Assessment of Gender Dysphoria

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Disclosures

• I have no financial relationships to disclose or conflicts of interest to resolve
Gender Dysphoria in Children

DSM-5 302.6 (F64.2)

A. A marked incongruence between one’s experienced/expressed gender and assigned gender, of at least 6 months’ duration, as manifested by at least six of the following (one of which must be Criterion A1):
   1. A strong desire to be of the other gender or an insistence that he or she is of the other gender (or some alternative gender different from one’s assigned gender)
   2. In boys (assigned gender), a strong preference for cross-dressing or simulating female attire; or in girls (assigned gender), a strong preference for wearing only typical masculine clothing and a strong resistance to the wearing of typical feminine clothing
   3. A strong preference for cross-gender roles in make-believe play or fantasy play
   4. A strong preference for the toys, games, or activities stereotypically used or engaged in by the other ender
   5. A strong preference for playmates of the other gender
   6. In boys (assigned gender), a strong rejection of typically masculine toys, games, and activities and strong avoidance of rough-and-tumble play; or in girls (assigned gender), a strong rejection of typically feminine toys, games, and activities
   7. A strong dislike of one’s sexual anatomy
   8. A strong desire for the primary and/or secondary sex characteristics that match one’s experienced gender

B. The condition is associated with clinically significant distress or impairment in social, school, or other important areas of functioning

Specify if: With a disorder of sex development (e.g., a congenital adrenogenital disorder)
Gender Dysphoria in Adolescents & Adults

DSM-5 302.85 (F64.1)

A. A marked incongruence between one’s experienced/expressed gender and assigned gender, of at least 6 months’ duration, as manifested by at least two of the following:
   1. A marked incongruence between one’s experienced/expressed gender and primary and/or secondary sex characteristics (or in young adolescents, the anticipated secondary sex characteristics)
   2. A strong desire to be rid of one’s primary and/or secondary sex characteristics because of a marked incongruence with one’s experienced/expressed gender (or in young adolescents, a desire to prevent the development of the anticipated secondary sex characteristics)
   3. A strong desire for the primary and/or secondary sex characteristics of the other gender
   4. A strong desire to be of the other gender (or some alternative gender different from one’s assigned gender)
   5. A strong desire to be treated as the other gender (or some alternative gender different from one’s assigned gender)
   6. A strong conviction that one has the typical feelings and reactions of the other gender (or some alternative gender different from one’s assigned gender)

B. The condition is associated with clinically significant distress or impairment in social, occupational, or other important areas of functioning

Specify if: With a disorder of sex development (e.g., a congenital adrenogenital disorder)

Specify if: Posttransition: The individual has transitioned to full-time living in the desired gender (w/ or w/o legalization of gender change) and has undergone (or is preparing to have) at least one of the cross-sex medical procedure or treatment regimen – namely, regular cross-sex hormone treatment or gender reassignment surgery confirming the desired gender
Diversity
Standards of Care
Assessment

- Pronouns/preferred name
- Tone of affirmation and kindness
Gender History

- Plans/wishes
  - Possibilities and limitations
- Early childhood memories
- Puberty (if applicable)
- Coming out (if applicable)
- Relationship now with their body
- Response to transition efforts
Gender History

• “Transgender children typically consistently, persistently, and insistently express a cross-gender identity and feel that their gender is different from their assigned sex.” - APA Fact Sheet: Gender Diversity and Transgender Identity in Children
Questionnaires

• Utrecht Gender Dysphoria Scale – Gender Spectrum
  – I wish I had been born as my affirmed gender
  – I feel unhappy because I have the physical characteristics of my assigned sex
  – It feels good to live as my affirmed gender
  – Puberty felt like a betrayal

• Gender Affirmative Lifespan Approach (GALA™) – University of Minnesota Medical School Institute for Sexual and Gender Health
Questionnaires

• Gender Identity/Gender Dysphoria Questionnaire for Adults and Adolescents (GIDYQ-AA)
  – have you felt satisfied being a girl?
  – have you felt pressured by others to be a girl, although you don't really feel like one?
  – have you felt uncertain about your gender, that is, feeling somewhere in between a girl and a boy?
  – have you had the wish or desire to be a boy?
  – at work or at school, have you presented yourself as a boy?
Other Areas of Focus

• Common comorbidities
  – Depression
  – Anxiety
  – Suicidal Ideation & Self-harm
  – Oppositional Defiant Disorder
  – Autism Spectrum Disorder
  – Substance abuse

• Adolescents are particularly vulnerable

(Becerra-Culqui TA, Liu Y, Nash R, et al. Mental health of transgender and gender nonconforming youth compared with their peers. Pediatrics. 2018;141(5):e20173845; María Paz-Otero, MD, Antonio Becerra-Fernández MD, PhD, Gilberto Pérez-López, MD, PhD and Domingo Ly-Pen, MD, PhD, 2021)
Other Areas of Focus

• Increased risk of violence
• Increased risk of sexual assault
• Protective factors
Psychotherapy

• “Psychotherapy (individual, couple, family, or group) for purposes such as exploring gender identity, role, and expression; addressing the negative impact of gender dysphoria and stigma on mental health; alleviating internalized transphobia; enhancing social and peer support; improving body image; or promoting resilience.” – WPATH

• Address comorbid concerns