

### Exploring Gender Identity with a Photo Diary

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**Section:** Section I: Homework, Handouts, and Activities for the Coming Out Process and  
Identity Exploration

***Type of Contribution:*** Homework/Activity

#### ***Objective***

This activity is designed to open a dialogue with clients about their gender identity. By exploring the ways in which they visualize their bodies and express their gender, clients will increase awareness of how their gender is enacted in their lives. This activity will also help clinicians understand how their clients conceptualize their gender.

#### ***Rationale for Use***

Gender identity is an abstract component of one's identity, yet a person's physical appearance can be a significant source of anxiety and dysphoria or acceptance and integration (Devor, 2004; Kinney, 2017b). Distinct from individuals' sex assigned at birth, gender identities refer to the internal sense of self (Catalano & Shlasko, 2010; Kinney, 2017b). The social construct of gender identity, however, has been predominantly understood as a continuum or dichotomy of masculinity and femininity (Risman & Davis, 2013). The binary (exclusively male or female) conceptualization of gender has more recently been dismantled due to its oppressive nature and replaced by multi-dimensional constructs of gender that include more fluid and creative gender identities (Burdge, 2007). According to Butler (1990), gender is a performative act with a basis that lies in socialization, whereas sex is a biological categorization of male,

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female, or intersex according to scientific indicators including external genitalia, gonads, internal reproductive organs, and sex chromosomes (American Psychological Association, 2012).

Understood in this way, gender classifications must move beyond the idea of crossing the gender binary and into an arena that includes an infinite number of possible gender expressions through myriad modalities (e.g., dress, speech, choice of career, etc.). While some gender diverse people accept the binary, others reject the binary and consider it problematic (Budge, Kinton Rossman, & Howard, 2014). Thus, the concept of gender must be expanded to include dynamically fitting outside, within, around, and intertwined within the gender binary (Kinney, 2017b) as the most important factor is being seen for one's authentic self (Devor, 2004).

Given the complexity of how individuals understand their gender identities, guides to working with individuals who identify as gender diverse suggest that the clients must be free to express their gender in any manner they choose without fear of repercussion from professionals (Ehrensaft, 2016). Failure to allow this freedom to clients can be stigmatizing and harmful, whereas providing a safe and affirming environment can assist clients in charting their own unique gender path (Hidalgo et al, 2013). Despite improvements in attitudes towards sexual and gender minorities among social work faculty and students, bias and heteronormativity persist, creating barriers to services and poor overall quality of experience for LGBTQ clients (Chonody & Smith 2013). Craig, Dentato, Messinger, and McInroy (2016) found that social work students may not be prepared to work with LGBTQ clients due to, limited LGBTQ content in undergraduate and graduate social work classes, lack of support for LGBTQ people including experiencing or witnessing homophobia, and minimal awareness of non-discrimination policies.

According to research by Beemyn and Rankin (2011), the strict gender roles forced upon transgender and non-binary individuals assigned male at birth as well as a lack of role models

and media presentations of individuals outside of the gender binary hampers the ability of many individuals to fully explore and develop their gender identities. While these individuals reported mostly conforming to socially designated gender roles and repressing their expression of their gender identity to protect their physical and psychological safety, for some the ability to experiment socially on occasions, such as Halloween, allowed them to begin to understand their inner feelings. Once they became more comfortable with their gender identity and felt able to express it publicly, they noted improvements in their psychosocial health. In all, this research demonstrates that exploring gender and/or gender expression is a healthy process and necessary for the overall wellbeing of individuals who identify as non-binary.

This exploration or modification of gender and/or gender expression can take many forms, ranging from temporary changes such as clothing, hair style, body hair (growth or shaving), breast binding, and prosthetics (e.g., packers, breast enhancing inserts) to permanent modifications such as gender confirmation surgery or hormone replacement therapy (Beemyn & Rankin, 2011). As individuals work to understand what type of expression is most representative of their gender identity, they may experience periods of more positive or more negative emotions and may wish to explore these within a therapeutic environment. Documentation of variations in gender expression through photography is a creative approach to helping clients reflect on the evolution of their gender expression and assist with the healthy development of their gender identity.

Photo diaries have been used in research and therapy with a variety of groups, including intensive care patients (Ewens, Hendricks, & Sundin, 2015), older adults with mobility challenges (Swallow, Petrie, Power, & Edwards, 2015), and parents and children receiving medical treatment (Hartman, Bena, McIntyre, & Albert, 2009). Furthermore, this method has

been used internationally in Italy for community phototherapy (Parrella & Loewenthal, 2013), in New Zealand exploring sexual cultures among secondary students (Allen, 2011), and in Australia and New Zealand to examine representation of cultural identities in media (Denny, Sunderland, Smart, & Christofi, 2005). In San Francisco, visual-narrative approach used photography and interviews to elicit the "gender stories" of transsexuals (Barbee, 2002, p. 54). This research found that for persons whose gender expression was outside of mainstream gender roles, being seen was important and their process of expression was often documented and confirmed with photography, "‘Photographs don’t lie,’ and the self-portrait acts as a blueprint of the transsexual individual in transition, making the transsexual’s gender real" (Barbee, 2002, p. 59). In this way, photography can empower clients to communicate their gender as they want to be seen.

This photo diary activity applies several well-established methods; namely, native photography (Blinn & Harrist, 1991), photo elicitation (Banks & Zeitlyn, 2015; Smith, 2016), and a photo diary (Chaplin, 2011). Photography allows individuals to artificially create an environment in which they feel comfortable and to put this environment on display for others. When used to explore identities, photo-elicitation interviews allow photographers to introduce the observer to aspects of their identity that might be overlooked in dynamic interactions while simultaneously contextualizing the experience and the motives surrounding creating the image (Croghan, Griffin, Hunter, & Phoenix, 2008); in other words, photographic interpretation is a collaborative exercise between the photographer and the observer in which they interact to create a more nuanced understanding of the subject and their presentation (Evans, 1999). Photography is an ideal venue for exploring something as intimate as individuals’ gender identities as it can act as a safe barrier between an experience and the discussion of it, as well as aiding in the

articulation of private thoughts and experiences that might otherwise not be revealed (Noland, 2006).

Photo diaries are a particularly useful technique for understanding visual transitions of time. When used chronologically, photographs can create an auto ethnographic document that allows individuals to speak in intimate, natural, and familiar tones to others who might not otherwise have access to their internal world (Chaplin, 2011). Individuals can use them to write complex stories highlighting periods of growth, change, or settlement. In this way, they can be part of a powerful dialogue that occurs during the identity development process, especially when the process partially occurs during discussions with others. Further, as a personal document, photo diaries can create an environment fully inclusive of individuals' culture, race, ethnicity, and other intersecting identities. This holistic approach is most effective when used repeatedly.

"How might all of our lives carry borders with them, wherever they go, wherever they remain - borders of class, ethnicity, nationality, language, gender?" (Susan Stryker as cited in Arnal, 2014, p. 11). People with multiple marginalized identities experience simultaneously evolving identities while traversing oppressive landscapes. According to Meyer's (2003) Minority Stress Model, mental health problems are caused and/or exacerbated by the stratified effects of oppression that "create a hostile and stressful social environment" (p. 674). Of importance to mental health is not only minority stress, but how it is modified by the way individuals process this stress (Meyer, 2003). When working with clients who identify as sexual and/or gender minorities, additional consideration needs to be given for each of the person's identities and their interactions, both as a tension and a resilience.

When working with transgender people of color, Singh and McKleroy (2011) note the importance of understanding their resilience and how it may have helped them navigate

challenges related to race and ethnicity in addition to gender identity. They found the key components of resilience for transgender people of color to be (a) a pride in one's gender and ethnic/racial identity; (b) an ability to recognized racial/ethnic and gender based discrimination, (c) acceptance by family or origin; (d) access to affirming health care and financial stability to secure treatment; (e) connection with a community of transgender people of color and activism/advocacy for transgender rights; and (f) spirituality and a maintained hope for the future. Several suggestions for practitioners were presented including self-assessing bias and knowledge of transgender people of color, creating of safe space (inclusive brochures, literature, and magazines and all gender bathrooms), explicitly stating of commitment to address racism, heterosexism, transphobia, etc., and advocacy to decrease social stigma and increase access to affirming health care and employment (Singh & McKleroy, 2011).

For affirming care, practitioners need to integrate understanding of intersectionality into their practice (Grafsky & Nguyen, 2015). An understanding of intersectionality requires knowledge of how oppression affects peoples' lives through stigma, prejudice, discrimination, macroaggressions (harmful legislation), microaggressions, heteronormativity, cisnormativity, internalized homophobia, and internalized transphobia. Laws and policies have strong influence on individuals who identify as sexual and/or gender minorities and their families; current awareness of legal protections and risks is essential to this work, especially when working with families that consist of individuals who identify as sexual and/or gender minorities who may be consider marriage and/or adoption (see Lambda Legal for current legislation and status of legal protections). As the literature on resilience has shown the importance of community support and access to healthcare, practitioners must possess knowledge of local resources for individuals who identify as sexual and/or gender minorities (e.g., community centers and affirming churches,

housing, and healthcare providers (Asakura & Craig, 2014; Kinney, 2017a; Orel & Fruhauf, 2015; Singh, 2013; Signh & McKleroy, 2011). Practitioners can provide affirming care by increasing awareness of surrounding infrastructures, educating themselves on current literature related to sexual and/or gender minorities, and seeking professional training within this area (Grafsky & Nguyen, 2015).

Most mental health organizations have established guidelines and best practices for working with transgender and gender diverse clients, among them the National Association of Social Workers (NASW), the American Counseling Association (ACA), and the American Psychological Association (APA). Professional guidelines and codes of ethics provide an imperative framework from which practitioners guide their inclusive and affirming work and navigate ethical decision-making.

In the 2008, the revision of the *NASW Code of Ethics* included the addition of the *gender identity or expression* among protected category for explicit inclusion (Reamer, 2013). Of the core social work values, most relevant when working with gender diverse clients are the core values of services, social justice, dignity and worth of the person, and competence. In accordance with the professional code (NASW, 2008), social workers are mandated to practice with respect towards individuals (2.01) and cultural competency (1.05), which includes attention to all forms of diversity, including sexual orientation and gender identity. Further, social workers must fight discrimination in all arenas (4.02), advocate in social and political action (6.04), and report social workers for incompetent practice (2.10) and unethical conduct (2.11). Burdge (2007) offered advice for social workers working with transgender clients that can be expanded to all therapists working with gender diverse clients – recognize that affirmative care includes awareness that (a) gender diverse persons are an oppressed population, (b) the gender binary

reinforces harmful social constructs of gender, and (c) queer theory and social constructionism can aid in understanding gender.

The value of diversity is similarly infused throughout the ACA *Code of Ethics* (ACA, 2014). It states a need for practitioners to develop cultural sensitivity (A.2.c), to not discriminate (C.5), and to advocate for their clients (A.7.a.). Additionally, diversity is highlighted in assessment (E.8) and for faculty (F.11.a), students (F.11.b), and competent content in counseling education (F.11.c.). For frameworks to guide practice with specific populations, the ACA's Association for Lesbian, Gay, Bisexual, and Transgender Issues in Counseling (ALGBTIC) published the *ALGBTIC Competencies for Counseling Transgender Clients* (ALGBTIC, 2009) and the *Competencies for Counseling with Lesbian, Gay, Bisexual, Queer, Questioning, Intersex and Ally Individuals* (Harper et al., 2013).

Finally, the American Psychological Association's (APA) *Ethical Principles of Psychologist and Code of Conduct* specifically notes sexual orientation and gender identity under Respect for People's Rights and Dignity (Principle E), boundaries of competence (2.01), unfair discrimination (3.01), and harassment (3.03) (APA, 2016). Additionally, the APA published the *Report of the Task Force on Gender Identity and Gender Variance* (APA Task Force on Gender Identity and Gender Variance, 2009) and *Guidelines for Psychological Practice with Transgender and Gender Nonconforming People* (APA, 2015) as well as established the APA Division 44 to focus on sexual orientation and gender identity. Prior to using the activity, it is recommended to review the professional codes and guidelines noting the expectations and boundaries of practice in one's profession. The photo diary activity was designed to ethically explore gender identity in a manner that empowers clients and values diversity while easily adapted to meet the circumstances and needs of the client and practitioner.



***Instructions***

A photo diary can be introduced when gender identity emerges in the therapeutic conversation. Throughout long-term treatment, this activity can be used repeatedly to assess changes in perception and appearance. Later iterations could review the previous photos and summary of remarks, reflecting upon the internal and external changes. This activity can be beneficial for a diversity of clients exploring their gender identity and other identities that are outwardly expressed. Clinicians should note unique cultural and environmental influences. In addition to individual therapy, this activity can be used to increase understanding of the gender identity of loved ones during couples and family therapy.

The structure of the photo diary can be simplified (e.g., self-portrait only) or made more intricate by adding additional components (e.g., multiple self-photos, environmental photos, and more in-depth narratives) depending on the readiness and ability of each client. The instructions include the basic design followed by variations as an alternative to or in addition to the basic design. While this assignment requires some technology for taking photographs, the images can be collected by a film or digital camera, including a cell phone. Note: Clients may use graphic representations of themselves if they do not have access to a camera or feel uncomfortable with taking pictures of themselves. In particular, it may be more appropriate to use drawings with children. Ask the client to photograph a picture of themselves and follow the steps below:

1. Instruct the client to take a self-portrait of themselves
2. At the next session, have the client bring the photograph (printed or digital) with a title for the self-portrait and/or a brief narrative.
3. At the start of the next session, ask the client to show you the photo and inquire about the story behind it. Prompts may include:

- a. What does your portrait photo say about you?
- b. What does the title mean to you?
- c. Would you tell me about the clothing you chose for this photo?
- d. How do you feel when looking at this photo of yourself?
- e. What do you like about this photo of you?
- f. Is there anything about this photo that makes you feel uncomfortable?
- g. Is there something missing in this photo that you would have liked to be able to portray?
- h. What emotions are being shown in this picture? Were these intentional?
- i. What do you want others to think when they see you as you are in this photo?

During this process, it is important to mirror the language used by the client. The therapist should note the pronouns used by the client, including whether they speak of the individual in the portrait using first person or third person language. The client will likely give cues to the ways they interpret their own gender, and the therapist should utilize this language in later interactions with the client. It is essential that therapists utilize language that is comfortable to the client. If you are unsure of what language the client would prefer you use, ask them directly – this will not only help you but it may also help them to consider how they want others to refer to them.

Therapists must also monitor the client for signs of dysphoria during this exercise. These feelings may be apparent through the language used, particularly if the client seems to be trying to force themselves into an idealized gender role. If the activity is causing significant emotional discomfort or provoking an intensely negative reaction, it should be stopped immediately and the therapist should work with the client to process their emotions.

4. This exercise should be repeated every one to three months, with the pictures being saved for future reference. After the initial time, clients should be asked to write a brief two to three sentence narrative about any changes in their identity that they feel have occurred in the preceding time period. These narratives should be reviewed with the client during the photo elicitation process to aid the client in discussing their journey toward understanding their gender identity. As the exercise is repeated, a book can be created that contains all the client's self-portraits, their titles, and the progressive narratives.

#### Variations

1. Alternatively to self-portraits, this exercise can be used to explore gender as the client sees it expressed in others. Clients can create a collage from images of other people whom they see as media representations, as embodying ideal appearances (e.g., clothing, hairstyles, physique), and as role models.
2. Expression of gender identity in public and private spaces may vary and potentially indicate important factors to be examined. Photos can be collected of spaces where the client regularly frequents or intends to travel. The therapist can discuss the photos to explore sources for support, security, and empowerment as well as developing plans for navigating places with uncertain safety.
3. Additional questions related to intersectionality can be asked to explore the interaction between multiple identities, probing to acknowledge challenges and recognize resilience. Biopsychosocial factors to consider include race, culture, sexual orientation, age, socioeconomic status, religiosity/spirituality/atheism, ableness, and mental health status.

***Brief Vignette***

Sam is a thirteen-year-old Latino client referred to a gender-affirming therapist by the family's general practitioner. When asked about gender and pronouns, Sam states that male pronouns are *ok* but he is unsure about gender. Sam's parents add that Sam often plays with his younger sister and has enjoyed wearing dresses and playing with dolls since he was five. Over the last year, Sam has reported becoming less comfortable with being in public and has secluded himself to socializing primarily through online gaming. Sam's parents admit they do not understand what is happening with Sam, but that they just want him to be happy.

Sam's appearance is slender with shaggy hair and loose fitting jeans and a hooded t-shirt. When speaking to Sam alone, he shares that he is afraid to wear the clothes that he actually wants to wear. Even with supportive parents, Sam is fearful that people will make fun of him and call him names. After speaking to both Sam and his parents, the therapist suggests using the photo diary to document his exploration of gender, starting with small steps in the comfort of their home. Sam appears anxious and excited for the monthly assignment and agrees to write a short essay about the experience.

The following month Sam returns with the first entry in the photo diary. For this session, Sam shared a photo of himself in his favorite sundress and read a short entry about the experience. Sam shares that he wishes he could be planning a quinceañera like his female friends. The therapist asks questions about his reaction and feelings noting strengths and resilience to share with the client. Challenges of discomfort and fear are identified and plans for future navigation are explored. Before leaving this session, Sam and the therapist discuss options for the next photo diary entry.

After six months of therapy using the photo diary, Sam is able to identify what forms of expression feel authentic and where struggles continue. With the family's encouragement and support, Sam changes to feminine clothing upon arriving home after school and remains so except when at school or in public. Sam is exploring female pronouns, growing her hair long, and considering going by Sofía because it feels more feminine. Sam and her family are discussing options for transitioning socially in school and their local community, including planning her quinceañera. In the future, the therapist can continue with the photo diary to document and explore Sam's exploration of gender expression in school and in public while building self-awareness and confidence.

### ***Suggestions for Follow-up***

After the client has accumulated a series of photo diary entries, ask them to tell a story using all the photos together. By focusing on an entire arc of their gender presentation, the client can begin to develop a coherent narrative that they can use when telling their story to themselves and to others. The client should be encouraged to consider not only the visible changes that may have occurred, but also the textual changes that may have occurred in how they described themselves in the titles and any internal changes in emotions that have occurred throughout the process. The client should also work on integrating their experiences on their gender journey into other aspects of their lives and their more global life narrative.

Once a client has developed a coherent sense of their own identity, this exercise can be used in either couples or family therapy. Clients and their significant others should explore what messages are being delivered through the portraits and the titles. Through this discussion, the significant others in the client's life will be able to develop a deeper understanding of the client's gender identity and the ways in which that identity manifests itself in the client's life. This will

also allow for the navigation of any conflicting messages or ideas about gender and gender expression in a less intimate and threatening manner.

Additional variations on this activity can include having the client collect photos of other people that demonstrate how they would like to express themselves. Probes similar to the ones described can be used, but they should focus on what the client finds attractive about those they have chosen to represent their desired self. Strengths and goals should be identified to focus on growth rather than negative body image. When utilizing this variation, therapists must be acutely attuned to how realistic the client's idealized self-image is, as many media images depict unhealthy ideals that may serve to harm the client if they try to attain those standards.

### ***Contraindications for Use***

The photo diary activity should be used cautiously with people with severe gender dysphoria or fixation on physical appearance, including those with eating disorders. The objective of the exercise is to focus clients on their physical appearance and the ways in which they embody their gender, but when used improperly this increased self-awareness that can lead to increased dysphoria or physical fixation. Professionals and clients should be prepared to work through any strong emotions that emerge during this activity and clients should have an active and accessible support system. This activity should only be used within the bounds of an established therapeutic relationship and with a client who has built up resilience and partially accepted and integrated their gender identity. It should never be used as an initial assessment or to determine the level of clients' gender dysphoria.

### ***Professional Readings and Resources***

Brill, S., & Pepper, R. (2008). *The transgender child: A handbook for families and professionals*. San Francisco, CA: Cleis Press.

Ehrensaft, D. (2016). *The gender creative child: Pathways for nurturing and supporting children who live outside of gender boxes*. New York, NY: The Experiment, LLC.

Erickson-Schroth, L. (2014). *Trans bodies, trans selves: A resources for the transgender community*. New York, NY: Oxford University Press.

Hendricks, M. L., & Testa, R. J. (2012). A conceptual framework for clinical work with transgender and gender nonconforming clients: An adaptation of the Minority Stress Model. *Professional Psychology: Research and Practice*, 43(5), 460-467.  
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Loewenthal, D. (2013). *Phototherapy and therapeutic photography in a digital age*. New York, NY: Routledge.

### ***Resources for Clients***

Arnal, K. (2014). *Bordered lives: Transgender portraits from Mexico*. New York, NY: The New Press.

Belge, K., & Bieschke, M. (2011). *Queer: The ultimate LGBT guide for teens*. San Francisco, CA: Zest Books.

Naz, D. (2014). *Genderqueer and other gender identities*. Los Angeles, CA: Rare Bird Books.

Testa, R. J., Coolhart, D., & Peta, J. (2015). *The gender quest workbook: A guide for teens and young adults exploring sexual identity*. Oakland, CA: New Harbinger Productions, Inc.

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