

# Therapy Access Project's Guide to Finding a Therapist

<b>This Guide Seeks to Pull Community Resources</b>	<b>1</b>
<b>Systemic Issues in Mental Healthcare</b>	<b>2</b>
Racism in the APA (TW: racism)	2
Queerphobia in the APA (TW: homophobia and transphobia)	3
Mandated Reporting (TW: involuntary confinement, assault and carceral violence)	3
What This Guide Offers	4
<b>Why Seek Out Therapy</b>	<b>4</b>
<b>Types of Therapy</b>	<b>5</b>
<b>Insurance and Therapy Costs</b>	<b>7</b>
<b>Identify Your Needs</b>	<b>8</b>
<b>Do Your Research</b>	<b>10</b>
For Those Without Insurance	11
<b>Reach Out &amp; Vet Potential Therapists</b>	<b>12</b>
<b>Email Template Example</b>	<b>13</b>
<b>Phone Call Script Example</b>	<b>13</b>
<b>Select Your Therapist</b>	<b>14</b>
<b>Communicating with Your Therapist</b>	<b>14</b>
<b>Stay Connected</b>	<b>15</b>

## This Guide Seeks to Pull Community Resources

You're here because you want to find a therapist that meets your needs specifically. Maybe you attempted to sign up for our program to get assistance in finding a therapist but were informed that our waiting list was full and you will have to apply during the next opening. We understand that waiting can be frustrating when the care you need is pressing, but due to our limited number of volunteers, we have to cap the list off at a certain amount. We created this Guide to Finding a Therapist in the hopes that this document will help you with the process of finding a therapist while you wait, and prepare you for navigating the mental healthcare industry while securing your therapy.

Therapy can be a safe haven to explore yourself, work through trauma, find resources, learn how to regulate your mood, create crisis plans, etc. We would recommend therapy for everyone who wants it, even people who are not in crisis or have no experience with mental illness. Scheduling time each week, or biweekly, to do self-work can be very helpful and might improve

certain things in your life. However there are many barriers to finding a therapist, such as time, energy, insurance, and lack of therapists that are queer, BIPOC, and disability allied. That's why we created this guide, to highlight the issues and benefits of therapy, to be informative about how to find a therapist, and to outline a clear way forward so that you can find a therapist who is the best match for you, who fits with your financial and therapeutic needs, and who holds space for your lived experiences. In this guide, you will find prompts to help you start your journey, therapist databases and resource lists, information about how insurance works as well as how to navigate finding a therapist without insurance, scripts and templates to help you start a conversation with your potential therapist and more!

## Systemic Issues in Mental Healthcare

Therapy can be really helpful, but it cannot reverse the symptoms of capitalism and oppression. It also works within an oppressive system, and while it is designed to help people get the resources and care they need, it is also held within a system that is designed to marginalize people, categorize people and profit off of people who are suffering.

It is important to recognize the shortcomings of therapy so that you can look for a therapist who is actively working against the grain and fighting the ways in which mental healthcare fails its patients/clients.

If you are utilizing insurance, your therapist will need to give you a diagnosis (no matter how much or how little time they have spent getting to know you), in order for your insurance to consider paying for your therapy. In order to make a diagnosis, therapists consult the Diagnostic and Statistical Manual of Mental Disorders (DSM). The DSM is a manual published by the American Psychiatric Association (APA) that guides mental health professionals in diagnosis and treatment. The DSM is the book that therapists are trained on in school. It's important to recognize the problems with this book so that you can understand how they are diagnosing you and recommending treatment.

### Racism in the APA (TW: racism)

Since the start of the APA, practitioners have abused and experimented on people of color in the name of "science." They have created and enforced racist theories that harmfully impact views of race and healthcare practices across time through scientific racism, imposing racial hierarchies and promoting eugenics. It was even once considered a mental illness for an enslaved person to want to run away and not be forced into labor and abused. Today these effects echo loudly and there are still disparities in diagnosis between white and BIPOC patients such as in the diagnosis of [schizophrenia and psychotic disorders](#). Racism is ingrained into the structure of our mental healthcare system. We believe that therapists need to be resisting and actively fighting against this structure, that is why we make it a priority to discuss systemic

racism with the therapists we recommend, and vet them to make sure their attitudes align with our clients.

## Queerphobia in the APA (TW: homophobia and transphobia)

Earlier editions of the DSM in the 1970's identified homosexuality as a psychological disorder. As recently as 2012, the DSM-4 included 'gender identity disorder' as a psychiatric disorder. Gender dysphoria is still listed as a psychological disorder in the DSM-5 and the criteria is about an incongruence between gender assigned at birth and their gender; a desire to transition; and distress about gender in social situations, at work, or in other important areas of life.

Diagnosis can be really helpful to some – it can create community and help build self-identity, however when an institution like the APA takes away autonomy and claims that certain gender experiences are a mental illness, it can be detrimental to oppressed people everywhere. The diagnosis of gender dysphoria is also used so that individuals can have their gender affirming care covered by insurance. Most people need to get a letter from a therapist or a psychiatrist to prove they experience enough distress about their body in order to receive gender affirming care. We believe people should just be trusted about who they are and should have the bodily autonomy to receive gender affirming care without being pathologized.

## Mandated Reporting (TW: involuntary confinement, assault and carceral violence)

Therapists are mandated reporters. This means that therapists must report child or elder abuse, and if they think you are a harm to yourself or others, otherwise they could lose their license. In cases involving potential self harm, it can be traumatizing and potentially life threatening when a therapist calls the police on someone instead of spending the time to de-escalate the situation. Therapists might do this because their client is feeling suicidal, which can be a constant state for some people and is not always indicative of a need for crisis care. When called by a therapist, the police are more likely to escalate the situation than de-escalate. People call the police on people of color more often which can lead to incarceration, forced time in a psychiatric hospital, or harm or death. We believe there should be a deescalation process to help navigate nuanced situations like these rather than the government requiring therapists to call 911 which can lead to people untrained in mental health crises arriving on the scene and making things much worse.

Psychiatric hospitals can be traumatizing not only because of the lack of autonomy, but assault and harm have also been documented. According to [SAMHSA](#), Black people were admitted to psychiatric hospitals at twice the rate of white people by percent of population. This is a

significant amount more and these admissions are both voluntary and involuntary. We believe that admission to psychiatric hospitals is not always necessary, should be with the informed consent of the individual and the carceral aspect of these hospitals are what make them harmful. We encourage therapists to work with their clients to make treatment plans and crisis plans that avoid carceral scenarios whenever possible.

## What This Guide Offers

It might sound like we are saying that therapy is bad, but it doesn't have to be. You can find individual therapists who resist harmful systems and who can really help you. It just often requires a thoughtful vetting process. This is why we are creating this guide, in order to aid you along your journey of finding the right fit. The Therapy Access Project has years of experience finding therapists for adults in the US who are actively resisting oppressive systems and that fit our values of:

- Anti-racist
- Anti-fascist
- Black lives matter
- Land back
- Trans and queer affirming
- Fat liberation
- Disability justice
- Transformative justice
- Sex positive
- Sex worker positive
- Housing for all
- Healthcare for all
- Anti-capitalist
- No borders
- Intersectionality
- Intersectional feminism
- Police and prison abolitionist

Due to our experiences pairing therapists with clients, we know many of the issues that can arise while doing this labor. Use this guide as a compass, but also feel free to pick and choose the advice. Everyone is different and you can create a process that works for you.

## Why Seek Out Therapy

Therapy isn't systemic change. However, therapy might benefit you if you are looking for dedicated recurring time to do internal and external work. Therapy can be a good place to

explore things about yourself, like your emotions or identities. You can also use this space to work on ways to cope with common stressors in your life, or to create a plan of what to do when you are in a crisis. Therapists can be helpful people to brainstorm ideas with, give you feedback, and can help you find resources that you might not know about otherwise. You might find yourself creating an important bond with your therapist that allows you to feel safe enough to process trauma or open up about difficult topics.

You can use the therapy space to talk about many things including (but not limited to):

- Personal or professional goals
- Political climate + oppression (internal and external)
- Activism
- Dreams
- Any of the -isms (racism, ableism, anti-semitism etc.)
- Your relationship with food/exercise/drugs/rest
- Anxiety or feeling on edge
- “Grind” culture
- Love or loneliness
- Feeling overwhelmed
- Your relationships with friends, family, co-workers
- Self-esteem or sense of self
- Work-life balance
- The last intense emotion you felt
- Progress (of any kind/magnitude)
- Relapse (of any kind/magnitude)
- Self care + community care
- Feeling “Off”
- Coping skills
- Sleeping patterns
- Body image + body dysmorphia
- Phobia (think: fat phobia, Islamophobia etc.)
- Pandemic
- Religion
- Grief

This list of things to talk about in therapy was created by [Oumou Sylla](#). Thank you Oumou for allowing us to use your work!

## Types of Therapy

The Therapy Access Project focuses on finding individual therapists, although there are many types of mental health professionals who can be useful in different situations, here are a few:

- Therapist: offers therapy to individuals and cannot prescribe medication.
- Social worker: can be licensed to practice therapy as well as doing other types of social work such as case management.
- Marriage and family counselor: works with two or more people at a time and focuses on the relationship.
- Psychiatrist: focuses on medication, diagnosis, and other treatment options.
- Psychologist: focuses on research and psychological testing for diagnosis but sometimes offers therapy.
- Death Doula or Death Midwife: supports an individual as well as involved family/friends through the process of dying.

When selecting a therapist, it might be important for you to find somebody who works with a specific modality that fits with the style of therapy you are looking for. Here is a brief explanation of a few different modalities that you might want to know more about:

- Psychoanalysis and psychodynamic therapies:
  - Focuses on changing behaviors, feelings, and thoughts by discovering their unconscious meanings and motivations.
  - These talk therapies originated from theories developed by Sigmund Freud who is currently criticized as being unscientific.
  - Full-blown psychoanalysis is 4-5 meetings a week with a psychoanalyst, while psychodynamic therapy is usually 1-2 times a week.
- Cognitive Behavioral Therapy (CBT):
  - Works to eliminate “problematic” cognitive distortions and check back in with reality.
  - Focuses on changing thoughts and behaviors through numerous coping skills taught and practiced within the therapeutic setting.
  - Though there are different approaches, CBT is criticized by some for being dismissive of clients' reality and focusing solely on internal solutions.
- Dialectical Behavioral Therapy (DBT):
  - Is a modified version of CBT created by Marsha Linehan, a psychologist who experiences Borderline Personality Disorder (BPD).
  - The principals are:
    - Mindfulness
    - Distress tolerance
    - Interpersonal effectiveness
    - Emotion regulation
  - Therapists teach tangible skills in each area.
  - Initially was created for people with BPD who are suicidal and is also helpful for people who struggle to regulate or contain their emotions.
- Feminist therapy:
  - Acknowledges that the personal is political.
  - Focuses on gender identity, sexism and oppression.
  - Identifies skills and strengths to recognize/embrace one's personal power.

- Seeks to empower those who feel silenced or oppressed in society.
- Somatic therapy:
  - Acknowledges that trauma is held in the body.
  - Looks at the body-mind connection.
  - Utilizes psychotherapy and movement for holistic healing.
  - Works with stress, anxiety, depression, addiction, trauma and other disorders.
- Internal Family Systems or Parts therapy:
  - Holds that personality is composed of various subconscious parts.
  - Parts-therapists are mediators to resolve inner conflicts.
  - Goal is to improve the relationships between the different parts so they can help alleviate internal conflicts and operate as a whole being.
  - Works with trauma, depression and other disorders.
- Eye Movement Desensitization and Reprocessing (EMDR):
  - Works to alleviate distress associated with trauma.
  - Processing traumatic memories while focusing on external stimuli such as eye movements.
  - Tends to be used in conjunction with talk therapy, since it can activate traumatic responses.

Group therapy is another option that can give you the space to process or learn coping skills amongst a group of peers. These groups can be led by licensed therapists, social workers, mental health professionals or even other peers within the community. Group therapy is often a cheap or free alternative that sometimes uses a “pay-what-you-can” donations based payment structure. You may be able to find group therapy that has a focus specific to your identity, experience or situation where you can open up to others who may relate to what you are going through.

## Insurance and Therapy Costs

Therapy can cost about \$100-\$350 per hour depending on location and specialties, which is a price point that is completely inaccessible for most people. Insurance will significantly cut down on that cost, typically ranging from a few dollars to \$50 or more, but it can also be really complicated to use. Not everyone has insurance and the financial burden of therapy can be overwhelming which keeps many people from starting therapy in the first place. Though rare, it is possible to find cheaper or free options.

If you are utilizing insurance, you will need to have some information about how your insurance plan works before reaching out to therapists. Consider going on your insurance plan's website or calling your insurance company to ask them some questions about your coverage. Here are some questions you might want the answer to before starting your search for a therapist:

- Does my insurance plan cover therapy?
- Do I need prior authorization before obtaining therapy? How do I obtain that?

- What is my copay (the amount of money I have to pay and my insurance doesn't cover) for therapy?
  - Note: ask yourself if this copay is something you can afford weekly or biweekly. If not, consider looking for a therapist that offers "sliding scale" sessions at a rate you can afford.
- Do I need a referral from my primary care physician before going to therapy?
- If I chose a therapist that is "out of network," (these providers are not initially covered by insurance), can I use a "super bill" (which is a list of services that have been provided to me by my healthcare provider) to be reimbursed? If so, how much will you reimburse me and what is that process like?
  - Note: using a superbill to be reimbursed can be helpful but it is a process that takes time, energy and you will have to be able to pay your therapist upfront only to be reimbursed later.
- Do I need to meet my deductible (the amount I pay for covered health care services before my insurance plan starts to pay) before my plan starts covering therapy?
- Once I do meet my deductible, how much will you cover?
- Can you offer me a list or database of "in network" therapists (these are providers who are known to be covered by the insurance plan)?

Finding out the answers to these questions might be stressful and the wording can be confusing but it is important to take the time to learn what you are getting into financially before choosing a therapist.

If you do not have insurance, it is possible to find therapists who offer cheaper therapy called "sliding scale" but you will be more limited in your options. Some therapists who claim to offer sliding scale therapy will still charge very high fees, that is why it's important to ask about the range they offer. Some therapists do sliding scale ranges dependent on income level so you may have to provide some documentation of your income. It is also possible to find sliding scale therapy at different local health centers and clinics. Go to the section in this document titled "For Those Without Insurance" for more information.

## Identify Your Needs

Knowing all of this, what do you want from therapy? Make a list of what you want, need, and are looking for in a therapist.

Here are some questions to help you get started:

- What would you like your therapist to **specialize** in? (examples: neurodivergence, C-PTSD, eating disorders, bipolar disorder)
- What would you like your therapist to be **competent** in? (examples: queerness, Blackness, anticarceral care, sex work, fatphobia)



- How would you prefer your therapist to **identify**? (examples: nonbinary, Native American, fem)
- Is there a specific **modality** you want your therapist to practice? (examples: somatic therapy, feminist therapy, DBT)
- Do you have any **access needs**? (examples: virtual sessions, dim lighting, wheelchair accessible office, scent-free office)
- Do you prefer **virtual or in person** therapy?
- **How often** would you like to attend therapy? (examples: weekly, biweekly, monthly)
- What is your weekly therapy **budget**?
- What kind of **insurance** plan do you have?
- Is there **anything else** you are specifically looking for?

Turn each of these wants and needs into questions to ask potential therapists. For example:

- It's really important to me that my therapist shares my identity. I am bisexual, is that how you identify?
- Do you have knowledge about family dynamics in Latinx culture?
- Are you anti-capitalist?
- Have you ever been or are you currently in therapy?
- What is the extent of your experience with non-binary clients?
- Do you offer sliding scale therapy? My budget is \$\_\_\_ per week.

Here are some extra vetting questions that we always ask in order to get a feel for who they are as a therapist and what they are bringing into their sessions:

- How do you hold space for the experience of queer and trans clients?
- How do you hold space for the experience of Black, Brown and Indigenous clients?
- What ways do you respect and validate your client's autonomy in terms of medication, diagnosis, and institutionalization?

Another thing you might need in this process is support because it can take a lot of time and energy to find the right therapist for yourself. Everybody has different skills and energy levels. It is possible to ask a friend, community member, caretaker or someone else you are in relationship with for support. Maybe they can take on some of the research load and send you therapist profiles to consider, or you can send them your list of questions and they can make phone calls on your behalf if you don't feel comfortable doing that yourself. Maybe what you need is an accountability buddy to help you stay focused on this task. You can even just ask for emotional support and have a dedicated person to complain to about this process. Whatever the ask is, try to be clear in your communication with this person and stay cognizant of their boundaries. Consider sending this guide to a friend and ask if they would be willing to spend some time working on an aspect of this process with you.

# Do Your Research

Start a document where you can add each therapist and store information about them as you research. You don't want to lose this information, especially in cases that you want to follow up. We suggest creating a spreadsheet (consider Google Sheets because it is free and can be easily shared with others) and include columns for each question that you plan on asking the therapists as well as logistical things like contact info. You can also write it all down on a sheet of paper as you go if you prefer.

Begin your research by choosing your database. There are many and they all serve a different purpose, but generally they are very similar in that you can filter through therapists near you using different categories and then read their bio before contacting them.

Here are some databases that we use:

- [Psychology Today](#) (a commonly used therapist database that has filters and a long list of therapists)
- [Open Path Collective](#) (this database is good if you don't have insurance because they offer \$30-\$70 therapy sessions but there is a \$65 one time fee)
- [National Queer and Trans Therapists of Color Network](#) (QTBIPOC mental health practitioners)
- [The Inclusive Therapist Directory](#) (for people with marginalized identities to find equitable access to radically affirming, culturally responsive mental health care)
- [World Professional Association of Transgender Health](#) (trans healthcare providers including therapists)
- [Therapy for Black Girls](#) (Black woman therapists)
- [Abolition Centered Care Provider Database](#) (abolitionist and non-carceral care providers, including therapists)
- [Therapy Den](#) (allows you to filter therapists by gender, sexuality, ethnicity and cost as well as more specific things like if they are sex worker positive, have wheelchair accessible bathrooms and what languages they speak)
- [American Association of Marriage and Family Therapy](#) (marriage and family therapist locator)
- [The American Association of Sexuality Educators, Counselors and Therapists](#) (sexuality counselors and sex therapists)
- [Latinx Therapy](#) (Latinx therapists)
- [Latinx Therapist Action Network](#) (Latinx therapists)
- [Neurodivergent Therapists](#) (neurodivergent therapists)
- [Meet Monarch](#) (allows you to filter by things like approach and availability)
- [Black Emotional and Mental Health](#) (virtual Black therapists, doulas, yoga teachers, mediators and other virtual wellness practitioners)
- [Hello Alma](#) (allows you to filter by things like identity and specialty)
- [Gaylesta](#) (queer therapists)

- [Chicago Black Therapists](#) (Black therapists in Chicago)
- [South Asian Therapists](#) (South Asian therapists)

The filters are your friend and can help a lot, but you will have to do a lot of filtering yourself. Click on the profiles and read their bios. Do they speak about themselves in a way that resonates with you? You might be able to see if they meet some of your criteria by reading the profile. They may also talk about their identity or therapy style in their bio.

If you are having a hard time finding a therapist that takes your insurance, you might have to check the insurance website or call your insurance's phone number and ask to see a database that lists covered therapists. This will probably have less filters and might not even have pictures or bios, but sometimes this is the only option. Reaching out to therapists from that database might work, it will just take a lot more trial and error.

If you are struggling to find a therapist in your area, consider utilizing virtual therapy and widening your search to other areas in your state. Therapists are licensed by state and it can be easier to find therapists in certain regions, so if you live in a small town or rural area, it might be easier to find a good fit in the largest city within your state.

## For Those Without Insurance

If you don't have insurance, it is possible to use the above databases to look for cheaper "sliding scale" therapy using the filters. If you are having trouble finding therapy in your budget, try doing research on cultural centers or health clinics that offer free or sliding scale therapy in the area. Is there a 2SLGBTQIA+ center nearby that offers therapy? Try Google searching your location with key words about what you are looking for (example: free therapy Chicago queer) or use the [HRSA Data Warehouse](#) to search for local federally qualified health centers, some of which (not all) offer sliding scale mental health care.

Navigating these centers and clinics can be a little more difficult because you don't normally have access to the individual therapists information (like their bio) and you will most likely be talking to an administrative team who might assign you a random therapist without asking your preferences, so try to be clear about what type of therapist you are looking for. They may also put you on a waitlist because therapists can be in high demand.

Another option is to reach out to local universities or medical schools because therapists in training often offer free or sliding scale therapy. You can also contact pre-licensed therapists who work as interns at therapy practices and need to fulfill a certain number of hours before getting their license. They also usually offer sliding scale therapy at low rates. One thing to consider is that you may have a time limit with these interns and therapists in training because they might eventually leave to start working as a licensed therapist elsewhere and will begin to charge higher rates.

It is also possible to find grants or funds that help cover your therapy costs for a certain number of sessions. Here is a list of some organizations that offer grants to cover therapy costs:

- [The Mental Health Fund \(MHF\) for Queer and Trans Black, Indigenous and People of Color \(QTBIPOC\)](#)
- [Loveland Therapy Fund for Black women and girls](#)
- [Inclusive Therapists' BIPOC Therapy Fund](#)
- [Lotus Therapy Fund from the Asian Mental Health Collective](#)

## Reach Out & Vet Potential Therapists

This is where you get to ask the questions you created earlier. You have to decide between calling them or emailing them. Here are pros and cons to both:

**Emailing:** You can make a template email to copy and paste and send to a lot of therapists, which eliminates playing phone tag. However, you won't be able to get a feel for who they are in conversation. It is also easier for a therapist to not reply to an email. If you have them on the phone, you have their attention.

**Phone:** When you call, you will be able to ask them your questions and find out what their unfiltered, automatic response is. You will hear their tone and be able to feel out how they like to communicate and if it vibes with your communication style. However, you will probably spend more time doing this and will have a harder time reaching people, especially right away.

You can also email them to set up a time to talk on the phone, thereby avoiding phone tag and getting a human connection. Although, if you have phone call anxiety, make sure to listen to yourself and your comfort level.

Some databases only show either an email or a phone number so you might have to stick to whatever mode of communication the therapist made public. Our tip for this is to search their name or practice on Google and try to find their website which might have more information about how to reach out.

Some therapeutic practices and clinics have an administrative team that you will have to communicate with before connecting with the therapist in question. They don't always allow you to talk with the therapist directly before your first appointment, so you can ask the team some of the logistical questions (about insurance for example) and then either ask them to relay the other questions to the therapist or you can ask them to set up a meeting between the two of you in order to ask the questions that only the therapist can answer.

When reaching out, don't be afraid to be upfront about what you are looking for. Ask the questions that you pre-created and start a dialog with your potential therapist. While asking the questions, it's ok to be clear about your needs and push back against things that they say especially if they make you uncomfortable. You are essentially vetting them in order to decide if

you want to hire them as your therapist, so you can treat it like a job interview. This is about you and what will be most helpful for your mental health. Stick to your questions but let the conversation flow. You might learn some interesting stuff about them.

You will have to reach out to many therapists and it may take some time. Therapists can take a while to get back to you and sometimes forget, so don't be afraid to be persistent and send follow up emails or call multiple times. You may find it helpful to carve out a block of time to intensely focus on this one task of emailing and calling, or you may prefer to space them out so you don't exhaust yourself. Make sure to take care of yourself because having these vulnerable conversations can be really draining.

Don't forget to take notes about each therapist in the document you created! This will allow you to compare your options.

## Email Template Example

Hi \_\_\_\_,

This is \_\_\_\_ and I am emailing because I think that you could possibly be a great fit for me as a therapist and I was hoping to ask you some questions before scheduling an intake with you.

(Add or remove as many questions as applicable and needed)

- Do you have upcoming availability?
- Do you specialize in \_\_\_\_?
- It's important for me to have a therapist who identifies as \_\_\_\_, is that how you identify?
- Do you accept \_\_\_\_ insurance?
- Do you offer sliding scale therapy? My budget is \$\_\_\_\_ per week.
- How do you hold space for the experience of queer and trans clients?
- How do you hold space for the experience of Black, Brown and Indigenous clients?
- What ways do you respect and validate your client's autonomy in terms of medication, diagnosis, and institutionalization?

I appreciate your responses and the work that you are doing to make the world a more balanced and beautiful place.

Warmly,

\_\_\_\_\_

## Phone Call Script Example

Hi, this is \_\_\_\_ and I am calling because I think that you could possibly be a great fit for me as a therapist and I was hoping to ask you some questions before scheduling an intake with you.

(Add or remove as many questions as applicable and needed)

- Do you have upcoming availability?
- Do you specialize in \_\_\_?
- It's important for me to have a therapist who identifies as \_\_\_\_, is that how you identify?
- Do you accept \_\_\_ insurance?
- Do you offer sliding scale therapy? My budget is \$\_\_\_ per week.
- How do you hold space for the experience of queer and trans clients?
- How do you hold space for the experience of Black, Brown and Indigenous clients?
- What ways do you respect and validate your client's autonomy in terms of medication, diagnosis, and institutionalization?

## Select Your Therapist

This is where you have to make a choice. You have done all the hard work and it has hopefully paid off! Which therapist has a style that speaks to you? Who meets your criteria? Who did you get a good feeling from? Can you imagine yourself becoming comfortable and trusting of one of these therapists in the future? Did it feel like any of them either got you, or were beginning to get you and what you are going through? If you still haven't gotten a good sense of a therapist, it could be beneficial to schedule a few sessions with them to explore and figure out if you connect. The number one predictor of a positive outcome in therapy is the quality of the relationship between therapist and client.

Chances are you might not have too many options especially if you don't have insurance or if you have very specific needs, but taking the time to do all this work will pay off when you have a therapist who truly understands you, someone you don't have to educate, and who won't violate the trust you've built together. Take the time to celebrate your hard work!

## Communicating with Your Therapist

Because of the power imbalance that exists between client and therapist, some folks may feel like once they finally have found a therapist they should stick it out no matter what. However, therapists are people who have biases and make mistakes just like anyone else. While your therapist may have studied certain disorders, experiences, or ways of being, you are the expert of your own mind. Feel free to push back on things that they say, especially if they don't sit right with you. The therapeutic relationship is just another type of relationship that requires communication and collaboration like any other. If you feel safe and comfortable, you can tell your therapist when they get something wrong.

If they:

- Misgender you
- Are not understanding of your perspective
- Say something racist, transphobic, ableist, classist, homophobic, etc.
- Assume something about you or the situation
- Diagnose you with something you don't feel comfortable with
- Project their own issues onto you

You can tell your therapist they made a mistake by:

- Using “I” statements to highlight what made you uncomfortable or upset.
  - “I felt \_\_\_ when you said \_\_\_.”
- Asking if you interpreted their meaning correctly.
  - “When you said \_\_\_, I interpreted it as \_\_\_. Is that what you meant?”
- Setting boundaries.
  - “It made me feel \_\_\_ when you said \_\_\_. If this continues, I won't be able to work with you anymore.”

While it is not your responsibility to educate your therapist, you can offer your perspective on how they should hold themselves accountable. This may allow you to work through the mistake as a team.

Your therapist can hold themselves accountable by:

- Acknowledging the rupture and validating your feelings.
- Apologize without shame spiraling or making it about themselves.
- Clarifying their perspective and discussing how and why it might differ from your own.
- Acknowledging your perspective and incorporating it into future sessions.
- Respecting your perspective, experiences, desires and needs.

If you decide the mistake was beyond mending by accountability, you should trust yourself and your ability to care for yourself and set boundaries. This could mean taking a break, ending therapy or finding another therapist who might be a better fit.

## Stay Connected

We hope this guide was helpful and that you can take care of yourself during this search process because we know how exhausting and time consuming it can be. With persistence and a little support, it is possible to find the care you need! If you have any questions feel free to reach out to us via email at [therapyaccessproject@gmail.com](mailto:therapyaccessproject@gmail.com). Don't forget to check in with us frequently and follow us on social media (@therapyaccessproject on Instagram) to stay updated about our application openings and projects.

A huge thank you to all of the incredible people who edited and gave feedback for this guide:  
Allison Linne, Atta Zahedi, Kim Campbell, Olivia Brownlee, Rachel Reinhart, Steph Cook, Taylor  
Leisher, Meena Statz, and Sophia Burke. Written by Finn Bradley.