

TRANS-AFFIRMING CARE IN THE PSYCHEDELIC SPACE

A GUIDE FOR THERAPISTS, CLINICIANS,
FACILITATORS, AND HEALERS



BY MAYA FERN, CHT & HANNAH MCLANE, MD, MA, MPH

soundmind

A NEW PSYCHEDELIC PARADIGM

SoundMind is an organization dedicated to bringing ethics, equity, and innovation to the psychedelic ecosystem.

We are women-led, self-funded, and committed to providing a radically safe container for psychedelic experiences. We bridge methodology from the biomedical model and the wisdom of traditional medicine practice, with a relentless focus on access and attunement for marginalized populations.

SoundMind has several ongoing initiatives to provide and disseminate free educational materials that center on the needs of marginalized populations. You can learn more about our initiatives at <https://soundmind.center>.

Through our nonprofit, clinical, and training efforts, SoundMind has been a leader in the psychedelic movement since 2018. We built the first psychedelic-assisted therapy clinic in the Philadelphia region, created one of the longest-running facilitator training programs in the U.S., and provide psychedelic retreats in Philadelphia, Oregon, New York, and abroad.

If you like what we do and want to support training and treatment for marginalized populations, please consider donating to us.



*Soundmind Initiatives: Psychedelics & Identity Initiative | Childhood Sexual Trauma Initiative
| End-of-life & Psychedelics | Solidarity Series | Psychedelics Facilitator Training
| Trans-Affirming Care | Neurodiversity Initiative*



INTRODUCTION

In recent years, psychedelics have experienced a powerful renaissance in the western world as many people seek out new ways to heal themselves and explore their consciousness. A growing body of research is demonstrating that psychedelic-assisted therapies can provide robust and sustainable relief from a range of difficult-to-treat mental health concerns, leading the policy landscape to shift in favor of legalizing certain psychedelic medicines for use in therapeutic settings. Ketamine, which can be legally prescribed off-label, is already in use by hundreds of providers across the country to treat depression, chronic pain, PTSD, and other mental health conditions. Psilocybin has been legalized for therapeutic use in Oregon and is expected to become available there by 2023. At the national level, the Biden administration has signaled it expects to approve both MDMA and psilocybin for therapeutic use within two years.

This rapidly growing popularity has created an urgency among practitioners to understand how to provide psychedelic-assisted therapies in an ethical, attuned, and skilled manner, taking into account the unique needs that individuals who hold diverse identities may present. Transgender and gender non-conforming people have long been marginalized within the medical system, and the psychedelic renaissance is no exception. While this is beginning to change as more people become aware of the unique challenges and needs of this population, there is still a long way to go to provide safe containers for those who have different life experiences than their cisgender peers. As the psychedelic community continues to grow and evolve, it is important that we continue to learn how to co-create these safe spaces for transgender and gender non-conforming people. By doing so, we can create a more inclusive and diverse community that is better able to meet the needs of all its members.

GENDER-AFFIRMING CARE

When we think of what gender is, many of us may not even realize the biases and assumptions we hold. For most of us, we were taught that everyone is either a boy or a girl, and that depends on what is in between our legs. However, that is not true for everyone, and this idea ignores the beautiful and expansive world of trans and gender nonconforming individuals. In the psychedelic space, it is imperative to be educated and informed about trans and gender nonconforming topics, as many of our clients hold these identities or may be exploring their gender identity as a part of their psychedelic experience.



DEFINITION OF TERMS

GENDER IDENTITY: This is a part of someone's internal and individual sense of self. One's gender can be male, female, non-binary, some combination of the two, or many others! Gender exists on a spectrum outside the standard male-female binary. One's relationship with gender can also change over time.

ASSIGNED SEX: Assigned at birth; this is the anatomical classification of people as male, female, or intersex.

GENDER EXPRESSION: How a person publicly expresses or presents their gender. This includes behavior, appearance, social expressions, chosen name, and pronouns. This can differ from an individual's internal gender identity, depending on perceived social acceptance or level of individual comfort with presenting as a particular gender.

TRANSGENDER OR TRANS: This umbrella term refers to individuals with diverse gender identities that differ from stereotypical norms. This is often used to describe individuals whose gender identity does not match their assigned sex at birth.

NON-BINARY: This term refers to people who feel their gender cannot be defined within the margins of the gender binary.

DEFINITION OF TERMS

CISGENDER: This describes individuals who identify with their sex assigned at birth.

GENDER NONCONFORMING: People may hold this identity if they do not conform to society's expectations as the norm for their gender. People of any gender may identify as gender nonconforming and may or may not identify as trans.

INTERSEX: This term describes individuals whose assigned sex differs from the male-female binary, and there are many ways people can be intersex. This includes but is not limited to: ambiguous genitalia at birth, chromosomal differences, and the presence of two different sets of internal sex organs



Why do these labels/terms matter? For individuals who exist outside the stereotypical gender norms, it is vital to have the language to communicate their identity. These terms can allow these individuals to feel seen and known for the complexity of their identities and experiences.

WHY IS GENDER-AFFIRMING CARE NEEDED IN THE PSYCHEDELIC SPACE?

Psychedelics have the potential to be powerful tools for personal growth and healing, but only if the individual feels comfortable and safe in their environment. Gender-affirming care means that the individual's gender identity is respected and affirmed. This includes using the individual's correct pronouns, using their chosen name, and providing a safe space to explore their identity. It is crucial to create an environment where individuals feel they can be themselves without judgment or discrimination. Psychedelics can be helpful for individuals who are exploring their gender identity, as they can provide a way to access deep parts of the self. They can help bring about insight and understanding and provide a space for healing past trauma. For individuals who are transgender or gender nonconforming, psychedelics can be a way to connect with their true selves and find peace in their identity.

Gender-affirming care is an essential aspect of psychedelic-assisted therapy that is often overlooked. There tends to be a lack of understanding and awareness of the needs of trans and gender nonconforming individuals within the psychedelic community, which can lead to a feeling of isolation and exclusion. Trans and gender-nonconforming individuals often face unique challenges during psychedelic-assisted therapy. This can include feeling uncomfortable in their skin, feeling disconnected from their bodies, and feeling like they are not being seen or heard due to the therapist or facilitator's lack of knowledge about the trans and gender nonconforming experience. In your practice, delivering gender-affirming care can create a safe and supportive environment through which your transgender and gender nonconforming clients can heal.

PTSD AND THE TRANSGENDER COMMUNITY

According to the National Center for Transgender Equality, transgender people are twice as likely to experience PTSD as the general population. This is likely due to the fact that transgender individuals often face discrimination and violence, both from individuals and society as a whole. This discrimination can take many forms, from verbal abuse to physical violence and homicide. Transgender individuals who experience PTSD may have difficulty coming to terms with their identity and may feel like they have to hide who they are to avoid further discrimination and violence. This can lead to a feeling of isolation and loneliness. Additionally, transgender individuals who experience PTSD may have trouble trusting people, making it difficult to form healthy relationships. This is especially true for transgender people of color, who experience higher levels of discrimination and violence than white transgender people.

One of the most important things that psychedelic practitioners can do is to provide a safe and supportive space for their transgender clients. This means creating an environment where the client feels respected and valued, and where they can openly discuss their experiences without fear of judgment. It is also important for psychedelic practitioners to be aware of the unique challenges that transgender people face, such as discrimination, violence, and rejection from family and friends. Knowledge of these unique challenges and characteristics of trauma may help the clinician better understand the content that may come out in psychedelic sessions in different forms. Another key component of working with transgender clients with PTSD is helping them to develop a sense of self-compassion. Many transgender people have a lifetime of experience with self-criticism and shame, and this can be magnified by their experiences of trauma. Therapists can help their clients to start viewing themselves in a more positive light and to develop compassion and understanding for themselves.

“ASSIGNED SEX AT BIRTH” VS. “BIOLOGICAL SEX”

In your practice, it is essential to use respectful, accurate language and to affirm your client's life experiences. One way to do this is to use the term "assigned sex at birth" rather than "biological sex." Biological sex is a term that is often used to refer to a person's genitals, hormones, or chromosomes. Historically, these biological elements have been equated with gender, but gender is a complex and multi-dimensional concept that is not reducible to biology. Especially considering a person's gender can be different from the sex they were assigned at birth, using the term "biological sex" can be dismissive and invalidating for individuals who are transgender or gender nonconforming. Using the term "assigned sex at birth" is more accurate and respectful. It acknowledges that gender is not always binary or straightforward and that a person's gender can be different from the sex they were assigned at birth.

If you are a clinician, it is vital to be aware of your language when discussing a person's gender. Using the term "assigned sex at birth" instead of "biological sex" on intake forms shows that you are knowledgeable about and sensitive to the complexities of gender identity. It also sends a message of inclusion to transgender and gender nonconforming clients because many members of the transgender community take offense to terms like "biological" or "birth" gender since it implies that their identities are less valid than those of cisgender people. Ultimately, this slight change in terminology creates a more welcoming and affirming environment for everyone.

HOLDING SPACE FOR TRANSGENDER AND NONCONFORMING INDIVIDUALS



ACKNOWLEDGE YOUR PRIVILEGE

Privilege is often discussed as something referring to an individual's wealth or racial identity, but it can also refer to people's everyday advantages based on their gender identity. For example, most cisgender people will never have to think about which public restroom to use. In contrast, transgender and gender nonconforming community members must consider this every time they leave the house. Another example is healthcare access - for many trans and gender non-conforming individuals, finding a healthcare provider that is an ally and knowledgeable about trans-specific health issues can be a significant challenge. Therefore, if you want to be an excellent ally to marginalized groups, it is vital to consider how privilege affects your life and those around you.

LISTEN AND AFFIRM

Listen to what your transgender clients say and show them that you understand and support them. When they share instances of discrimination and difficulty in their lives, do not question their interpretation of a situation or comment, and do not downplay any experiences they share. It is crucial to affirm their individual experiences and recognize the effects of oppression in the transgender community. This can include transphobia and discrimination, societal rejection, and microaggressions. A great way to navigate these topics is to invite clients to share regarding these issues, provide support in addressing trauma reactions, and establish healthy coping mechanisms and actions.

USE INCLUSIVE LANGUAGE

Whenever possible, try to start using more inclusive language. It is crucial that when you hear someone use oppressive language, you explain why it is hurtful, offensive, and contributes to oppression. When you use this kind of language, you are not just harming an individual but contributing to a history of subjugation and oppression. Every struggle of a marginalized group has a history, a background of accepted and overt discrimination and violence. By using oppressive language, you add to that experience.



EXAMPLES OF INCLUSIVE LANGUAGE

Exclusive: "That person just dropped his or her phone!"

Inclusive: "That person just dropped their phone!"

Exclusive: "Do you have a boyfriend/girlfriend?"

Inclusive: "Are you dating anyone?" or "Do you have a partner?"

BINARY LANGUAGE TO AVOID

These are examples of expressions that assume there are only two genders.

- Ladies and gentlemen
- Boys and girls
- Men and women of the faculty
- Brothers and sisters
- He or she
- S/he
- Sir/madam



GENDER INCLUSIVE ALTERNATIVES

These are alternatives to use instead of language assuming a gender binary.

Esteemed guests
Friends
That person
Friends and colleagues
Students
Siblings
Everyone
The participant
Faculty members

OUTDATED TERMS TO AVOID AND PREFERRED LANGUAGE

The following terms are examples of preferred language to use when in conversation with a transgender client.

- Instead of "sex change" or "sex reassignment," use "gender affirmation" or "transition care" or "change of gender marker" to refer to medical transition or change of a marker on a document or in a database, depending on the context.
- Instead of "biological man" or "biological woman," use "cisgender man" or "cisgender woman" or perhaps "non-transgender man" or "non-transgender woman."
- Instead of "feminine/female pronouns" or "masculine/male pronouns," use "she/her pronouns" or "he/him pronouns."
- Instead of "preferred gender pronouns," use "personal pronouns."
- Instead of "homosexual," use "gay" or "lesbian."
- Instead of "lifestyle" or "preference," use "orientation" or "identity."

DO YOUR OWN RESEARCH

Do not rely on marginalized people in your life to be your only source of information about their experiences. It can be tiring to keep answering questions, and there are plenty of other resources you can consult, such as libraries, bookstores, and the internet. Here are some suggestions to help you get started:

[Glaad](#)

[PFLAG Reading List](#)

[Human Rights Campaign](#)

EDUCATE OTHERS

Use your knowledge to educate other allies. Offer explanations and resources when someone seems to have misunderstood something or is unintentionally acting disrespectfully. If you hear someone say something oppressive, correct them. Each time you educate someone, it is one less time that a marginalized person has to do it themselves. An easy way to inform others is by simply correcting their speech. As an ally, it is your responsibility to use your privilege to educate others who may be spreading harmful words or information about transgender individuals. This can be done by correcting their speech when you hear them using the wrong pronouns for someone, referring to a trans or non-binary person by a name they used prior to transition, such as their birth name, or saying harmful things. By taking this action, you are helping create a safer and more inclusive environment for all.

REFLECT ON YOUR BIASES

It is essential to reflect on the stereotypes and assumptions you may hold about gender. For example, you might say or do things that can make a person feel excluded or invisible without noticing it. Self-reflection is a great way to check-in with yourself to figure out how you grew to understand gender and gender stereotypes in your life. Some questions to ask yourself are:

- “How have I benefited from sticking to specific gender roles in life?”
- “How have I contributed to reinforcing binary gender expectations?”
- “Were there any times in my life I have wandered from society’s gender expectations and were there any negative impacts?”
- “Do I treat transgender individuals the same as I treat cisgender individuals? If not, what is different?”
- “How have I been expected to behave because of my gender?”



SUMMARY

The tools and guidance above are all necessary to be a good ally: using correct language, being sensitive and aware, calling out others when necessary, and doing the work of self-reflection. You might get appreciation from others, but do not expect it—you are not owed anything just for treating people with respect, even though the rest of the world does not always do that. If you are having a hard time understanding, processing, or coming to terms with something relating to a person in your life, try to get support from other allies rather than the person in question. They are likely going through something even more complex and need you to support them. Reach out to family members, friends, colleagues, or community support groups and try to build a network of other allies you can lean on.

HOW TO REPAIR HARM



It's okay to make mistakes, and when you do, acknowledge them, correct them, and commit to doing better without making excuses. Understand that your impact can be different from your intent. When someone gives you the gift of telling you how you have impacted them, it is an opportunity to be humble and listen, rather than taking up more space explaining your intent.

Harmful: “I’m sorry that I got your pronouns wrong, but it’s so hard to learn because I have known you for so long.”

Helpful: “I’m sorry I used the wrong pronoun. I promise I'll try harder to get it right.”

Harmful: “Well, I remember you as (deadname), so it’s hard for me to switch.”

Helpful: “Thank you for correcting me; I will use your proper name from now on.”

Harmful: “Wow, I would have never guessed you’re trans!”

Helpful: “You look nice today; I like your style!”

HORMONES AND PSYCHEDELICS



As psychedelic-assisted therapies—including those using ketamine, MDMA, psilocybin, and other psychoactive substances—become increasingly available, there is a vital need to understand how these medicines do or do not interact with gender-affirming medical treatment, including hormones and other medication.

After reviewing the research and consulting with medical colleagues, we were unable to find evidence of any clear contraindications or negative interactions between psychedelic medicines and hormone replacement therapy (HRT). For that reason, if an individual is on HRT and is told to globally "stop all medications" before a psychedelic experience, we recommend having more specific discussions with your guide, facilitator, or healthcare provider about the drawbacks of holding these medications and the fact that that they are replacing a hormone that would be endogenous if gender assigned at birth matched one's gender identity. Check with your doctor and your psychedelic facilitator about any hormones you are on and whether they might impact your ability to do psychedelics. If your doctor or facilitator is unsure, please don't hesitate to contact SoundMind at info@soundmind.institute for further consultation. We are also happy to field questions directly from facilitators or healthcare professionals should they need additional support in these psychedelic care decisions.

WE WOULD LOVE TO HEAR FROM YOU!

Do you or someone you know have experience with navigating gender in the psychedelic space? We would love to hear your story!

If you have any questions about this guide or want to share your story, please reach out to:

info@soundmind.institute



At SoundMind, we are dedicated to empowering diverse voices and promoting equity and inclusion. We are proud to be at the forefront of this initiative and are committed to creating a more inclusive community in the psychedelic ecosystem.

ABOUT THE AUTHORS

MAYA FERN, CHT (SHE/HER)



Maya Fern is a queer, trans woman and board-certified hypnotherapist living in Eugene, Oregon. Throughout her life, psychedelics have played a profound role in deepening her understanding of her own identity, inspiring her to empower others in discovering how greatly the subconscious mind shapes our inner and outer worlds. She has a passion for understanding and working with marginalized communities in the psychedelic space and is dedicated to supporting their unique journey in a purposeful, intentional way. Maya is devoted to cultivating a safe and nurturing atmosphere for exploring non-ordinary states of consciousness while fostering acceptance, awareness, and compassion for those seeking to tap into their innate wisdom and connect with their most authentic selves.

HANNAH MCLANE, MD, MA, MPH (SHE/THEY)

Dr. Hannah McLane is a physician, psychoanalyst, and entrepreneur. She is the Founder of SoundMind Institute, a Philadelphia and Oregon-based psychedelic facilitator training and research initiative aimed at bringing ethics, equity and innovation to the psychedelic ecosystem. She is the clinical director of the SoundMind Center, the first psychedelic therapy center in the Philadelphia region, and training director for retreat offerings in Philadelphia, Oregon and Costa Rica. She attended McGill University and holds graduate degrees from Temple University (MA, Communication Sciences, Spanish Concentration), Brown University (MD, Doctor of Medicine, Contemplative Studies Concentration), and Harvard School of Public Health (MPH, Global health and Bioethics). Dr. Hannah identifies as queer, white, able-bodied, neurodiverse, and from a rural background.



GUIDE DESIGNED BY: ROBIN DIVINE & MAYA FERN, CHT WITH
CONTRIBUTIONS FROM: COURTNEY HUTCHISON, LSW MPH