



The British
Psychological Society
Promoting excellence in psychology

Gender Diversity Specialist Register Application

Office Use Only

App/Reg Fee:

HCPC Reg:

Declaration:

Referee:

Date to Reps:

Date Approved:

* Name
* Email address
* Public address
* Website address
Society Membership Number:
HCPC Registration number (Counselling/ Clinical):

PAYMENT

Applications received before 31 August 2019 will not be subject to any application or 1st year subscription fees

You are required to pay **£87** – a one-off, non-refundable assessment fee of **£51** and **£36** for your subscription fee for the register. The subscription fee is an annual fee and must be paid to maintain your entry on the register. We will invoice you each year around the anniversary of your entry to register and therefore this payment may not show on your main Society subscriptions invoice.

Cheque:

Made payable to The British Psychological Society.

Telephone:

Once we receive your application we can provide the number for our automated payment line.

Yes, I'd like to pay by phone (please tick)

Online:

We can provide detail of how to pay online once we receive your application.

Yes, I would like to pay online (please tick)

DECLARATION

I confirm that to the best of my knowledge and belief the information I have given is correct. I have read and understood the competencies & essential knowledge areas and by signing this application, confirm I have the required knowledge and experience to appear on this specialist register and agree to provide evidence of this if asked to by the Society

I acknowledge that I remain bound by the Society's Code of Conduct and Ethics and Member Conduct Rules, which will continue to apply to me.

I am aware that the information given will be made available to the public and confirm that the information provided is true and accurate. In providing the personal information given I agree to the Society processing and holding it only for the purposes set out in our privacy policy which can be viewed at the following link; www.bps.org.uk/privacy-policy. I consent to the above details being published on the Gender Diversity Specialist Register (GDSR).

Signed:

Date: / /

REFEREE'S DETAILS

Your referee must either be a Member of the Society and a senior clinical colleague, e.g., your Head of Department or Clinical Line Manager, OR, your Line Manager or Supervisor who is an appropriately qualified professional. Your referee must be able to attest to your successful practice of psychological science in this field for a period of at least two years since you became eligible for Chartered membership and were registered with HCPC. We do require your referee to sign off each competency and make comments where appropriate.

Referee's Name

Referee's Email Address

Referee's Membership No. (if known)

MEMBERSHIP NUMBER.....

In this section of the application, you are required to demonstrate how each competency has been met (pages 3 – 6). We do not require additional supporting evidence such as project reports, standard operating procedures, or training course attendance certificates, but if you feel they may strengthen your application these will be accepted and reviewed.

IMPORTANT - Please do not include any personal information about individuals.

Competencies	Examples (including hours)	Referees signature and comments
1. 320 total GD patient contact hours (Direct contact or supervision of such contact)		
2. 100 different GD patients (Direct contact or supervision of such contact)		
3. Ongoing monthly supervision with a supervisor who is an Applied Psychologist with appropriate knowledge of Gender Diversity, or the equivalent accredited professional.		

<p>4.</p> <p>50 various CPD hours on GD each year, including direct learning, conferences, academic work, etc.</p>		
<p>5.</p> <p>180 contact hours with GD patients each year</p> <p>(Direct contact or supervision of such contact)</p>		
<p>6.</p> <p>A commitment to obtaining patient feedback</p>		
<p>7.</p> <p>A commitment to engaging with GD people outside of the clinical environment and where there is not a clear power imbalance; this includes both individuals, community groups; advocacy groups, etc.</p>		

<p>8.</p> <p>A commitment to obtaining ongoing appraisal</p>		
<p>9.</p> <p>A commitment to multidisciplinary team working</p>		
<p>10.</p> <p>A commitment to ongoing review and implementation of best evidence-based practice.</p>		

The following knowledge is essential when applying;

- Working knowledge of social and legal rights pertaining to gender and sexuality relevant to gender diversity care.
- Knowledge and critical appreciation of relevant theories of identity and psychosexual development including:
 - Essentialist theories;
 - biological and evolutionary
 - cognitive-behavioural
 - social-learning
 - Post-modernist
 - Social constructionist
 - Feminist and Queer theories
 - Psychodynamic / psychoanalytic
 - Humanist

- A critical appreciation of psychiatric diagnosis and psychological formulation as it pertains to gender and sexual diversity, e.g. with reference to the DCP position statement on Psychiatric Diagnosis.
- Engagement with community literatures including books, blogs, films, etc
- Contemporary professional and commonly used terminology.
- Awareness of the intersections of GD with culture, ethnicity, (dis)ability, physical health, class, and other intersectional areas.
- Awareness of the process of Speech and Language therapy for GD people; including how psychological processes affect that.
- The surgeries available to GD clients including awareness of stages (where relevant), risks/complications and likely psychological sequelae being:
 - Breast augmentation
 - Bilateral mastectomy and associated chest recontouring
 - The various facial feminisation procedures
 - The various facial masculinisation procedures
 - Vaginoplasty
 - Cosmetic vulvoplasty
 - Orchiectomy
 - Clitoroplasty
 - Penectomy
 - Metoidioplasty
 - Phalloplasty
 - including erectile prosthesis
 - Knowledge of the various donor sites
 - Urethroplasty
 - Cricothyroid approximation
 - Laryngeal shave
- The medicines available to GD clients including awareness of major risks, effects and likely psychological sequelae being:

Oestrogens

- Oral Preparations;
 - Oestradiol Valerate (Progynova or Climaval),
 - Oestradiol Hemihydrate (Elleste Solo or Zumenon),
 - Premarin,

- Ethinylestradiol,
 - Phytoestrogens and associated preparations
- Topical preparations;
 - Patches
 - Oestradiol (as hemihydrate) -Estradot
 - Oestradiol - Evorel
 - Gel (Sandrena)
- Oestrogen implants

Androgens

- Testosterone injections
 - Enantate
 - Sustanon
 - Nebido
- Testosterone patches
- Testosterone gel
 - Testogel
 - Testim
- Testosterone implant

Hormone blockade

- GnRH α Analogues
 - Goserelin/Zoladex implant
 - Decapeptyl injection
- Cyproterone Acetate
- Spironolactone

- The reproductive consequences of the physical interventions available and the options for gamete storage and assisted fertility.
- Hair removal by both laser and electrolysis and their use on the face, body, and genitals.
- Psychological appreciation of current diagnoses pertaining to GD clients and the issues surrounding the use of these including at present (and any revisions or additions in future editions):
 - (DSM 5) Gender Dysphoria in children
 - (DSM 5) Gender Dysphoria in Adolescents and Adults
 - (DSM 5) Other specified Gender Dysphoria
 - (DSM 5) Unspecified Gender Dysphoria
 - (DSM 5) Transvestic Disorder
 - (ICD 10) Transsexualism
 - (ICD 10) Dual-role transvestism
 - (ICD 10) Gender identity disorder of childhood

- (ICD 10) Other gender identity disorders
 - (ICD 10) Gender identity disorder, unspecified
 - (ICD 10) Multiple disorders of sexual preference
 - (ICD 10) Other disorders of sexual preference
 - (ICD 10) Disorder of sexual preference, unspecified
 - The forthcoming ICD 11 Diagnoses – including the likely diagnosis of Gender Incongruence
- Psychological appreciation of current diagnoses associated with working in the area of sexuality and gender more broadly and the issues surrounding the use of these, including:
 - Disorders of sexual preference
 - Paraphilias
 - Body dysmorphic disorder
- Knowledge of Intersex or Disorder/Diversity of Sexual Development conditions including:
 - Klinefelter's
 - Turners syndrome
 - Mosaicism
 - Androgen insensitivity syndrome
 - Congenital adrenal hyperplasia
- Awareness/knowledge of medical issues such as
 - Polycystic ovarian syndrome
 - Importance of general health such as BMI, fitness, smoking cessation, etc.
- Knowledge and skills in the assessment and management of common, severe and enduring mental distress including the prevention and management of suicide and deliberate self-harm.
 - An ability to formulate gender related distress in the context of common, severe and enduring mental distress and/or neurological differences including:
 - Accommodation and adaptation of usual practice
 - Assessment of risks
 - Making recommendations and providing appropriate care between gender specialist and mental/physical healthcare services.
 - Ability to manage these and work in a multi-disciplinary/multi-agency setting
 - Knowledge of psychotropic medication such as antipsychotics and antidepressants, their psychological sequelae and their specific interactions with GD conditions.

- Knowledge and competence working cross culturally, including an appreciation of intersectionality of experience and the multiplicity of expressions of gender and sexuality.
- Knowledge and experience of assessing capacity under the Mental Capacity Act, 2005, including updated and regional acts pertaining to these matters; and awareness and commitment to adjusting communication for those with Learning Disabilities or receptive or expressive language difficulties.
- Knowledge and competence in understanding the impact of, and working with, professional systems, employers/educators, families, partners and carers as it pertains to GD.

- Knowledge of the following tests and evaluations as they pertain to GD people
 - The Ferriman-Galloway score for hirsutism
 - Tanner Stages
 - Oestradiol levels
 - Testosterone levels

- Knowledge of the diversity of sexual practices and identities including:
 - BDSM
 - Heterosexual
 - Gay male
 - Lesbian
 - Bisexual
 - Fetishes
 - Asexual
 - Pansexual
 - Trans related fetishism

- Polyamory/ethical non-monogamy

- Knowledge of the diversity of Gender practices and identities including:
 - Cisgender female
 - Cisgender male
 - Trans female
 - Trans male
 - Genderqueer/non-binary
 - Gender neutral/agender
- Knowledge of contentious areas in this field including:

- Behavioural Classification and Psychiatric Diagnosis
- Autogynephilia/autoandrophilia
- Knowledge of the unacceptability of conversion and reparative 'therapy' practices
- Knowledge of the arguments for an informed consent approach and the issues around treatment on demand models
- Legal matters pertaining to GD people including:
 - The Gender Recognition Act 2004
 - The Gender Recognition (Disclosure of Information) (England, Wales and Northern Ireland) Order 2005
 - The Single Equality Act 2010
- Current guidelines for assisting GD people including:
 - NHS England (2013). Interim NHS England Gender Dysphoria Protocol and Service Guideline 2013/14.
 - NHS England (2014). SSC1417 - Primary Care responsibilities in relation to the prescribing and monitoring of hormone therapy for patients undergoing or having undergone Gender dysphoria treatments.
 - Royal College of Psychiatrists (2013). CR181 - Good practice guidelines for the assessment and treatment of adults with gender dysphoria.
 - World Professional Association for Transgender Health (WPATH). (2011). *Standards of Care for the health of transsexual, transgender and gender nonconforming people* (7th ed). Minneapolis, MN: WPATH.

Demonstration of the following skills:

- Affirmative approach to GD
- Cultural sensitivity relating to GD
- The ability to differentiate practice from identity
- The ability to elicit a full general, and psychosexual, history
- Formulation with GD clients
- Psychotherapy with GD clients
- Adaptation of psychometrics to GD clients where used
- Assessment of GD clients for surgery on psychological grounds
- Assessment of GD clients for hormone blockade and/or cross sex hormones on psychological grounds
- Differentiation of GD from other conditions including, but not limited to mental health conditions; fetishism; Autistic Spectrum Conditions; erotic arousal as a driver for transition; trauma; and psychosis.
- Ability to recognise GD in clients with frequently co-occurring conditions such as Intersex conditions, Autistic Spectrum Conditions, trauma, fetishism, mental health conditions, and a good understanding of how those conditions manifest in GD clients
- Ability to work in a multidisciplinary team.