Elizabeth Rachel Barry

Opinion

Elizabeth Scanlan and Rachel Barry on how they developed a quality local service for trans and non-binary clients

Our journey to becoming trans allies



ILLUSTRATION BY Tim Biddle

e are communitybased SLTs whose caseload includes providing a voice service across the Southport and Formby areas of England.

During 2018 we noticed a significant increase in the number of referrals we received for transgender individuals who needed support with their voice and communication. As this was an area neither of us had much clinical experience in, our first thought was to look for any local specialist services better placed to support this new caseload. This led to us make contact with Dr Sean Pert from the University of Manchester, who has a specialist interest in transgender voice and communication.

Our initial plan to refer our caseload over to Sean was met with a "nice try". Instead, he supported us to realise that we should not view the therapy needs of this group as exclusively 'specialised' and that SLTs should feel confident to offer this service as part of a voice outpatient clinic. Many trans and non-binary clients face barriers attending services outside their locality. These include practical difficulties, such as funding, and emotional difficulties, such as anxiety when travelling via public transport due to high levels of transphobia.

Clients with complex needs may still require more support this is available via discussion with the National Transgender Voice and Communication Therapy CEN, supervision from more specialist colleagues and RCSLT advisers, or referral to specialist national centres in the

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form of gender identity clinics. Sean works in partnership with the LGBT Foundation (visit **lgbt.foundation**) and delivers voice and communication workshops for trans and nonbinary individuals. Led by Sean, SLT volunteers and students, the workshops are intensive group weekend events in Manchester and are open to people UK-wide.

In September 2018, Sean invited us to attend a trans-awareness course and assist him with running the workshop. Eighteen trans and non-binary individuals took part. It provided a mixture of one-to-one and group therapy, and focused on supporting people to make changes to their voice pitch, resonance, articulation style, use of language and non-verbal communication. The group format also provided a great opportunity for peer support.

Attending the course and training has had a positive influence on our clinical practice. On returning to work we were keen to share our experiences. Eager to raise awareness of the issues facing trans and non-binary people, particularly in accessing healthcare, we delivered in-service training sessions to the wider teams we work with, promoting the important impact we can all have by being 'trans allies'.

We now have increased confidence in working with trans and non-binary people and recognise that a 'specialist service' is not always necessary. We have developed our clinical skills in supporting individuals to make changes to their voice and communication as part of our general voice outpatient clinic, and have created resources and leaflets to use with this group.

During therapy we encourage the use of technology and visual feedback to support individuals to self-manage and monitor their own voice production, with the use of apps that monitor pitch and volume. To evidence our skills we are in the process of completing the RCSLT *Trans and gender diverse voice and communication framework.*

We are delighted that trans and non-binary clients can now access a quality service locally. We hope this article will inspire other SLTs to reconsider the myth that voice and communication work with this client group is a 'specialism', and in doing so help to remove barriers this population faces in accessing local speech and language therapy services.

Elizabeth Scanlan and Rachel

Barry, SLTs, Lancashire and South Cumbria NHS Foundation Trust Email: elizabeth.scanlan@ lancashirecare.nhs.uk and rachel. barry@lancashirecare.nhs.uk

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