



Online Voice and Communication Change Groups for Trans and Non-Binary People

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Online Voice and Communication Change Groups for Trans and Non-Binary People

Abstract

Trans and non-binary people face multiple barriers in accessing gender affirming services, including voice and communication change (VCC). These include prolonged waiting times and a lack of access to services delivered locally (Cheng, 2020; Ellis et al., 2015). The absence of a gender service in Greater Manchester, a home to a sizeable LGBTQ+ community, resulted in significant health inequalities for the trans community. NHS England commissioned the Indigo Gender Service in Greater Manchester, one of three new primary care services. These were launched virtually due to the pandemic.

The VCC team comprises three speech and language therapists (SLTs). The team aims to empower service users to discover their authentic voice, reflecting their gender identity and sense of self. Previous research has demonstrated that in-person group intervention and working with students is acceptable and effective (Pert, 2020). Translating this success into an online format is essential to service delivery during the pandemic due to the heightened risk of COVID-19 transmission via aerosol generation (Castillo-Allendes et al., 2020). Benefits of online delivery to the trans community have been identified, such as eliminating travelling costs and time. These benefits will be retained in the future.

The VCC service provides an innovative group therapy model. This includes workshop elements sandwiched with small group breakout activities. Support is delivered by volunteer students and qualified SLTs, trained and supervised by the VCC team. Service users can access videos of exercises online between sessions as part of home practice. Due to the increasing demand for VCC and paucity of SLTs trained in this field (Cheng, 2020), the team endeavours to upskill our profession to address this long-term workforce challenge. Volunteers may participate remotely online, regardless of their geographical location.

The Indigo Gender Service is co-produced with the trans community. The VCC team consults with the Co-Production Group to ensure that the needs of service users are met in a culturally sensitive manner. The Co-Production Group advised that accessible multimedia self-help resources be made available for home practice. For example, subtitled videos of exercises have been made available on the service's website. These resources increase trans and non-binary people's autonomy and confidence in VCC (Cheng, 2020).

Service users completed VCC groups of six two-hour sessions over a three week period. Detailed feedback was collected from service users at an outcome appointment. Service users found the online format acceptable and valued input from students. During outcome appointments two weeks after intervention, service users showed progress towards achieving their individual VCC goals. They are invited to VCC self-help groups, empowering service users to continue to develop and sustain authentic voice.

Evaluation of VCC online groups supports previous findings that group intervention involving students is an acceptable and effective therapy option for trans individuals. The team will report this service delivery model in relation to gender identity (trans men, trans women, and non-binary service users). Service improvement suggestions incorporated to date include peer-to-peer interaction opportunities, exploration of cisheteronormativity, and development of e-learning resources to free up time for further workshop activities.

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