

Lee, J., Kim, H., Budge, S.L. (In Press). The Companionship Model for Affirming Assessment Sessions for Transgender and Nonbinary Youths and Families. *Harvard Review of Psychiatry*.

Table 1. Sample Breakdown of a 90-minute Session

Time	Topic(s)	Details
5 - 10 mins	Setting Agenda and Rapport Building (Validating, Asking, and Sharing)	<ul style="list-style-type: none"> • Validating that the session often brings a wide range of feelings • Asking how both the youth and guardians feel about the session • Sharing clinician's critical understanding of the assessment process as an informed consent/assent process and the session's focus on increasing access to resources • Eliciting questions about the session
For topics below, ensure you are (i) Engaging both TNBY and their families and (ii) centering assessment on access to resources		
10 -15 mins	Discuss past medical, surgical, psychiatric history (if any) <ul style="list-style-type: none"> ○ Developmental history, including learning and cognitive disorders that may require special attention ○ Social history (school, work, hobbies) 	<ul style="list-style-type: none"> • Most pediatric patients generally exhibit uncomplicated medical histories, and severe and acutely concerning psychiatric conditions are rare. • For patients with substantial and ongoing psychiatric histories, a more comprehensive review of their condition may be necessary. • If the patient is currently under treatment, it is helpful to obtain collateral information from their current healthcare providers
5 - 10 mins	Gender history	<ul style="list-style-type: none"> • Explore the history of gender incongruence or dysphoria to determine eligibility for insurance coverage; discuss additional support for severe gender dysphoria as needed. • If the patient requests treatments that have prerequisites, evaluate their compliance with these requirements (e.g., surgery may require one year of hormone treatment prior to coverage)
15 -20 mins	Explore gender embodiment goals Explain risks and benefits of the treatment	<ul style="list-style-type: none"> • Provide information about the treatment's risks and benefits in a way that is appropriate for the patient's developmental stage. • Utilize various tools to assist in this process when necessary

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10+ mins	<p><i>With <u>patient</u> alone</i></p> <ul style="list-style-type: none"> ○ Psychiatric review of symptoms that may not have been disclosed during the session with the parent. ○ Further discussion on gender embodiment goals, risks, benefits 	<ul style="list-style-type: none"> • Allow the patient to discuss potentially sensitive or private topics such as genital dysphoria, sexuality, intimacy, or substance use history, as developmentally appropriate
10+ mins	<p><i>With <u>parents</u> alone</i></p> <ul style="list-style-type: none"> ○ Further discussion on concerns or planning 	<ul style="list-style-type: none"> • Dedicate time to address any questions or concerns guardians might have, ensuring they receive accurate medical information. • Empower guardians to communicate concerns effectively with their medical team
10+ mins	<p><i>With <u>parents and patient</u></i></p> <ul style="list-style-type: none"> ○ Planning for further resources 	<ul style="list-style-type: none"> • Plan for ways to increase access to necessary resources that may not have been discussed during the session. • These resources may be social support, time off from school or work, and financial support
2-5 mins	Wrap up	<ul style="list-style-type: none"> • Ensure that questions are addressed, and resources are provided.

Table 2. Sample Questions for the Assessment Session (*Use them as relevant to patient case; you do not have to ask all of these questions)

General Questions	
1.	What are your thoughts and feelings about today's assessment session?
2.	Could you share your journey with understanding your gender, including when you first started thinking about it and how your understanding has evolved over time?
3.	What are your hopes for how others see you? How would you describe your gender goals?
4.	What specific gender affirming treatments are you interested in? How might these be important for your [specific gender affirmation goal]?
5.	How do you experience gender dysphoria? Are there aspects of your body that you are uncomfortable with due to gender-related reasons? Are there any discomforts that are not related to gender?
6.	What helps you feel gender euphoria? (or what helps you feel less dysphoric?)
7.	Have you ever seen a therapist or a psychiatrist or any sort of mental health professional before?
8.	(If there is a prior psychiatric diagnosis) Some people feel that their gender journey and mental health are closely related (ex. your anxiety might be worse when you are feeling really dysphoric, or you might feel more dysphoric when you are depressed). Some people feel like their gender journey and their mental health are not really related at all (ex. you feel the same amount of dysphoria when you are depressed or not depressed). How do you think it relates to you?
9.	What grade are you currently enrolled in? Do you have an Individual Education Plan (IEP) or a 504? Have there been any concerns regarding a learning disorder or a developmental disability?
10.	How might your life look different after you start gender affirmation? How might it be the same?
11.	Is there anything you worry about with starting gender affirmation?
Treatment-specific Questions	
1.	Could you tell me what you know about [treatment]?
2.	What have you read/heard about side effects or risks?

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3. Which effects are you most looking forward to? Which effects are you most worried about? How might you feel about the undesired effects?

 4. Have you talked about this with your parents/guardians? How did the conversation go? How do you feel about their reactions?

 5. How might [treatment] affect your relationship with your family? Your friends/partner? Your community?

 6. Who in your life do you consider supportive, and who might not be?

 7. What kinds of positive or negative feelings do you think you will have after starting [treatment]? What concerns do you have about starting gender affirmation?
(If the patient needs examples or clarification: For some people, even when they are really happy and do not regret gender affirmation, they might mourn some aspects of the changes they experience. It is normal to experience grief when going through any kind of change. How do you think you might want to handle this if it comes up for you?)

 8. Do you have any thoughts on when you might want to start? (Ex. Summer break? Over winter? Before college/high school/big transition, or during gap year?)

 9. Have you thought about the topic of having children in the future and how it relates to your gender identity or the treatments you might have? What are your thoughts or questions about this?

 10. How can I help you find more information or support if you need it?

 11. **[For Parents]** What concerns do you have for your child starting [treatment]?

 12. **[For Parents]** What are some of the side effects or negative effects you've read or heard about?

 13. **[For Parents]** What are some resources that you have been able to find for learning about gender affirming treatments?
* The clinician may offer examples such as the <https://transcare.ucsf.edu/>

 14. **[For Parents]** How comfortable do you feel about speaking with your pediatrician (or other specialist) about medical concerns?

Figure 1. Illustrative Clinical Examples of Using the Companionship Model with TNBY and their Guardians.

1.1. Case Example: Assessing for and Increasing Access to Social Support

Background: Jordan, a 15-year-old transgender boy, is in a session to discuss starting testosterone. Jordan's parents, who are supportive but still learning about transgender identities, are also present. The focus of this session is to evaluate Jordan's informed assent and to facilitate access to social support for both Jordan and his parents.

Clinician: "It's essential for us to work together to support Jordan's journey. How have you been feeling about Jordan's transition?"

Dad: "We are supportive, but we're also concerned about the challenges he might face, like discrimination or health risks."

Clinician: "I hear your concerns. It's important to remember that Jordan's wellbeing is the priority, and having supportive parents makes a significant difference. Jordan, how do you feel about your parents' concerns?"

Jordan: "I'm glad they're trying to understand, but sometimes I feel like they're more worried about the challenges than about how I feel inside."

Clinician: "It's a balance, isn't it? On one hand, ensuring Jordan's emotional wellbeing, and on the other, addressing practical concerns. Let's talk about your questions about hormone therapy. What questions do you have about the treatment?"

Mom: "We've heard a bit about hormone therapy, but we're not sure about the long-term effects."

Clinician: "That's a great question. Hormone therapy, like all other medical treatments, can involve risks and benefits. It's important to know that while there are risks associated with testosterone therapy, these effects are closely monitored and can usually be managed effectively with regular health check-ups. Common changes due to testosterone include a deeper voice, increased body hair, and altered fat distribution, some of which will be permanent in their changes and some of which will be partly reversible. In terms of health risks, they can include changes in red blood cell count, cholesterol, cardiovascular health, and sometimes mood fluctuations. The impact on fertility should also be considered, especially since Jordan is young, and we'll guide you through these aspects.

It's also important to consider the risks of not proceeding with gender-affirming care. Not receiving gender-affirming care can significantly impact Jordan's mental health. Youths who don't receive the support they need often report higher levels of anxiety, depression, and a greater risk of self-harm and suicidal thoughts. Their everyday functioning can be impacted with ongoing distress due to a persistent feeling of incongruence between their gender

identity and physical appearance. Also, when pubertal changes are established without gender affirming treatments, it would be difficult to reverse these changes without surgical interventions. Starting hormone therapy earlier can prevent some of these changes, potentially reducing the need for more invasive surgeries in the future.

The overall goal of this therapy is not just physical alignment with Jordan's gender identity, but also to significantly enhance his mental health and quality of life. We've seen many positive outcomes from hormone therapy in terms of psychological well-being. And of course, we'll be here to support Jordan every step of the way, ensuring a safe and supportive journey. *[note. In real session, the clinician may provide more room to talk through and process with TNBY and their guardians on these risks and benefits].*

Dad: "What about how other people will treat him? We worry about bullying or worse."

Clinician: "Not all TNB youths experience worsening of social connections after gender transition. In fact, many TNB people report feeling less anxious and depressed after gender transition as their bodily experiences become more congruent with their perceived self-concept, which can help mitigate effects of transphobia. When there are social challenges, having a strong family support system is incredibly protective. The research shows that having even one supportive adult makes a huge difference. And, if we can get you all access to additional support resources, that will only make it better for Jordan."

Clinician: "Jordan, it's helpful to consider the support system you have outside of this room. Have you talked to any peer support groups or individuals who have gone through similar experiences?"

Jordan: "I've chatted online with a few people, but I haven't joined any formal groups. I think it might help to talk to others who really understand what I'm going through."

Mom: "Maybe we could look into groups together? I want to understand more about what you're experiencing and how I can support you."

Clinician: "That's a great idea. There are several transgender support groups and communities, both online and possibly in your local area. Here is a list of online and in person support groups within 30 miles. XXX community center has TNB youth group every Friday at 5PM and if this is not accessible for you, you can consider joining online support groups in your area. Connecting with others who have undergone hormone therapy can provide valuable insights and emotional support."

Dad: "And what about support for caregivers? I want to make sure I'm doing everything I can for Jordan."

Clinician: "There are resources for caregivers as well. PFLAG, as well as local LGBTQ+ community centers, often have resources and support groups for family members. These can be valuable for understanding the transition process and how best to support Jordan. Here is a list of online and in person parent support groups within 30 miles."

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Jordan: “I think it would be good for both of us to have that support. I don’t want to go through this alone.”

Clinician: “Absolutely, Jordan. This journey is yours, but you’re not in it alone. We’ll make sure you have all the resources and support you need. We’re here to support you every step of the way.”

1.2. Case Example: Engaging with Parents in Supporting Their TNB Child

Background: The clinician is conducting a session with the parents of Avery, a 13-year-old nonbinary trans femme. Avery is not present in this session, allowing for an open discussion about the parents’ concerns and understanding of gender diversity.

Clinician: “Thank you for coming in today. It’s essential for us to discuss how to best support Avery’s journey. How have you been feeling about Avery’s recent coming out as trans?”

Mom: “We have different views and emotions about Avery’s identity. I’m trying to be open and accepting because I don’t want Avery to feel alone, but I can see that it’s harder for my husband.”

Dad: “I’ve also been trying to be there for Avery, but it’s been really challenging. I don’t really understand what this means, and Avery doesn’t tell me much. We’re both processing this in our own ways, and sometimes it’s hard to understand what the other is feeling.”

Clinician: “It sounds like you both are on different paths in understanding and accepting Avery’s identity. This is common, and it’s okay to be at different stages at different times. What’s important is how you communicate and support each other through this process. This doesn’t mean you both must agree on everything immediately, but rather that you’re committed to navigating this journey together. Let’s talk about your specific worries for Avery. What aspects are you finding most challenging?”

[After listening to the dad’s response]

Clinician: “Thank you for sharing that. It’s clear that your concern for Avery’s well-being is deep. Regarding feeling like you’re the only one worrying, it might help to express these concerns to your partner. Sometimes, sharing your specific worries can open up a dialogue and help both of you understand each other’s perspective better.”

Dad: “Yeah, that makes sense. We know it’s important that we create a united front for Avery, sometimes I just feel so alone in this process and feel distraught.”

Mom: “I know Avery opens up to me more but I’m not sure how to always bring that up with my husband. I would like for Avery to be able to tell him directly, but I don’t want to

pressure anything, and I don't like feeling like I'm playing a game of telephone either. It's hard to figure out when or how to have these conversations."

Clinician: "Is there anything you think might make these conversations easier?"

Mom: "I thought about family therapy, but I don't know if Avery would go for that at all!"

Clinician: "That can be helpful for families. Even for just the two of you, it might be good to have a dedicated space and time to talk about this with a therapist together, to be on the same page, to better support each other. This is a big change for everyone in the family."

Dad: "Well, I just wish there was some model for how to figure this out. I don't think I know anyone who has gone through something like this in my family."

Clinician: "It might also be beneficial to connect with other parents who are going through similar experiences. Hearing from other parents and couples who went through similar processes can provide a sense of solidarity and new insights into navigating these challenges. Have you considered joining a support group like PFLAG? They offer resources for parents and families of LGBTQ+ youth, and it can also be a space for couples to learn about TNB identities and grow together."

Mom: "We've heard of PFLAG but haven't attended any meetings. It might be helpful to talk to other parents who are going through the same thing."

Dad: "I would love to learn how other dads are communicating with their child."

Clinician: "Absolutely. Here is the contact info for PFLAG in your area, they hold in-person meetings every Friday at 6PM. Additionally, local LGBTQ+ community centers often host parent support groups. These spaces can provide both educational resources and emotional support for both of you as well."

Mom: "That might be helpful. We do need to understand each other's perspectives better to support Avery as a united front."