

# ETHICAL GENDER INCLUSIVE PRACTICES WITHIN APPLIED BEHAVIOUR ANALYTIC SERVICES

LANDA FOX, MA, BCBA, CSHE - POSITIVE CONNECTIONS -  
landa@positiveconnections.ca

KATRINA MCGEE, B.ED, M.ED, BCBA - BEANSTALK BEHAVIOUR  
CONSULTING & SD61 - katrina@beanstalkbehaviour.com

KINGSLEY STRUDWICK - AMBIT GENDER DIVERSITY CONSULTING

1

## Territory Acknowledgement

- As non-consensual visitors and settlers on these lands we acknowledge that this conference and presentation is taking place on the traditional, ancestral, and unceded territory of the Musqueam people.
- We believe it is important to acknowledge that in our work within a field that is aimed at helping others, we must understand the impacts of colonialism on us all.

2

## Acknowledgements

- Cory Keith – Spectra Services

3

How are the authors connected  
to this topic

4

## How is Behaviour Analysis connected to this topic

- Increased recognition of the overlap between being on the autism spectrum and being gender-diverse
  - between 6% and 27% (see Strang et al., 2018)
  - higher estimates use parent screener for ASD identification
  - lower estimates use clinical, confirmed ASD diagnosis

5

## How is Behaviour Analysis connected to this topic

- Behaviour Analytic autism service providers are thus likely to serve clients who are on both of these spectrums

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Point in development of earliest remembered gender nonconformity<sup>a</sup>

Preschool	3/22
Kindergarten	5/22
Elementary school	8/22
Middle school	5/22
High school	0/22
Cannot recall	1/22

Strang et al., 2018

- As such, we should be prepared for how we will effectively and ethically navigate these within our practices

6

## Terms Primer

- Cisgender/Cis
- Transgender/ Trans
- Gender-diverse/genderqueer/genderfluid/non-binary
- If someone uses another term – ask questions rooted in consent:
  - “is it ok with I ask what that means for you? or would you prefer I look into it on my own?”
  - “would you like to share more about that?”

7

## Gender Exploration

- Most children will engage in gender exploration
- This can start around age 3

8

# The Gender Unicorn

Graphic by:  
**TSER**  
Trans Student Educational Resources

To learn more, go to:  
[www.transstudent.org/gender](http://www.transstudent.org/gender)

Design by Landyn Pan and Anna Moore

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Gender Identity

- Female/Woman/Girl
- Male/Man/Boy
- Other Gender(s)

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- Masculine
- Other

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**Sex Assigned at Birth**

- Female
- Male
- Other/Intersex

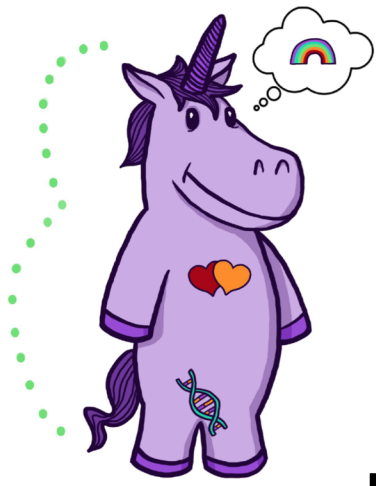
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●              ●              ●

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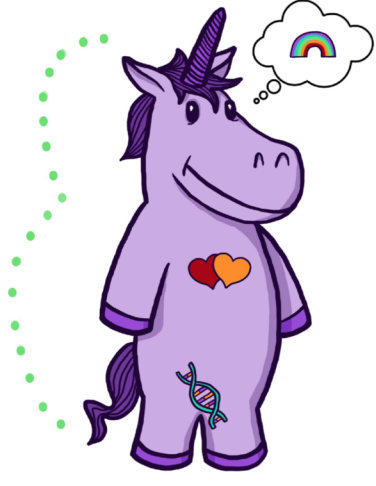
**Physically Attracted to**

- Women
- Men
- Other Gender(s)

13

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**Physically Attracted to**

- Women
- Men
- Other Gender(s)

---

**Emotionally Attracted to**

- Women
- Men
- Other Gender(s)

14

## A bit more about being trans and transitioning

- Individual
- Multiple ways of transitioning
- More than medical
- Transition as motion *away from* but *not necessarily* to a specific point

15

## Trans and Gender-Nonconforming (TGN) Youth at Risk

- Katz-Wise et al. (2018)
  - Youth report high risk of mental health concerns:
    - suicidality
    - self-harm
    - depressive symptoms

16

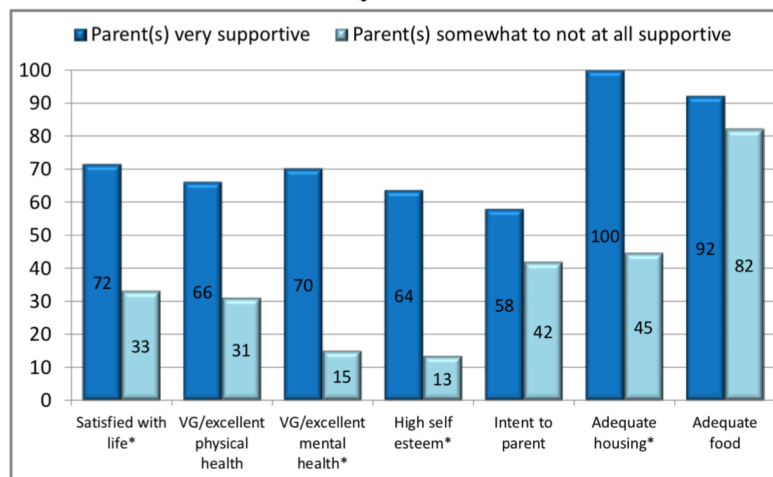


## What's the most important

- Support
  - **Support** and then move to understand
  - NOT
  - Understand and then support

17

## What's the most important - SUPPORT



\* = statistically significant difference ( $p < 0.05$ )

18

## Trans Pulse 2012

“For parents and caregivers, our data have many implications. Our earlier results (not shown) revealed that having a “somewhat supportive” parent did not have a significantly more positive effect on youth than if their parents were not at all supportive of their gender expression and identity. This indicates that anything less than strong support may have deleterious effects on a child’s well-being. These results should be viewed in light of recent suggestions that LGBT youth may rate their families as more supportive than their behaviours would indicate. Our findings suggest the **need for parents of trans youth to find adequate support** for themselves so that they can provide the strong support that their children need.”

19

## The Ethics of SUPPORT

- **Section 1.05** - professional & scientific relationships
  - e) “do not knowingly engage in behaviour that is....demeaning to persons with whom they interact in their work based on factors such as.....gender....and in accordance with the law
- **Section 2.05** - rights and prerogatives of clients
  - rights are paramount and behaviour analysts support legal rights

20

## ABA and LGBTQIA+ History

- Will discuss with reference to one article in particular
- Acknowledging that, while times may change and practice may change, we must recognize the permanence and lasting impact of research published within the field
- Acknowledging also, that many fields have a history of problematic research and intervention with the LGBTQIA+ communities

21

## ABA and LGBTQIA+ History

- In 1974, in the 7th issue of the *Journal of Applied Behavior Analysis* an article was published entitled:
  - Behavioral Treatment of Deviant Sex-Role Behaviors in a Male Child
- Authors:
  - George Rekers
  - **O. Ivar Lovaas**
- Part of a larger project often referred to as “The Feminine Boy Project” at UCLA
- In 1977, in the 10th issue of *JABA* an article by R.C. Winkler was published criticizing the original Rekers & Lovaas article

22

## Rekers & Lovaas, 1974

- Behaviours identified as requiring intervention:
  - cross-gender clothing preferences
  - actual or imagined use of cosmetics
  - feminine behaviour mannerisms
  - aversion to masculine activities + preference for girl playmates and feminine activities
  - preference for female role
  - feminine voice inflection and feminine content in speech
  - verbal statements about preference to be a girl

23

## Rekers & Lovaas - why intervene?

- Do note that society could stand to be more tolerant of those with “sex-role deviations”
- Identify dependence on mother as contributing factor
- Identify social learning over biology
- Predict “severe adjustment problems” in adulthood
- See intervention in childhood as the only way of preventing sexual deviance in adulthood
- Highlight ease of behaviour change over physically changing a body
- Parent wish to modify behaviour

24

# Rekers & Lovaas - procedures

- Session in Clinic with Mother
- Differential reinforcement of alternative behaviours
  - reinforcement of masculine behaviours with attention
- Ignore/extinguish feminine behaviours; ignore any interfering behaviour (e.g., tantrums resulting from ignoring)

25

## Rekers & Lovaas - Clinic Results

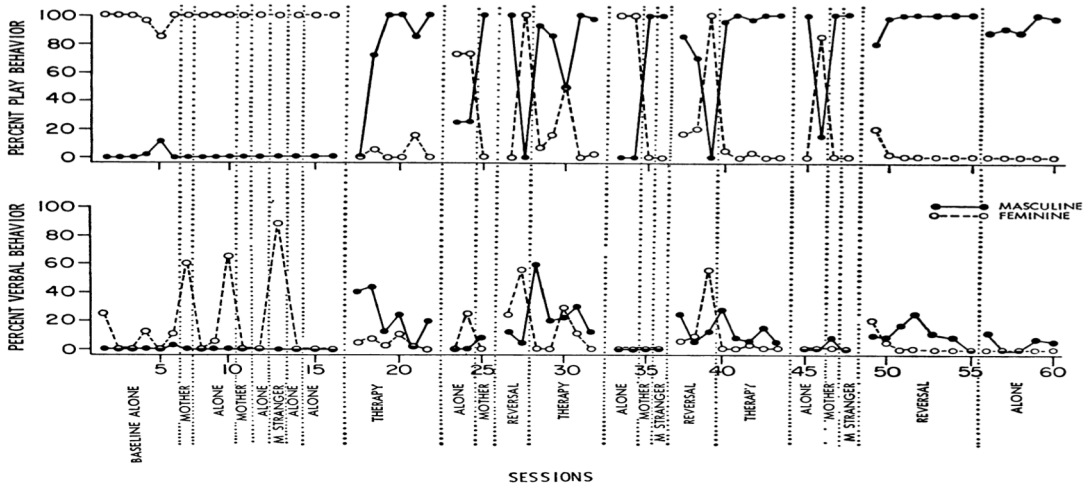


Fig. 1. Per cent feminine and masculine play and verbal behavior as a function of mother's social reinforcement contingency in the clinic playground.

26

# Rekers & Lovaas - procedures

## Home Intervention Program with Parents

- Token system
  - Blue Chips - awarded for masculine behaviours
  - Red Chips - given for feminine behaviours and subtracted from blue total
    - Also paired with timeout/isolation/removal of privileges or physical punishment (spanking from father)

27

# Rekers & Lovaas - Home Results

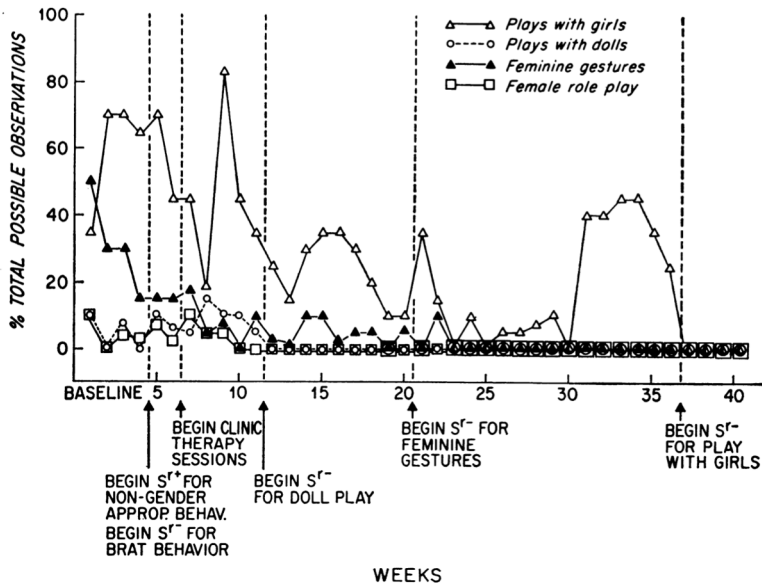


Fig. 2. Per cent feminine behavior per week as a function of token reinforcement intervention in the home.

28

## ABA and LGBTQIA+ History

- The boy in this Rekers and Lovaas study went on to commit suicide at age 38 (Villarreal, 2011)
- Rekers has an extensive history of anti-LGBTQ activity subsequent to this study
- Some see parallels between these types of “gay conversion therapy” or “gender conversation therapy” and “autism conversation therapy” directly naming ABA as the methodology
  - e.g., Gibson & Douglas, 2018

29

## Other Thoughts.....

- Is it unreasonable to think we, as behaviour analysts, might be asked to intervene on some of these behaviours today?
- How do we define “socially appropriate” behaviours when we are setting goals for clients?
- What can we do as faculty, instructors, supervisors to help trainees think critically?

30

## Prevention via the Code

What ethical code sections prevent us from engaging in this type of behaviours change program?

- 1.05 e) – non-discrimination sections
- 2.02 – responsibility to clients – defining client
- 2.05 – rights of clients (Canadian law)
- 4.02 - involving client in planning and consent
- 7.02 – when colleagues are at risk of doing harm; acknowledge that we are in a position of possibly doing harm to clients

31

## What About Our Current Practice

- What are we doing?
- What could we do better?
- What does our ethical code require of us?

32



## Potentially Relevant Ethical Code Sections

- 1.02 – boundaries of competence
  - provide service.....only within the boundaries of competence...commensurate with education, training, and experience
- 1.03 – maintain competence via professional development
- 1.05 e) – non-discrimination sections
  - “do not knowingly engage in behaviour that is....demeaning to persons with whom they interact in their work based on factors such as.....gender....and in accordance with the law
- 2.01 – accepting clients - commensurate with experience
- 2.02 – responsibility to clients – defining client (child, parent, student)

33

## Potentially Relevant Ethical Code Sections

- 2.03 – consultation
  - arrange for consultations and referrals based principally on best interests of the client
- 2.05 – rights of clients (legal – protection under Charter)
  - rights of client are paramount
  - behaviour analysts support clients’ legal rights and prerogatives
- 2.06 – maintain confidentiality
  - primary obligation to protect confidentiality
- 7.02 – when colleagues are at risk of doing harm; acknowledge that we are in a position of possibly doing harm to clients

34

## To Dos and To Don'ts

- What are some common teaching approaches, general administrative activities, and other methods of interacting where there is a risk to do harm?
- What we should do and what we shouldn't do
- What Professional and Ethical Compliance Code for Behavior Analysts sections might be relevant

35

## Assumptions About Clients

### **DON'T**

- Making cisgender, heterosexual assumptions about any/all clients
- Example – cis-het parents
- Example – cis direct service client

### **DO**

- Create intake and subsequent forms and questionnaires that are inclusive
  - Gender: M F X
  - Pronouns: \_\_\_\_\_
- Create space for people to inform of any changes or new information
- Spaces for Name (1<sup>st</sup>) and Legal Name (2<sup>nd</sup>)

### RELEVANT ETHICS CODE SECTIONS

- Section 2.05 - Rights and Prerogatives of Clients

36

## Use of Pronouns

### DON'T

- Use the term "preferred pronouns"
- Assume they will not change (names may change too)
- assume the only pronouns are he/she/they and don't assume that a person only uses one

### DO

- Ask about pronouns
- Provide/model stating your own
  - *Hi my name is \_\_\_\_\_ I use \_\_\_\_\_.*  
*May I ask your name and pronouns?*
- put pronouns in email signatures
- practice using a person's pronouns in private
- correct others when they misgender someone else

### RELEVANT ETHICS CODE SECTIONS

- Section 2.05 - Rights and Prerogatives of Clients

37

## Pronouns (c

### SOME POSSIBILITIES

- Sie/hir
- Zie/Zir
- THon
- Per
- Ne
- Ve
- Fea

38

# Teaching Pronouns

## DON'T

- Teach he/she pronouns using arbitrary gender markers
- Teach he/she as the only singular pronoun

## DO

- Think critically about why this skill is "needed"
- Use multiple exemplars
- model being ok with being unsure and that being ok
- model neutral pronouns
- model asking!

39

## Pronoun materials

she



he



her

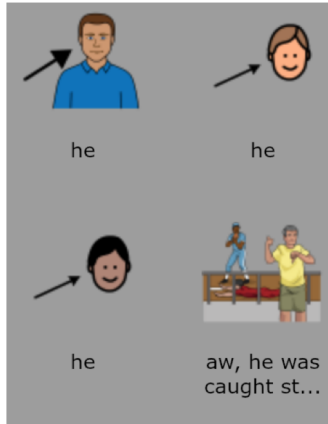
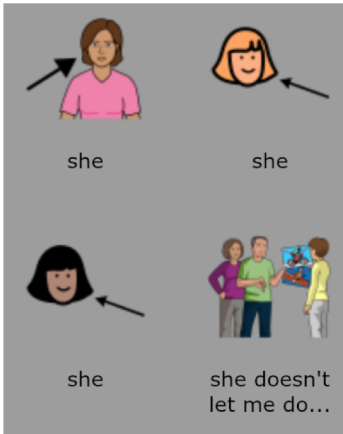


his



40

# Pronoun materials



41

In case you need more proof Boardmaker is the patriarchy in action



42

## Deadnaming

### **DO**

- Archive old reports; make paper trail for a new edition with new name/pronouns
- Change all current records to person's

### **DON'T**

- EVER deadname someone

43

## To Dos and To Don'ts

- This was a VERY brief list
- Recently (2019) Worner & Stockwell published a self-assessment checklist consisting of 28 items that is helpful to complete

44

## Ethical Scenario #1

During a one on one session with an 8-year-old child they tell you that they want to have people call them by a different name (instead of Chloe they want to be Jon), wear different clothing, and get a 'boys' haircut. They say their parents told them they are silly and that they just want to be like their cousin.

What do you do?

45

## Ethical Scenario #1 - Thoughts

What are your first steps?

- Start using the name and pronoun the child stated to you
  - If the family is not supportive, this may mean not using gendered pronouns with parents
- Be supportive to the family
  - be *very* careful about discussions in front of the child using deadname and incorrect pronouns
  - provide resources to family (groups, support networks, help with social transition)
- Inform other staff that do/may work with child

46

## Ethical Scenario #1 - The Code

- 1.02 – boundaries of competence
- 1.03 – maintain competence via pro-d
- 1.05 e) – non-discrimination sections
- 2.01 – accepting clients
- 2.02 – responsibility to clients – defining client
- 2.03 – consultation
- 2.05 – rights of clients (legal – protection under Charter)
- 2.06 – maintain confidentiality
- 7.02 – when colleagues are at risk of doing harm; acknowledge that we are in a position of possibly doing harm to clients

47

## Ethical Scenario #2

A 13 year old boy (self-identifies as such) who has always played around with make-up and worn some of his older sister's clothing at home, has recently started to wear makeup and some more "feminine" clothes to school. His parents have been ok with this in their home, but now that he is in high school and wants to start wearing these things outside of the home they are concerned. They ask you, as the Behaviour Consultant, to make a plan to stop their son from doing this.

48



## Ethical Scenario #2 - Thoughts

What are your first steps?

- Ask open questions to the parents such as “what does that behaviour mean for you?” “what are you feeling about that” “what are your concerns around that?”
- Indicate you are a gender-confirming professional/agency
- Reference ethical code for why this may not be appropriate
- Build a plan, with the client and the parents about what it could look like to offer support through this process

49

## Ethical Scenario #2 - The Code

- 1.02 – boundaries of competence
- 1.03 – maintain competence via pro-d
- 1.05 e) – non-discrimination sections
- 2.02 – responsibility to clients – defining client
- 2.03 – consultation
- 2.05 – rights of clients (legal – protection under Charter)
- 3.01- Behavior analytic assessment
- 3.02 - Medical/Biological
- 4.02 - Involving client in planning and consent
- 4.03 - Individualized behaviour change programs
- 7.02 – when colleagues are at risk of doing harm; acknowledge that

50

## Ethical Scenario #3

You are the owner of an ABA service provider. An employee has recently come out to you and will be transitioning socially (new name, modified dress, change in pronouns). A family of one of the clients he works with comes to you saying they only want a woman to work with their child. What do you do?

51

## Ethical Scenario #3 - Thoughts

What are your first steps?

- Ask open questions to the parents “what concerns you about this?”
  - speak to the benefits of the child receiving care / support from a variety of genders?
- How do you balance the rights of parents to decide who works with their children and the rights of employees
  - are we currently allowing parents to decide BIs based on gender?

52

## Take Home Messages

- Individualize

53

## 4 Things Right Now

- Put your pronouns in your email signature - **like, now**
- Try to stop using “guys” as a group greeting
- Review your forms for assumptions about gender and leave space for gender markers of M, F, X & Pronouns:\_\_\_\_\_
- Review client programs and critically analyze any pronoun programs or social skills programs centered on gendered norms

54

## Additional Opportunities & Resources

Brief Consultation available from:

Ambit Gender Diversity Consulting

<https://www.ambitgenderdiversity.com>

[info@ambitgenderdiversity.com](mailto:info@ambitgenderdiversity.com)

Spectra Services - Corey Keith

<https://spectraconsulting0.wixsite.com/home>

[spectraconsulting@yandex.com](mailto:spectraconsulting@yandex.com)

55

## Additional Opportunities & Resources

- Moving Trans History Forward – Conference – Victoria – April 2020
- Upswing Advocates - Illinois - <http://www.upswingadvocates.org>
- Empowered Center for Sexuality - Missouri - <https://www.empoweredcenter.com>
- Follow & Interact with the Sexual Behavior Research and Practice SIG of ABAI
  - FACEBOOK: <https://www.facebook.com/SBRPSIG/>

56

## Additional Opportunities & Resources

- Genderbread person explainer: <https://www.genderbread.org/wp-content/uploads/2017/02/Breaking-through-the-Binary-by-Sam-Killermann.pdf>
- Urban Native Youth Association - 2-Spirit Collective
  - <https://unya.bc.ca/programs/2-spirit-collective/>
- Trans Tipping Point Project - <https://victoriapridesociety.org/the-trans-tipping-point/>

57

## Additional Opportunities & Resources

- Trans Care BC – FREE Educational Training online: <http://www.phsa.ca/transcarebc/health-professionals/education/trans-intro>
- Trans Care BC – Accessible Care Strategies for Organizations and Programs
  - [http://www.phsa.ca/transcarebc/Documents/HealthProf/20\\_Care\\_Strategies.pdf](http://www.phsa.ca/transcarebc/Documents/HealthProf/20_Care_Strategies.pdf)
- Trans Care BC – Gender Inclusive Language – Building Relationships
  - [http://www.phsa.ca/transcarebc/Documents/HealthProf/Gender\\_Inclusive\\_Language\\_General.pdf](http://www.phsa.ca/transcarebc/Documents/HealthProf/Gender_Inclusive_Language_General.pdf)
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58

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