



Neurodivergence and Gender Diversity

This resource will:

- Describe some of the experiences and barriers to accessing mental health and medical care for trans and gender diverse people with divergent neurotypes (neurodivergent)
- Outline why it is important for clinicians to use gender affirming and neuro-affirming practice for neurodivergent trans and gender diverse clients
- Invite workers supporting neurodivergent trans and gender diverse clients into practical ways to respond and provide support

Research and practice suggest that there is a high co-occurrence of trans and gender diverse people who are neurodivergent (have brains which process, learn, sense and socialise in ways which diverge from typical expectations). Both neurodivergent and trans and gender diverse clients have specific and particular care and support needs which clinicians can meet by adopting both a gender affirming and neuro-affirming approaches. Refer to [Guidesheet 1](#) for more information on gender affirming care.

Understanding the story

Clients whose gender identity and neurotype diverge from expected norms can face both transphobia (stigma or discrimination against trans people) and ableism (stigma or discrimination against people with a disability) when seeking mental health care. This could look like inherent parts of a client's identity being pathologised or clinicians assuming that a client's gender identity is 'caused' by their neurodivergence, or vice versa, without any evidence base.

All clients have the right to receive accurate treatment information and the ability to provide informed consent. Trans and gender diverse neurodivergent clients can experience delays to or denial of their medical gender affirming care due to workers' lack of confidence with informed consent processes, or ableist beliefs about a neurodivergent client's ability to provide informed consent.

Neurodivergent trans and gender diverse people can also face barriers in accessing appropriate support due to the mental health system treating both gender diversity and neurodivergence as "specialised" areas of practice. This makes it harder to find holistic care that incorporates both these parts of someone's identity concurrently. To improve mental health outcomes for neurodivergent, trans and gender diverse clients, clinicians should adopt varied care approaches which centre the client's unique needs.

Tips for adopting a gender affirming and neuro-affirming practice

- Design approaches and environments which assume diversity of neurotypes and genders as the norm
- Consider ways your service can tailor itself for different communication, learning and sensory profiles
- Be explicit about the different approaches that are available to clients and avoid using broad terms that don't capture this specificity, eg. rather than 'person centred approach', try explicit introductions such as, 'I support people of all genders and neurotypes'
- Critically reflect on the current client journey and acknowledge existing barriers for neurodivergent and trans and gender diverse clients
- Practice using language that de-centres neurotypical experiences as the norm
- Consider somatic and expressive, e.g. art or play-based, interventions
- Offer choice and control over environmental elements of the service that could make the client's experience more manageable, e.g. lights, temperature, sound, pace.
- Offer a sensory "check in" during the service and co-create a sensory toolkit with the client

More tips:

- Use strengths-based and affirming language about the clients' intersecting identities rather than viewing them as a problem to solve
- Normalise using Alternative and Augmentative Communication (AAC) tools in the service, e.g. key word sign, visuals, communication apps
- Avoid making assumptions or conclusions about a client's intersecting identities and create space for them to reflect, find meaning and share if and when they choose



A non-affirming clinician says:

"I'm trained as a talk-based therapist, so if you're not ready to talk, that's okay, we can be in silence."

"I like to use essential oils in the counselling room and prefer to keep the doors and windows closed so there's little background noise."

"It seems like the doctor has concerns about your understandings of the risks of undertaking gender affirmation."

"It makes sense that rigid gender rules don't fit for you, because it seems like lots of social rules don't work for you"



An affirming clinician says:

"I work with clients who have a variety of ways of engaging in the counselling process. In our work, we can be in person or on Zoom, write, talk, watch clips, meditate, have quiet time, draw, gesture or role play. There are many options for how we work together."

"Would you be open to starting with a sensory check in together? Please let me know how you would like the lighting, air, smells, sounds, temperature, etc., and we can adjust."

"I am happy to advocate with you to access gender affirming care. I believe that you know what is best for you and you can work with medical professionals to help you understand the risks and benefits involved with any kind of decision making."

"The barriers that you're facing are due to transphobia and ableism. Your gender identity and neurotype are not wrong. They are both important parts of you."



Twenty10 is an LGBTQIA+ organisation based in Sydney that provides young people with housing, counselling, and social support across NSW.

This resource is part of Safe and Affirmed Guidesheets, a series of five resources created by Twenty10 for clinicians and youth mental health workers. **scan the QR code.**

Twenty10 delivers LGBTQIA+ inclusivity training to workplaces and schools. [Click here to learn more.](#)

