# **SANDYFORD**

caring about sexual, reproductive and emotional health







the hip-hop wet made a log uncker than an album, par ceause it's O.K. if it sounds rough nixtape is about the log of the

for sale there is little cause for action.

Will put out five of "Ransom," in 2014 ing-impatier are any ind which w ary 29t bes, which that, u, r the Internet "Ra lly be for sale, partnership with whi n't seem all that happy about this arrangement, but he had little choice but to go along. "I recognize that I am in business with them,"

Will and his co-producers must track down the copyright holders each sample and negotiate the record's profits. And, s no limit to the size of copyright holders can begin with wildly infla asking for seventy-fiv the use of a record's earnings, say, two-second percussic melody— and hold up the album until the satisfied. All of which is a new th for Will and his team, who, despite th ir precocious ill learning success as producers, are when it comes to the fine licensing-royalty splits.

"He's an entrepreneurid guy," Jinh w Iovine said of Will. "Te hustles, he works hard, and he has brilliant ideas. Now it's all about fritow-through. H



where he met a menu who has a mo-

A Pluss was having a lub. Will got a late en in the mornclub with his tely shouted L Made-It ed around. in the b ore, with The plac bare conc s. some a lot of furniture sc people dancing, some on tables and couches. Now and then, a rapper would jump up and flow to a beat. Will went up to the booth and played a couple of records, then headed back down.

A guy near the bar, who was dressed with the white, was someone Will had known so his teen-age years in Marietta. He go, very agitated that the dijust hat put of the song he was trying to promote. It was obviously drunk. He go. What's face, and then Will's friend by, who was already at the district of the control of the

"Man, they what to give me the mitrophone to te farm!" the guy said.
"You got to understand the difference between pulling and pushing, Will responded, putting his arm around the guy. "You can't make people like your same. You got to have dope music and get people to fuck with your music. Will talked to him for five minutes or

ming a I g Will said.

Back in the c r, Will expressed his ming a I g Will said.

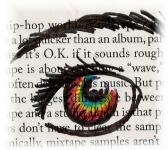
Trustration I g chinks I can do some prybode's first rodeo. And thing for I m and make that shit how that's reason the grant see and respect that

# **NHS Services -**

# The Young People's Gender Service

This leaflet provides information about NHS services in Scotland for young people who are experiencing distress and / or uncertainty about their gender identity.

The Young People's Gender Service is a multi-disciplinary team based in Glasgow who specialise in working with young people up to the age of 18, experiencing uncertainty or distress about their gender. The Service provides clinical input for young people and their families from across Scotland, as well as consultation



and training to professionals and other agencies.

## **Referral process**

Referrals are accepted from a variety of sources, including GPs, Child and Adolescent Mental Health Services (CAMHS), schools and social work. The service also accepts self-referrals, either by email or phone call. However, it can be useful to speak with a GP about a referral first, as there may be other stressors or difficulties that they could help with at the same time. For example, some young people may also benefit from a referral to their local CAMHS if they are feeling low, anxious, or are at risk of self-harming.

# Frequently asked questions

## What will happen during the first appointment?

You will meet with a clinician who has experience in working with children and young people and who will take a person-centred and non judgmental approach. Depending on a young person's age and their own preference, they may be seen individually or with a family member. During the first appointment you will be asked what you hope to get from coming along. It is okay to say you are not sure.

In order to help, we will need to complete an assessment.

Discussing gender can be a very personal and sensitive thing so there is no need to feel under pressure to rush. The assessment often takes a number of appointments.

#### What will we cover in an assessment?

The clinician will ask about gender identity and its development. They will ask about lots of other things, too, such as a young person's interests, how they spend their time, their relationships and their strengths. They will also ask about growing up and a young person's physical health. The clinician will be interested to know more about your family and how things are going at school. Time will also be spent talking about a young person's hopes and goals for the future. You may be asked to complete some questionnaires. It is not unusual for an

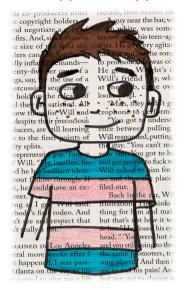


assessment to take place over a number of months. Time between appointments will allow each person an opportunity to reflect on what has been covered and also, for some people, enable them to take steps to move forward.

#### What happens next?

When the assessment has been completed there may be a number of outcomes, including individual or family work, referral to another service, referral to a specialist in hormone treatments for children (Paediatric Endocrinology) or referral for further assessment for hormone therapy. Sometimes all of these things are suggested. Each person's care is tailored to their needs.

## What types of support does the Service offer?



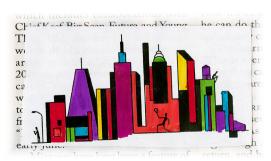
The Service offers a range of different supports to young people and their families. Everyone is different so each plan is individualised based upon their assessment. The service may provide individual support to young people to help them think through different aspects of their gender identity and helping them to make sense of their experiences. We sometimes offer support to parents or whole families to understand gender identity development and help them to communicate with each other about this. The Service can provide support

and advice to schools. We want to help our young people to keep well and live healthy and rewarding lives.

#### Counselling and support services

Sandyford Counselling & Support Services (SCASS) provides a Counselling Service for young people, aged 13-17 years, who are exploring / questioning their Gender Identity or considering transition. SCASS works alongside Sandyford Gender Identity service and provides a safe space for young people to explore their Gender concerns and issues with a qualified Counsellor. You can be referred to the service by yourself, your GP or another service and can contact us on 0141 211 6700.

Sandyford Counselling & Support Services (SCASS) is based within NHS Sexual Health Services.



### What are puberty blockers and will they be offered?

Following assessment a young person may be referred to an Endocrinologist to consider if puberty blockers would be helpful. Puberty blockers suppress the sex hormones naturally produced by the body. This means that puberty is effectively paused. Puberty blockers will only be considered if puberty has started and assessment shows that the young person is experiencing clear, persistent and consistent gender dysphoria.

If a young person is referred for puberty blockers they will continue to meet for regular review appointments with the



Gender Service, as well as attending Endocrinology. The effects of puberty blockers are considered to be fully reversible. A young person can stop puberty blockers without progressing onto further treatment.

# What are gender affirming hormones and will they be offered?

Gender affirming hormones may be prescribed to a young person with gender dysphoria. These hormones help affirm the gender the young person feels is correct for them by changing their body. For example, a young person who was assigned female at birth but who identifies as male may be prescribed masculinising hormones. For another young person who was assigned male at birth but who identifies as female, they may be prescribed feminising hormones.

Will put out five of them before nsom," in 2014 Fans have been wait—impatiently, if Twitter comments any indication—for "Ransom 2," ch was supposed to drop on Janus 29th. One reason for the delay is unlike the previous mixtapes, which is leaked for five over the Internet, a som 2 will a tually be for sale, his part of Will's partnership with a way in the building." Everyone looked. The place was a cleaned—but stop have concerte floors and wall furniture secreted as

In Scotland a young person needs to be at least 16 to be started on gender affirming hormones. Following completion of the first assessment, consideration may be given to using gender affirming hormones. The decision to start on gender affirming hormones for a young person under the age of 18 is made on a multi-disciplinary basis. This means that the young person will meet with another clinician for further assessment before hormones are started. We try to make sure there is not too long a wait before this further assessment appointment happens.

# **Our Confidentiality Promise**

A professional has a 'duty of confidentiality'. At Sandyford Services, this means we must not disclose anything learned about a young person without their agreement. We will have an open chat about confidentiality as we know how important it is not to break trust. You can be sure that anything discussed with the Gender Service – the doctors, clinical psychologists, counsellors, nurses, the occupational therapist or receptionists – will stay confidential. The only reason why we might have to consider passing on confidential information without permission would be to protect a young person or someone else from serious harm. We would always try to discuss this first though. If you have any worries about confidentiality, please talk to us about this.

# Contact details for the Young People's Gender Service:

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Telephone: 0141 211 8618

Web: http://www.sandyford.org/

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