Relational Psychology Group

Loren S. Schechter, M.D.
9000 Waukegan RD
Morton Grove, IL 60053

September 29, 2021

[redacted]

Dr. Schechter,

It is my pleasure to write a letter of support and recommendation for [redacted]. I had worked with [redacted] in individual therapy from August 12,2020 through January 26, 2021. They have had a total of 21 sessions with me. Originally [redacted] engaged in therapy to address symptoms related to depression, anxiety, and gender exploration/expression/dysphoria. I have met with [redacted] for the purposes of assessing their readiness for gender affirming surgery. After assessment, it was determined that [redacted] meets the criteria for a diagnosis of (F64.1) Gender Dysphoria and is a good candidate for gender affirming surgery. [redacted] year-old, caucasian, whose sex at birth was assigned female, is a non-binary individual who uses gender pronouns of they/them/theirs. They have asked me to write a letter of support as they begin the consultation process for chest reduction surgery.

[redacted] began identifying as non-binary approximately four and a half years ago, and two years ago began using they/them/theirs pronouns first with their partner, then friends and peers, followed by immediate family. Now their pronouns are used throughout their daily interactions and at school. To date, [redacted] has not begun hormone replacement therapy, nor do they plan to do so. [redacted] has not gotten a legal name and/or gender marker change on their Driver's license or birth certificate, but they plan to do so in the future. To date, [redacted] has not had any previous gender affirmation surgeries. [redacted] identifies their chest as one of their primary focuses of their gender dysphoria, which began during early adolescence and worsened as they entered puberty. [redacted] persistently expressed a desire for gender affirmation surgery for approximately three years.

[redacted] has discussed the following in regards to undergoing gender affirming surgery:

- Potential social impacts; [redacted] believes this affirming surgery will help them feel less anxious and concerned about being misgendered/misread. They believe they

will be less self-conscious if they are not concerned about their chest. This surgery will also help Skyler engage in physical activities, such as swimming, more readily due to not needing to bind or wear a shirt. Overall, [redacted] feels that chest reduction surgery will help them feel more present in social situations, because they will not have to bind and account for the hours of binding in their social activities.

- Potential effects on safety; [redacted] believes that chest reduction surgery will reduce their focus on their chest and how others are reading their gender, based on the perception of this secondary sex characteristic, allowing them to navigate the world with appropriate vigilance.

- Potential effects on familial relationships; [redacted] believes that this surgery will allow family members to more readily recognize their gender identity and expression, helping them to affirm their gender within the immediate and extended family. Within the context of their partnership, [redacted] believes that having their chest reduced will allow them to be more comfortable in intimate situations with their partner.

- Potential financial costs; [redacted] is aware of the approximate surgery cost based on previous clients of Dr. Schechter's with similar insurance plans. [redacted] parents view this surgery as medically necessary and are planning on covering the out of pocket costs for this gender affirmation surgery. [redacted] parents are fully informed of the potential costs of this surgery and have a plan in place to cover it.

- Potential impacts on mental and physical health; [redacted] feels this surgery will increase their self-esteem, reduce the frequency and intensity of their dysphoria, decrease anxiety symptoms, improve their ability to attend to and maintain healthy relationships, and improve their ability to focus and attend to their academic responsibilities. Currently, [redacted] meets criteria and is being treated for Gender Dysphoria and the commonly associated anxious distress symptoms with this diagnosis. In addition, having this gender affirmation surgery will allow [redacted] to discontinue binding which has caused significant physical discomfort and pain, and can have long term negative physical health implications.

[redacted] partner, parents, and sister are described as quite supportive, and all of these individuals have planned to assist in [redacted] recovery as needed. [redacted] is informed on the psychosocial impacts of gender affirming surgery and is able to make an informed

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decision. [redacted] presents with thoughtful, cautious deliberation towards decision-making, rather than impulsivity. Therefore, I believe with continued consultation, they demonstrate the capacity to understand the surgical procedure, its effects, and the associated care and recovery. [redacted] meets the criteria set forth by the World Professional Association for Transgender Health (WPATH), including demonstrating persistent, well-documented gender dysphoria; a capacity to provide informed consent; and well controlled psychiatric concerns. I fully support their decision to move forward with this surgery.

If you have any questions or concerns, please do not hesitate to contact me at 224-307-4850. I am available for coordination of care and welcome a phone call to establish a collaborative consultation.

Sincerely,

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Rachael Sytsma, Psy.D.
Licensed Clinical Psychologist

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