

# Overview

## HALF-DAY MODULES FOR AGENCIES & TEAMS

*\*Each ½ day module can be mixed, matched, and adapted to fit agency and team needs.*

- Trauma & the Provider
- Harm Reduction in Practice
- Strengthening Outreach Skills
- Understanding Mental Health in Queer Guys & PLWHA
- Understanding & Supporting People with Psychosis
- Psychedelics N' Psychosis - the *other* PnP
- Mental Health Readiness Assessments for Transition-Related Surgeries
- Trans people in women's shelters: inclusion and policy roadmaps

## FULL-DAY TRAININGS FOR AGENCIES & TEAMS

- Anti-Racism / Anti-Oppression
- Motivational Interviewing and CBT Skills
- Working with Strong Emotions
  - Part 1 - Understanding Anger
  - Part 2 - Complex Trauma & Self Harm
- Practicing & Reflecting on Peer Support Skills

## KEYNOTE TOPICS FOR CONFERENCES

*\*Each of these can be delivered as a keynote or workshop format. They can also be expanded to ½ day training modules to include experiential learning components.*

- LGBT Muslims and Mental Health
- Casual sex vs Long Term Relationships: Conflicting Scripts for Gay Men?
- Mirror, Mirror: Queer Men and Body Image
- Harm Reduction in the Context of LGBTQ Communities
- Mental Health in LGBT2S Communities
- Shame & Sexuality
- Sex-Positivity: Definitions, Declarations, & Applications
- Ciscentrism in HIV Testing Settings
- Counselling Clients with High Anxiety & Low to No Risk for HIV
- "How Did This Happen?" Supporting Family Dialogue When Someone *Comes Out*

# Training Modules

\*Each ½ day module can be mixed, matched, and adapted to fit agency and team needs.

## Module: Trauma & the Provider

Learning Outcomes:

- Introduce trauma-informed theory and basic principles
- Examine what trauma histories can look like for specific communities (gbMSM, trans folks, Indigenous communities, women, and newcomers)
- Identify signs of vicarious trauma and compassion fatigue
- Analyze case scenarios and apply trauma-informed theory to conceptualize service users' presenting concerns
- Explore themes that arise with service users while doing outreach with people seeking HIV testing, people who access bathhouses, sex workers, people living with HIV that access support services, and those encountered during street outreach shifts.

## Module: Harm Reduction in Practice

Harm reduction approaches have become the standard of care and an expectation in many social service settings. However, many front line service providers have not had the opportunity to process their own personal values, questions about what constitutes “harm”, their role in supporting clients, and the fears and barriers they may experience in implementing programs and services that are harm reduction-based. This workshop will allow for a values exploration, a space for honest and perhaps difficult conversations, and concrete tools and examples of implementing harm reduction interventions at the front line and organizational levels.

## Module: Strengthening Outreach Skills

Learning Outcomes:

- Review examples of conversations between service provider and service user in order to
  - a) identify systemic factors at play in the context of outreach conversations
  - b) use self-reflexivity to gather information about the dynamic (e.g. what are you feeling and thinking? What is the service user likely feeling and thinking?)
  - c) convert ‘what we think we know’ (and other assumptions) into exploratory, non-judgemental questions
- Consider what factors comprise an optimal and effective outreach response (e.g. tone & length, affirming subtext of statements, open-ended questions, objective information, warm-referral sources).
- Use role-play exercises to demonstrate and evaluate outreach conversations as a group.

### **Module: Understanding Mental Health in Queer Guys & PLWHA**

#### Learning Outcomes:

- Explore the context in which mental health concerns get activated through group activity
- Define mental health and wellbeing
- Discuss social and developmental factors that affect the mental health of queer guys and people living with HIV
- Group work to analyze the impact of:
  - Internalized homophobia/transphobia
  - Body image
  - Relationship navigation
  - Substance use

### **Module: Understanding & Supporting People with Psychosis**

#### Learning Outcomes:

- Review overarching mental health diagnostic categories and locate common experiences of psychosis
- Explore the specific clinical presentations of delusions, hallucinations and/or experiences of non-consensus realities
- Analyze case scenarios through a trauma-informed and culturally-aware practice lens
- Discuss multiple interventions for supporting clients and consider implications for non-pathologizing approaches to psychosis

### **Module: Psychedelics N' Psychosis - the *other* PnP**

#### Learning Outcomes:

- Define psychosis and locate it within the context of Schizophrenia Spectrum (and Other Psychotic) Disorders
- Identify key cross cultural and anti-oppressive considerations (and tensions) when approaching people who experience non-consensus realities
- Briefly review all DSM disorders and conditions that can include psychotic features
- Discuss the range of substance-induced psychoses that are possible
- Examine existing research and literature on the experience of methamphetamine-induced psychosis specifically
- Explore suitable approaches and intervention methods when working with queer guys and other individuals who experience meth-induced psychosis

### **Module: Mental Health Readiness Assessments for Transition-Related Surgeries**

As of March 2016, the Ontario Health Insurance Plan (OHIP) changed the funding criteria for transition-related surgeries by allowing “qualified providers” throughout the province to assess patients for the surgery. Registered social workers have been designated as [one of five professionals](#) that are able to provide readiness assessments for trans people seeking lower/genital surgeries. The objectives of this module include:

- Review of trans 101 material: definitions, concept of gender diversity, challenging the gender binary and cis-centrism, issues of systemic oppression, examples of interpersonal and institutional transphobia, particularly in health care settings
- Review of the WPATH [Standards of Care](#) and Ministry of Health & Long Term Care requirements
- Discussion of what surgery planning visits can look like between social workers and clients
- Concrete examples of questions providers can ask to support client readiness and to develop strong support letters
- Conceptualizing the care planning process for various clinical presentations along with critical reflection on power, medicalization of identities, and challenging paternalism

*Note: this module can be done by a registered social worker alone or in conjunction with a registered nurse with experience in this area of work.*

### **Module: Trans people in women’s shelters: inclusion and policy roadmaps**

This workshop will begin with a tailored “trans 101” to support exploration of basic concepts of gender identity and examples of specific challenges trans and gender diverse clients experience while navigating cis-centric (and women’s-specific) social services. We will then use case studies as a medium to allow participants to a) analyze their own assumptions, b) consider the criteria that may be used to determine if a client is a fit for shelter services, and c) examine implications for working with clients or referring them to other services. Finally, we will discuss factors that would be useful to consider and questions the organization might ask while creating policies around inclusion for trans and gender diverse service users.

# Full Day Trainings

## **Module: Anti-Racism / Anti-Oppression**

Most social service organizations have already undergone some form of anti-oppression training. If your agency is looking to go deeper and explore tensions and intersections of power and privilege as they play out in your workplace, a tailored training can be developed for you. Concepts that can be covered include: social determinants of health, the specifics of what power & privilege look like, oppression and what it can look like in various communities, microaggressions, the myth of meritocracy, equity vs. equality, experiences of erasure, affirmative action and risks of tokenism, and more. Teams will also participate in application-based exercises to consider what AR/AO principles can look like in their work.

## **Module: Motivational Interviewing and CBT Skills**

There is an increasing demand for front line staff--beyond therapists--to draw on MI and CBT skills in their work. This workshop will begin with a conversation around the context and appropriate use of motivational interviewing and cognitive behavioural therapy techniques. This full day workshop will equip participants with basic knowledge of each modality and concrete tools they can use with clients who are considering behaviour change, working through ambivalence, interested in behavioural strategies to manage depression, and those who need support restructuring unhelpful thinking styles. There will be opportunity for group discussion, individual practice, and case-related questions.

## **Module: Working with Strong Emotions**

### *Part 1: Understanding Anger, Learning Outcomes:*

- Explore common client presentations of strong emotion in group and service settings
- Examine anger, its underlying drivers, and common activators
- Consider the connections between anger style and potential interpersonal goals for more effective communication
- Review rules for 'fighting fairly' and collectively identify team protocol for de-escalation
- Discuss tools that can be used with service users: e.g. temperature scale, CBT anger cycle, hassle logs, anger decision chart, script for accountability and apologies, mindfulness-based techniques

### *Part 2: Complex Trauma & Self Harm, Learning Outcomes:*

- Discuss the spectrum of suicidality and provider attitudes towards crisis presentations
- Unpack "cluster B" personality disorders: conceptualizations, the role of trauma histories
- Identify possible defense mechanisms employed by service user and provider
- Explore the functions of "self-harm" for people
- Practice and reflect on common suicide risk assessment questions/practices
- Discuss safety planning tools and critically reflect on values of bodily autonomy, professional liability, ethical practice and overall utility of safety planning

## Full Day Training Modules, Cont'd

### Module: Practicing & Reflecting on Peer Support Skills

The first half of the training will focus on discussing and practicing each engagement skill briefly and in pairs. Participants will reflect on what their own style is and how the various skills “fit” for them. Participants will then be organized into groups for the second half of the training day and each group will “tag-team” in engaging “service users” in a simulation exercise while other participants observe. After each 30 minute simulated peer encounter, we will debrief as a larger group. This group discussion will not be used to criticize or give feedback about engagement skills to simulators. Rather, it will be used to identify which concrete skills were used in the interaction, to ask the service user actors what stood out for them in the interaction, and then to reflect on the dynamic with regard to tone, flow, affect, and social location of the service user and provider. Skill areas to be examined include (Bogo, 2006):

1. Engagement
  - a. *Greeting / “pitch”*
  - b. *Service user story / narrative*
  - c. *Finding an ‘opening’*
2. Open-Ended Questions
  - a. *Prompts*
  - b. *Intentional direction*
  - c. *Emotion-focused*
  - d. *Exploration of feelings*
  - e. *Internal thought process*
3. Closed-Ended Questions
  - a. *+ Considerations in the Use of Questions*
4. Seeking Concreteness & Asking for Clarification
5. Attending & Active Listening
  - a. *Transference & countertransference*
6. Restatement or paraphrasing
7. Reflection of feelings
8. Silence
9. Summarizing
10. Reframing
11. Interpretations & Explanations
12. Elicit & Respond to Feedback
13. Sharing Impressions
14. Challenge
15. Offering Support & Information
  - a. *Information about the services*
  - b. *Psychoeducation*
  - c. *Normalization*
  - d. *Providing suggestions*

# Presentations

\*Each of these can be delivered as a keynote or workshop format. They can also be expanded to ½ day training modules to include experiential learning components.

## **LGBT Muslims and Mental Health**

This presentation will draw on academic literature, personal lived experience, and community organizing work with Salaam Canada, a national LGBTQ Muslim organization. We will unravel the tensions that affect the mental health of LGBTQ Muslims, including managing homophobia and coming out, reconciling sexuality and faith-based identities, both being critical of Islam and fighting Islamophobia, seeking and creating affirming spaces, acculturation as asylum seekers and Canadian-born LGBTQ Muslims, and religious-cultural factors affecting access to mental health services.

## **Casual sex vs Long Term Relationships: Conflicting Scripts for Gay Men?**

Gay men's mental health is often discussed in contexts of sexual health and HIV prevention. This presentation offers a different framework for understanding gay men's mental health concerns by positioning them as responses to conflicting cultural scripts and representations around casual sex and long term relationships. We will explore what issues arise when working in a landscape where both casual sex and long term relationships are revered and criticized on an ongoing basis without adequate representations and community conversations about what reconciled scripts can look like or what skills are needed to actualize relationship models that work for gay men.

## **Mirror, Mirror: Queer Men and Body Image**

This interactive workshop on queer men and body image will ask audience members to reflect on cultural messages around 'good' bodies, food, fatphobia and thin privilege. Participants will examine what body image challenges look like in queer men's communities. We will explore and discuss counselling/clinical questions and approaches to addressing body image issues with queer men drawing on cognitive behavioral, acceptance & commitment, Gestalt and psychodynamic tools.

## **Harm Reduction in the Context of LGBTQ Communities**

Harm reduction approaches have become the gold standard for many public service agencies working with substance users. However, while many of us know "our politics" around harm reduction, it can be useful to collectively reflect on how we define problem substance use and build a framework to understand the context of use in the lives of LGBTQ people. This workshop will facilitate a conversation around the multiple functions of alcohol and drugs in our lives and consider when is use a problem and when is it not. We will draw on the ABC model (antecedent-behaviour-consequence) derived from *Structured Relapse Prevention (published by CAMH)* to explore what specific harm reduction strategies can look like before, during, and after using.

### **Mental Health in LGBT2S Communities**

This presentation will begin with a review of social determinants of mental health for LGBT2S communities. We will then explore each letter of the identity-acronym (L-G-B-T-2S) to identify common developmental experiences for each subpopulation group, ranging from unique identity-related stressors to specific of experiences of marginalization. We will then consider how these stressors and experiences can be used to inform our understanding of the mental health needs and implications for counselling in each of these communities.

### **Shame & Sexuality**

Many gay men feel bad about who they are and what they desire. Even after we “come out”, past negative experiences have already left their imprint. There is a residue from internalized messages about what it means to be a gay man in a straight world. As a gay racialized man and a clinical social worker, I feel compelled to consider how systems of homophobia and racism have manifested themselves as chronic shame in my life--and by extension, my clients' lives. I am regularly thinking about what shame looks like when it shows up, where it originated, and reflecting on how to manage or unlearn it. This engaging talk will take an exploratory approach to examine how shame interferes with gay men's execution of desire, shapes the motivation for partner-seeking, and reinforces HIV stigma in our communities.

### **Sex-Positivity: Definitions, Declarations, & Applications**

Front line workers and organizations are increasingly describing their approach to service as 'sex-positive'. But, what does this mean? Are there multiple definitions? Are there limitations? Are there specific ways to be sex-positive? This interactive knowledge building session will answer these questions by reviewing some of the popular ideas around what it means to be both sex-positive and sex-negative while also beginning a conversation around providing sex-positive services to the frequent target groups of sex-negativity: women, sex workers, and gay/bisexual men. Brief case scenarios will also be used to generate group discussion.

### **Ciscentrism in HIV Testing Settings**

This workshop will provide a nuanced pre/post test counselling roadmap for delivering queer and trans inclusive HIV and STI testing services. This session will discuss what appropriate questions look like when working with queer, and particularly trans-identified, service users as well as common roadblocks for service providers in collecting comprehensive sexual histories and delivering appropriate transmission and risk reduction information. Factors which may heighten experiences of inclusion/exclusion for trans people will be explored. Presenter can offer a mock testing role-play and facilitate discussion for workshop participants. Participants will have the opportunity to practice their new pre/post test counselling skills (that is, communicating risk and documenting a comprehensive sexual risk history with a trans inclusive lens).

### **Counselling Clients with High Anxiety & Low to No Risk for HIV**

People with high anxiety around HIV acquisition but very low risk have often been disregarded as the “worried well.” We know from experiences in testing settings that objective risk assessments, providing point-of-care testing, and reassurance are often not enough for this group of service users. In fact, these interventions on their own can sorely miss the mark. Drawing on sociological literature and the [HHANLR Guidelines](#) (2009), this workshop will help participants unpack the many layers of service user anxiety and provide examples of how to support clients, both in a short-interaction as seen in sexual health settings and in longer-term psychotherapy relationships.

### **“How Did This Happen?” Supporting Family Dialogue When Someone Comes Out**

LGBTQ people, in their own resilient ways, often find their way to needed information, resources, answers to burning questions, and community. After LGBTQ people “come out” to their family members, there are often many questions that surface and family members (whether parents, siblings or spouses) find themselves in places of isolation. This isolation can be particularly pronounced in racialized communities and in families with histories of fairly recent immigration. This presentation is intended to alleviate the burden of educating others that LGBTQ people often face and reduce the isolation family members often contend with by answering common questions family members ask when someone “comes out”.

## **Trainer Bio**

Rahim Thawer is a registered social worker who works as a psychotherapist on the LGBTQ family health team at [Sherbourne Health](#) in Toronto and as a consultant in [private practice](#). He operates from a harm reduction, sex positive, anti-oppressive and trauma-informed approach providing psychotherapy to newcomer, racialized, queer, trans and HIV-affected communities around issues of anxiety, depression, trauma, body image and problem substance use. Rahim also supervises master’s of social work and counselling psychology students and has taught as a post-secondary instructor at George Brown College, Centennial College, and Ryerson University. He developed curriculum for a number of courses in Centennial College’s Addiction & Mental Health Worker Program (AMHW) before its launch in Fall 2016. Rahim is a co-editor of a local history anthology entitled [Any Other Way: How Toronto Got Queer](#), which was shortlisted for the 2017 Toronto Book Awards, and he was nominated for the [CBC Proud to Shine Features](#) in 2018 for his volunteer and activist work. Rahim is on the Guelph Sexuality Conference planning committee and is part of the Core Organizing Team with [Salaam Canada](#), a national LGBTQ Muslim organization.

