describes findings from Writing Themselves in 4: a national survey of health and wellbeing among LGBTIQ+ young people in Australia.



Reference List

Acevedo-Polakovich I, Bell B, Gamache P, Christian A. Service Accessibility for Lesbian, Gay, Bisexual, Transgender, and Questioning Youth. *Youth Soc.* 2013;45(1):75-97.

ACON's Language Guide: Trans and Gender Diverse Inclusion: www.acon.org.au/who-we-are-here-for/transgender-people

[Australian Standards of Care and Treatment Guidelines](#) for trans and gender diverse children and adolescents.

American Counseling Association [ACA], 2010

Black, E., Bond, K., Briffa, T., Carpenter, M., Cody, C., David, A., Driver, B., Hannaford, C., Harlow, E., Hart, B., Hart, P., Leckey, D., Lum, S., Mitchell, MB., Nyhuis, E., O'Callaghan, B., Perrin, S., Smith, C., Williams, T., Yang, I., & Yovanovic, G. (2017) 'Darlington Statement: Joint consensus statement from the intersex community retreat in Darlington,' March 2017. Sydney, NSW.

Bockting et al., 2013

(Cundill, 2020).

[Darlington Statement – Darlington Statement](#) - A joint consensus statement by Australian and Aotearoa/New Zealand intersex organisations and independent advocates.

Eckstrand, K.L. & Potter, J. (2017). Trauma, resilience, and health promotion in LGBT patients: What every healthcare provider should know, Springer.

FredriksenGoldsen et al., 2014; Singh, Hays, & Watson, 2011

[Guidelines for Psychological Practice With Transgender and Gender](#)

[Nonconforming People American Psychological Association](#)

[Guidelines for the Primary and Gender-Affirming Care of Transgender and Gender Nonbinary People](#), Center of Excellence for Transgender Health

Guidelines for the Primary and Gender-Affirming Care of Transgender and Gender Nonbinary People [Transgender-PGACG-6-17-16.pdf \(ucsf.edu\)](#)

Key messages adapted from Supporting trans and gender diverse children and their families - Emerging Minds

Lev, 2004

Machtiger EL, Cuca YP, Khanna N, Rose CD, Kimberg LS. From treatment to healing: the promise of trauma-informed primary care. *Womens Health Issues Off Publ Jacobs Inst Womens Health.* 2015 Jun;25(3):193–7. [National LGBTI Health Alliance Report](#) Strauss, et al., 2017; Smith, et al., 2014

[TransPathways Report](#)

Waling, A., Lim, G., Dhalla, S., Lyons, A., & Bourne, A. (2019). Understanding LGBTI+ Lives in Crisis. Bundoora, VIC & Canberra, ACT: Australian Research Centre in Sex, Health & Society, La Trobe University & Lifeline Australia.

Witten, 2003

[Writing Themselves in 4 National Report](#)

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If you have feedback or would like to provide any updates on the contents of this guideline please contact the Office for Mental Health and Wellbeing @ OfficeforMHW@act.gov.au

