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CONTINUING EDUCATION SESSION

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SESSION	CE HOURS	DATE/TIME
CE6	1.0	Friday, November 4th 1:00pm-2:00pm

TITLE
CNM-Affirming Mental Health Care: Considerations for Practice And Training

AUTHORS
Cara Herbitter, PhD, MPH; VA Boston Healthcare System
Ellora Vilkin, MA; Stony Brook University
Alexander Tatum, PhD, CST; Ball State University
Michelle Vaughan, PhD; Wright State University

AASECT - Core Knowledge Areas and Training:	F; Q; P
APA - Curriculum Content Criteria:	1.1; 1.2; 1.3
NCHEC - Areas of Responsibility:	1.3.3; 1.3.4; 4.5.1; 4.5.2; 4.5.3; 4.5.4; 7.2.1

ABSTRACT

Purpose: The purpose of this workshop is to a) review research findings on how anti-CNM stigma impacts attitudes and practices among mental health providers, including a brief discussion on the limitations of graduate training; b) review current best practices for CNM-affirming mental health care; and c) brainstorm improved practices for graduate mental health training across disciplines. Issues: CNM individuals experience stigma related to their sexuality and relationships (Moors et al., 2021; Witherspoon & Theodore, 2021), and such marginalization may undermine sexual minority peoples' physical and mental wellbeing. Mental health provider bias against CNM people and relationships has been documented (Herbitter et al, under review; Schechinger et al, 2018), raising questions about how to understand barriers to care and devise practice and training initiatives to support affirming care for CNM people (Herbitter et al., 2021, Vaughn, 2022). Training on sexuality-related topics has been linked to clinicians' greater willingness and self-efficacy in addressing sexuality, although graduate programs offer limited sexuality training (Miller & Byers, 2012), and there are rarely opportunities for collaboration across disciplines about training approaches. Continuing education on CNM-affirming clinical care may increase access to affirming services for this population. Overview of Session Activities: We will begin with an interactive polling activity to assess familiarity and clinical knowledge with CNM. We will then provide a brief lecture on the current literature about anti-CNM stigma in clinical practice and discuss graduate training on CNM/relationship diversity. Following this, we will provide an overview of best practices for CNM-affirming mental health care, with opportunities for participation and discussion of how to apply principles to particular settings. Finally, we will divide into groups and brainstorm across disciplines ways in which graduate training about CNM-affirming practice and relationship diversity can be improved, followed by a large group wrap-up and next steps. Anticipated Participant Outcomes: We anticipate that participants will gain a better understanding of how broader societal anti-CNM stigma and mononormativity may impact both mental health clinical practice and training. We expect that this increased insight will help participants reflect on ways these biases may unintentionally influence their practices and also motivate them to consider strategies discussed in the workshop for increasing affirmative training and standards across mental health disciplines. Key resources and readings to support CNM-affirming practice/training will be shared.

LEARNING OBJECTIVES

To describe one way that broader societal anti-CNM stigma may translate into clinical practice and/or clinical training.

To identify three CNM-affirming practices mental health providers can employ in clinical practice.

To formulate two ideas for improving mental health provider training aimed at increasing CNM-affirming clinical practice.