

# Determining a Client's Readiness for Gender Transition: Clinical Evaluation and Recommendation

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# Session Overview

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- Identify DSM 5 diagnostic criteria for gender dysphoria
- Describe social and medical gender transition including its criteria and assessment
- Discuss practical strategies that counselors can best assess and recommend candidates for social and medical gender transition

# Gender Dysphoria in DSM-5

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A condition in which one experiences a marked incongruence between one's expressed and assigned gender for at least six months

- In children
- In adults and adolescents

Must be accompanied with clinically significant distress or impairment in important areas of functioning

# Clinical Interview and Observation

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- Acknowledges struggles/challenges
- Observes significant behaviors
- Assesses the environment
- Rules out differential diagnosis
- Identifies other/related mental health concerns

# Gender Transition

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A period in which a person expresses oneself as and adopts gender role of an desired gender

- Psychological
- Social
- Hormonal
- Surgical

Type	Meaning	Considerations	Examples
Psychological Transition	Dealing with internal identify; Preparing for coming out	<ul style="list-style-type: none"> <li>• Clear, attainable, realistic expectations</li> <li>• Co-existing mental health concerns</li> </ul>	<ul style="list-style-type: none"> <li>• Gathering information</li> <li>• Seeking professional assistance</li> </ul>
Social Transition	Coming out	<ul style="list-style-type: none"> <li>• Gradual transition</li> <li>• Abrupt transition</li> <li>• Profound impacts</li> </ul>	<ul style="list-style-type: none"> <li>• Coming out to families/friends</li> <li>• Changing legal documents</li> </ul>
Hormonal Transition	Seeking Hormone Therapy	<ul style="list-style-type: none"> <li>• Reversible interventions</li> <li>• Partially reversible interventions</li> <li>• Health risks</li> </ul>	<ul style="list-style-type: none"> <li>• Receiving GnRH-a</li> <li>• Taking testosterone/estrogen</li> </ul>
Surgical Transition	Pursing reconstruction surgery(ies)	<ul style="list-style-type: none"> <li>• Irreversible interventions</li> </ul>	<ul style="list-style-type: none"> <li>• Breast augmentation</li> <li>• Genital reconstruction</li> </ul>

# Transition as Developmental Process

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- is a life long process
- enables people to experience identity shifts
- is a period where people find their place
- has a different starting or ending point for everyone
- may cycle and recycle

# Current Care: Provider

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- Binary assumption to care
- Focus is on pathology, not diversity
- Unnecessary barriers to care
- Excessive waits to get treatment
- Limited evidence behind diagnostic criteria and treatment options
- Limited knowledge and skills in trans care



# Current Care: Consumer

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- Lack of access to competent care
- Face discrimination and institutional oppression
- Avoid seeking professional help
- Learn to work around the criteria and providers
- Access to less/unhelpful resources

# Bridging the Gap: Gatekeeping to Informed Consent Evaluation Approach

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# Informed Consent Approach: Guiding Principles

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- Embrace complexity and tolerate uncertainty
- Convey respect, empathy, and compassion
- Avoid reducing clients to gender, physical attributes, or to the intervention they are seeking
- Remember clients are experts in their own lives, but may not know what they need and what options are

# Recommending Candidates for Gender Transition

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# Questions to Ponder

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- Is this person likely to **benefit** from social, hormonal, and surgical transition?
- Are they prepared, have **realistic expectations**, and have the practical and emotional **support** they need to achieve a positive transition outcome or will it decrease the **quality of their life**?
- Do they have a general idea of their **transition plan** and **resources** they would need?

# Counseling and Support for Changes in Gender Role

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- Clarifying and exploring gender identity and role
- Addressing the impact of stigma and minority stress on one's mental health and human development, and
- Facilitating a coming-out process

(p. 184, Coleman et al., 2011)

Coleman, E., Bockting, W., Botzer, M., Cohen-Kettenis, P., DeCuypere, G., Feldman, J., ... Zucker, K. (2011). Standards of care for the health of transsexual, transgender, and gender nonconforming people, 7th version. *International Journal of Transgenderism*, 13, 165-232. doi:10.1080/15532739.2011.700873

# Referral Letter

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- The client's general identifying characteristics;
- Results of the client's psychosocial assessment, including any diagnoses;
- The duration of the referring health professional's relationship with the client;
- An explanation that the criteria for hormone therapy have been met, and a brief description of the clinical rationale for supporting the client's request for hormone therapy;
- A statement that informed consent has been obtained from the patient;
- A statement that the referring health professional is available for coordination of care and welcomes a phone call to establish this.

# Key Points

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- Recognize our own understanding, biases, and assumptions regarding gender, gender identity, and sexuality
- Understand that gender transition is a complex process which presents opportunities and challenges
- Conceptualize client concerns in the context of individual's psychological, relational, cultural, and physical aspects
- Assist clients in developing realistic expectations on transition
- Seek opportunities for interprofessional collaboration



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