

Gender Affirmative Therapy (GAT) Factsheet

Meg-John Barker

What is Gender Affirmative Therapy (GAT)?

Gender affirmative therapy (GAT) is any form of counselling or psychotherapy which seeks to help people to come to a consensual, comfortable, and self-accepting place with their gender. It is founded on the position that no gender identity, expression, or experience is any more valid, 'natural' or 'normal' than any other. In this way GAT sits in opposition to any form of *conversion therapy* which attempts to change a person's gender identity or suppress their experience or expression of their gender.

Why is GAT important?

We all have a relationship to gender and these are often related to our experiences of mental health difficulties, for example:

- Attempts to conform to rigid masculine gender roles - including demonstrating strength and suppressing emotion - are linked to the high suicide rates, and to addictions and violent behaviour which also impact the mental health of others
- Attempts to conform to rigid feminine gender roles - including being defined by attractiveness and relationships with others - are linked to high rates of body image problems, depression, and anxiety
- Cultural transphobia and assumptions that people should remain in the gender they were assigned at birth are linked to high rates of suicide attempts, self-harm, and mental health struggles among trans people via common experiences of bullying, discrimination, and family rejection
- Assumptions that gender is binary, and the cultural invisibility of non-binary genders, are linked to the high rates of mental health struggles among non-binary people (those who do not experience themselves as male or female)

For these reasons it is vital that therapists and counsellors are *gender-aware* and *gender-affirmative*: able to help their clients to understand the range of options they have in relation to gender and to support them in navigating these.

What are the underpinning assumptions of GAT?

GAT is based on the position that gender is diverse and that no gender identity or expression is inherently superior or more 'natural', 'normal' or valid than any other. This includes the following assumptions:

- It is no more preferable to be cisgender (remaining in the gender you were assigned at birth) than it is to be trans (shifting from the gender you were assigned at birth), or vice versa. Both trans and cisgender are big umbrella terms encompassing a diverse range of experiences, expressions, and identities
- It is no more preferable to identify as a woman, as a man, or as a non-binary person, or to express femininity, masculinity, or any form of androgyny or non-binary gender
- Most people identify, express, and experience their genders in different ways over time as they find more comfortable and consensual relationships to their gender. This can involve: changing dress and appearance; shifting titles, names, pronouns and other identifiers; taking external hormones; undergoing surgical procedures, etc. It's important to remember that such changes are commonplace among cisgender and trans people alike (e.g. women and non-binary people may take oestrogens and progesterones because they are menopausal, trans, seeking birth control, intersex, or experiencing endometriosis; people may have mastectomy/breast reduction because they are trans or non-binary, because they are a man with gynecomastia or pseudogynecomastia, because they are a woman who doesn't wish to be sexualized or otherwise stereotyped on the basis of their breast size, or because they are a person who is at risk of breast cancer or migraines related to breast size)

- No particular gender journey is preferable to any other. For example, it is no more preferable: to express gender in culturally normative or non-normative ways, to undergo social or physical changes or not to

What happens in GAT?

The emphasis in GAT is on supporting the client towards a gender experience, expression, and identity that feels comfortable and consensual to them.

- We live in a culture which privileges being cisgender over trans, being binary over non-binary, being a man over being any other gender, and being masculine over expressing gender in other ways. Therefore GAT may well involve unpacking cultural norms around gender and how they have impacted the client
- Our culture also regards some gender identities, expressions, and journeys as more acceptable or 'normal' than others, so GAT may involve normalising and legitimising the various options available to the client
- Gender intersects in vital ways with other aspects of experience (e.g. race, class, sexuality, age, generation, mental health, disability) so GAT does not focus exclusively on gender but rather explores it in the context of the client's background and wider world
- Given that there is still a great deal of stigma and discrimination around any gender non-normative expression there may well be exploration of how clients can navigate the wider world in ways that are safe-enough, and the balance between this and expressing their gender in ways that feel comfortable and consensual to them

What doesn't happen in GAT?

There are many myths about what happens in GAT, largely due to the current moral panic about trans. The following things would never happen in GAT:

- Suggesting that a person must be trans simply because they have a gender non-normative experience or expression, many cisgender people also have these.
- Suggesting that a person must be cisgender because they do not seem trans and/or non-binary enough to 'count'
- Encouraging a person to take puberty blockers or hormones, or discouraging them from doing so if that feels like the best path for them
- Encouraging a person to have surgical interventions, or discouraging them from doing so if that feels like the best path for them
- Rushing anybody into any form of gender identity, expression, or experience
- Encouraging any decision before a person is fully informed about what it would involve and what impact it would have on them physically, psychologically, and socially. Informed consent is vital

Further Resources

You can find the research this report is drawn on in:

- Barker, M-J. (2017). *British Association of Counselling & Psychotherapy Good Practice in Action Fact Sheet 095: Gender, Sexual, and Relationship Diversity (GSRD)*. www.bacp.co.uk/media/2334/bacp-gender-sexual-relationship-diversity-gpacp001.pdf
- Government Equalities Office (2018). *National LGBT Survey: Research Report*. www.gov.uk/government/consultations/national-lgbt-survey

Other useful resources include:

- The Memorandum of Understanding on Conversion Therapy in the UK, Version 2 www.bacp.co.uk/docs/pdf/16215_mou2_final.pdf

- Stonewall trans report: www.stonewall.org.uk/sites/default/files/lgbt-in-britain-trans.pdf
- Trans panic:
theconversation.com/a-trans-review-of-2017-the-year-of-transgender-moral-panic-89272
- Iantaffi, A. and Barker, M-J. (2017). *How to Understand Your Gender*. London: Jessica Kingsley.
- Pink Therapy: www.pinktherapy.com