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TRANSGENDER PARENTING: A REVIEW OF EXISTING RESEARCH

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EXECUTIVE SUMMARY

This report reviews existing research on the prevalence and characteristics of transgender people who are parents, the quality of relationships between transgender parents and their children, outcomes for children with a transgender parent, and the reported needs of transgender parents. Our analysis of the research to date, which includes 51 studies, has found the following:

- Surveys show that substantial numbers of transgender respondents are parents, though at rates that appear lower than the U.S. general population. Of the 51 studies included in this review, most found that between one quarter and one half of transgender people report being parents. In the U.S. general population, 65% of adult males and 74% of adult females are parents (Halle, 2002).
- Some studies suggest that there may be substantial differences in the rates of parenting among trans men, trans women, and gender non-conforming individuals. In all the studies included in this review that provided data about different transgender subgroups, higher percentages of transgender women than transgender men reported having children.
- Two studies have found that people who transition or “come out” as transgender later in life tend to have higher parenting rates than those people who identify as transgender and/or transition at younger ages. This higher rate of parenting could be due to individuals becoming biological parents before they identified as transgender or transitioned.
- Of the six studies that asked about both “having children” and “living with children,” all found that there were more transgender respondents who reported having children than living with children. It may be that many of the respondents represented in these studies had adult children who are no longer living with them. However, there is some evidence that formal and informal attempts to limit the contact of transgender parents with their children may also partially explain this discrepancy.
- In studies that asked transgender parents about their relationships with their children, the vast majority reported that their relationships are good or positive generally, including after “coming out” as transgender or transitioning.
- Studies on the outcomes for children with transgender parents have found no evidence that having a transgender parent affects a child’s gender identity or sexual orientation development, nor has an impact on other developmental milestones.
- Transgender parents have reported having social service needs related to child care, networking with other parents, and support for family planning.
- Transgender parents have reported discrimination – either formally through the courts or informally by the child(ren)’s other parent – in child custody and visitation arrangements. Transgender people who wish to adopt may experience discrimination in adoption.

Based on our review of existing research, we recommend the following for future research endeavors:

- To advance research endeavors about transgender parents, federal agencies and administrators of national population-based surveys should include questions to identify transgender respondents on surveys, such as the American Community Survey (ACS) and the National Survey on Family Growth (NSFG). While research that targets transgender parents is necessary, the ability to identify transgender people in national, population-based datasets will help create national benchmarks for certain aspects of transgender parenting.

- More research is needed to understand differences in parenting rates among various groups of transgender people, including to examine differences based on gender, race/ethnicity, and socioeconomic status, whether a parent has transitioned, age of transition, factors related to family formation, and other characteristics that may drive differences in parenting rates among transgender people. Research on these topics may shift over time in terms of outcomes as society becomes more accepting of transgender and gender non-conforming people.
- Further research is needed to determine whether discrimination against transgender parents or potential parents – either formally or informally – has an impact on the prevalence of parenting, as well as the prevalence of children living with a transgender parent.
- Further research is needed to more clearly illuminate how parent-child relationships evolve in relation to a parent’s transition. Research on parent-child relationships should take into account the age of the children when transition occurs and examine transgender parents’ relationships with adult children and with children born subsequent to their transition.
- More research is needed, including longitudinal studies, to assess various developmental and other outcomes for children of transgender parents.
- Another area where research is needed is in family formation, including regarding increased availability of options to assist reproduction. A more nuanced approach to studying family formation among transgender people will provide better understanding of how transgender people are becoming parents and what their needs may be.
- Relatedly, further research is needed to understand the differences in family formation and parenting among transgender people by age cohort and by age of transition. Family formation may be quite different for self-identified transgender people who are currently younger and those who have transitioned at earlier ages than those who had children as part of relationships prior to their transition. Further research can illuminate these differences and the different needs of those cohorts.
- Future research should also consider focusing on gender non-conforming parents, including people who identify as genderqueer or outside the gender binary.
- Finally, further research and designed interventions are needed to begin to address discrimination by courts, adoption agencies, and foster care and child welfare systems.

Data collection and research in these areas and others will lead to a fuller understanding of the experiences and needs of transgender parents and their children, as well as discrimination and bias they may face.

INTRODUCTION

Until recently, very little research has been conducted about transgender parents and their families.¹ However, in the past decade, research in this area has increased exponentially. Of the 51 studies involving transgender parents included in this review, all but six were published after the year 2000 and approximately one-fourth were published in the last four years. This review is designed not only to describe the research conducted thus far in this burgeoning field, but also to make recommendations to guide this growing area of research.

In the United States, it is estimated that about 700,000 adults identify as transgender (Gates, 2011). In legislatures, courts, and government agencies across the U.S., decision-makers are increasingly confronted with issues that involve transgender people. A growing number of family courts, adoption agencies and child welfare workers have begun to encounter transgender parents and their families dealing with such issues as adoptions, custody disputes, and relationship recognition. In the courts, transgender parents who are in the process of transitioning have been shown to be particularly vulnerable in family court proceedings, especially those transitioning from male to female (Perez, 2009/10). For example, in *Daly v. Daly*, the Nevada Supreme Court terminated a transgender parent's parental rights after she began her transition.² The court blamed Suzanne, the transgender parent, for the loss she was enduring, stating: "Suzanne, in a very real sense, has terminated her own parental rights as a father."³ Within the child welfare system, states do not specifically prohibit transgender people from adopting children; however, there are not strong policies to protect that right (American Fertility Association, 2009). Only six states prohibit discrimination against foster and adoptive parent applicants based on gender identity in their laws or regulations.⁴ This means that adoption agencies are left to create their own policies, which can lead to discrimination (Ross et al., 2009).

This literature review is designed to inform decision-making in courtrooms, agencies, and among policy-makers by summarizing current research about transgender parents and to suggest to scholars further areas of research. We will present findings from the 51 existing studies in four emerging areas of research regarding transgender people in parental roles:

- 1) Prevalence and characteristics of transgender people who are parents
- 2) Quality of relationships between transgender parents and their children
- 3) Outcomes for children with a transgender parent
- 4) Needs of transgender parents

METHODS

In conducting this literature review, we searched a variety of sources, including academic articles, books, public health studies, community needs assessments, and reports about the prevalence and characteristics of transgender parenting and the experiences of transgender parents and their children. First, records in academic databases, such as Academic Search Premier and JSTOR, were searched using search terms such as "transgender," "transsexual," "gender non-conforming (GNC)," etc., and "parents," "parenting," "children," and "family," etc. Second, this search pattern was repeated when also searching the web utilizing Google web and Google Scholar. Reference mining, the practice of examining the references used in relevant articles to find additional articles or papers, was also used extensively. Studies were excluded that addressed the families of origin of trans people, or parenting a transgender child/youth, etc., and focused instead

¹ The studies reviewed in this paper define their population of interest in a variety of ways. We use broad inclusion criteria for studies reviewed here to include people who identify as transgender, transsexual, genderqueer, gender non-conforming, cross-dressers, drag kings, drag queens, and many more identities. For the purposes of this paper, we rely on the umbrella terms "transgender" and "trans" to refer to people who identify in this variety of ways. We use the broadest definition possible of parenting to include biological, adoptive, formal, and informal relationships where transgender people were fulfilling a parenting role. Also, given the minimal number of studies examining transgender people in parenting roles, we made the decision to be inclusive of our definition of parenting to capture the wide variety of definitions used in the literature to create a more comprehensive picture of child-rearing experiences.

² *Daly v. Daly*, 715 P.2d 56 (Nev. 1986) *overruled on other grounds by In re Termination of Parental Rights as to N.J.*, 8 P.3d 126 (Nev. 2000).

³ *Id.* at 59. Also, in *Magnuson v. Magnuson*, the Washington court of appeals granted primary residential custody to a non-transgender spouse over the transgender spouse because of her plan to transition. This ruling was made despite the findings of the court's guardian ad litem that the transgender spouse was more nurturing and engaged and recommendation that the child be placed in the transgender parent's care. See *Magnuson v. Magnuson*, 170 P.3d 65 (Wash. Ct. App. 2007).

⁴ CAL. WELF. & INST. CODE § 16013 (2009); CONN. GEN. STAT. ANN. § 46a-73 (West 2011); N.J. ADMIN. CODE § 10:122C-1.6 (2012); N.M. CODE R. § 8.26.5 (2011); N.Y. COMP. CODES R. & REGS. tit. 18 §§ 441.24, 421.3 (2013); 14-3 R.I. CODE R. § 174:1-II (2013). Vermont does not include gender identity in its statutory or regulatory language, but it explicitly indicates that it will not discriminate based on gender identity in either adoption or foster care on its website. Vermont Department for Children and Families. *Becoming a foster parent*. Retrieved from <http://dcf.vermont.gov/fsd/kids/fostercare/becoming>; Vermont Department for Children and Families. (2013) *State adoptions*. Retrieved from http://dcf.vermont.gov/sites/dcf/files/pdf/fsd/pf/Adoption_FactSheet.pdf

on only those that included transgender adults who had parenting experiences. When not available via the internet, authors of studies were also contacted to request hard copies of reports.

All of the 51 studies reviewed here utilized non-probability sampling methods and used a variety of definitions and terms to define the population of interest. Sampling for these studies mainly was localized, taking place within one city or locale, though a few engaged in nationwide sampling in the U.S. and in other countries. To the extent possible, we have grouped studies together to present their findings for specific groups of study participants. Details regarding the location, methods, and population definitions for each study are available in the appendix.

PREVALENCE AND CHARACTERISTICS OF TRANSGENDER PEOPLE PARENTING

Prevalence of Parenting

Surveys of transgender people have asked questions in a variety of ways when trying to ascertain respondents' parenting of, or providing care for, biological or adoptive children, having children as dependents, or living with children.

TABLE 1: PERCENTAGE OF TRANSGENDER OR GENDER NON-CONFORMING STUDY PARTICIPANTS WHO REPORTED HAVING CHILDREN/BEING PARENTS

	OVERALL	TRANS WOMEN	TRANS MEN	GNC ^a
Grant et al. (2011)	38.0%	52.0%	17.0%	20.0%
Factor & Rothblum (2007 & 2008)	23.5%	44.0%	7.7%	20.3%
Xavier et al. (2007)	29.0%	36.0%	16.0%	
Stotzer (2013)		47.0%	35.0%	
Kenagy & Hsieh (2005)		22.9%	15.9%	
White & Ettner (2004)		64.0%	47.0%	
Wilson et al. (n.d.)		50.0%	0.0%	
Reisner et al. (2014)	15.0%			
Green (2012)	36.0%			
Progressive Leadership Alliance of Nevada (2011)	30.0%			
One Colorado Education Fund (2010)	29.0%			
Dye (2009)	42.9%			
Erich et al. (2008)	46.2%			
Aitken, Kealey, & Adamson (2007)	26.0%			
Davis et al. (2006)	32.4%			
Zians & O'Brien (2006)	25.8%			
Cahill et al (2003)/Battle et al. (2002) ^b	19.4%/15%			
Croghan, Moone, & Olson (2012)		69.0%		
De Sutter (2002/2009)		39.9%		
Lawrence (2003) ^c		47.0%		
Wierckx et al. (2012)			22.0%	
Pfeffer (2010)			9.8%	
Lothstein (1988)			16.0%	
Docter & Prince (1997) ^d				69.0%
Brown et al. (1996) ^d				64.0%
Prince & Bentler (1972) ^d				74.0%

^a GNC stands for "gender non-conforming."

^b Cahill et al. (2003) and Battle et al. (2002) both report on data from the Black Pride Survey, but report different percentages of transgender people with children.

^c Lawrence (2003) specifically asked if they had been biological parents before surgical transition.

^d These studies include only self-identified men who cross-dress as women.

The most common questions in surveys of transgender people have been the broad questions, “Do you have children?,” “Are you a parent?,” or similar variants, without differentiating between biological children or other types of relationships with children and whether or not those children live at home or are adult children. Table 1 presents findings from the 26 studies that asked the broad questions above or similar variants, separating respondents into groups by gender whenever possible.

The second most common way of ascertaining transgender adults’ relationship to children was to ask whether or not they were “living with” children or currently “had dependents” (Table 2). Question wording regarding dependents varied, since this could include adult children, and few specified whether children were biologically or legally related, or whether there existed some other informal association. One study asked about “sharing in the financial support of a child or an adult,” which could also obscure whether the respondent was caring for an adult child, an adult with a disability, or an elder (Weinberg, et al., 1999).

TABLE 2: PERCENTAGE OF TRANSGENDER STUDY PARTICIPANTS WHO REPORTED LIVING WITH A CHILD/CHILDREN OR HAVING ONE OR MORE “DEPENDENTS”

	LIVING WITH CHILDREN				DEPENDENTS			
	OVERALL	TRANS WOMEN	TRANS MEN	GNC	OVERALL	TRANS WOMEN	TRANS MEN	GNC
Factor & Rothblum (2007)	6.0%	10.0%	3.8%	4.7%				
Dye (2009)	33.3%							
Xavier, et al. (2007)	15.0%							
Davis, et al. (2006)	17.6%							
Idaho Tobacco Prevention & Control Program (2004)	16.0%							
Cahill et al. (2003)/Battle et al. (2002)	2.5%							
Pfeffer (2010)			3.2%					
Grant, et al. (2011)					18.0%	22.0%	12.0%	11.0%
Passante (2012)					28.0%			
Open Door Fund (2010)					0.0%			
Weinberg, et al. (1999) ^a					23.0%			

^a Weinberg, et al. (1999) asked about “sharing in the financial support of a child or an adult.”

In certain studies, more respondents reported “having children” than “living with children.” For example, among 6 transgender and intersex people who reported that they had children, Aitken et al. (2007) found that only one respondent had a child living with them, and another reported that a child lived with them sometimes. It may be that many of the respondents represented in these studies had adult children who are no longer living with them. However, reports of discrimination in custody decisions (e.g., Erich et al., 2010; Grant et al., 2011; Couch et al., 2007) suggest that formal and informal attempts to limit the contact of transgender parents with their children may also partially explain this discrepancy.

COMPARING PARENTING RATES

Tables 1 and 2 suggest that a substantial number of transgender people are parenting in a variety of capacities, though the overall prevalence of parenting may be lower than the U.S. general population. For instance, in the National Transgender Discrimination Survey (NTDS), 38% of respondents reported being a parent versus 64% of the U.S. population at the time of the survey (Grant et al., 2011). Analysis by Gary Gates of data from the Gallup Daily Tracking Survey,

⁵ This finding is based on data from individuals age 50 or younger who are living alone or with a spouse or partner. See Gates, G. (2013). *LGBT Parenting in the United States*. Los Angeles: The Williams Institute, available at <http://williamsinstitute.law.ucla.edu/wp-content/uploads/LGBT-Parenting.pdf>

which is a nationally-representative survey, found that 35% of self-identified LGBT individuals had a child under 18 in the home as compared to 70% of non-LGBT identified individuals (Gates 2013).⁵ Based on these findings, there is evidence to suggest that transgender people parent at rates lower than the U.S. general population. However, it should be noted that overall rates of parenting increase as age increases, both in the U.S. general population as well as among respondents to the NTDS (Grant et al., 2011). Therefore, the age ranges of participants in the studies reviewed in this report may have had some impact on the prevalence of parenting found in these studies.

The Gallup Daily Tracking Survey does not allow the LGBT respondents to be analyzed separately, but several studies provide some comparisons of parenting rates between transgender individuals and non-transgender lesbian, gay, and bisexual individuals. Many of these studies are limited in that the gender identity and sexual orientation of the transgender respondents is not analyzed separately. Findings from some of these studies have found a higher rate of parenting among transgender study participants than non-transgender study participants, while others have found the opposite. The only study that controls for age in any way is Croghan et al (2012), which only focused on older LGBT people. They found that transgender women in their study had a rate of parenting similar to non-transgender bisexual men and women, but higher than non-transgender gay men.

TABLE 3: PERCENTAGE OF STUDY PARTICIPANTS WHO REPORTED BEING PARENTS, BY SEXUAL ORIENTATION AND GENDER IDENTITY

	NON-TRANSGENDER PARTICIPANTS			TRANSGENDER PARTICIPANTS			GNC PARTICIPANTS	
	STRAIGHT MEN & WOMEN	LGB WOMEN	LGB MEN	OVERALL	TRANS MEN	TRANS WOMEN	ASSIGNED MALE AT BIRTH	ASSIGNED FEMALE AT BIRTH
Cahill et al. (2003)		24.5%	4.3%	2.5%				
Green (2012)		24.3%		36.0%				
Dye (2009)		15.7%		42.9%				
Stotzer (2013)		30.0%			35.0%	47.0%	11.0%	23.0%
Croghan et al. (2012) ^a		Bisexual: 67.0%	Bisexual: 78% Gay: 23%			69.0%		
Idaho Tobacco Prevention & Control (2004)	Men: 26.0% Women: 34.0%	26.0%	13.0%	16.0%				

^a Although Croghan et al. (2012) measured rates for trans men and lesbian women, they did not provide a separate finding for the percentage of transgender men who were parents, perhaps due to the small sample size for transgender men (n=16). Findings for gay or lesbian women were not reported in the study.

Number of Children

Very few studies of transgender people have inquired about the number of children they have had or are actively parenting. In the only study to inquire about number of children in the home, the Idaho Tobacco Prevention and Control Program (2004), found that among ten transgender people who lived with a child, eight lived with only one child, one lived with three children, and one lived with five or more. Factor and Rothblum (2007) found that among transgender participants who had children, there were not notable differences in the number of children based on gender: trans women had an average of 2.18 children, trans men had an average of 1.75 children, and genderqueer participants had an average of 2.15 children. This study also included the non-transgender siblings of the transgender participants. The findings for the non-transgender siblings were very similar to their trans and genderqueer siblings overall: sisters had a mean number of children of 1.83 and brothers had a mean number of children of 2.2. Similarly, Green (1978) found that trans men and trans women who are parents were parenting similar numbers of children: an average of 2.25 kids in trans men's and 2.33 children in trans women's households. Green (1998) also found an average of two children per transgender parent.

A few other studies inquired in other ways about the number of children transgender respondents had. In the NTDS, 50% of those transgender respondents who said that they had dependent children reported having one child, 33% had two children, and 17% had three or more children (Grant, et al., 2011). Among Dutch trans men, 54% had one child, 18% had two children, and 27% had three children (Wierckx, et al., 2012). Another study of transgender people in San Diego found that one third had one child, another third had two children, and another third had three or more (Zians & O'Brien, 2006). Though based on limited data, these studies suggest that transgender people of various gender identities may be parenting similar numbers of children in the home. The study by Rothblum provides some preliminary evidence that transgender people may be parenting similar numbers of children as non-transgender people.

Parenting by Gender, Age, and Age of Transition

Gender and age are related to parenting rates in the general U.S. population. Grant et al. (2011) found that, like in the general population, rates of parenting among transgender NTDS respondents increase as age increases. The NTDS also found differences in parenting based on gender: 52% of trans women, 17% of trans men, and 20% of gender non-conforming respondents were parents. The few other studies that provided findings for transgender respondents by gender also indicated that there may be substantial differences in the rates of parenting among trans men, trans women, and gender non-conforming individuals. In these studies, trans women and gender non-conforming individuals (particularly cross-dressers assigned male at birth) appeared to have higher rates of parenting compared to trans men (see Tables 1 and 2). Among those who reported that they had children, Xavier et al. (2007) found that trans women were less likely to have children living with them (34.0%) than trans men (50.0%).

Two studies have found that people who transition or "come out" as transgender later in life tend to have higher parenting rates than those people who identify as transgender and/or transition at younger ages (e.g., Grant et al., 2011; Pyne, 2012). For example, Grant et al. (2011) found that parenting rates were higher among those who had transitioned later in life (82% for those 55 or older) compared to the parenting rates among those who had transitioned at younger ages (38%).

Parenting by Race/Ethnicity

Given the small sample sizes of transgender people in most studies, few have been able to provide findings by race/ethnicity. However, Grant et al. (2011) reported that, in the NTDS, American Indian respondents had the highest rates of having a child who currently relied on their income (25%), followed by respondents who are Latino/a (20%), White (19%), Black (18%), multiracial (17%), and Asian (10%). Similarly, when asked about being parents (as opposed to having a dependent child) in the NTDS, American Indians had the highest rate of being parents (45%) followed by respondents who are Latino/a (40%), White (40%), Black (36%), multiracial (29%), and Asian (18%). A few studies have focused on specific racial/ethnic populations, such as the two-spirit or LGBT native or indigenous populations (Davis et al., 2006; Passante, 2012) and the Black community in the Black Pride Survey (Battle, et al., 2002; Cahill, et al., 2003).

It is also important to note that most studies of transgender people do not take into account the different cultural roles that may be traditional for some racial/ethnic groups. For example, among many indigenous peoples, gender identity

and sexuality are less clearly separate and are often more fluid than in contemporary Western thinking. Those who may be considered “transgender” by Western definitions (e.g., mhwahine in Hawai‘i, fa’afafine in Samoa, two-spirit people among the indigenous people of North America, etc.) have much clearer socio-cultural roles for raising children and helping support the larger family unit (including nephews and nieces). For example, many cultures throughout the Pacific Basin see transgender people as key family members for providing a significant amount of child care and financial support for raising children (e.g., Vasey & VanderLaan, 2010), and informal adoption of kin is more common than having biological offspring (e.g., Kaltenborn, 2003). Thus, some racial, ethnic, and/or cultural groups may have different rates of biological versus adoptive parenting, which has yet to be studied.

QUALITY OF RELATIONSHIPS WITH CHILDREN

The second area of research explored in this review is how the parent-child relationship may be affected when a parent “comes out” as transgender and/or transitions. Studies have addressed this question in a variety of ways, such as by measuring changes in the existence or the quality of the parent-child relationship and outlining factors that have been helpful for children in adjusting to a parent’s transition. In this section, we review studies that have provided findings related to the parent-child relationship during and after a parent’s transition.

The Idaho Tobacco Prevention and Control Program (2004) asked study participants about their overall relationships with their children. Of the 19 transgender respondents who reported they had children, most (78.9%) said that their relationship was positive/very positive. In contrast, 10.5% said that their relationship with their children was negative/very negative. When asked about their overall experience raising their child, 73.7% said it was positive/very positive, and 15.8% said negative/very negative. These reported rates were similar to non-transgender parents in the study. This study did not identify if or when the participants had disclosed their transgender status to their children, so there is no way to determine if the fact that the parent was transgender had any impact on the parental relationship.

According to the NTDS, among those transgender people with children, transitioning had varied effects on respondents’ relationships with their child(ren) (Grant et al., 2011). Twenty-two percent reported improved relationship, 29% said that their relationship was worse, 36% reported their relationship was the same, and 13% reported that, “some things are better, some things are worse.” Erich et al. (2008) reported in a study of 91 transgender people that 46.2% had children, and of those, 60.5% reported their relationships were “good” or “excellent.” Eighty-eight percent of those parents had “come out” as transgender to at least one of their children. In regard to the parent-child relationship, Veldorale-Griffin (in press) reported that 37.5% of parents reported positive changes to the relationship after beginning transition, 35% reported no change, 15% reported negative changes, and 12.5% reported mixed reactions. In a study of 14 transgender parents, 21 of their 28 children knew about their parent’s transgender status, and 19 (90%) of those children reported having a positive relationship with their parent (Church, O’Shea, & Lucey, 2014). Finally, a study of over 300 transgender people and their significant others found that rejection from teenage and adult children was “frequently reported” by respondents after disclosing their transgender status, although no percentage was provided to estimate the prevalence of this type of rejection (Lenning & Buist, 2013). Based on these studies, though some reported detrimental impacts, it seems that for most transgender parents who transitioned, there were positive or no changes to the parent-child relationship.

Some studies have investigated the extent to which transgender parents lost contact with their children after “coming out” as transgender or transitioning. White and Ettner (2007) interviewed 27 transgender people about their relationships with their children during and after transition, and found that 5% had no contact with their children during their transition, and 10% had no contact with their children six years post-transition. However, the NTDS found that 30% of respondents’ children refused to speak or spend time with their transgender parent due to their transition (Grant et al., 2011). Neither of these studies explored the role of custody and other judicial decisions, the influence of other parents, or social stigma more generally in impacting transgender parents’ contact with their children during and after transition.

To place findings described above into the context of family dynamics regarding transition, based on his clinical experience, Lev (2004) outlined several stages a family may go through in a “period of adjustment” when a parent “comes out” as transgender to their family. According to Lev (2004), the first stage is characterized by disclosure, which may lead to a family crisis. In some cases, disclosure does not occur until the transgender parent specifically informs their children of their identity, while in other cases, disclosure is a longer process where children may have already seen

parents' gender non-conforming behaviors/identities (such as through cross-dressing at home) before any formal conversation occurs or in lieu of any specific conversation (Veldorale-Griffin, in press). The second stage is turmoil, when some families start to grapple with their loved one's transition. Third, families enter the negotiation stage, which sets the stage for the final stage, balance. In the balanced stage, a family has moved through crisis to a new sense of normalcy, though this does not always result in acceptance. Following this period of adjustment, relationships may be just as strong, or even stronger than before (e.g., Grant et al., 2011; Pyne, 2012). It should be noted that this model does not address families being formed by people who already identify as transgender or gender non-conforming and/or who have already transitioned by the time of family formation.

Several studies have outlined factors that may be related to the ease of a child's adjustment to a parent's transition. In her findings from thirty interviews with transgender men and women, Hines (2006/2007) highlighted some factors that she found to have substantial effects on a child's adjustment to their parent's transition, including how accepting the transitioning parent's partner is of the transition and how well the school handles the parent's transition. In a survey of ten therapists who had seen over 4,768 transgender individuals, White and Ettner (2004) found that therapists reported the strongest factors related to a child adjusting well to a parent's transition were as follows: 1) the child having close emotional ties to the non-transitioning parent, 2) cooperation between parents about child rearing, 3) the extended family support of the transitioning parent, 4) the child having a close relationship with the transitioning parent, and 5) having ongoing contact with both parents. Similarly, Reisbig (2007) found in a case study of the children of five male-assigned cross-dressers that those adult children who reported having a close relationship with their fathers had adapted easily to their father's cross-dressing as children.

A child's age at the time of a parent's transition has also been suggested as an important variable in the child's adjustment to the parent's transition. White and Ettner (2007) interviewed 27 transgender parents about their relationship with their children during and after transition and found that younger children had an easier adjustment to the transition than older children and young adults (also found in Erhardt, 2007 and in Pyne, 2012). Israel (2005) also reported in her case notes that she found that younger children had easier adjustments to a transgender parent's "coming out" process, though she did not provide any empirical evidence beyond her clinical judgment. Hines (2006) has suggested that regardless of age, all children will also need time to "transition" – adjusting to new pronouns and/or names, changes in gender roles in their family, the loss of a "mom" or "dad" while gaining a "mom" or "dad" – though this process has not been fully explored. However, Veldorale-Griffin (in press) found that among adult children with transgender parents, concerns about how to interact with their parent as their parent transitioned put a strain on some relationships. In this study, 22% of adult children reported that they experienced stress about how to address their parent (e.g., mom vs. dad) and which pronouns to use and when.

Qualitative evidence suggests that children adjust to their parent's transition in various ways. Green (1998) offered excerpts – all positive – that provide insight into how some children grapple with and then come to accept their parent's transition:

"Linda wants to be a woman. Linda wants to start a fresh life. She likes living as a woman. I think that is happy for her. At first (when I was 4½) I didn't quite understand. As I got older, I realized she must be happy living as a woman, so I'll just accept that." (7 year old son of a trans woman)

"My Mother's not happy in the body she is in. My mom is a lot happier since starting to live as who she wants to be. When I was 13, my mother said, 'I want to be a man, do you care?' I said, no, as long as you are the same person inside and still love me. I don't care what you are on the outside... It's like a chocolate bar. It's got a new wrapper but it's the same chocolate inside." (14 year old daughter of a trans man)

"Jim (mother) is my dad because he is having a sex change. It's alright with me. If it makes Jim happy, it makes me happy." (10 Year old son of a trans man)

A few studies have found that the main stressors for children during their transgender parent's "coming out" process were due to tension between the parents and processes of divorce/relationship dissolution that may ensue, rather than stress about the gender transition itself (Freedman, Tasker, & Di Ceglie, 2002; White & Ettner, 2007; Pyne, 2012; Haines et al., 2014). Veldorale-Griffin (in press) found that 22% of adult children of transgender parents experienced stress

when they were “put in the middle” of their parent’s relationship after disclosure of a parent’s desire to transition. While these studies found clear signs that divorce or relationship dissolution was the cause of much parent-child relationship strain, it was sometimes difficult for researchers to disentangle the effects on relationships related to divorce versus those related to a parent’s transition.

Two studies highlighted findings concerning how others’ perceptions of the sexual orientation and gender expression of the parents can affect the parent-child relationship. In a series of interviews with ten female-to-male transgender people, Ryan (2009) reported that for some trans men partnered with women, transitioning was more acceptable to their parents and made certain social interactions easier for their children, because they were no longer perceived by others as a lesbian couple. Hines (2006/2007) also found that parents who transitioned from female to male had relatively smoother transitions within their respective families because these individuals already had androgynous/masculine presentation prior to transition, implying a greater general acceptance of masculinity among those perceived as women than femininity among those perceived as men.

Three studies have focused on the self-perceptions of transgender parents in relation to traditional maternal/paternal parenting roles. Ryan’s (2009) study of trans men found that although they had transitioned from being “mothers” of children, they had already felt like fathers in many ways. One participant was asked when he started feeling like his child’s father, to which he replied, “Always. There was no shift except that I was being seen that way. So I was finally being seen [as her father] once I transitioned” (Ryan, 2009, pg. 145). Trans men in this study also reported they felt the need to “do fathering differently” and that they felt less constrained by conventional definitions of fatherhood because of their own experiences with gender identity (Ryan, 2009). Similarly, in a different ethnography of trans men, two trans men who had given birth to children as trans men reported that they experienced the pregnancy and birth in ways that were quite different from non-transgender women, which reinforced and confirmed their identities as men (Rubin, 2003). Finally, Faccio et al (2013) found that among trans women who became parents prior to their transition, participants focused on the role of “parent” in general rather than linking their parenting ability specifically with gendered parenting (i.e., being “mothers” or “fathers”).

OUTCOMES FOR CHILDREN

For many years, studies have sought to assess the validity of concerns in family court proceedings that the well-being of children would be negatively impacted if they were parented by gays and lesbians (Gartrell and Bos, 2010). Research is increasingly becoming available to address concerns courts may have about the well-being of children with transgender parents. Researchers have begun to address questions as to the outcomes for children with transgender parents, including in areas of sexual and gender identity development and other developmental markers.

Studies in this area have found no evidence that having a transgender parent affects a child’s gender identity or sexual orientation development, or has an impact on any other developmental milestone (Green, 1978; Green, 1998; Freedman et al., 2002). For instance, in Green’s (1998) study of 17 children from families with transgender parents, none of the children gave indications of gender dysphoria. Some studies suggest that negative outcomes may result from children losing contact with their transgender parent, such as after a divorce (e.g., Green, 1998; Freedman, et al., 2002; Perez, 2009/10). Some research has suggested that transgender parents increase some positive outcomes, such as by teaching their children about accepting individual differences and diversity and by being open-minded (e.g., Reisbig, 2007; Pyne, 2012).

Several studies have looked at social acceptance of children with transgender parents and the possible negative impact of discrimination or shunning from peers. These studies have generally found that harassment and teasing by peers is infrequent (Green, 1998; Freedman et al., 2002; Aitken et al. 2007; Reisbig, 2007). For instance, Freedman et al. (2002) found that 6 out of 18 (33%) children with transgender parents reported difficulties with peers generally (not related to their parent’s gender identity), 6% reported issues with depression, and none reported problems with harassment, persecution, or victimization. One study, however, found a substantial rate of bullying from peers. In a small sample of adult children with transgender parents, Veldorale-Griffin (in press) found that 33% had experienced bullying from children at school.

Two studies found that children of transgender parents reported feeling protective of a transgender parent when they noticed discrimination or social rejection their transgender parent faced (e.g., Hines, 2006/2007; Pyne, 2012). Pyne

(2012) reported that children sometimes noticed the discrimination or social rejection their transgender parent faced, such as people using the wrong pronouns or laughing at the parent. One set of parents reported that their children were hurt or angered by these forms of injustice but were able to teach their children strategies to appropriately handle these types of situations.

In a study of 50 transgender parents, Haines et al. (2014) found that many transgender parents preemptively prepared themselves and their families for the possibility of experiencing stigma as a family, or their children experiencing stigma. Many respondents discussed how they had, or would, handle experiences of anti-transgender bullying of their children in the following ways: 1) notifying authorities, 2) processing negative events directly with their child(ren), and 3) selectively disclosing as a future prevention strategy.

NEEDS OF TRANSGENDER PARENTS AND PROSPECTIVE PARENTS

Several studies have focused on the specific needs of transgender parents and their families. This research has fallen into three broad categories: 1) social service and support needs, 2) family formation and assistance in becoming parents, and 3) custody/visitation.

Social Services and Support

Two studies examined the social service needs of transgender people in Chicago and in Philadelphia (Kenagy, 2005; Kenagy & Bostwick, 2005). In these studies, child care, parenting skills training, and family planning emerged as critical issues for varying segments of the transgender populations surveyed. In a survey in Northwest England, 29.4% of transgender respondents reported that they were interested in parenting and family networking groups specific to or sensitive to transgender issues (Trans Resource and Empowerment Centre [TREC], 2010). Veldorale-Griffin (in press) also found

TABLE 4: PERCENTAGE OF TRANSGENDER STUDY PARTICIPANTS WHO REPORTED CERTAIN FAMILY OR PARENTING NEEDS

	CHILD CARE			PARENTING SKILLS OR NETWORKING			FAMILY PLANNING		
	OVERALL	TRANS WOMEN	TRANS MEN	OVERALL	TRANS WOMEN	TRANS MEN	OVERALL	TRANS WOMEN	TRANS MEN
Kenagy (2005) ^a	37.0%	9.0%	75.0%	43.0%	19.0%	75.0%	38.0%	17.0%	66.0%
Kenagy & Bostwick (2005) ^a	8.0%	12.0%	0.0%	10.0%	15.0%	0.0%	32.0%	36.0%	21.0%
TREC (2010)				29.4%					
Valera et al. (2001)		3.8%							

^a Also reported in Kenagy & Hsieh (2005).

that a quarter of transgender respondents expressed desire for better/more support group availability for transgender parents as well as mentoring from other transgender parents. Nineteen percent felt that more information and support needed to be made available to help support their children with the transition process. In a study of trans men who gave birth to their biological children after transitioning, all participants reported that feeling isolated was a consistent problem from pre-conception, to birth, and adapting to parenthood, citing a lack of available resources or supports and feeling like they were the only trans men seeking to carry their children (Ellis et al., in press). Many expressed a desire for more availability in social supports for trans men who choose to give birth to their own biological children. Despite this expressed interest in supportive services and groups, it is not clear where transgender parents can safely access these services. One study found that even among lesbian, gay, and bisexual parenting agencies and support groups, transgender people often feel unwelcome and unsupported (Ryan, 2009).

Many transgender parents note that the love and acceptance of their family members were critical in supporting their transition process. For example, Veldorale-Griffin (in press) found that 43% of transgender parents reported that their children were their main source of support during transition, and 29% reported that their spouse or significant other was their main support. These findings highlight how strengthening and supporting families during gender transition of a parent is critical for the family unit, the children, and the transgender parent.

Family Formation and Assistance in Becoming Parents

Research has started to emerge about family formation among the following groups: those who are actively in a process of transitioning, those who identify as genderqueer without a desire to transition, and those pursuing parenting after having transitioned. For example, three studies have inquired about the route by which transgender people became parents. Among Dutch transsexual men after surgical transition, 73% had a female partner who'd been inseminated with donor sperm, and 27% had their own biological children prior to surgical transition (Wierckx, et al., 2012). None indicated adoption as their method of becoming a parent. Battle et al. (2002) reported that among transgender respondents in the Black Pride Survey, 15% identified themselves as parents, and 10% had biological children, while 5% had adoptive or foster children. Last, among racially/ethnically diverse respondents of an LGBTQI community needs assessment in Hawai'i, 23% of transgender women and 12% of transgender men reported having biological children (Stotzer, 2013). Fourteen percent of transgender women and 18% of transgender men had legally adopted children. Twenty-nine percent of transgender women and 29% of transgender men reported that they had children they considered their own, even if they were not biologically or legally related to them (such as a partner's child). Other research suggests that those who transition at younger ages are less likely to have children (Grant et al., 2011; De Sutter, 2002; Pyne, 2012).

Adoption: Six states prohibit discrimination against foster and adoptive parent applicants based on gender identity in their laws or regulations.⁶ This means that in 44 states, a transgender person's application to become a foster or adoptive parent could potentially be vulnerable to extra scrutiny or outright denial simply because they are transgender with no explicit state family law protections. Given the variety of ways that someone's transgender status could be revealed in the adoption and foster care process (e.g., medical histories, background checks, information about prior marriages, etc.), the adoption process may not be an option for some transgender people. A few studies have described the difficulties transgender people may experience with adoption services due to misinformation, the perception that they would experience discrimination, and actual experiences of discrimination. Pyne (2012) reported that among 18 transgender people, none reported seeking services at adoption centers. Some of these 18 reported that not pursuing adoption was because of the perception that they would be denied or discriminated against. Similarly, Ellis, Mojnar, & Pettinato (in press) found that among 8 trans men, participants and their partners did not pursue adoption because of fear of discrimination. Research by Ross et al. (2009) suggests that this perception may be well-founded since few adoption agencies have anti-discrimination policies related to gender identity, and adopted children are rarely placed with transgender people or couples. There is also evidence of misinformation on the part of foster and adoption agencies, such as those who convey the message that fostering and adopting are not options for transgender people even when there are no specific prohibitions against transgender people fostering or adopting (e.g., Minter & Daley, 2003). One study also highlighted the difficulties trans people face in becoming a legally recognized second parent through second-parent adoption or having relationships to children legally recognized in other ways (Pyne, 2012).

Reproductive Technologies: Wierckx, et al. (2012) found that among Dutch trans men who had undergone surgical transition, 54% had a current desire to have children and an additional 8% had experienced this desire in the past. Because of perceptions of bias in the adoption process, Pyne (2012) reported that among the transgender people who desired to become parents, all chose to have children biologically, such as by maintaining their own fertility, preserving sperm before transition, and utilizing sperm banks or fertility clinics. However, there were reported subsequent challenges in establishing the biological and familial relationships on legal forms that could not recognize fathers who had given birth or mothers who had donated sperm (Pyne, 2012). Some medical professionals have advocated for standards and guidelines, as well as effective counseling about

⁶ CAL. WELF. & INST. CODE § 16013 (2009); CONN. GEN STAT. ANN. § 46a-73 (West 2011); N.J. ADMIN. CODE § 10:122C-1.6 (2012); N.M. CODE R. § 8.26.5 (2011); N.Y. COMP. CODES R. & REGS. tit. 18 §§ 441.24, 421.3 (2015); 14-3 R.I. CODE R. § 174-1-II (2013). Vermont does not include gender identity in its statutory or regulatory language, but it explicitly indicates that it will not discriminate based on gender identity in either adoption or foster care on its website. Vermont Department for Children and Families. *Becoming a foster parent*. Retrieved from <http://dcf.vermont.gov/fsd/kids/fostercare/becoming>; Vermont Department for Children and Families. (2015) *State adoptions*. Retrieved from http://dcf.vermont.gov/sites/dcf/files/pdf/fsd/pf/Adoption_FactSheet.pdf.

available options, for people who will transition and wish to become biological parents (Murphy, 2012; De Sutter, 2009). Specific recommendations exist from organizations such as the Endocrine Society to counsel transgender people about the possibility of preserving fertility prior to transition (Hembree et al., 2009).

TABLE 5: PERCENTAGE OF TRANSGENDER AND GENDER NON-CONFORMING STUDY PARTICIPANTS WHO REPORTED DISCRIMINATION IN CHILD CUSTODY AND/OR VISITATION

	CHILD CUSTODY DISCRIMINATION GENERALLY	EX-PARTNER LIMITED OR STOPPED RELATIONSHIP WITH CHILDREN				RELATIONSHIP WITH CHILDREN LIMITED BY COURTS		
	OVERALL	OVERALL	TRANS WOMEN	TRANS MEN	GNC	OVERALL	TRANS WOMEN	TRANS MEN
Grant et al. (2011)		29%	34%	20%	19%	13%	16%	8%
Minter & Daley (2003)	6.0%							
Erich et al. (2010)	15.5%							
Green (2012)		4.0%						
Couch et al. (2007)						5%		

Child Custody and/or Visitation

Transgender parents may face challenges in child custody and visitation when a relationship ends. In the NTDS, a substantial percentage of transgender parents (29%) who were in a relationship that ended reported that their former partner had limited or stopped their relationship with their children (Grant et al. 2011). Furthermore, 13% reported that a court or judge had stopped or limited their relationships with their child or children due to their status as transgender or gender non-conforming. The study also found that racial/ethnic minority transgender parents were particularly vulnerable to having a judge or court limit their contact with their children. Other studies have provided some evidence of transgender parents' relationships with children being restricted or ended by the non-transgender parent (Freedman et al., 2002; Green, 2006; Green, 2012; Pyne, 2012). Furthermore, Freedman et al. (2002) found that, of the 11 couples that included a transgender parent who had divorced or separated, in only 2 cases was there a joint custody arrangement, and in the other 9 cases, the children lived with the non-transgender parent. The authors did not ask the cause for this inequality in custody arrangements, but these findings highlight the need for further research into unequal formal or informal treatment of transgender parents. Although no specific percentage is mentioned, Haines et al. (2014) also found that many transgender parents reported that the fear of discrimination or actual discrimination in family court represented a significant stressor that had the potential to interfere with the ability to maintain effective parenting practices.

Pyne (2012) provides further insight into how formal and informal custody arrangements posed challenges for transgender parents. In a series of focus groups with 18 transgender people in Ontario, Canada, those who had children before their transition reported both formal and informal means that courts and former partners challenged their ability to parent. For some, the courts created specific conditions, such as that which was imposed on one trans woman who was not allowed to go the child's school. For others, the custody issues were not formal, but the partner worked to deny access or make visitation so logistically burdensome that visitation became nearly impossible. One participant recalled, "She attempted to deny access to the children and although she never got legal defenses around that, she put up so many practical barriers that it's been impossible to develop a meaningful relationship with my children for a number of years" (Pyne, 2012).

LIMITATIONS

This report reviews existing research on transgender parenting. Most of the studies reviewed in this paper did not focus on transgender parenting as the main question of interest. Thus, the available research often lacks detail. In addition, most studies had very small sample sizes that were not randomly selected, meaning they have limited generalizability.

In research about transgender people, the various groups that comprise the larger category of “transgender” (e.g., trans men, trans women, genderqueer people, and other groups) are commonly lumped together, when in fact there may be very different types of parenting, parenting experiences, strengths, and challenges among these different groups. Whenever possible, this report clarified the composition of the sample to limit overgeneralization of findings from one group of transgender people to another. However, as can be seen throughout this report, this lumping together of groups of transgender people likely obscures differences within and between groups.

In addition to obscuring differences between various groups of transgender people, the lack of available research on transgender parenting meant that this review collapsed studies from the late 1970s all the way up to 2012, obscuring any potential cohort effects. Given the rapidly changing social landscape and attitudes toward LGBT people, it is likely that the children of transgender parents interviewed in the late 1970s will have had very different experiences than the children of transgender parents today. This report is not able to explain any differences in parenting over time.

CONCLUSION

This report reviewed existing research on the prevalence and characteristics of transgender people who are parents, the quality of relationships between transgender parents and their children, outcomes for children with a transgender parent, and the reported needs of transgender parents. This body of research suggests:

- Surveys show that substantial numbers of transgender respondents are parents, though at rates that appear lower than the U.S. general population.
- Some studies suggest that there may be substantial differences in the rates of parenting among trans men, trans women, and gender non-conforming individuals.
- Two studies have found that people who transition or “come out” as transgender later in life tend to have higher parenting rates than those people who identify as transgender and/or transition at younger ages. This higher rate of parenting could be due to individuals becoming biological parents before they identified as transgender or transitioned.
- Of the six studies that asked about both “having children” and “living with children,” all found that there were more transgender respondents who reported having children than living with children. It may be that many of the respondents represented in these studies had adult children and are no longer living with them. However, there is some evidence that formal and informal attempts to limit the contact of transgender parents with their children may also partially explain this discrepancy.
- In studies that asked transgender parents about their relationships with their children, the vast majority reported that their relationships are good or positive generally, including after “coming out” as transgender or transitioning.
- Studies on outcomes for children with transgender parents have found no evidence of any effect on a child’s gender identity or sexual orientation development and no evidence of any other impacts on other developmental milestones.

- Transgender parents have reported having social service needs related to child care, networking with other parents, and support for family planning.
- Transgender parents have reported discrimination – either formally through the courts or informally by the child(ren)’s other parent – in child custody and visitation arrangements. Transgender people who wish to adopt may experience discrimination in adoption.

This report points to further research that is needed about transgender parents and their experiences and needs:

- To advance research endeavors about transgender parents, federal agencies and administrators of national population-based surveys should include questions to identify transgender respondents on surveys, such as the American Community Survey (ACS) and the National Survey on Family Growth (NSFG). While research that targets transgender parents will continue to be necessary, the ability to identify transgender people in national, population-based datasets will help create national benchmarks for certain aspects of transgender parenting.
- More research is needed to understand differences in parenting rates among various groups of transgender people, including to examine differences based on gender, race/ethnicity, and socioeconomic status, whether a parent has transitioned, age of transition, factors related to family formation, and other characteristics that may drive differences in parenting rates among transgender people. Research on these topics may shift over time in terms of outcomes as society becomes more accepting of transgender and gender non-conforming people.
- Further research is needed to determine whether discrimination against transgender parents or potential parents – either formally or informally – has an impact on the prevalence of parenting, as well as the prevalence of children living with a transgender parent.
- Further research is needed to more clearly illuminate how parent-child relationships evolve in relation to a parent’s transition. Research on parent-child relationships should take into account the age of the children when transition occurs and examine transgender parents’ relationships with adult children and with children born subsequent to their transition.
- More research is needed, including longitudinal studies, to assess various developmental and other outcomes for children of transgender parents.
- Another area where research is needed is in family formation, including regarding increased availability of options to assist reproduction. A more nuanced approach to studying family formation among transgender people will provide better understanding of how transgender people are becoming parents and what their needs may be.
- Relatedly, further research is needed to understand the differences in family formation and parenting among transgender people by age cohort and by age of transition. Family formation may be quite different for self-identified transgender people who are currently younger and those who have transitioned at earlier ages than those who had children as part of relationships prior to their transition. Further research can illuminate these differences and the different needs of those cohorts.
- Future research should also consider focusing on gender non-conforming parents, including people who identify as genderqueer or outside the gender binary.
- Finally, further research and designed interventions are needed to begin to address discrimination by courts, adoption agencies, and foster care and child welfare systems.

Data collection and research in these areas and others will lead to a fuller understanding of the experiences and needs of transgender parents and their children, as well as discrimination and bias they may face.

REFERENCES

- Aitken, S., Kealey, S., & Adamson, R. (2007). *LGBT Community Needs Assessment Report*. LGBT Centre for Health and Well-being. Available at http://lgbthealth.org.uk/sites/default/files/Needs%20Assessment%20Sept%2007%20Updated%20Dec%2007_PDF
- American Fertility Association (2009). *Building the Family of Our Dreams: A Primer for the LGBT Community*. Author: New York, NY. Available at <http://www.theafa.org/mediafiles/lgbt-handbook-2012.pdf>
- Battle, J., Cohen, C., Warren, D., Fergerson, G., & Audam, S. (2002). *Say it Loud: I'm Black and Proud, Black Pride Survey, 2000*. New York: National Gay and Lesbian Task Force. Available at: <http://www.thetaskforce.org/downloads/reports/reports/SayItLoudBlackAndProud.pdf>
- Brown, G. R., Wise, T. N., Cost, P. T., Herbst, J. H., Fagan, P. J., & Schmidt, C. W. (1996). Personality characteristics and sexual functioning of 188 cross-dressing men. *The Journal of Nervous and Mental Disease*, 184(5), 265-273.
- Cahill, S., Battle, J., & Meyer, D. (2003). Partnering, parenting, and policy: Family issues affecting Black lesbian, gay, bisexual, and transgender (LGBT) people. *Race and Society*, 6, 85-98.
- Church, A., O'Shea, D., & Lucey, J. V. (2014). Parent-child relationships in gender identity disorder. *Irish Journal of Medical Science*, 183, 277-281.
- Couch, M., Pitts, M., Mulcare, H., Croy, S., Mitchell, A., & Patel, S. (2007). *Tranznation: A Report on the Health and Wellbeing of Transgendered People in Australia and New Zealand*. Australian Research Center in Sex, Health, and Society: Melbourne, Australia.
- Croghan, C. F., Moone, R., & Olson, A. M. (2012). *2012 Twin Cities LGBT aging Needs Assessment Survey Report*. Greater Twin Cities United Way and the PFund Foundation; Twin Cities, MN.
- Davis, J., Barnes, J., Breckon, M. R., Houle, K., Morgan, R., Paquette, M., & Taylor, C. (2006). *Nowhere Near Enough: A Needs Assessment of Health and Safety Services for Transgender and Two Spirit People in Manitoba and Northwestern Ontario*. Crime Prevention Branch, Public Safety and Emergency Preparedness Canada: Winnipeg, Manitoba.
- De Sutter, P., Kira, K., Verschoor, A., & Hotimsky, A. (2002). The desire to have children and the preservation of fertility in transsexual women: A survey. *International Journal of Transgenderism*, 6, retrieved from http://www.iiav.nl/eazines/web/ijt/97-03/numbers/symposion/ijtvo06no03_02.htm
- De Sutter, P. (2009). Reproductive options for transpeople: Recommendations for revision of the WPATH's Standards of Care. *International Journal of Transgenderism*, 11(3), 183-185.
- Docter, R. F. & Prince, V. (1997). Transvestism: A survey of 1032 cross-dressers. *Archives of Sexual Behavior*, 26(6), 589-685.
- Dye, C. (2009). *Branching Out: Kent and Medway Lesbian, Gay, Bisexual, and Transgender (LGBT) Needs Assessment, 2008*. Metro Centre. Available at <http://www.e-canterbury.co.uk/assets/Kent%20Analysis%20LGBT.pdf>
- Ellis, S. A., Wojnar, D. M., & Pettinato, M. (in press). Conception, pregnancy, and birth experiences of male and gender variant gestational parents: It's how we could have a family. *Journal of Midwifery and Women's Health*.
- Erhardt, V. (2007). *Head over Heels: Wives Who Stay with Cross-dressers and Transsexuals*. New York: Haworth Press.
- Erich, S., Tittsworth, J., Dykes, J., & Cabuses, C. (2008). Family relationships and their correlations with transsexual well-being. *Journal of GLBT Family Studies*, 4(4), 419-432.
- Erich, S., Tittsworth, J., Meier, S. L. C., & Lerman, T. (2010). Transsexuals of color: Perceptions of discrimination based on transsexual status and race/ethnicity status. *Journal of GLBT Family Studies*, 6(3), 294-314.
- Faccio, E., Bordin, E., & Cipolletta, S. (2013). Transsexual parenthood and new role assumptions. *Culture, Health, & Sexuality*, 15, 1055-1070.
- Factor, R. J., & Rothblum, E. D. (2007). A study of transgender adults and their non-transgender siblings on demographic characteristics, social support, and experiences of violence. *Journal of LGBT Health Research*, 3(3), 11-30.
- Factor, R. J., & Rothblum, E. D. (2008). Exploring gender identity and community among three groups of transgender individuals in the United States: MTFs, FTMs, and genderqueers. *Health Sociology Review*, 17, 235-253.
- Freedman, D., Tasker, F., & Di Ceglie, D. (2002). Children and adolescents with transsexual parents referred to a specialist gender identity development service: A brief report on key developmental features. *Clinical Child Psychology and Psychiatry*, 7(3), 423-432.
- Gartrell, N. & Bos, H. (2010). US National Longitudinal Lesbian Family Study: Psychological Adjustment of 17-Year-Old Adolescents. *Pediatrics*, 126(1), 28-36.
- Gates, G. (2011). *How Many People are Lesbian, Gay, Bisexual, and Transgender?* Los Angeles: Williams Institute.

- Gates, G. (2013). *LGBT Parenting in the United States*. Los Angeles: Williams Institute.
- Grant, J. M., Mottet, L. A., Tanis, J., Harrison, J., Herman, J. L., & Keisling, M. (2011). *Injustice at Every Turn: A Report of the National Transgender Discrimination Survey*. Washington DC: National Center for Transgender Equality and National Gay and Lesbian Task Force.
- Green, M. S. (2012). *Anchorage LGBT Discrimination Survey: Preliminary Report*. Identity Inc.: Anchorage, AK.
- Green, R. (1978). Sexual identity of 37 children raised by homosexual or transsexual parents. *American Journal of Psychiatry*, 133(6), 692-697.
- Green, R. (1998). Transsexuals' Children. *International Journal of Transgenderism*, 4(2), available from <http://www.symposion.com/ijt/ijtco601.htm>
- Green, R. (2006). Parental alienation syndrome and the transsexual parent. *International Journal of Transgenderism*, 9(1), 9-13.
- Haines, B. A., Ajayi, A. A., & Boyd, H. (2014). Making trans parents visible: Intersectionality of trans and parenting identities. *Feminism & Psychology*, 24, 238-257.
- Halle, T. (2002). *Charting Parenthood: A Statistical Portrait of Fathers and Mothers in America*. Bethesda, MD: Child Trends.
- Hembree, W. C., Cohen-Kettenis, P., Delemarre-van de Waal, H. A., Gooren, L. J., Meyer, W. J. III, Spack, N.P., Tangpricha, V., Montori, V.M. (2009). *Endocrine treatment of transsexual persons. An endocrine society clinical practice guideline*. Endocrine Society: Baltimore, Maryland. Available at <http://www.endo-society.org/guidelines/final/upload/endocrine-treatment-of-transsexual-persons.pdf>
- Hines, S. (2006). Intimate transition: Transgender practices of partnering and parenting. *Sociology*, 40, 353-371.
- Hines, S. (2007). *TransForming Gender: Transgender Practices of Identity, Intimacy, and Care*. Policy Press: Bristol, England.
- Idaho Tobacco Prevention and Control Program (2004). *LGBT Health Assessment Survey: Final Report*. Idaho Department of Health and Welfare.
- Israel, G. E. (2005). Translove: Transgender persons and their families. *Journal of GLBT Family Studies*, 1(1), 53-67.
- Kaltenborn, B. (2003). *The fa'afafine, gender benders in Samoa. On cultural construction of gender and role change*. A dissertation for the degree of Social Anthropology, University of Oslo, Norway.
- Kenagy, G. P. (2005). Transgender health: Findings from two needs assessment studies in Philadelphia. *Health and Social Work*, 30, 19-26.
- Kenagy, G. P., & Bostwick, W. B. (2005). Health and social service needs of transgender people in Chicago. *International Journal of Transgenderism*, 3, 57-66.
- Kenagy, G. P., & Hsieh, C.-M. (2005). Gender differences in social service needs of transgender people. *Journal of Social Service Research*, 31(3), 1-21.
- Lawrence, A. A. (2003). Factors associated with satisfaction or regret following male-to-female sex reassignment surgery. *Archives of Sexual Behavior*, 32(4), 299-315.
- Lenning, E., & Buist, C. L. (2013). Social, psychological, and economic challenges faced by transgender individuals and their significant others: Gaining insight through personal narratives. *Culture, Health, & Sexuality*, 15, 44-57.
- Lothstein, L. M. (1988). Female-to-male transsexuals who have delivered and reared their children. *Sex Abuse*, 1, 151-166.
- Lev, A. I. (2004). *Transgender emergence: Therapeutic guidelines for working with gender-variant people and their families*. Binghamton, NY: Haworth Clinical Practice Press.
- Minter, S. & Daley, C. (2003). *Trans Realities: A Legal Needs Assessment of San Francisco's Transgender Communities*. San Francisco: National Center for Lesbian Rights and the Transgender Law Center.
- Murphy, T. (2012). The ethics of fertility preservation in transgender body modifications. *Journal of Bioethical Inquiry*, 9(3), 311-316.
- One Colorado Education Fund (2010). *A Conversation with Coloradans*. Available at http://www.one-colorado.org/wp-content/uploads/2010/10/SurveyResults_BigBook.pdf
- Open Door Fund (2010). *2010 Lesbian, Gay, Bisexual, and Transgender (LGBT) Boulder County Survey Report*. Open Door Fund: The Community Foundation: Boulder, CO. Available at <http://www.opendoorfund.org/survey/2010/Survey2010Report.pdf>
- Passante, L. (2012). *Aboriginal Two-spirit and LGBTQ Mobility: Meanings of Home, Community, and Belonging in a Secondary Analysis of Qualitative Interviews*. Thesis for MSW, University of Manitoba, Winnipeg.
- Perez, S. S. (2009/10). Is it a boy or a girl? Not the baby, the parent: Transgender parties in custody battles and the benefit of promoting a truer understanding of gender. *Whittier Journal of Child and Family Advocacy*, 9, 367-403.

- Pfeffer, C. A. (2010). "Women's work"? Women partners of transgender men doing housework and emotion work. *Journal of Marriage and Family*, 72, 165-183.
- Prince, V. & Bentler, P. M. (1972). Survey of 504 cases of transvestitism. *Psychological Reports*, 31, 903-917.
- Progressive Leadership Alliance of Nevada (2011). *Equity for All: Key Findings of the Nevada Transgender Community Needs Assessment Survey. A Report for the 2011 Nevada Legislature*. Available at <http://www.leg.state.nv.us/Session/76th2011/Exhibits/Senate/CL/SCL650H.pdf>
- Pyne, J. (2012). *Transforming Family: Trans Parents and their Struggles, Strategies, and Strengths*. Toronto: LGBTQ Parenting Network, Sherbourne Health Clinic.
- Reisbig, A. M. (2007). The lived experiences of adult children of crossdressing fathers: A retrospective account. Dissertation. Kansas State University.
- Reisner S. L., White, J. M., Dunham, E. E., Heflin, K., Begenyi, J., Cahill, S., & The Project Voice Team (2014). *Discrimination and Health in Massachusetts: A Statewide Survey of Transgender and Gender Nonconforming Adults*. Boston, MA: The Fenway Institute, Fenway Health.
- Ross, L. E., Epstein, R., Goldfinger, C., & Yager, C. (2009). Policy and practice regarding adoption by sexual and gender minority people in Ontario. *Canadian Public Policy*, 35(4), 451-467.
- Rubin, H. (2003). *Self-made Men: Identity and Embodiment among Transsexual Men*. Nashville, TN: Vanderbilt University Press.
- Ryan, M. (2009). Beyond Thomas Beatie: Trans men and the new parenthood. In R. Epstein (Ed.), *Who's your daddy? And Other Writing on Queer Parenting* (pp. 139-150). Toronto: Sumach Press.
- Stotzer, R. L. (2013). *LGBTQI Hawai'i: A Needs Assessment of the Lesbian, Gay, Bisexual, Transgender, Queer, and Intersex Communities in the State of Hawai'i, Supplement 1: Findings by Gender Identity/Expression*. Myron B. Thompson School of Social Work, University of Hawai'i, Mānoa: Honolulu, HI.
- Trans Resource and Empowerment Centre (TREC) (2010). *The North West Trans Needs Assessment: Research Report*. Author: England.
- Valera, R. J., Sawyer, R. G., & Schiraldi, G. R. (2001). Perceived health needs of inner-city street prostitutes: A preliminary study. *American Journal of Health Behavior*, 25(1), 50-59.
- Vasey, P. L. & VanderLaan, D. P. (2010). Monetary exchanges with nieces and nephews: A comparison of Samoan men, women, and fa'afafine. *Evolution and Human Behavior*, 31, 373-380.
- Veldorale-Griffin, A. (in press). Transgender parents and their adult children's experiences of disclosure and transition. *Journal of GLBT Family Studies*, online ahead of print 2014.
- Weinberg, M. S., Shaver, F. M., & Williams, C. J. (1999). Gendered sex work in the San Francisco Tenderloin. *Archives of Sexual Behavior*, 28(6), 503-521.
- White, T., & Ettner, R. (2004). Disclosure, risks, and protective factors for children whose parents are undergoing a gender transition. *Journal of Gay and Lesbian Psychotherapy*, 8, (1/2), 129-145.
- White, T., & Ettner, R. (2007). Adaptation and adjustment in children of transsexual parents. *European Child and Adolescent Psychiatry*, 16(4), 215-221.
- Wierckx, K., Van Caenegem, E., Pennings, G., Elaut, E., Dedeker, D., Van de Peer, F., Weyers, S., De Sutter, P., & T'Sjoen, G. (2012). Reproductive wish in transsexual men. *Human Reproduction*, 27(2), 483-487.
- Wilson, P., Carr, S., Young, R., Fleming, P., Spiers, A., & McConnachie, A. (n.d.). *Scottish Transgender Survey - Final Report*. Available from http://www.nes.scot.nhs.uk/nes_resources/lgbt/documents/6%20Training_activities_resources/6%20Trans_awareness/Resources/Trans_Survey_Glasgow_Uni.pdf
- Xavier, J., Honnold, J. A., & Bradford, J. (2007). *The Health, Health-related Needs, and Lifecourse Experiences of Transgender Virginians*. Virginia HIV Community Planning Committee and Virginia Department of Health.
- Zians, J., & O'Brien, T. J. (2006). The San Diego County Transgender Assessment Report, 2006. Family Health Centers of San Diego and the Transgender Health Project. Available at http://www.calendow.org/uploaded_files/san_diego.transgender.assessment.pdf.

APPENDIX

PLEASE NOTE: Sample descriptions are provided using the terms as they appear in the study of origin.

STUDY	YEAR DATA COLLECTED	LOCATION	RECRUITMENT	METHOD	SAMPLE	PRIMARY PURPOSE OF RESEARCH
Aitken et al. (2007)	2007	Edinburgh, the Lothians, and the Borders, UK	Mostly internet distributed by Health Centre Promotion Department through LGBT service organizations	Survey	258 LGBT People Men: 42.6% Women: 53.5% Intersex: 0.4% Other: 3.5%	Needs assessment conducted by the LGBT Centre for Health and Wellbeing
Brown (1996)	Not specified (over two years)	San Antonio, TX; Austin, TX; Pittsburgh, PA; Provincetown, MA	Convenience sample from nationwide social organization and cross-dresser support groups advertised in newsletters	Survey	188 male-assigned people: Transvestites: 83 Transgenderists: 61 Transsexuals: 44	A study to explore the personality trait characteristics and sexual functioning of a sample of cross-dressers
Cahill (2003) and Battle et al. (2002)	2000	Philadelphia, Houston, Washington D.C. Oakland, Chicago, LA, Detroit, New York, & Atlanta	Black Pride Survey, conducted by the NGLTF and Black Pride organizations recruited in nine cities at Black Pride events	Survey	2,645 Black LGBT people Women: 40% Transgender: 2% Men: 58%	To get specific demographic and needs information for Black LGBT people
Church, O'Shea, & Lucey (2014)	Not specified	Ireland	Recruited through hospitals	Survey	14 parents who met DSM-IV criteria for gender identity disorder (12 MTF and 2 FTM)	To understand how parenting impacted transitioning choices
Couch et al. (2007)	2006-2007	Australia & New Zealand	Email recruitment through online invitations sent to listservs, community networks, radio, LGBT specific newsletters	Survey	253 Transgender People	To gather information about the lives of transgender people, with particular focus on access to and quality of health services
Croghan, Moone, & Olson (2012)	2012	Twin Cities, MN	21 LGBT community partner organizations/agencies distributed in their networks	Survey	792 elderly LGBT people 10% Transgender people Trans women 6% Trans men 3% Other gender 1%	To ascertain the health and social needs of elderly LGBT in the Twin Cities, Minn.
Davis et al. (2006)	Not specified	Manitoba and Northwestern Ontario, Canada	Recruitment through LGBT newspaper, campus radio, student newspapers, linked to various local organizations, tapping personal connections/networks	Surveys, interviews and focus groups	73 transgender and two spirit people	Needs assessment of transgender and two-spirit people in Manitoba and Northwestern Ontario
De Sutter (2002/2009)	2002	Europe, predominantly France, UK, Netherlands, and Belgium	Internet survey advertised on websites and mailing lists targeting transsexual women	Survey	121 trans women Transgender: 3 Transsexual: 118	Internet survey of European transsexual women to determine reproductive wish
Docter & Prince (1997)	1990-1992	United States	Volunteer non-random sample collected from club meetings, conventions, ads in magazines and newsletters for cross-dressers	Survey	1,032 male cross-dressers	Demographic survey of transvestites, plus questions about "marginal" vs. "nuclear" cross-dressers
Dye, M. (2009)	2008	Kent and Medway, England	Recruitment through contact lists and databases, advertising survey on organization and other relevant websites, outreach sessions by outreach workers, snowballing and word of mouth	Survey	199 LGBT people Male: 56.7% Female: 35.6% Transgender: 7.8%	Overall needs assessment of Kent and Medway, England

STUDY	YEAR DATA COLLECTED	LOCATION	RECRUITMENT	METHOD	SAMPLE	PRIMARY PURPOSE OF RESEARCH
Ellis et al. (in press)	Not specified	Pacific Northwest	Recruitment through personal contacts, recruitment by health care or social service providers	Interviews and online surveys	8 male identified or gender variant gestational parents	Study to learn about the experiences of trans men who choose to create a family by bearing their own biological child(ren)
Erich et al. (2008)	Not specified	Not specified	Snowball sampling through websites and email solicitation	Survey	91 transsexuals MTF: 90.7% FTM: 9.3%	Study to learn about transsexuals' family relationships and how relationships with family members impact overall well-being
Erich et al. (2010)	Not specified	Not specified	Snowball sampling through known transsexual people, and networks of transsexual support groups, and informational websites and online magazines	Survey	33 total transsexuals of color MTF: 22 FTM: 11	Survey of the perceptions of discrimination based on either trans status or race/ethnicity
Faccio et al. (2013)	Not specified	Italy	Snowball sample initiated through support centers	Interviews	14 MTF transsexuals and 14 non-transgender men	Study to examine the parenting identities of non-transgender men and transgender women
Factor & Rothblum (2007 & 2008)	Not specified	United States	Recruitments via invitation/flyer posted on websites, at transgender political, social, cultural, academic, and health conferences, trans film showings, Pride events.	Survey	166 Total (not including comparison group of non-trans siblings) MTF: 50 FTM: 52 Genderqueer: 64	Survey of identity development, level of disclosure of trans status, and relationship to community
Freedman et al. (2002)	2001	UK	Audit of a specialist gender identity service	Audit of case files	18 children of transgender parents 124 people with cases related to gender identity	A study of developmental concerns among children with transgender parents and children with their own gender identity concerns
Grant et al (2011)	2008	United States	Online survey distributed to 150 listservs and through 800 organizations across the U.S., also made available via paper survey	Survey	6,456 transgender and GNC people who primarily identify as: Male: 26% Female: 41% Part time as one gender, then another: 20% Gender not listed here: 13%	To assess experiences of discrimination (and other needs) among transgender and GNC people across the United States
Green (1998)	Not specified	Charing Cross Hospital, UK	Unclear	Interviews	18 children of transsexual parents (six trans women, three trans men)	To determine the gender identity development and peer group stigma for children of transsexuals

STUDY	YEAR DATA COLLECTED	LOCATION	RECRUITMENT	METHOD	SAMPLE	PRIMARY PURPOSE OF RESEARCH
Green (2012)	2011	Anchorage, AK	Online and paper survey through purposive sampling using LGBT networks	Survey	268 LGBT people MTF: 5.2% FTM: 3.7% Other: 0.4%	Needs assessment and discrimination survey for LGBT people in Anchorage
Haines et al. (2014)	2007	18 U.S. States	Online recruitment through recruitment via blogs, emails, contacts to LGBT parenting groups, and face-to-face networking	Online survey	342 LGBT parents, 50 of whom represented transgender families (46 trans parents and 4 partners of trans parents) MTF: 60.0% FTM: 32.0% Transgender/transsexual: 8%	A U.S. national study of LGBT parenting
Hines (2006; 2007)	2002-2005	UK	Purposively selected, no other information available	Interviews	MTF: 13 FTM: 13 Bigendered: 4	Qualitative analysis of transgender people's partnering and parenting experiences
Idaho Tobacco Prevention & Control Program (2004)	2003	Idaho	Sampling using lists, networks, outcropping, and advertising	Survey	1,759 LGBT people Male: 691 Female: 986 Transgender: 72	Statewide survey of LGBT people to assess impact of tobacco use in the community
Kenagy (2005)	1997	Philadelphia, PA	Snowball sampling	Interviews/ Focus groups	MTF: 49 FTM: 32	Health and social survey needs survey for the Philadelphia area
Kenagy & Bostwick (2005)	2001	Chicago, IL	Snowball sampling	Interviews	MTF: 78 FTM: 33	Health and social service needs survey for the Chicago area
Kenagy & Hsieh (2005)	1997 in PA, 2000-2001 in Chicago	Philadelphia, PA and Chicago, IL	Snowball sampling	Face-to-face structured interviews	MTF: 119 FTM: 65	Needs assessment piloted in Philadelphia and then replicated in Chicago
Lawrence (2003)	1994-2000	Not specified	1-year follow up survey post sex reassignment surgery	Survey	232 male to female post-operative transsexuals	To determine post-operative satisfaction with SRS
Lenning & Buist (2013)	Not specified	Not specified	Survey invitation posted on multiple online transgender support networks, then spread via snowball methodology	Survey	249 transgender people (primarily trans women) and 55 partners of transgender people (primarily partners of trans men)	A study to explore the challenges faced by transgender people and their significant others
Lothstein (1988)	1978-1988	Case Western Reserve University Gender Identity Clinic	Data from doctors' charts, interviews with therapists, and structured interview questionnaire completed by therapists. Additional questionnaire mailed to 23 clinician-researchers with expertise in GID.	Survey	Sample of therapists commenting on 11 FTM parents who presented at the Gender Identity Clinic for Sexual Reassignment Surgery who also had serious mental health concerns	Study to explore the relationship that FTM parents had with their children
Minter & Daley (2003)	2002	San Francisco, CA	Not specified	Survey	155 Transgender people (check all that apply): Transsexual: 50% MTF: 30% FTM: 28% Genderqueer: 21% 3rd Gender: 10% Effeminate Male: 7% Cross-dresser: 7% Masculine Female: 6% Drag Queen/King: 5% Other: 5% None of these: 10%	Survey of discrimination and the legal needs of transgender people in San Francisco

STUDY	YEAR DATA COLLECTED	LOCATION	RECRUITMENT	METHOD	SAMPLE	PRIMARY PURPOSE OF RESEARCH
One Colorado Education Fund (2010)	2010	Colorado	Conducted by independent research firm using targeted social media recruitment, email listservs, and advertising	Survey	4619 LGBT people Male: 57% Female: 39% Transgender: 3% Self-identify: 1%	Needs assessment of LGBT Coloradans
Open Door Fund (2010)	2010	Boulder, CO	Online surveying through LGBT groups and lists in the Boulder area and the host organization's website	Survey	315 LGBT people started survey, 292 finished it (so overall sample unclear) of whom 2.9% identified as transgender and 3.6% as "other" gender	Needs assessment of Boulder, Colorado
Passante (2012)	Not specified	Winnipeg and Vancouver, Canada	Through community advisory committee members, posters at key organizations, flyers distributed at community events, and word of mouth	Interviews and Focus Groups	50 LGBTQ people, gender identity as (check all): Female: 22 Male: 11 Two-spirit: 13 Transgender: 8 Transsexual: 4 Transgender MTF: 3 Queer: 2	Research on how "aboriginal Two spirit and LGBTQ people create community and navigate their multiple community memberships
Pfeffer (2010)	Not specified	United States and Canada	From listservs, email groups (internet-based social network sampling)	Interviews	50 female partners of transgender men	To explore the gendered nature of relationships between a female and a trans-partner
Prince & Bentler (1972)	1964-1966	Not specified	Subscribers to <i>Trasvestia</i> magazine	Survey	504 male heterosexual cross-dressers	To explore physical and sociological characteristics, childhood experiences and family relations, among cross-dressing men
Progressive Leadership Alliance of Nevada (2011)	2010-2011	Nevada	Through support groups and transgender-serving agencies	Survey	131 self-identified trans people	A general assessment about transgender people's needs for presentation to the Nevada legislature
Pyne (2012)	2010	Toronto area, Canada	Recruitment through listservs, posters at local community agencies, and through informal community networks	Focus groups	18 transgender parents	To more deeply understand the strengths of and challenges being faced by transgender parents
Reisbig (2007)	Not specified	Midwestern U.S.	Criterion sampling via transgender serving organization	Interviews	5 adult children of cross-dressing fathers	To understand relationship factors, meaning making, and impact on social development due to fathers' "coming out" as cross-dressers

STUDY	YEAR DATA COLLECTED	LOCATION	RECRUITMENT	METHOD	SAMPLE	PRIMARY PURPOSE OF RESEARCH
Reisner et al. (2014)	2013	Massachusetts	Venue-based and online recruitment	Online survey	452 participants Assigned male at birth and identified as women, female, or MTF spectrum: 28% Assigned male at birth, identified as gender non-conforming or a non-binary gender: 9% Assigned female at birth and identified as man, male, or FTM spectrum: 31% Assigned female at birth and identified as gender non-conforming or non-binary gender identity: 32% Intersex: 5%	Community-based needs assessment to explore the health and well-being of transgender people in Massachusetts
Rubin (2003)	1992-1995	San Francisco, CA; New York, NY; Boston, MA	Recruitment through informal networks and direct solicitation to trans-serving organizations	In-depth ethnographic research	22 trans men	To better understand trans men's lives
Ryan (2009)	Not specified	Not specified	Not specified	Interviews	10 trans men who are currently parents or planning to become parents	To explore the nature of trans men's fathering of their children
Stotzer (2013)	2013	Hawai'i	Paper survey collected at Pride Events, email recruitments to online survey through community organizations, social media posts of invitation to online survey	Survey	710 LGBTQI people Cisgender men: 48.6% GNC men: 7.3% Trans men: 2.4% Cisgender women: 27.5% GNC women: 9.0% Trans women: 4.2% Genderqueer/androgynous: 1%	Statewide needs assessment of community safety and violence, health, family and relationships, workplace discrimination and employment, and LGBTQI community priorities
TREC (2010)	2009-2010	North West region of England	Internet link to survey distributed via email networks utilizing snowball methodology	Survey	155 transgender people Man/trans man: 33.6% Woman/trans woman: 53.6% Other: 12.8%	Needs assessment of trans people in North West of England related to community safety, discrimination, and social service needs
Valera et al. 2001	Not specified	Washington, D.C.	Street recruitment in areas known for sex work	Survey	100 sex workers Female: 42 Male: 32 Transgender women: 26	Study of the needs of street sex workers in Washington, D.C.
Veldorale-Griffin (2014)	Not specified	Not specified	Recruitment through LGBT community centers, online discussion lists and listservs snowball sampling, transgender support groups, and personal contacts	Online Survey	48 Transgender parents Sex at Birth Male: 62.5% Female: 29.2% Intersex: 6.3% Current identity: Female: 48% Male: 31.3% Trans woman or MTF: 10.5% Trans-masculine: 2.1% Transgender: 2.1% Intersex: 2.1% Unsure: 4.2% 9 adult children of transgender parents Female: 78% Male: 22%	To learn how transgender parents and their children experience the disclosure of parental gender transition

STUDY	YEAR DATA COLLECTED	LOCATION	RECRUITMENT	METHOD	SAMPLE	PRIMARY PURPOSE OF RESEARCH
Weinberg et al. (1999)	1990-1991	San Francisco California's Tenderloin District	Connected with known "regulars" in sex worker areas (around a specific bar)	Unstructured Interviews	140 sex workers Women: 46 Men: 46 Transgender people: 48	To explore differences in work-specific characteristics of sex work based on gender
White & Ettner (2004)	Not specified	Not specified	Sent to therapists in the Harry Benjamin International Gender Dysphoria Association	Survey	10 therapists reporting on their work with 4,768 transgender clients	Determine needs of children whose parents are transitioning
White & Ettner (2007)	Not specified	Not specified	Not specified	Qualitative Interviews	27 transgender parents MTF: 25 FTM: 2	To determine the adjustment of children to their parent's transition
Wierckx et al. 2012	2009-2010	Belgium	Patients who underwent sex reassignment surgery between 1987 and 2009 at Ghent University Hospital were invited by letter	Survey followed by hospital evaluation	50 transsexual men post-SRS	Part of a larger study to determine health and well-being post SRS, this specific report on relationship and reproductive issues
Wilson et al. (n.d.)	Not specified	Scotland	Recruited through GP offices across Scotland	Survey	52 Transgender people Trans women: 39 Trans men: 121	Assessment of needs and experiences of trans people related to demographic characteristics and interactions with services in Glasgow
Xavier et al. (2007)	2005-2006	Virginia	Recruitment through service providers, gender support groups, informal peer networks	Survey	350 transgender people MTF: 229 FTM: 121	Survey to improve the health of transgender Virginians
Zians & O'Brien (2006)	2004	San Diego County, CA	Outreach workers from a health clinic	Survey	Total sample = 136 Cross-dresser: 7.4% Transvestite: 2.9% Drag Queen: 9.7% Drag King: 1.4% Pre-operative: 51.1% Post-operative: 16.3% Non-operative: 8.9% Hormone only: 0.7%	Public health survey

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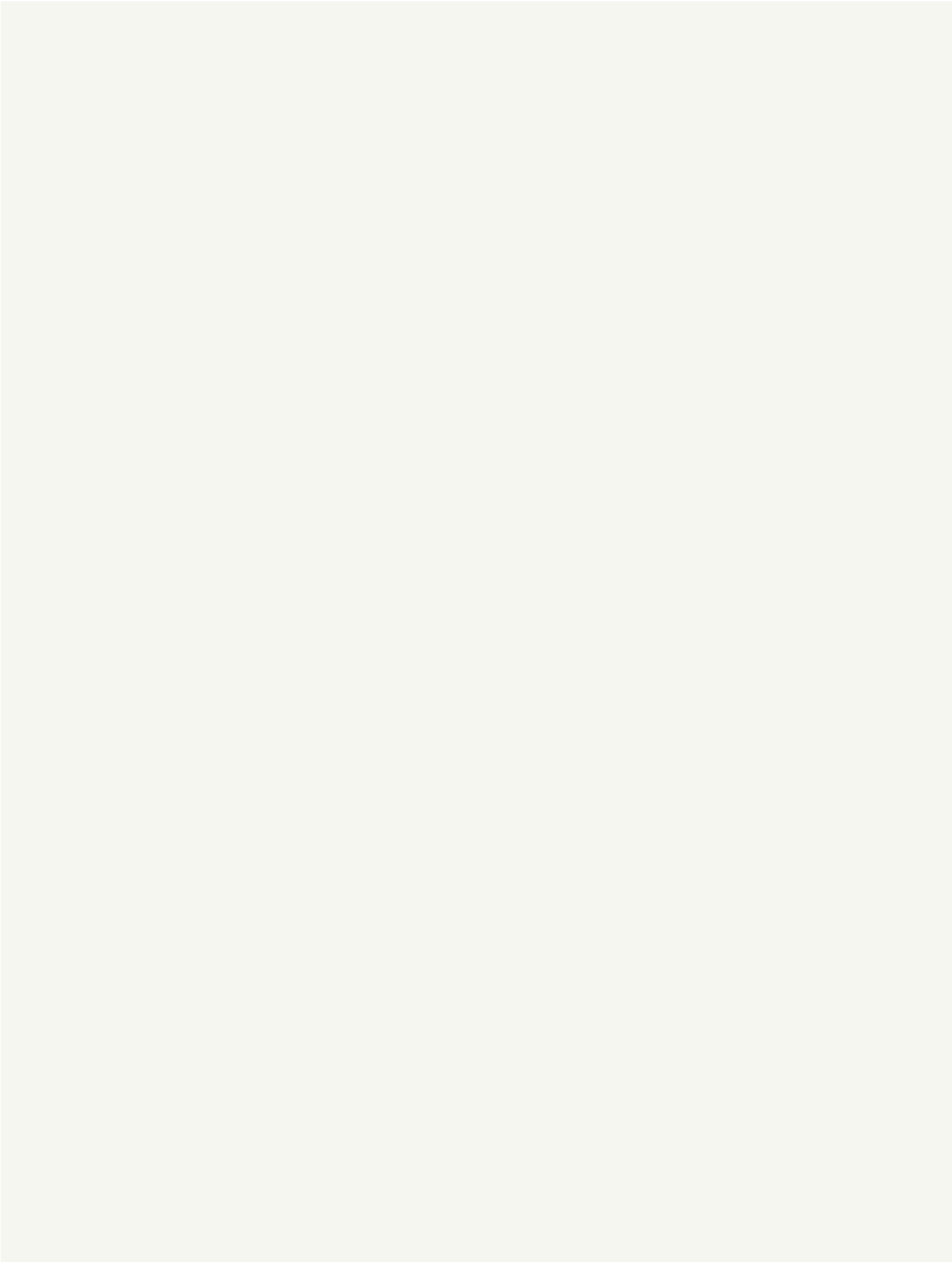
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