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Parenting the Transgender Child:

Transitions in Gender, Sexuality, and Identity

A dissertation submitted in partial satisfaction of the

requirements for the degree Doctor of Philosophy

in Sociology

by

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September 2015

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September 2015

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by

Elizabeth P. Rahilly

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## ABSTRACT

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This thesis captures the experiences and perspectives of a new generation of parents who identify and raise a child as transgender. Drawing on in-depth interview data with 56 parents, who speak to 43 cases of significant childhood gender variance, I explore several dimensions of the trans-parenting phenomenon that illuminate new cultural reckonings with gender, sexuality, the body, the binary, and identity. First, I examine the wealth of interactions and observations parents have with and of their children, through which parents ultimately come to understand their children as transgender. These stories highlight the child-directed, child-centered dynamics of childhood socialization in a new context—gendered childrearing and (trans)gender identity development—dynamics that are the vehicle of trans-affirmative parenting. Next, I turn to parents’ and professionals’ distinctions between, and sometimes re-interpretations of, “trans” and “gay” understandings of non-normative expression. I then explore parents’ newfound reckonings with non-binary identities and expressions, both practically and conceptually. Lastly, I consider parents’ privacy negotiations on behalf of their children, along with their biomedical accounts for their children’s transgender embodiment, and the cisgender body logics that undergird both. Taken together, the analyses across these different domains of parents’ experiences expose the cultural work that is giving (trans)gendered subjectivities increasing viability and

intelligibility at particularly early points in the life course. The research also shows the prevailing constraints that a binary order imposes on more gender-variant and non-binary subjectivities and embodiments, especially for children assigned male and trans-feminine possibilities, and the raced and classed inflections of this parenting model.



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## CHAPTER 1

### INTRODUCTION

*“Well this is such a phenomenon ... I mean this is an historical moment, it really is, and I don’t know how it’s gonna come out, but it is a very historical process. You know I’m 72 ... I lived through the women’s movement ... when we talked about gender in those days, we were talking about the differences between men and women ... it was all social, I was around for that ... and then you’re here with this, which takes on another whole aspect of gender ... .”*

*(Leigh, founder of support group for parents of gender-variant children)*

It is a Friday morning around 9 a.m., early January, 2015. Like so many times before, I am hitting the open road for an interview, and the Pacific to my right is glassy and serene. I concluded my interviews with parents of gender-variant children a year ago, but I can’t resist the opportunity to conduct one more interview face-to-face, with parents who live some fifteen minutes down the coast from me. In my 6-7 years of research endeavors, I have never reached a family who resides so close, and I was not going to pass up the opportunity. I am meeting Glenn and Jayne,<sup>1</sup> a married heterosexual couple who were finally able to set aside some time from the daily demands of work life and raising their three young children, 9, 6, and 4 years old. The schools are on holiday break, and they have secured a babysitter to make possible our interview in a quiet, empty school library (Glenn is a district administrator and has access). As we settle into a private study room, I learn that Jayne and Glenn are starting a support group in the area for other parents and families like them—a more local alternative to the one several hours away in a large city, which I’ve been hearing about for years from other parents. Perhaps I might be interested in attending some time, they suggest (later on my drive home, I laugh to myself that such a support group blossoms here and now,

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<sup>1</sup> All names that appear in this thesis are pseudonyms.

at the seeming end of this project's journey, but I log it as duly reflective of the historical and cultural developments this thesis charts).

Over the course of our long, caffeine-fueled interview, they tell me, with as much chronological and anecdotal detail as I ask for, about their two oldest kids, Jared (assigned female at birth) and Ally (assigned male at birth), whom they now raise as a transgender boy and a transgender girl, respectively. Jared's new status as a boy full-time is just a few weeks old. When we first started communicating five months ago, they had been identifying Jared as gender-fluid or gender-neutral, and Glenn and Jayne advise me that they are still trying to get used to his new identification. Having another transgender child does not make this transition easy or unremarkable for them, just maybe faster. Jared has Asperger's syndrome, an autism spectrum disorder. While Jared is the eldest, they did not recognize or identify him as gender-variant until years after they had begun observing Ally's gender variance (as early as 18 months old)—which, as they articulated throughout our conversation, seemed like much more of a “problem” relative to her male birth assignment. They also feel that Jared's autism and sensory sensitivities, including his preference for not-so-feminine “comfortable” clothes, potentially clouded their reading of his behaviors as anything gender-atypical. Ironically, managing Jared's behavioral issues eventually motivated Jayne to permit Ally to wear dresses outside of the house; it was one less challenge to deal with in the morning.

While I had been emailing solely with Glenn over the last several months (only 1 of 2 fathers who ever personally contacted me about my project), I quickly learn in our interview how intensely involved Jayne is in raising their three children full-time and managing all aspects of their childhoods, including, but not limited to, the gender variance and the Asperger's syndrome (both of which, it turns out, she has been blogging about anonymously

in several different online locations). Given Jayne’s involved parenting work, it does not surprise me discover all the work she has done to help create a masterful online database of local resources and professionals for parents of transgender children, which entailed connecting with a local university and LGBT center, as well as founding the parents’ support group. Months later, at a conference on trans identity, I run into Jayne; we hug excitedly, and she tells me that since launching the group’s web page, her email has been “blowing up” with interested parents.

This dissertation is the story of parents who identify and raise a child as transgender in early 21<sup>st</sup> century North America, including the attendant discourses, practices, perspectives, and institutional infrastructure that have arisen in support of children identified as such, across schools, advocacy organizations, medical and mental health practitioners and clinics, and especially online. The parents I studied certainly do not represent the first parents to encounter and support significant childhood gender variance,<sup>2</sup> but they do feel like no one in their lifetimes has done what they are doing—identifying and raising a young child as the “other” sex. Indeed, the oldest childhood transition of a pre-adolescent child represented in my sample is dated from 2005.

However, even at the beginning, the story of these parents’ experiences is not simple. At the time of our interviews, the majority of children represented in this study were

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<sup>2</sup> These parents are not necessarily the first parents to raise a child as gender-variant or transgender in North America, let alone globally. Anthropological and historical reports of pre-colonial Native American societies describe persons who might be considered gender-variant or transgender within their own cultures, often collectively referred to as “two-spirit” or the “berdache,” and whose gender-variant “tendencies” were observed and honored in childhood: “[Navajo] Children with berdache tendencies were given special care and encouragement [by their families] ...” (Roscoe 1994: 355). It should be noted that “berdache” is considered a Western colonialist coinage and has largely been abandoned outside of these early records. Other scholars who study gender diversity in cross-cultural contexts, such as the *hijra* of India, have collected retrospective, childhood accounts of persons’ gender variance, in which parents are mentioned as at least being aware of the child’s gender variance (see Nanda 1994: 402-03; Nanda 1999). Nevertheless, for the parents in this study and the professionals they consult, raising a child as transgender feels like very new terrain relative to LGBT identities of the 20th-21st centuries, as well as to conventional parenting and professional approaches to young children (i.e. raising them as their assigned birth sex).

identified by parents as transgender (35 of 43 cases). However, some children have developed or present in more gender-normative directions since an earlier round of interviews in 2009-10, and a few children are identified by parents as gender-variant, including as “agender,” but *not* necessarily as transgender—just as Jared was for 5-6 months. (One mother did not necessarily think in any of these terms; her friends referred her to my project.) To be sure, attending to those sometimes murky and/or changing distinctions along an imagined “spectrum” of gender-varying identities, expressions, and embodiments—a spectrum with both (trans)gender and (homo)sexual valences—is part of the story, and the change, I aim to tell.

More accurately, then, this dissertation is the story of parents who identify and support a child as significantly gender-variant, including as transgender, and not necessarily in the present moment, but at some point, at least, within the last 6-7 years that I have conducted this research. The data intimately expose the practices and processes that are demanded of these parents—intellectual, discursive, practical, political, emotional—as they confront a normative gender order that privileges a sex-deterministic binary, and as they advocate for their gender-variant children. The findings illustrate that these parents learn to abandon the import of assigned birth sex for the gender their children can be. They imagine a wider range of (trans)gendered possibilities than a limited male/female binary allows, including ones that makes room for change and fluidity over the life course. They relinquish strictly (homo)sexual interpretive frames for their child’s non-normativity. And they attempt to account for all of this intelligibly, to themselves and to others, in a world still grounded in cisgender<sup>3</sup>—not transgender or gender-variant—presumptions for bodies and gender,

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<sup>3</sup> I use “cisgender” to mean not transgender, as in a “match” between one’s gender identity and their assigned sex at birth. Additional key terms are defined below.

particularly in the context of early childhood development. Parents' negotiations newly reveal the workings and orderings of a culture by those who must push against it. Fundamentally, this dissertation captures new possibilities for gender identity and expression during particularly early points in the life course, as they are facilitated by the parents who observe, research, and identify them.

Like all parents, these parents are situated in a very specific historical moment, one in which parents like them, and parent support groups and networks regarding transgender children, newly exist, but also one in which the whole world of gender and sexuality is being challenged, new medical options are available for childhood body modifications and interventions, new possibilities of self-identity exist, and new terminology is emerging and evolving. In the section that follows, I define the terminology I use in this thesis to explain the various categories and aspects of childhood gender variance that surface in my analysis, in terms of how these parents describe, understand, and identify their children. I proceed with an outline of the major historical trends and considerations that serve to contextualize these parents in our broader cultural moment.

### ***Terminology***

Asserting objective definitions and distinctions for these terms and the children to whom they refer is impossible, and nothing I aim to do. I strive to be cautious about what I describe at any given moment. I do not presume that the categories I employ here are necessarily definitive of any kind of interior validity or sense of self on the children's part, be it gender-variant or gender-normative. These children do not have children have complete and unfettered access to gender expressions of any kind, independent of the wider culture they live in, the opportunities for self-expression it provides, and parental compliance (nor, of

course, could I tap into those interiorities myself). At every instance, I am relying on the parents' reports of their children's identities and behaviors—which, no doubt, often reflect explicit identity statements from the children. Indeed, relying on parental perspectives, absent the children's, is a reigning tension of this thesis. And yet, this dynamic is intimately related to the range of childhood gender identities and expressions that are made livable and possible for these children in the first place—and is inherent to the sociological motivations of this study. More than anything, the terminology I outline here is for analytic clarity and specificity.

In this thesis, “gender-variant” serves as an umbrella term for all the children represented in this study, whose expressions, interests, and self-identifications are considered atypical relative to the expectations of their assigned birth sex. “Transgender,”<sup>4</sup> or “trans,” refers more specifically to child who has a firmly “cross-gender”<sup>5</sup> identity and whose parents

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<sup>4</sup> The term “transgender” was actually developed as a broad umbrella category for all kinds of gender variance, the way I am using “gender-variant” here regarding these children. “Transgender” was in part an outgrowth of queer theory and politics of the 1980-90s, with aims to challenge more binary, gender-normative expectations of trans persons, especially in the medico-psychiatric arena, and to speak to a wider range of gender-variant identities, expressions, and embodiments, including those people who did not engage in “sex change” (Califia 2003; Spade 2006; Stryker 2008). “Transsexual” is sometimes distinguished from the broader “transgender” to refer to a person who specifically identifies with, and wants to live as, the “other” sex, i.e. male or female (and who may engage in body modifications to those ends, but not necessarily). Of course, these are by no means firm or steadfast definitions. However, by way of example, Serano (2007) identifies as “transsexual” because her trans experience was so heavily related to matters of transitioning from her *physical sex*, not her gender; she does not consider herself a stereotypically feminine woman, but has always known she is female. Serano also resists the notion that “transsexual” has to mean gender-normative, regressive, or restrictive (arguably a transphobic connotation of the word), in the way that some trans political discourses insinuate. Instead, she explains, the term is really about the “subconscious sex” with which one identifies (male or female). In these ways, “transsexual”—as in, “cross-sex category”—may well represent many of the children in this sample, who, fundamentally, identify as the “other” sex—as males/boys and females/girls—and who desire a change in their natal anatomy. I believe this is reflected in the growing preference for the terminology “affirmed female/male.” However, like all of the parents and professionals I spoke with, I use the term “transgender,” which in this context refers specifically to children who were assigned one sex at birth and identify as the “other.” This is in line with broader popularizations of the term. Please see chapter 4 for additional commentary on my particular use of the terms transgender and gay.

<sup>5</sup> A note on quotation marks: “Cross-gender,” like so many terms and labels in this thesis, marks a contested concept or category. It refers to a formula for sex and gender that presumes a “match” between the two, and thus characterizes a trans person's gender identity as something that is “across” from or “opposite” from their assigned sex. If assigned sex were not held as relevant to one's gender identity, of course there would be no

have affirmed them as such (i.e., children assigned male at birth who identify as girls and children assigned female at birth who identify as boys). I use “gender identity” to refer to a child’s self-identification as a “boy/male,” “girl/female,” or something less binary altogether (e.g. “two-spirit”).<sup>6</sup>

However, as I explore in Chapters 4 and 5, “gender-variant” had varying valences and connotations as it was distinguished from the more specific “transgender,” sometimes as something at least implicitly related to matters of “(homo)sexuality” or sexual variance, and other times as something indeed related to (trans)gender variance, but not necessarily in a cross-gender (binary), or transgender, capacity. In these latter instances, I use “non-binary” as an inclusive term for all gender-variant identities and/or expressions that cannot be characterized firmly as “male/boy” or “female/girl” relative to normative conceptions for those categories, in either cisgender or transgender terms. This can include a range of non-transgender possibilities, including: “genderqueer” (persons who do not necessarily identify as “boy” or “girl,” e.g. a child assigned male who only wears stereotypical girl clothing and

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need to refer to this “cross(ing)” in the first place. The same goes for the terms “other sex” or “opposite sex.” Moreover, it would be more accurate to use the term “cross-sex category,” since these children identify as males/boys or females/girls, not necessarily as masculine or feminine; I use the former since these parents speak in terms of their child’s “gender” (not their “sex category”). Similarly, “male” and “female” sex assignments at birth refer to a particular understanding of bodies, sex category, and gender that is not always accurate (a child assigned “male” at birth may actually identify as a female/girl). “Gay,” “transgender,” “gender-fluid,” and/or “gender-variant” also mark potentially contested labels, identifications, and conceptualizations, depending on where, when, and how they are used. In these ways, the use of quotation marks for these terms feels appropriate, since I do not mean to assert them as objectively true or accurate, but more often am referring to particular understandings about “gender,” “sexuality,” and/or identity that their application signals in any one instance. Indeed, as I will show, these terms are more than “just” labels and words, but signal proliferating possibilities for, and understandings of, gender, sexuality, and identity in the 21<sup>st</sup> century. However, for readability, I will avoid prolific use of quotation marks beyond this section of the manuscript.

<sup>6</sup> What are distinguished as sex and gender among social scientists I will often elide for the purposes of persons’ self-identifications. A transgender woman, for example, may identify as a “female,” regardless of her sexual anatomy or birth sex assignment, which, as a personal identity category, may be synonymous with “woman.” I believe this is reflected in some parents’ use of the terms “affirmed female” or “affirmed male” to describe their transgender girls and boys, respectively. I seek to honor the identifications of the parents/children as much as possible, even as I understand critical sociological distinctions between physical/biological sex, sex category, and gender.



identifies as two-spirit, or a child assigned female who consistently presents in visibly masculine ways and prefers male attributions by others), “gender-fluid” (persons who more explicitly change their identities and/or expressions regularly, sometimes presenting in more masculine ways and preferring male pronouns, sometimes as more feminine and preferring female pronouns), or “agender” (persons who do not identify with any gender identity or expression and reject “masculine” or “feminine” characterizations). As a further note: while many parents, scholars, and advocates will use the term “gender-fluid” as near synonymous with “gender-variant,” I use “gender-fluid” in a very specific capacity: to refer to a child who is literally fluid and changing in their expressions and/or identities regularly, “boy” one day, “girl” the next. In my own research experiences, this scenario was actually very rare—most children whom we speak of as “gender-variant” are consistently more masculine or more feminine relative to their assigned sex, and thus I do not characterize them as “fluid” (even if they enjoy the activities and interests stereotypical to both boys and girls). In this use of “gender-fluid,” I thus distinguish and prioritize gendered expressions, presentations and identities on a child’s part from gendered *activities* (i.e. roughhousing or playing with Barbie dolls).

“Cisgender,” particularly as it pertains to my “follow-up” cases from 2009-10 (see Chapter 2), refers to a child who is not identified as transgender, nor as necessarily gender-variant. However, this does not necessarily mean they are gender-normative relative to prevailing conceptions for maleness and femaleness. For example, a “cisgender male” child identifies with their assigned birth sex and lives and presents as a normative boy most of the time, but may occasionally play dress-up at home or don more feminine clothing items (e.g. pink jeans); they may also dislike stereotypical kinds of boy play (e.g. sports) and prefer

theater and fashion instead. For these reasons, several of the parents of children I identify as such no longer really identify them as gender-variant, and why I use “cisgender” instead. I contrast this with a categorically “gender-variant” child who consistently presents or identifies in gender-nonnormative ways, as described above. In all of the non-binary and/or non-transgender cases, I refer to the child’s assigned sex at birth (male or female) to signal their potential difference from gender-normative standards, and use the pronouns parents used during the interviews.

I include these various shadings of terminology to capture the range of possibilities I encountered in parents’ narratives. Notwithstanding, these latter, gender-variant and non-binary categories are not particularly descriptive of the majority of children represented in this study (more than 80% at the time of the interviews), who are binary- and transgender-identified, per their parents. Moreover, the operating terminology I use in this thesis does not necessarily reflect the preferred terminology or vocabularies of all of the parents or professionals I interviewed because, as I observed, these are constantly in flux and vary person to person. Some parents prefer “gender-nonconforming” to “gender-variant” (this includes various permutations as to where and when a hyphen gets used, if at all—e.g. “gender non-conforming” or “gender variant”), or “affirmed female” to “transgender girl.” More recently, “gender creative,” “gender expansive,” and “gender independent” have surfaced as the preferred parlance. The identity labels persons use are no small matter, and often reflect a politicized stance; some parents, for example, do not like “gender-variant” because they feel it connotes something “deviant” or aberrant. One parent advised me that she prefers the term “asserted gender” to “affirmed gender” because the former refers to a gender that the child has always claimed and expressed, whereas the latter connotes a gender

that others have agreed to attribute to the child. The parent (and the professionals from whom she learned it) seeks to center the child's self-identification, not what others have done for the child. This makes perfect sense to me, in light of the deeply child-centered nature of parents' journeys and the ways in which they seek to affirm their child's own self-conceptions.

I would never claim that one label is more right or true over another, and I take very seriously the reasons for which some terms are preferred over others. I, however, do use "affirmed gender," and related "affirmative" iterations, throughout this document, as my work is almost always referring to what the parents are doing to and for these children—affirming, supporting, honoring childhood gender-variant identities and expressions, versus discouraging, disparaging, refuting them. Indeed, I consider this parent's explicit preference for "asserted gender" as part of the affirmative labor she does. Again, the terminology I have chosen is for analytic clarity when describing the range of gender-nonnormative potentials that parents observed, described, and/or actively managed, relative to broader discourses and identity labels for gender variance they encounter and with the help of burgeoning infrastructural resources. The last term I introduce, "social transition," further duly reflects this study's emphasis on the parents' practices and perspectives, not the children's.

"Transition" or "social transition" refers to a parent recognizing and affirming their child as the "opposite" sex category, including fully permitting the related name, clothing, pronoun, and hairstyle preferences of the child, as well as enrolling them in school and other activities as such. Parents often go to friends, extended family, and other adults in the child's life to explain and request this new recognition and identification. In this way, "transition" refers to the parents' thoughts and actions, including how they come to recognize their child, and not any gender transformation on the part of the child. Indeed, many see "transition" as

the moment when the parents formally and finally acknowledge the gender that the child has always been expressing, and why I so often encountered the notion, “he/she just is who he/she always has been.” This is why I most often speak in terms of, the “parents facilitating a transition” or the “child is socially transitioned,” versus “a child who is transitioning.” Moreover, “transition” does not necessarily entail any bodily changes or physical transitions, and for the majority of children in this study, does not yet (they are still pre-pubertal, and hormonal treatments are not yet appropriate or necessarily desired).

### *Historical and Cultural Scaffolds*

My graduate career shadowed the emergence and, in Foucauldian terms, “invention” of the “transgender child” over the last 10-15 years (Bryant 2006, 2008; Foucault 1973; Meadow 2011, 2013, 2015). However, there are broader historical and cultural developments over the last half century that serve to contextualize and historicize the parents and professionals that make up the present study, who represent a burgeoning population of adults who are exploring, affirming and facilitating transgender identities and transitions for children during early childhood development, especially in pre-adolescence. Below, I discuss these trends in three broad areas: First, the feminist movement of the 1960-80s and its calls for “feminist” or “gender-neutral” parenting, as well as the modern LGBT rights movement; both of these have publicly challenged traditional gender norms and stereotypes, as well as made visible gendered and sexual variances that defy (cisgender) heteronormative expectations. Second, the history of gender-variant children in psychiatric research and literature, starting in the 1950s, along with more recent clinical infrastructure and support systems that have developed around present-day gender-variant children and their families. And third, models of childhood socialization, in both psychology and sociology, that have

increasingly emphasized the child as an active agent in childhood development and parent-child interactions, not as a passive recipient of social expectations. Here I also discuss the raced, classed, and gendered dimensions of child-directed, child-centered parenting. Collectively, these three broad areas offer pertinent insights into our contemporary cultural moment, wherein a parent can listen intently to a young, pre-pubescent child and come to understand them as categorically “transgender” or “gender-variant.”

### ***Gender-variant Precursors: Feminism and the LGBT Rights Movement(s)***

Attentive to the complexities of gender inequalities, many second wave scholars and activists called for childrearing practices that resisted stereotyping male and female children, often referred to as “gender-neutral,” “feminist,” or “gender-aschematic” parenting (Bem 1983, 1998; Ehrensaft 1987; Pogrebin 1980; Statham 1986). This included modeling egalitarian parenting practices, as well as permitting gender-inclusive toys, interests, and activities for young boys and girls. The famous “William’s Doll” (1972) song, recorded on the “Free to Be You and Me” album, is emblematic of these principles; it tells the story of a boy who wants to play with dolls and is eventually allowed to do so (because it will make him a “good father.” Sandra Bem (1998), one of the foremost proponents of such practices, often modified the gender of characters in her children’s storybooks (i.e. drawing breasts and long hair on a truck driver, or a beard on a schoolteacher); she also repeatedly drove her daughter past a work site where one of the construction workers was a woman.

Social scientists have attempted to study the effects of such gender-neutral principles on children (Katz 1996; Fagot and Leinbach 1995; Risman and Meyers 1997). Risman and Myers (1997), for example, found that children adopted their parents’ feminist beliefs when it came to adults (i.e. parenting roles, occupation); however, children still drew upon

gendered stereotypes to differentiate themselves and their peers in interviews. More recently, Martin (2005, 2009) and Kane (2006, 2009, 2012) have exposed the limited legacy, or “stalled revolution,” of such parenting ideals, which they largely attribute to lingering, negative cultural associations between childhood gender variance and adult homosexuality. Parents’ practices uphold compulsory heterosexuality and hegemonic masculinity instead. Martin (2005) found that across a wide variety of parenting guides, gender-neutral parenting was still not whole-heartedly endorsed for fear of “encouraging” homosexuality (474-75). Tellingly, Martin (2005) concluded that:

[T]he gendered socialization of children seems only to have mildly waned since the height of the second wave ... there may well be rich research territory in the area of gender socialization that has been abandoned by many feminist researchers ... . [H]ow parents imagine and treat signs of homosexuality in children are important political and intellectual questions ... . (475)

Similarly, Kane (2012) found that even the most gender-progressive of parents tend to succumb to the “gender trap,” or social expectations that limit parents’ best intentions against the gender binary (3). Most parents Kane studied still felt accountable to a modicum of gender normativity, especially when it comes to male children and “icons of femininity” (2006, 2009), such as frilly skirts and dresses and Barbie dolls. Moreover, few, if any, of the parents Kane describe seemed cognizant of the prospect of a transgender child; as one particularly progressive mother said, ““Eli, you’ll never be a girl, but if you want that Barbie pool you can have it”” (Kane 2012: 150).

Such limitations are not surprising; there are parts of Pogrebin’s (1980) much celebrated book, for example, that are stunningly transphobic and/or homophobic (e.g. 295 and 300; see also Martin 2005 for a critical discussion of this). In these original formulations, gender-neutral parenting encouraged boys and girls to pursue whatever interests they want,

regardless of stereotypes—but they were ever and always cisgender boys and girls, respectively, and ideally heterosexual. More fundamentally, these formulations fail to rupture the quintessential link between sex and gender, even as they try to reduce the relevance of that link. Sandra Bem (1998), for example, advised that she always tried to reduce the difference between boys and girls to anatomy to her children, ultimately reiterating a cisgender relationship between sex and gender: “[A] boy, we said again and again, is someone with a penis and testicles; a girl is someone with a vagina, a clitoris, and a uterus” (107). As conventionally conceived and practiced, gender-neutral parenting remains largely ignorant of transgender prospects for young children—a prominent limitation from which the parents in this thesis depart (including departing from gay associations with childhood gender variance as well). Nevertheless, these gender-neutral principles, born out of second-wave feminism, have widened the gendered “boxes” in which parents can allow their male and female children to learn and grow. This enables a baseline level of openness to children’s gender-atypical preferences among many contemporary parents, versus rejecting them outright, as I will examine later in this thesis.

Alongside calls for gender-neutral parenting, the modern-day gay rights movement, galvanized in the 1960-70s, has made the prospect of LGBT identities increasingly visible on the political and cultural stage (Engel 2002; Taylor, Kaminski, and Dugan 2002). Arguably, the success and normalization of “LG(B)”<sup>7</sup> has made for greater openness to the “T” in the cultural mainstream. In many ways, it is loose associations between gay and trans, which the proverbial “LGBT” moniker connotes, that bridges gay rights developments with transgender issues in society at large, despite the contradictions and faults of such associations. The

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<sup>7</sup> Many would argue that bisexuality has hardly been normalized by the mainstream gay rights movement (see e.g. Gamson 1998b for a discussion of this).

federal repeals of DADT and DOMA (section 3) in 2010 and 2013, respectively, along with a wave of new states legalizing same-sex marriage since 2010,<sup>8</sup> signal the growing normalization of homosexual identity in society. Increasing percentages of national respondents, as well, count same-sex couples with children as “family” (Powell et al. 2010).

Of course, this burgeoning, albeit unevenly spread, cultural comfort around gay identity and homonormative relationships (Duggan 2002) hardly guarantees transgender awareness or inclusion. Indeed, arguably the lynchpin of the mainstream gay rights movement is that it is *not* about (trans)gender variance or gender at all, but about sexuality and sexual orientation, and vice versa (Valentine 2007). Gays and lesbians are just “normal” men and women like their heterosexual counterparts, and deserve the same rights and protections, the logic goes. The homonormative and gender-normative face of the modern gay rights movement has been a long-standing tension in LGBT political organizing, and is why explicitly “queer” activism took hold in the 1990s, in part to address such trans-exclusionary tendencies (Cohen 1997; Gamson 1998b). Many LGBT scholars and activists assert that gay rights agendas have been advanced at the expense of transgender issues. The Employment Non-Discrimination Act (ENDA), for example, has been plagued by these divisions (Califia 2003: 240-41; Stryker 2008:150-52).<sup>9</sup> They also note that prejudice towards visible manifestations of gender variance is often at the heart of what is considered

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<sup>8</sup> The “Don’t Ask Don’t Tell” policy effectively barred LGBT persons from serving openly in the U.S. military. The Defense of Marriage Act (1996), section 3, prevented legally married same-sex couples from receiving the same federal benefits and protections that married opposite-sex couples do. Most recently, in a historic decision on June 26, 2015, the U.S. Supreme Court ruled that bans on same-sex marriage are unconstitutional, legalizing gay marriage across all 50 states and D.C.

<sup>9</sup> ENDA has marked an embattled legislative initiative due to debates over whether to include specific protections for “gender identity/expression” in the workplace, and not just for “sexual orientation.” That these statuses would be considered such separate political interests and groups is part of the critique of such divisive LGB/T politics (trans persons can identify as lesbian, gay, or bisexual, and LGB-identified persons can be perceived as visibly gender-variant). The bill has not been formally passed into law yet.



“homophobia,” and that trying to separate issues of (homo)sexuality from (trans)gender is misleading (Califia 2003: 241-42).

Moreover, the political history of specifically transgender and transsexual activists and issues, both on their own terms and in relation to gay rights, has been largely overlooked in the wider LGBT movement. As Stryker (2008) notes, the 1966 riots at Compton’s Cafeteria in San Francisco, which challenged police brutality of gender-variant persons and pre-date Stonewall, are still little known and rarely acknowledged. Indeed, despite the crucial work of other trans activists and organizations over the decades (Califia 2003; Stryker 2008; Valentine 2007), the parents I interviewed advised they had little familiarity with trans persons or identity early on. They often confessed that their early associations with trans entailed rather sensationalistic portrayals from daytime talk shows, as well as “Rocky Horror Picture Show” or “show girls in Vegas.” As such, trans political history does not seem explanatory of these parents’ (limited) early understandings of “LGBT,” and it would be remiss to assume that broadening familiarity with homosexuality and gay identity guarantees transgender inclusion or awareness. But gay identities and realities did seem to offer them a cultural and political referent and starting point for (trans)gender variance.

Reflective of widespread cultural links between gay and trans, the May 2014 cover story of *TIME* magazine, entitled “The Transgender Tipping Point,” opens with the caption, “Nearly a year after the Supreme Court legalized same-sex marriage, another social movement is poised to challenge deeply held cultural beliefs” (Steinmetz 2014). The “transgender movement,” as the article calls it, is gaining visibility and momentum, with major figures like Chaz Bono, Laverne Cox, Janet Mock, and most recently Caitlyn Jenner, giving trans identity a very public face. As of June 2015, all of the Seven Sister women’s

colleges, including Barnard, Bryn Mawr, Mount Holyoke, and Smith, have enacted policies allowing transgender students to enroll (Williams 2015; Weber 2014). Between 2012 and 2013, California, where approximately half of the participants for this study reside, enacted several trans-specific legislative initiatives, including laws that: guarantee students the right to use sex-segregated school programs and facilities consistent with their gender identity, ban “gay panic defenses” in LGBT-related hate crimes (often marshaled in transgender-related cases), and ban exclusions of trans-related health care coverage.

California, however, is only one of a few states with such measures. Currently, thirty-two states lack specific “gender identity” clauses in their employment non-discrimination laws (as they do for “sexual orientation”), and many states still require relatively burdensome documentation to allow for gender markers to be changed on key identity documents, if not “sex reassignment surgery.”<sup>10</sup> As such, the above developments do not mean to imply great progress for either gay or transgender experience in society, especially considering queer intersectional analyses of such developments (Cohen 1997; Conrad 2014), let alone the limited status of trans-specific protections across the states. However, historical developments in LGBT politics and the mainstream gay rights movement, whether these are regarded as advancements or not, have ushered in a new platform for broader cultural reckonings, awakenings, and readiness regarding (trans)gender variance—that is, for the “T” in “LGBT.”

### ***The Transgender Child: A Medico-psychological Mapping***

While much of the history regarding LGBT identity and politics concerns adults, research regarding LGB(T)-identified youth (generally, 14-21 years old) started emerging in

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<sup>10</sup> See [www.transgenderlawcenter.org](http://www.transgenderlawcenter.org) for a thorough report of state-wide laws and policies.

the late 1980-90s (Herdt 1989; Herdt and Boxer 1993; Miceli 2002). This research is mainly housed within the “helping professions” or the “psy sector” (Castel 1991), including psychiatry, psychology, social work and social services; it is certainly the arena that contemporary parents of gender-variant children turn to for support, education, and guidance.<sup>11</sup> These literatures generally concern the “bio-psycho-social” risk factors that are disproportionately associated with this group, including depression, isolation, low self-esteem, drug and alcohol abuse, and suicidality, and practices that help these youth, and ideally their families, improve their socio-emotional well-being (e.g. Morrow 2004; Ryan 2010). An estimated 30-40% of LGBT youth attempt suicide, relative to a suicide rate of 8-13% among their gender-normative, heterosexual counterparts (Morrow 2004: 95). Furthermore, it is estimated that over 40% of all transgender and gender-variant persons will attempt suicide in their lives, the most staggering national average of any surveyed group (Haas, Rodgers, and Herman 2014). The National Gay and Lesbian Task Force reports there is a growing “epidemic” of LGBT-identified youth among the nation’s homeless population, in which transgender youth are the most disproportionately represented (Ray 2006).

However, only within the last decade or so has this research terrain really attended to transgender-identified youth specifically, beyond a nominal reference in proverbial LGBT nomenclature (Burgess 2000; Fisher, Poirier, and Blau 2012; Grossman and D’Augelli 2007; Grossman, D’Augelli, and Salter 2011; Grossman et al. 2006; Krieger 2011; Wren 2002). By and large, studies from the last several decades have referred to “gay” or “LGB” youth instead (e.g. Anderson 1987; Cook and Herdt 1991; D’Augelli et al. 1998; Savin-Williams 1994, 2001, 2006), with only a scant few prior to 2000 focusing specifically on

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<sup>11</sup> Although in one interview, a parent advised me that she wished she could consult a “clinical sociologist” of sorts about her child’s gender variance.

“transgendered”<sup>12</sup> or “transsexual” adolescents (Denny 1995; Kahn 1990; Rodgers 1995). A review of these literatures reflects the increasing visibility of specifically transgender identity categories for young people, along with a related paradigm shift among practitioners, such that gender, as much as sexuality, is the plane of reference for conceptualizing and addressing LGBT-related experience and support.

The term “LGBTQ youth” generally refers to adolescents and young adults who personally claim an LGBTQ identity category (approximately 13 years old and older). Pre-pubescent, transgender and gender-variant children (4-12 years old), in contrast, do not first self-identify or “come out” as transgender per se, but are labeled and understood as such by adults. Transgender as a category only becomes meaningful to these children after their parents have researched and exposed them to it; what is meaningful are the “boy” and “girl” categories that culture presents initially and their attendant differences. There are no references to “transgender children” in medical or mental health related literatures or in popular media prior to the mid-1990s (Meadow 2014: 57).

Nevertheless, gender-variant children are by no means new to clinical or psychiatric purview. Systematic, longitudinal studies of gender-variant children, particularly “feminine boys,” took hold in the 1950-60s, following the rise of the medical management of adult transsexuality in the U.S. (Meyerowitz 2002). These studies were launched perhaps most notoriously by John Money and Richard Green at UCLA (Bryant 2006), as they culminated with Green’s widely cited 1987 report, *The Sissy Boy Syndrome and the Development of Homosexuality*, which claims that most of the children grew up to be homosexual or bisexual

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<sup>12</sup> “Transgender” has become favorable to “transgendered” when referring to a specific person because the latter connotes something being done to a person, or a person having undergone something, whereas the former connotes the gender the person has always known themselves to be (e.g. a transgender woman versus a transgendered woman).

(cisgender) as young adults, less frequently as heterosexual, and least frequently as transsexual (notably, these statistics do not account for about a quarter of the children from the original sample, who were not reached for follow-up). These early studies were the basis of the development of the “Gender Identity Disorder in Childhood” (GIDC) diagnosis, which premiered in the 1980 edition of the DSM (DSM-III).<sup>13</sup> Given the documented statistical outcomes of most gender-variant children (i.e. cisgender and gay), many scholars and practitioners protested the GIDC diagnosis as an implied preventative tool for adult (male) homosexuality (e.g. Bem 1993; Sedgwick 1993), especially since other studies associated with UCLA’s gender clinic explicitly engaged in behavior modification therapies (e.g. Rekers 1972; Rekers and Lovaas 1974; see Bryant 2006 for an overview of this contentious history). Thus, while gender-variant children were originally scrutinized for potential insights into the childhoods of adult transsexuality, they came to be hotly discussed as “protohomosexual” subjects decades later. The statistically significant relationship between childhood gender variance and adult homosexuality has continued in later studies, albeit with decreasing majorities, including in studies of children assigned female (Drummond et al. 2008)<sup>14</sup>, as well as in oft-cited research from the Netherlands (Wallien and Cohen-Kettenis 2008).<sup>15</sup>

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<sup>13</sup> The DSM, or the Diagnostic and Statistical Manual, is the guidebook of diagnoses and criteria that mental health practitioners use in the North America, and is published by the APA (American Psychiatric Association).

<sup>14</sup> It should be noted that a majority of the children assigned female referenced in these studies do not necessarily identify as homosexual or bisexual as adults; rather, statistically, more gender-variant females identify with homosexuality or bisexuality as adults than their presumed gender-normative childhood counterparts.

<sup>15</sup> Dutch researchers are considered the pioneers of childhood transgender transitions, and conducted the first long-term trials of puberty suppressants on gender-variant children (de Vries et al. 2011; Wallien and Cohen-Kettenis 2012). As such, these practitioners have been highly influential in international treatment recommendations.

A more contemporary figure in this landscape is Dr. Kenneth Zucker in Toronto, Canada, who has specialized in GIDC-related research for several decades (Zucker 1982, 1985; Zucker and Bradley 1995). Zucker was appointed as the chairperson of the APA committee to revise the GIDC diagnostic criteria for 2013 edition of the DSM, and is similarly notorious for his potentially reparative or corrective practices with children, especially among contemporary parents of gender-variant children. Zucker's approaches were publicized in a 2008 NPR special on transgender children, and were contrasted with those of a particularly affirming therapist, Dr. Diane Ehrensaft, who is an equally well-known professional voice in this landscape (Spiegel 2008). Here, however, the controversy much more explicitly concerns evading potentially transgender or transsexual adult outcomes. Presuming a certain malleability of the self in early childhood development, Zucker (2008) has argued that young children make "good psychotherapy candidates" for "interventions" that would help them accept their assigned sex, in contrast to their older GID counterparts, for whom formal sex/gender transitions are the recommended response (358).<sup>16</sup> In response to mounting activist efforts and petitions about Zucker's potentially reparative practices, Zucker's long-standing, well-attended gender clinic underwent review in March 2015, and cannot accept any new patients until the review is completed (Smith Cross 2015).<sup>17</sup>

The recent hiatus of Zucker's clinic is duly reflective of trends in mental health to support and affirm childhood gender variance rather than to attempt to curb or reverse it,

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<sup>16</sup> Zucker has in fact compared this approach to therapeutic strategies with children of color who have "ethnic identity disorder," for whom the therapist does not facilitate a new racial identity, but helps the child understand the social limitations and stereotypes that would make them want to dis-identify with their "given" race or ethnicity (2008: 359). Incidentally, Dr. Friedman similarly articulated a certain malleability to gender identity (Friedman 2015).

<sup>17</sup> "Reparative" or "conversation" therapies for LGBT patients are opposed by the APA, and have been outlawed in California, New Jersey, Washington, D.C., and most recently Oregon (as of May 2015). However, the "ban" is only enforceable for state-licensed therapists, so it is symbolic to a large extent.

including allowing cross-gender identities and transitions in young, pre-adolescent children who express a desire for this. Thus, while significant childhood gender variance is nothing new among parents and practitioners, a paradigm that is particularly aware and supportive of transgender possibilities is gaining traction among mental health professionals and social workers (Behan 2006; Ehrensaft 2011, 2012; Kavalanka, Weiner, and Mahan 2014; Lev 2004; Malpas 2011; Pyne 2014; Saeger 2006). This is true for pediatric endocrinologists as well, who have pioneered pre-pubertal hormone therapies for transgender children (Delemarre-van de Waal and Cohen-Kettenis 2006; Olson, Forbes, and Belzer 2011). As a related node in these developments, the latest edition of the DSM (DSM-V, 2013) has changed the terminology from “Gender Identity Disorder” to “Gender Dysphoria,” so as to remove the stigma of “mental disorder” from transgender experience and to emphasize the distress that comes from sociocultural norms, not individual pathology (similar to debates about homosexuality that ultimately eliminated it as a diagnostic category from the DSM in 1973). Representative of the affirmative approach, Diane Ehrensaft (2012) writes:

A very small minority of children will experience a cacophony between their assigned and [asserted] gender ... . As with left-handed children, who are also a small minority of the population, I believe these children who experience this discord are not abnormal, they simply vary from the norm. ... In this theory of gender development, individuals are the experts of their own gender identities ... . This model of gender development dispenses with the diagnosis of Gender Identity Disorder of Childhood (GIDC) ... a diagnosis and implied treatment that pathologize perfectly healthy children who are simply expressing their authentic gender identity. (338-339)

Despite these trends, other clinicians have exhibited more caution and reservation about early childhood transitions, in part because of the reigning longitudinal statistics described above: most childhood gender variance does not “persist” into adult transgender identity or transsexuality, as it is often described, but “desists” and results in (cisgender)

homosexuality. In a special issue of *The Journal of Homosexuality*, Jack Drescher (2012) summarized the range of clinical opinions and responses regarding childhood gender variance:

Clinical responses to prepubertal children with GD/GV vary. At one pole, clinicians discourage social transitions such as name changes and public gender role changes until a child reaches puberty and proves to be a persister. At the other pole, clinicians support not only cross-gender identifications but expressions of gender transition such as name change and public gender role change, even though it is not known whether the child's cross-gender behaviors and identifications will desist or persist. (507)

While the general position among both parents and professionals is to not assume or predict any ultimate outcome for a gender-variant child—gay (cisgender), transgender, none of the above—significant childhood gender variance inevitably confronts long-term hypothesizing and concerns. As Drescher (2012) claims, “There are no reliable screening instruments that differentiate between young children in whom [gender dysphoria] will desist and those in whom it will persist,”<sup>18</sup> and “Some clinicians believe that facilitating childhood gender transition may increase the probability of persistence into adolescence and adulthood” (506).

Implicit in such debates about childhood gender transitions is a sex-deterministic logic for gender: why uproot your child's sex category until you're absolutely sure? Is there an age that is “too young” or “too soon” to do this, and does one risk (over)determining a certain gendered outcome for a child? In a stirring opinion piece for *The New York Times* (2013), Drescher himself voiced reservations about early childhood transitions, implying that professionals and parents run the risk of rushing into things thoughtlessly: “I would advise parents to learn all they can about the different approaches so they can understand the

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<sup>18</sup> Some researchers, however, suggest that children who score higher on GIDC assessment tools at intake are more likely to “persist” in their gender variance through adolescence (Wallien and Cohen-Kettenis 2008).



limitations and how they are sometimes guided by personal beliefs about gender rather than by good research data” (n.p.). These reservations are near identically captured in another op-ed by Richard Friedman (2015), also a psychiatrist, who writes “But if anything marks what a child really is, it is experimentation and flux. Why, then, would one subject a child to hormones and gender reassignment if there is a high likelihood that the gender dysphoria will resolve?” (n.p.).

Edgardo Menvielle (2012)—a psychiatrist who started one of the first major support groups and online forums for parents of gender-variant children in the U.S.—has also expressed some ambivalence about early childhood transitions, especially for children whom he views as hard to “categorize” clearly as the “persisters” (i.e. “truly transgender”) or as “just” gender-variant:

The question of which individual children should be [considered appropriate for social transition] presents one of the greatest clinical challenges. ... The challenge lies in making a decision to move forward with a gender transition at this early stage for children who are in a category in between these two groups, [i.e.] when a child neither fits clearly into the group that insists on a cross-gender identity nor it seems to be a matter of pure cultural advantage, or for the child who sometimes expresses strong distress but also seems to waver between these two extremes. At this time, we lack the guidance of evidence regarding the potential long-term advantages and disadvantages of prepubertal gender-role transition ... . Given that many, if not most, children who express childhood gender variance do not progress or persist into a transgender adult identity, a recommendation for social transition at this stage is given cautiously.

Because of “desistance” trends, Dutch researchers have recommended “watchful waiting,” namely waiting until 12 years of age for formal social transitions and hormone blockers and until 16 years for cross-sex hormones (Delemarre-van de Waal and Cohen-Kettenis 2006; de Vries and Cohen-Kettenis 2012). However, the “Dutch Approach,” as it has been dubbed, has been contentious and unpopular stateside, as I encountered in interviews with both

parents and advocates, who believe in transitioning a child whenever it seems they desire this (i.e. well before 12 years old in some cases), and who want to administer cross-sex hormones at a time that achieves “peer concordance” with the rest of the child’s maturing peers (i.e. sooner than 16 years of age).<sup>19</sup> Of course, it precisely such debates and controversies regarding “best practices” for gender-variant children, and the longitudinal statistics that pertain, that forge the clinical and cultural background of the parents and professionals addressed in this thesis.

With the help of the internet and social networking (Meadow 2013, 2014; Menvielle 2012; Rahilly 2013, 2015), contemporary parents and advocates of gender-variant children have connected and organized seemingly vastly and rapidly over the last 10-15 years, via the web sites of various support organizations, their related online forums and listservs, parent blogs, and live support groups and conferences to which the internet leads them. In 1998, a support group for parents of gender-variant children (mainly feminine male children, none of whom were transgender) was started at the Children’s National Medical Center (CNMC) in Washington, D.C. (personal communication). Soon after, the founders created a web site and an online brochure titled, “If you are concerned about your child’s gender behaviors” (2003), which describes gender variance as a natural biological variation, not as a psychopathology (1-3). The brochure advises parents that according to research, most gender-variant boys grow up to be gay, while most gender-variant girls grow up to be heterosexual or bisexual, but that on “rare occasions,” some of these children will be transgender (5). Parents are

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<sup>19</sup> One of the physicians I spoke with, who is exclusively involved in the medical management of childhood hormone treatments, said that the Dutch recommendations are hardly taken as steadfast rules, either by the Dutch researchers themselves or by other practitioners like herself. She described the protocols as a good “jumping off point,” because they posed the only real data that any practitioner had at the time, but that each child’s hormonal transition is conducted on a case-by-case basis, as each child is so different, both physiologically and psycho-socially, and because gender is such a “highly subjective” experience. There are some children, for example, for whom she administers blockers at 9 or 10, and there are other cases where they are administered at a later time.

encouraged to embrace their child's behaviors, and are discouraged from corrective therapies (15). The D.C. group also launched an online forum for parents who lived outside the area, drawing nation-wide interest. Eventually, gender-variant females, as well as transgender children, were represented in the organization, and separate listservs have since been created to accommodate parents of these different children. The group also started a camp retreat for the children, which rotates location every year (Pawder 2012). Like the support group, the camp was originally mainly attended by gender-variant boys, where they are allowed to dress up in ways they are not always permitted back at home or during school, but now transgender children attend as well (personal communication).

Two other major organizations, Gender Spectrum and TYFA (Trans Youth Family Allies) were formed in 2006-2007, more explicitly aimed at supporting transgender and non-binary possibilities in early childhood. Born out of a small parent support group in Oakland, CA, and founded by a co-author of *The Transgender Child: A Handbook for Families and Professionals* (2008), Gender Spectrum started holding annual conferences for families in 2007, which, in its first year, had less than 45 persons in attendance, but by 2014, over 500 family members were registered, with hundreds of other professionals, presenters, and volunteers in attendance (personal communication). The web pages of Gender Spectrum's organization also challenge sex-deterministic logics for gender identity and expression: "When a child is born, a quick glance between the legs determines the gender label that the child will carry for life. But ... a binary concept still fails to capture [that] ... biological gender occurs across a continuum of possibilities" (Gender Spectrum, n.d.). The organization asserts that gender and sexuality are "separate, distinct parts of our overall identity" and that "gender

expression should not be viewed as an indication of sexual orientation” (Gender Spectrum, n.d.).

Additionally, in 2008, TYFA, founded by the parent of a transgender teen, also launched an online listserv for parents, “TYFA Talk,” which has international reach and as of 2014, had over 500 online registrants (personal communication). More localized LGBT organizations and chapters of PFLAG are becoming increasingly cognizant of transgender children and their parents, too.<sup>20</sup> Over the years, multiple online blogs have surfaced as well by parents of gender-variant and transgender children, detailing their newfound negotiations with gender norms and stereotypes as these pervade their daily lives. Through their online searches and ensuing interactions, parents encounter this burgeoning landscape and its networks of support.

On the biomedical side, several major clinics have developed within the last 10 years to specifically treat and support transgender children and their families, within the existing infrastructures of large research hospitals and universities across the country.<sup>21</sup> Beyond their pediatric and endocrinological expertise in the way of hormones, these clinics often provide access to a comprehensive “team” of specialists and professionals in the realms of psychology and counseling, legal consultation, and/or education and advocacy. The clinic at UCSF, for example, is officially affiliated with Dr. Diane Ehrensaft and one of the directors

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<sup>20</sup> Camp Aranu'tiq is another significant site, formed in 2009-10, which holds annual summer camps exclusively for transgender and gender-variant youth (8-18 years old), as well as weekend family camps. Another major venue for parents is the annual Philadelphia Trans Health Conference (PTHC), which started in 2001 and has programming specific to transgender youth and children and their parents.

<sup>21</sup> These major clinics include: Dr. Norman Spack and the Gender Management Service (GeMS) clinic at Boston Children’s Hospital (since 2007); Dr. Johanna Olson and The Center for Transyouth Health and Development at Children’s Hospital Los Angeles, which has been partnered with Transforming Family, a parent support group in Los Angeles, since 2009; Dr. Stephen Rosenthal of the Child and Adolescent Gender Center at the UCSF Benioff Children’s Hospital (c. 2008); and Dr. Robert Garofalo’s Gender Development clinic at the Lurie Children’s Hospital of Chicago (since 2013).

of Gender Spectrum. These various infrastructural developments across the country, and the parent groups they are linked to—both online and offline—are forging proliferating support systems for childhood gender variance, in particularly transgender-affirming capacities. Within this wider parent-advocate community, childhood gender variance is addressed not as a problem to be corrected or redressed, nor necessarily as proto-homosexuality, but as a matter of *gendered* variance and difference, and in many cases, as cross-gender identity—that is, as transgender.

### ***Childhood Socialization: The Agentic Child and Child-directed Parenting***

Outside of childhood gender variance, children’s normative gender identity development, including their development of “sex-typical” behaviors, has consumed decades of research and theorizing, particularly within the fields of psychology and social psychology (for overviews, see Bem 1983; Coltrane 2008; Maccoby 1992, 2000; C. L. Martin, Ruble, and Szkrybalo 2002; Risman and Myers 1997). Behaviorist or social-learning and cognitive-developmental theories are the predominant, competing schools of thought (and have been integrated at times; see Bussey and Bandura 1999). The former emphasizes “external” environmental and sociocultural forces that socialize children to sex-specific norms and identities, while the latter emphasizes “internal” cognitive schemas, through which children develop gendered self-conceptions.

Sociologists, too, have studied the ways in which young children actively negotiate and incorporate, and sometimes challenge, gender norms (Cahill 1986, 1989; Thorne 1993). Overall, the governing question of much of this research is, effectively, what are the processes through which children become normatively differentiated boys and girls in accordance with the expectations of their assigned sex, and how are aberrations from those

norms addressed or regulated among otherwise gender-compliant, gender-normative children (e.g. Cahill 1989: 292). In contrast to the psychiatric arena narrated above, this body of work marks a refreshing interest in efforts to explain the normative, versus the nonnormative. But until recently, social scientific scholarship has been largely unaware of the prospect of a transgender child, who consistently and often adamantly refutes the norms, cues, processes, behaviors, and/or self-conceptions that are expected of them, both socially and psychologically. Gender-variant children who do not fit the expected tract of cisgender identity and comportment have been historically subsumed by the purveyors of the GIDC diagnosis—as in, *what went wrong?* As outlined above, though, that psycho-pathologizing position is changing. Notably, a recent study by a cognitive psychologist assessed the gender cognition of transgender-identified children, and found that trans children’s responses mirrored their cisgender counterparts’ self-perceptions, effectively “proving” for many that these children are not “confused” or “faking” their gender identities (Olson, Key, and Eaton 2015).<sup>22</sup>

Notwithstanding, this thesis does not attempt to advance a new theory of (trans)gender identity development in children or intervene on reigning debates between behaviorist and cognitive theoretical models. In this dissertation, I am not interested in the how’s and why’s of children’s (trans)gendered self-conceptions; instead, I focus on the ways in which their parents respond, react, and make sense of those developments, in particularly, increasingly transgender-aware capacities. To these ends, I draw on more general theoretical principles in parenting and childhood socialization to ground this thesis and the experiences

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<sup>22</sup> In some ways, the need for such a study to effectively “prove” the veracity of children’s self-conceptions as “boys” or “girls,” on some intrinsic, cognitive level, seems absurd. However, given some of the skepticism and backlash that parents face from others, such a study could offer important, affirmative ammunition and legitimacy to the decisions they make in socially transitioning their young children.

of its respondents. Most scholars give parents a primary role in children's socialization. As Maccoby (1992) notes:

Although parents are not the only agents contributing to the socialization of children, the family has continued to be seen as a major—perhaps *the* major—arena for socialization. This reflects the pervasive assumption that even though socialization ... can occur at any point in the life cycle, childhood is a particularly malleable period ... when enduring social skills, personality attributes, and social orientations and values are laid down. (1006)

The import of parents' roles in children's development guides and motivates the present study: the parents' actions, reactions, and understandings in and of various processes, and not the gender-variant children, are the object of my sociological inquiry. Indeed, the parents are the ones buying clothing, permitting toys, allowing haircuts, conducting online searches, registering for conferences, meeting with school administrators, consulting medical and mental health practitioners, and ultimately adopting gender-variant identity categories and conceptions of their children. Nevertheless, both psychologists and sociologists of childhood have given increasing attention to the agency of children themselves, rejecting traditional socialization models that frame children as passive recipients of adult social norms, but considering them instead as active agents in the socialization process, with adults and with each other (Handel, Cahill, and Elkin 2007; Kuczynski, Harach, and Bernardini 1999; Peterson and Rollins 1987).

Sociologists in particular, citing the rest of the discipline's understanding of the self and society as products of dynamic, interactional processes (Blumer 1986; Mead and Hind 1934), have been keen to emphasize children as pertinent objects of study in their own right. Norman Denzin (1977), for example, admonished over 35 years ago: "There will be no coherent sociological theory of self, society, social relationships, and social structure until the sociologist has adequately grasped and understood the symbolic, interactional, and linguistic

foundations of the socialization process. The worlds of the child ... constitute a set of obdurate realities to which all sociological theories must eventually return” (5). Similarly, Spencer Cahill (1986) remarked of his observations of children and language, “Children are not passively molded by the environment but interpretively organize and respond to the environment along lines laid down by their native language” (304). Barrie Thorne (1987) argued that children need to be “revised as active, speaking subjects” (88), who are “complex actors, strategists, performers, users of language, creators of culture” (101).

In light of these conceptions, scholars of childhood have sought to re-frame childhood socialization as “reciprocal influence”: “Children increasingly are seen as active participants in their own socialization, acting back on their environments, socializing those around them (including their own parents), even as they themselves are socialized” (Coltrane and Adams 1997: 223). Others have similarly described more “bidirectional” or “interdependent” models for parent-child relations (Knapp 1999). More recently, Corsaro (2015) has proposed an “interpretive reproduction” framework, which moves beyond simple, linear and individualistic theories of children’s socialization into adult society and envisions a multivalent dynamic between parents, children, and their changing social-historical contexts:

From a sociological perspective, socialization is not only a matter of adaptation and socialization but also a process of appropriation, reinvention, and reproduction. ... [C]hildren are not simply internalizing society and culture but are actively contributing to cultural production and change. ... [C]hildren are, by their very participation, [also] constrained by the existing social structure and by societal reproduction. These societies and cultures have, in turn, been shaped and affected by processes of historical change. (18)

While this study focuses on adults’ perceptions and practices, attention to the agentic child, who acts within and against a wider sociocultural milieu, offers key insights into the experiences detailed ahead, wherein parents think and act as much in response to their



children's actions and utterances than in accordance to their own assumptions, norms, and values. Indeed, "follow the child's lead" resounded as the *modus operandi* among the parents, professionals, and forums I studied. At almost every possible juncture, it was their child's articulations of who they were, what they preferred, how they would come to be identified, who would know about it, and what medical treatments and interventions they wanted, if any, that governed these parents' practices, perspectives, and decisions. One could say it was the parents who were being as much socialized to their children's gender as the other way around, and often parents said, "The transition is *our* transition, not our child's" (see also Duron's 2013 memoir). As such, I am compelled to frame child-directed, child-centered models of parenting, spurred by active, agentic children, as a theoretical backdrop for the material I present; indeed, child-centered parenting it is arguably the fundamental mechanism through which transgender childhoods are being made increasingly possible and viable in our current cultural moment.

Moreover, scholars of childhood do not see childhood socialization as a mere means to an end, but as sociological terrain on its own terms. As Thorne (1993) said, "children's interactions are not preparation for life, they are life itself" (3). Similarly, Corsaro (2015) notes that, "The problem is the term *socialization* itself. It has an individualistic and forward-looking connotation ... the idea of training and preparing the individual child for the future keeps coming to mind" (18). These viewpoints resonate with several perspectives captured in this study, wherein both parents and professionals try to resist long-term projections of adult outcomes, but strive to parent in the present moment, in response to what their child needs here and now. Children are understood and honored as they express themselves, quite

seriously and concertedly, even while their caretakers acknowledge that this may not always be their identification or status. As Denzin (1977) said,

Socialization .... represents a fluid, shifting relationship between persons attempting to fit their lines of action together into some workable, interactive relationship. It is not a process that ends on the completion of adolescence ... . Nor is it a structurally determined process whereby the values and goals of the social systems are instilled in the child's behavior repertoires. Socialization is a never-ending process that is negotiated and potentially problematic in every interactional episode ... . (3)

Additionally, sociological studies regarding class and parenting labor contribute to understanding how the parents in this study do the work of engaging with their children. To these ends, pertinent insights are born from Lareau's (2002, 2003) work, which reveals the classed components of child-centered parenting. Lareau found that both Black and white middle-class parents practiced "concerted cultivation," actively nurturing their child's individual growth and dispositions with multiple outside resources and engagements: "Parents actively fostered and assessed their children's talents, opinions, and skills. They scheduled their children for activities. They reasoned with them. They hovered over them and outside the home they did not hesitate to intervene on their children's behalf" (2003: 238). In contrast, working-class parents modeled "accomplishment of natural growth," which was less structured and intensive about children's time and engagements outside of school. Lareau also found that lower-class parents were less likely to intervene on their children's behalf with outside institutions and were more authoritative in their parenting in their styles (see also Kohn 1963, 1979), contrasting with the child-agentic perspectives on parenting outlined above. Furthermore, Sharon Hays' (1996) work on "intensive mothering" shows that contemporary ideologies of motherhood are increasingly invested in the "selfless" rearing of the "sacred child," which similarly entails a parenting model that is child-centered, expert-

guided, emotionally absorbing, labor-intensive, and financially expensive: “[T]he contemporary model of socially appropriate mothering takes the form of an ideology of *intensive mothering* ... [which] is a gendered model that advises mothers to expend a tremendous amount of time, energy, and money in raising their children” (p. x). Collectively, this scholarship sheds light on the classed, gendered, and culturally-specific modes of parenting I observed, by participants who are largely white, middle-class women and child-centered.

### ***Chapter Overview: A Sociology of Trans-Parenting***

With these historical and cultural trends in mind, I turn my focus to particularly sociological dimensions of the trans-affirmative parenting phenomenon, which lie at the heart of the political and “medico-psychological” histories outlined above. Several other sociologists have studied parents of transgender and gender-variant children. Tey Meadow (2011) has examined how parents adapt traditional belief systems—including biomedical, spiritual, and psychological—to account for their child’s gender-variant self to others. Meadow (2013) has also reflected on the methodological aspects of this subject area from Meadow’s own perspective as a gender-nonnormative person in the eyes of Meadow’s research participants. Field and Mattson (Forthcoming) have compared and contrasted the experiences of parents of LGB and transgender children, and have found both salient differences and similarities between the groups; this includes parents’ grief and mourning, as well as their desires for their children to be “out and proud” or “stealth,” respectively.

In this study, I examine threads in interviewees’ commentary that I found particularly illuminating of new cultural reckonings with gender, sexuality, the body, the binary, and identity, including: distinctions and associations between gender variance and

“gay,” that is, between (homo)sexual and (trans)gender realms of identity and experience; the limits of gender-variant and/or non-binary possibilities that fall outside of normative conceptions for males and females, limits that are particularly inflected by the rigidity of masculinity and maleness; and essentialist, biomedical logics for sex, gender, and the body. All of these issues are explored through parents’ evolving practices and perspectives on childhood gender variance, as they respond to their child over the course of early childhood development and as they become immersed in trans-affirmative education, discourses, and support networks. This study exposes those social processes, and the discursive strategies and negotiations that pertain, as the social change at work among these families, through which departures from conventional gendered practices and understandings are made meaningful and intelligible.

To these ends, each chapter draws on particular set of literatures and frameworks that are pertinent to the problems and the data analyzed therein. In Chapter 3, I describe how the parents in this study come to conceive and identify their child as transgender in the first place, including the wealth of observations, behaviors, conversations, and pivotal anecdotes parents’ recalled that have come to constitute their child’s overall gender-variant profile and story. This material highlights the child-centered, child-directed nature of parents’ (re)actions (Hays 1996; Lareau 2002, 2003), as well as the child-agentic, bidirectional nature of early childhood socialization in general. These parents are as much responding to, as they are directing, their children (Coltrane and Adams 1997; Corsaro 2015; Knapp 1999). However, this material also exposes important caveats and differences across cases, challenging the notion of any one transgender “profile” for a child. These observations extend the critiques of other scholars regarding the gender-normativizing stereotypes that are applied to trans adults

(Bornstein 1995; Califia 2003; Meyerowitz 2003; Serano 2007; Spade 2006), and point to a merging of traditional gender-neutral or feminist parenting principles (Bem 1983, 1998) with transgender-aware childrearing.

Chapters 4 and 5 take up the fluid and in some ways murky understandings of gender variance itself, whose multivalent connotations and associations are intimately related to parents' newfound reckonings with gender, sexuality, identity, and the binary. In Chapter 4, drawing on constructionist perspectives of gender and sexuality (Bryant 2008; Halberstam 1998; Rubin 2011; Rupp 2001, 2009; Valentine 2007), I examine parents' contrasts between gay and trans kinds of gender variance. Given reigning historical statistics that link childhood gender variance with adult homosexuality—not to mention wider historical and cultural associations between gender variance and homosexuality—parents' distinctions between gay and trans, or between “just gender-variant” and “truly transgender,” are no small part of the story. Parents' embrace of their children as definitively transgender here and now is, in part, to distinguish their children as not gay (and to many of the parents, a sexual identification at a pre-adolescent stage would be preposterous anyway). Through these contrasts, parents work to articulate gender and sexuality as related but separate realms of human identity and experience, echoing the accepted understandings of (trans)gender and (homo)sexuality in adult mainstream LGBT rights discourses (Valentine 2007). However, throughout parents' narratives, gay kinds of gender variance were occasionally re-considered as trans kinds of gender variance, and vice versa, such that these otherwise distinct realms of experience intermittently merged or overlapped along the imagined spectrum of non-normative possibilities. In these ways, parents conceived of (childhood) gender variance as increasingly relevant to transgender interpretations and understandings—that is, as a matter of gender

identity and expression, not sexuality. I argue that such intellectual, conceptual, and discursive labor exposes the workings of a culture that is giving increasing intelligibility to explicitly gender-variant expressions and self-conceptions. At the same time, such work does not rule out other LGBTQ outcomes along a fluid spectrum of possibilities, for these children and for others.

Next, in Chapter 5, I consider the category gender-variant when it was used to describe non-binary, genderqueer, or gender-fluid possibilities—that is, as something very much in the realm of (trans)gender, but not necessarily in cross-gender, binary capacities. On these terms, “gender-variant” refers to children who are “somewhere in the middle,” who do not necessarily identify simply as boys or girls, and/or whose gender expressions and sensibilities are more visibly gender-variant relative to normative conceptions for males and females—a boy in a dress, for example. And almost inevitably, this kind of gender variance was framed as “harder” to parent and accommodate than transgender, due to the gender binary shaping all aspects of our social world. This chapter also includes an intimate look at the follow-up cases in my sample, namely those cases I interviewed in 2009-2010 whose statuses and/or identifications had changed as of our follow-up interviews in 2012-2013, from something more gender-variant to either cisgender or transgender identifications. Notably, all of these cases pertain to children assigned male at birth.

Throughout this material, parents’ perspectives and experiences expose the compulsory character of the gender binary and the limits of living intelligibly outside the polar “ends” of the gender spectrum (Butler 1990, 2004; Lucal 1999; West and Fenstermaker 2002; West and Zimmerman 1987). They also inevitably confront the rigidity of masculinity and cultural hysteria regarding male femininity specifically (Kimmel 1994; Pascoe 2007;

Serano 2007). Moreover, parents' discussions, both with me and apparently with each other, recalled contentious debates about the risks of "reifying the binary" in transgender transitions versus living out less binary possibilities, the latter of which are often framed as the more expansive or liberating (Bornstein 1994; Califia 2003; Halberstam 1998; Roen 2002; Serano 2007). In short, parents' become aware of the prospects of, and the limits around, the gender-variant "middle," but they also ultimately legitimize and affirm binary self-expressions and identifications on the parts of their children. While these parents strive to make "purple" a possibility, these children very much align with "pink" and "blue."

Lastly, in Chapter 6, I analyze parents' negotiations regarding privacy and (non)disclosure of their child's transgender status. Parents' management of their child's privacy was, at root, a matter of not exposing their child's sexed body to others—as many parents said, "what their child has between their legs is nobody's business." These parents understand that the "essential insignia" for their children's sex category may be presumed by others, but is otherwise irrelevant to the maintenance of their male and female status (Garfinkel 1967; West and Zimmerman 1987). And in light of many critiques of "visibility politics" (e.g. Samuels 2003; Thomsen 2015), including trans visibility politics (Califia 2003; Serano 2007; Roen 2002), such privacy negotiations well make sense. These children should not be held to any public political agenda, especially considering that many of them do not necessarily personally identify as transgender anyway—but as boys and girls.

However, parents' protections of their children's "contradictory embodiment" (Connell 2012; West and Fenstermaker 2014) often related to their conceptions of trans as a matter of "medical confidentiality" or "medical privacy." More specifically, I encountered a strain in some parents' narratives that compared transgender embodiment to a disability, a

physiological aberration, or a “birth defect”; their children were “supposed” to be born with a particular sexual anatomy, but something “screwed up.” These narratives very much affirm the deeply held, embodied sense of self their children so often articulated to them (e.g. “God made a mistake, why don’t I have boy parts?”). Moreover, biomedical frameworks and disability analogies hardly have to pathologize gender variance; disability rights scholars and activists have challenged those logics for decades (Clare 1999; Colligan 2004; Kafer 2003; Oliver 1990). But parents’ use of disability frameworks did not necessarily take on the force of ideological deconstruction. I take pause to cautiously consider what such narratives might mean for broader cultural reckonings with (trans)gender variance, especially for those manifestations that fall outside of the privacy of these particularly situated parents and the clinicians they consult. When body talk and body logics are often all we have to work with, what new narratives and rhetorics might we devise that challenge, at root, cisgender presumptions in the first place?

In a concluding chapter, I synthesize these themes for a sociology of trans-parenting and transgender childhoods, which are being made newly viable and possible, in the here and now of these families’ lives and of our broader cultural moment. These parents and their children depart from conventional practices and understandings of gender in early childhood development, but these changes are made meaningful and intelligible only within the cultural parameters of gender, sexuality, the body and the male/female binary that have been set before them, and they are inflected by race and class. Here, too, I suggest future research questions. I turn next, however, to Chapter 2, and detail the methodological dimensions of my project.



## CHAPTER 2

### **METHODS**

Securing a study population for this project was no easy matter, as my informants represent a very unique population of parents and the very recruitment of the parents was a learning experience in its own right. The parents were eager to share their experiences and contribute to a developing body of research, but I often felt I had to juggle my own sociological insights, impressions, and analyses against their fundamental aims for raising trans awareness and affirming the trans-parenting paradigm. No doubt this is not very different from the work of other sociologists, but engaging in social scientific analyses of matters as sensitive and, at times, emotionally wrought as parents' (gender)non-normative children often felt like particularly dicey research terrain, as I discuss more fully below. Moreover, the point-people I often approached about reaching new parents, outside of my snowball sampling efforts—including the moderators of listservs and support groups, conference organizers, the directors of organizations, as well as the authors of blogs whom I had already personally interviewed—often seemed wary to allow me access or entrée, or to advertise my research, which I understood and sought to oblige. Sociologists—versus social workers, mental health professionals, or medical doctors—are not the obvious “professionals” that advocates and educators would necessarily want to connect with other parents. This chapter delineates the methods I used and the various demographic dimensions of the sample, as well as the ethical and political conundrums I encountered in my research endeavors.

**TABLE 1. PARTICIPANT REFERENCE CHART BY PSEUDONYM:  
PARENTS AND PROFESSIONALS**

	<b>PARENT</b>	<b>CHILD</b>	<b>IDENTIFICATION IN THESIS*</b>	<b>AGE @ INTERVIEW</b>
1.	BRUCE	EMERY	TRANSGENDER GIRL	4
2.	MARTSY & MARCO	CINDY	TRANSGENDER GIRL	5
3.	MICHELLE	RIANN	TRANSGENDER GIRL	5
4.	KARI	EMMA	TRANSGENDER GIRL	5
5.	JULIE	MACY	TRANSGENDER GIRL	5
6.	JESSICA	TALIA	TRANSGENDER GIRL	5
7.	WENDY & RITA	HAZEL	TRANSGENDER GIRL	6
8.	MONICA & DAN	HAYDEN	TRANSGENDER BOY	5
9.	NORA		GENDER-VARIANT FEMALE	5
10.	CLAIRE & RICK	AMOS	TRANSGENDER GIRL	6
11.	LINDA	VIOLET	TRANSGENDER GIRL	6
12.	GLENN & LACY	AVERY	TRANSGENDER GIRL	6 (1 <sup>st</sup> CHILD)
13.	NINA	MIKEY	CISGENDER MALE	7
14.	JANICE	EILEEN	TRANSGENDER GIRL	7
15.	TORY	CONNOR	TRANSGENDER BOY	7
16.	MARIE	MILO	TRANSGENDER BOY	7
17.	MEREDITH		TRANSGENDER BOY	7
18.	TRACY & KAT	DAVE	CISGENDER MALE	8
19.	BETH (& BARRY)	TIM	CISGENDER MALE	8
20.	NANCY	MICKEY	TRANSGENDER BOY	8
21.	GRACE	NICK	TRANSGENDER BOY	7
22.	HARMONY	BALDWIN	TRANSGENDER BOY	8
23.	BECCA & NATHANIEL	BO	TRANSGENDER GIRL	9
24.	DANA	SKYLAR	GENDER-VARIANT MALE	9
25.	CAROL	CASEY	TRANSGENDER GIRL	9
26.	GLENN & LACY	JARED	TRANSGENDER BOY	9 (2 <sup>nd</sup> CHILD)
27.	SHELLA	TEGAN	TRANSGENDER GIRL	10
28.	HEATHER	SAMANTHA	TRANSGENDER GIRL	10
29.	KAREN	IZZY	TRANSGENDER BOY	10
30.	LORRAINE & CORY (SAM)	JAMIE	TRANSGENDER BOY	11
31.	ALLY & ELIAS	RAYA	TRANSGENDER GIRL	11
32.	LAURIE	PHILLIP	CISGENDER MALE	11
33.	TRISH & MARK	JOE	TRANSGENDER BOY	11
34.	KRISTINE	ELI	CISGENDER MALE	12
35.	MOLLY & JOE	GIL	TRANSGENDER BOY	12
36.	NICOLE	SADIE	TRANSGENDER GIRL	12
37.	CAROLYN	VIC	TRANSGENDER BOY	12
38.	THERESA & BILL	LISA	TRANSGENDER GIRL	13

\* These represent the operating gender identifications of the children in this thesis per the terminology I laid out in Chapter 1. They do not necessarily represent the preferred identity labels or terminology of the parents (i.e. “affirmed female” versus “transgender girl,” or “gender-nonconforming girl” versus “gender-variant female”). Grey-scale refers to the follow-up cases that were interviewed twice, once in 2009-10 and again in 2012-13.

39.	SARA	JACKIE	GENDER-VARIANT FEMALE	14
40.	TINA		TRANSGENDER GIRL	14
41.	CELIA		TRANSGENDER GIRL	16
42.	BAILEY		TRANSGENDER BOY	16
43.	AMELIA		TRANSGENDER BOY	18
	<b>PROFESSIONAL</b>	<b>FIELD/ROLE</b>		
1.	NEIL	ADVOCATE/EDUCATOR AT SUPPORT ORGANIZATION		
2.	MERYL	ADVOCATE/EDUCATOR AT SUPPORT ORGANIZATION		
3.	CATE	ADVOCATE/EDUCATOR AT SUPPORT ORGANIZATION		
4.	DR. MOLIO	MEDICAL PROFESSIONAL/ENDOCRINOLOGY		
5.	DR. EPSTEIN	MEDICAL PROFESSIONAL/ENDOCRINOLOGY		
6.	CHARLOTTE	MENTAL HEALTH PROFESSIONAL		
7.	LEIGH	MENTAL HEALTH PROFESSIONAL		
8.	ANNA	MENTAL HEALTH PROFESSIONAL		
9.	DR. LANGUNA	MENTAL HEALTH PROFESSIONAL		

### *The Sample*

The methods and sampling for this dissertation entailed multiple dimensions, relative to both the parents and their children. First, the overall parent sample consists of two sub-groups: a first group of parents I originally interviewed in 2009-10 and whom I interviewed again in 2012-13 (heretofore the “follow-up” cases), and a second group of “all new” parents I interviewed in 2013 (see Table 1). One last couple was interviewed in 2015. Taken together, I spoke with 56-58 parents for the project,<sup>23</sup> who represent 43 cases of significant childhood gender variance: 13 cases represent the cases from 2009-10, and the remaining 30 represent new cases from 2013/2015.<sup>24</sup>

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<sup>23</sup> I spoke with 58 parents in total, between 2009 and 2015, as well as one 18 year-old sibling. However, 2 parents from the original sample did not take part in a second, follow-up interview, only the co-parent, and there were 2 new co-parents who joined in follow-up interviews. This dissertation mainly represents the resulting 56 participants I spoke with between 2012-2015, either in follow-up or as part of the new sample.

<sup>24</sup> Incidentally, one of the siblings (assigned female) of one of the follow-up cases also entailed gender variance. We never directly discussed her, but she inevitably came up throughout our interviews. After my follow-up interview with these parents, they emailed in 2013 to say that this sibling had claimed a new male identity and had requested male pronouns, which the parents obliged. As of our latest communication in 2015, the child has since “switched back” to female pronouns/identification.

Recruitment and data collection occurred in several different waves and via several different avenues. My interviews with the first set of parents (13 cases) occurred in 2009-10, in part for an MA thesis project. These parents were recruited at an annual conference for families with gender-variant children and via a blog post, which a parent had shared on my behalf. Then, beginning in the summer of 2012 through October 2013, I conducted all the follow-up interviews, as well as interviews with all new parents (30 cases). The new group of parents was recruited via snowball sampling from the original group of parents, who passed along information about my project within their support-group networks; this garnered approximately 10 new cases. The rest of the cases came via a large listserv for parents of transgender children.<sup>25</sup> However, two new cases came from outside this network: one came from attending the annual conference a second time in 2013, where I had posted a blurb in the conference program, and the second came from meeting the parents by happenstance in August 2014, whom I ultimately interviewed in January 2015.

As the research participants are located throughout the U.S., approximately half of the interviews were conducted via telephone, while the rest were conducted in-person at parents' homes, when they were within reasonable driving distance (namely California).<sup>26</sup> In the semi-structured interviews with the parents, I asked about a range of themes, including: how they first came to observe and identify their child as gender-variant or transgender; which

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<sup>25</sup> Unbeknownst to me, a new parent had posted my research blurb to that forum, to which I otherwise do not have access as a non-parent; this effectively doubled my sample size within 1 month.

<sup>26</sup> While face-to-face interviews provide a degree of interpersonal connection, rapport, and non-verbal communication that telephone interviews cannot (as well as minimize interruption between speakers), the telephone permitted easy access to these parents' stories in a way that finances and geography otherwise prevented. Interviews conducted in parents' homes did tend to run longer (although several phone interviews were broken into 2-3 sessions, resulting in comparable lengths with those conducted in person). Ultimately, there was no noticeable difference between the kinds of data I could glean in-person versus those I collected on the phone.

terminology they preferred and/or used with their child; the means of support and resources they sought, including professionals; their child's school life and parents' negotiations with administration; siblings' reactions; dialogues they had with their children about gender, sexuality, and/or the body; thoughts about hormone treatments; debates or sources of contention they encountered among other parents; explanations they had for gender variance; and new understandings about gender that they had developed. However, parents' responses inevitably entailed a wealth of rich anecdotal moments regarding everyday interactions with their child, and with others, which were hugely insightful of their practices and perspectives regarding childhood gender variance.

During 2013-2015, I also interviewed 9 professionals for the project, who are some of the leading figures in the country regarding the care, management, and support of gender-variant and transgender children and who have worked with numerous (in some cases hundreds) of cases. I regard these professionals as representative of the "expert" opinions and protocols of the field, which the parents readily encounter and consult, via online research, the forums, conferences, and support groups.<sup>27</sup> These professionals include: 2 medical

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<sup>27</sup> Scholars have studied the social construction of "authoritative knowledge," especially in the biomedical realm (e.g. Browner and Press 1996; Jordan 1977). I would argue that parents here draw on 2-3 different kinds of "authoritative knowledge" in the "professionals" they consult for expertise and guidance. Along with mental and medical health practitioners (i.e. therapists, doctors), who traditionally hold authority in the areas of gender and sexual variance (Bryant 2006, 2008; Karkazis 2008; Meyerowitz 2004; Spade 2006), I include advocates and educators who are actively involved in trans youth support and advocacy organizations full-time—including as directors and founders of them—and who have spoken to hundreds of families in their careers, conduct school trainings across the country, etc. Parents consult these persons as readily for their "expert" advice, experience, insights and guidance, even though they carry a kind of "authoritative knowledge" that is different from making traditional diagnostic claims or assessments under the auspices of psychiatry or psychology (nor would they want to). Additionally, a few parents from the sample have become actively involved in the advocacy of trans youth themselves, have started their own organizations, and engage in various aspects of awareness-raising work (conducting talks and workshops, speaking on panels, launching philanthropic foundations). My interviews focused more on these parents' personal experiences parenting their own children—I did not interview them as professionals—but other parents of trans and gender-variant children might well consider them "experts" at this point in their careers. Indeed, the founder of one of the leading advocacy organizations is a parent of a transgender child herself, and how and why she started in this area of work (she often challenges the recommendations of the endocrinological community as well). Interestingly, while many parents allow therapists, psychologists, and psychiatrists the status of holding "authoritative

doctors (pediatrician/endocrinologist); 3 advocacy/educational professionals; and 4 mental health professionals (including clinical counseling/psychology, social work, and psychiatry). All but 2 of these interviews occurred via telephone. Interview guides were tailored to the specific professional, and I asked about how they became involved in the field and what their perspectives were on various issues, including: when to socially transition a child, how a transgender child is identified and/or distinguished from a gender-variant child, longitudinal studies on gender-variant children, theories or causes of gender variance, medical interventions and their timing, and differential experiences for children assigned male and female.

The duration of the interviews ranged from approximately 1.5-3.5 hours in length, with an average of 2.25 hours, all of which were recorded with a digital voice recorder.<sup>28</sup> Approximately half of the interviews were transcribed by transcription assistants (pending informants' approval on consent forms), whom I interviewed and screened personally for the project, and I transcribed the rest. Drawing on grounded theory methods (Charmaz 2004; Glaser and Strauss 1967; Strauss and Corbin 1990), I then coded all transcripts for salient themes and patterns that surfaced across the data set (e.g. verbal declarations, disability analogy), as well as for counter-occurrences in those patterns (e.g. no verbal declarations), with the help of the Atlas.ti coding software program. Memos and reflections from the coding ultimately generated the major analytic areas that concern the chapters of this dissertation; these areas struck me as the most pertinent to the wider gender change at work

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knowledge” on the meanings of childhood gender variance, many come to reject their assessments if they are resistant to transgender identifications and/or transitions, as will be noted in Chapter 3. Parents deferred as much to the insights of the social networks and parent support groups they connect with than some of the licensed clinicians they originally consulted.

<sup>28</sup> One follow-up interview had to be cut short after about 25 minutes due to an emergency with a friend; however, substantial follow-up information was still gathered during this session.

among these families, as they pertained to new cultural reckonings with, and possibilities for, gender, sexuality, identity, the binary, and the body.

### *The Children of the Parents*

Among the 43 childhood cases: 26 children were assigned male at birth and 17 children were assigned female. The disparity between the assigned male and assigned female cases could reflect a cultural difference that results from greater gendered scrutiny given to persons assigned male, particularly during early childhood development (i.e. “boys” who like dresses and dolls versus “girls” who like pants and sports) (Kane 2006, 2009; Thorne 1993). However, the male:female ratio represented here (1.6:1) is much lower than historical trends that have been reported, some as high as 7:1 (Bartlett, Vassey, and Bukowski 2000). This could signal the limits of “tomboy” identifiers for children assigned female in a cultural milieu that is becoming increasingly versed in gender variance and transgender possibilities.

As a preface to the identifications that follow: I do not presume to know the gender identities, or preferred pronouns or designations, of any child; as a rule, I am only ever referring to parents’ identifications of their children—which I assume aim to be as authentic to their child’s senses of self as possible (and which refer to what their children have explicitly requested). This is one of the methodological and ethical conundrums of the project. Theoretically, a child assigned female who still, for all intents and purposes, goes by “female” with their parents may well dis-identify in some ways with female or with female pronouns (nor would this mean they identify as male either). What I list here is based upon parents’ reports and descriptions. Of the 43 cases: 35 represent children or youth who do not identify with their assigned sex, while 8 represent(ed) some kind of gender variance but who are still identified as/with their assigned sex. More specifically, these cases include: 20

transgender girls, 14 transgender boys, 1 agender child (does not identify with any gender), 1 gender-variant male, 2 gender-variant females, and 5 cisgender males (whom parents once and/or currently consider some degree of gender-variant). The children’s ages at the time of the interviews ranged from 4-18 years old. However, the average age of the child was 8 years old, and the majority of the sample (37 cases) represents children who are 12 and under, with only 6 teenagers (13-18 years old). It is also important to note that 4 of the 6 teenagers, as well as one 12 year old, “came out” to their parents, whereas the other 2 were socially transitioned “by” their parents in pre-adolescence, consistent with the rest of the children represented. In short, the relatively older children who formally disclose to their parents a gender-variant or transgender sense of self, after having lived as the “other” for some time—and who have become aware of “LGBT”-spectrum identities on their own terms—present a very different model of trans-parenting than the other cases, the significance of which will be addressed in the Conclusion.

***Race, Class, and Gender (and Religious and Political Affiliations)***

Demographically, I will refer to the 56 parents I interviewed between 2012-2015, either as follow-up or in a single interview, who represent all 42/43 childhood cases and households.<sup>29,30</sup> Nearly half the cases (20) are located within California, while the rest come from various regions of the U.S. and Canada, including: 5 in the Midwest; 4 in the Southeast;

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<sup>29</sup> Two of the transgender cases come from 1 household, so there are 42 households for 43 childhood cases.

<sup>30</sup> A noticeable limitation of the study, as reflected in these profiles, is that I often only spoke with one parent of the household, whose responses—both in interviews and on demographic forms—did not necessarily speak for both parents. While forms often listed information for both parents, there were surely differences within couples as far as religious, political, educational, and occupational backgrounds and affiliations (e.g. the mother identifies as Republican and has a Bachelor’s degree while the father, whom I did not interview, identifies as Democrat and has a graduate degree). Talking to all parents/guardians of every child would certainly amplify the depth of the study and might yield interesting contrasts. Outside of total household income levels, I refer to the biographic information that is specific to the parents I actually spoke with and whose quotes I use in this thesis.



4 in the Northeast; 3 in the Northwest; 1 in the Southwest; and lastly 2 from Eastern Canada. Racially, the vast majority of parents are white (approximating 90%). Three are biracial, including white/Black, white/Latino, and white/Middle Eastern, and 3 parents are Latino. This does not represent the racial breakdown of the children; several white parents in the sample, for example, have adopted children of color (e.g. Latino, Asian), and several of the children are biracial (white/Latino or white/Asian), but I only spoke with the white parent.<sup>31</sup> The sample reflects considerable income variation, from no formal income at the time of the interview to \$300,000. Of the 42 households represented: 4 have an income below \$30,000; 6 between \$30,000-50,000; 11 between \$60,000-100,000; 14 between \$100,000-150,000; and 5 have an income greater than \$150,000.<sup>32</sup> Educationally, the majority of the sample is college-educated with at least a Bachelor's degree (over 70%), and nearly half of the parents (23 interviewees, roughly 44%) hold graduate or advanced degrees (these include 6 doctoral degrees and a plethora of Master's degrees). Of the remaining portion, approximately 20% have Associates degrees or some college education, with 2 who are high-school educated. Considering both the income and education levels, the sample is predominantly middle-to-upper-middle class.

The sample is heavily skewed towards women; I spoke with 11 men/fathers total (approximately 20% of the parents). This includes 1 step-father, who is the one transgender parent in the study, and 1 gay-identified man. The sample does include a bit of a range in sexual identity, although the parents are overwhelmingly heterosexual- (and cisgender) identified. Over 40 of the total participants identify as heterosexual (approximately 70%),

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<sup>31</sup> Six of the children were adopted and represent white (Russian), Latino, and Asian ethnicities, as well as one child whose racial/ethnic background is unknown (Native American or Southeast Asian).

<sup>32</sup> Two cases did not list an income.

while 11 identify as non-heterosexual [including: gay (2), lesbian (4), bisexual (6), and queer (1), and 2 selected “none” as their sexual identity]. Among the interviewees were represented: 29 heterosexual marriages (within these, 3 women identify as bisexual, 1 woman and 1 man selected “none” as their sexual identity, and 1 of the partnerships consists of a queer-identified woman and a heterosexual-identified transgender man); 5 same-sex marriages (1 male/gay relationship and 4 female/lesbian relationships; of the 6 women I interviewed from these, there are 4 lesbians and 2 bisexuals); and 11 single mothers (1 identifies as bisexual whose co-parent is a woman, 1 identifies as gay whose co-parent is a heterosexual man, and the rest are heterosexual-identified).

Other demographics that might be salient to parents’ responses to childhood gender variance and/or LGBT issues include parents’ political and religious affiliations. The majority (nearly 65%, or over 30 parents) identify politically as Democrat, 12 identified as Independent or “none” (roughly 20%), and 3 identified as Republican (including 1 as “Independent/Conservative”), and 1 as Moderate. The most popular response under religious affiliation was “none” (30%), while 10 listed Christian, 7 listed Catholic, 5 listed “UU” (Universal Unitarian), 4 listed Jewish, 3 listed Buddhist (including “Quaker/Buddhist”), and 2 listed Spiritual. Thus, on both political and religious indices, the majority of parents represent affiliations that are associated with more “liberal,” accepting views on LGBT issues broadly.

In sum, while the sample does include slight variation in class backgrounds and sexual, political, and religious identifications, the sample is overwhelmingly white, middle-class, and college-educated. These demographics are not surprising: The care of a transgender or gender-variant child can require a variety of different support services and

specialists.<sup>33</sup> Furthermore, parents often must talk to school personnel and administrators to accommodate and acknowledge their child's affirmed gender. In these ways, it takes a lot of time, resources, and capital (financial, temporal, cultural, and emotional) to parent under these circumstances—time, resources, and capital that are most often available to white, middle-class, and/or college-educated parents (Lareau 2002, 2003) and/or are expected of mothers (Hays 1996). In turn, the raced, classed, and gendered dimensions of my sample are representative of the kinds of parents that would be most equipped to take on the kinds of attention, advocacy and maneuvering of institutional others on behalf of their gender-nonnormative children observed here—and to partake in my research project. Notwithstanding, I cannot conclude that white, middle-class, college-educated moms and parents are the only kinds of parents identifying and supporting transgender and gender-variant children. This study cannot speak to the experiences of other parents who may have less access to, visibility within, or interest in the kinds of forums from which I recruited. As such, the processes and practices represented here largely pertain to white, middle-class, as well as cisgender women's, responses to childhood gender variance.

### ***Methodological Limitations and Considerations***

The sample and data collection process point to multiple methodological factors that are important to consider in my analysis. First, the parents represent a purposive or convenience sample—I went to places and forums that were specifically designed for parents of gender-variant- and transgender-identified children (e.g. national conferences, online blogs, and indirectly via the support groups and listservs of parents I already knew), and I

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<sup>33</sup> This can include but is not limited to: psychologists and mental health counselors who are consulted for support and guidance; trips to national conferences, which often require plane fare, lodging, and registration fees; expenses at the doctor's and/or endocrinologist's office, which insurance does not always cover; consultations with various advocacy organizations and their directors that might incur additional travel expenses, not to mention being readily technologically "plugged in" to the internet.

grew the sample via snowballing sampling from parents within those parental/advocacy networks. It is otherwise very difficult to find and recruit parents of significantly gender-variant children (nor, in turn, could I study parents who seek to quash and “correct” their children’s gender variance outright—they are necessarily not accessible within these venues, where parents have identified their children as categorically gender-variant in the first place). As such, my findings from this sample are not generalizable to a wider population of parents who have potentially gender-variant or transgender children, let alone to all parents raising children over the last 5-7 years. The parents that I was able to recruit via the avenues that were most accessible to me represent a very specific sub-population of parents, who are immersed in a particularly affirmative set of discourses, identity labels, and childrearing practices regarding childhood gender variance. Since I do not know what the “true” population of parents of gender-variant and transgender looks like, I cannot be sure if the sample I was able to recruit is biased; however, my sampling techniques may well have yielded raced and classed selection biases (see Cannon, Higginbotham, and Leung 1988; Sprague 2005: 127-30 for a discussion of selection biases that may be relevant to this study).

Secondly, and not unrelated to the above, the parents actually served two informant roles to me: one, as experts of their own childrearing experiences and of their children, and secondly, as participants in a wider discursive community, or sub-culture, mainly virtual but sometimes in-person (e.g. support groups and conferences), which continued to inform their parenting decisions and perspectives. Parents’ responses frequently cited conversations, debates, and other parents’ experiences or opinions among a wider web of parents, advocates, and professionals. I did not have access to the forums and communities where such discursive encounters occurred (either online or in support groups); this would require a

formal screening process, so that only parents of such children are admitted. Nor did I want to seek it out, as doing so felt invasive of a space that is otherwise devoted to these parents and to those who are involved in their immediate support. For similar reasons, I was wary about attending the annual conferences, as were the organizers, who asked me not to use any specific data or observations from the conference settings, even if anonymously, or to directly approach participants about my research. These were protocols I understood and obliged. In an interview, I was frank with one of the organizers about my concerns in risking a voyeurism and opportunism as an academic in such settings; I am not the kind of “professional” these conferences normally recruit, such as social workers, psychologists, trans activists, medical practitioners, who more directly give to this community in the way of help, support, information and guidance. I did this, at the least, to signal my awareness of these risks that they no doubt were considering too (to there was no marked response).

In other words, I never really spent immersive time in the sub-culture, as an ethnographer would do; rather, I largely relied on dispatches of it from one-on-one (or one-on-two) interviews with its participants. Given my limited involvement, I wondered how much empirical weight I could give to such reports in my analysis, as I was never directly privy to the dialogues parents’ recalled nor participated in them myself (the online forums would and should be a whole other study in its own right, pending one’s access). However, my own direct readings and interpretations of these experiences were less significant, or maybe differently significant, than my interviewees’ “take-aways” and understandings of them, as they surfaced throughout our conversations. In short, I decided that whatever parents’ recalled from others’ comments online, or in support groups, was as significant in their evolving experiences and consciousness as any other anecdote or perspective I could

garner from their daily lives. To these ends, I almost always explicitly asked parents about the major debates and issues within this wider community, which, when they were offered, tended to be quite consistent. This signaled to me that these parents were indeed representative conduits of the broader discourses and beliefs that shape the trans-parenting community (e.g. to disclose or not to disclose, to fully transition or not to transition, and why).

Additionally, the two sub-groups of parents represent two different cohorts and samples, both temporally/historically and “type”-wise, which presents both limitations and substantial insights: The first group of parents was recruited and interviewed in 2009-10. Historically, this sample of course is not that far off from parents in 2013 (or 2015), but in that short time, the infrastructure and visibility of transgender children (and their parents), and of the category transgender more broadly, has dramatically expanded. The major advocacy organizations only first really launched in 2007, and since then their representativeness has grown by the hundreds, either at the annual conference or on the listservs (personal communications). One of the advocates I spoke with said that since 2013, their listserv’s growth rate has actually “leveled off,” not because fewer parents are raising trans kids, in her view, but due to the “information overload” around the rest of the country: “Three, four, five years ago, we were basically the only game in town, now there’s a lot of local resources that schools will [use] to do a training ... and there’s also more doctors [and] more therapists around the country who are working with the kids ... .” Reflective of this, one of the first parents I interviewed in 2009, when recalling her early experiences prior to transitioning her child (c. 2004-06), said that she could not find a practitioner, or a support group, in her area that was versed enough in childhood gender variance to support her. Her

city, a large metropolis, is now home to a thriving support group (considered the largest in the country), which was constantly referred to in later interviews and as of 2009 is officially affiliated, too, with one of the major clinics in the country.

As further insight, the first major televised special that is representative of this trans-parenting model (e.g. socially transitioning a young, pre-pubertal child) occurred in 2007 on *20/20*, and its guests (Jazz and her parents) are considered the pioneers of the phenomenon. Since then, several other cases have received national attention. For example, the Coy Mathis case in Colorado in 2013 resulted in a landmark court decision that permitted a transgender girl to use the restroom of her choice after she had been denied by her school district. Moreover, throughout 2011-13, California enacted several major pro-transgender legislative acts (see Chapter 1); several states are following suit. Public, transgender-identified advocates and figures, including Janet Mock and Laverne Cox, have effectively placed transgender at the center of popular discourse and awareness. In short, the parents I first met in 2013 were immersed in a very different landscape, wherein the prospect of a categorically transgender child was ever crystallizing in both popular and institutional consciousness, in a way quite unlike the context of those parents who encountered these issues prior to 2009 (i.e. the follow-up cases). As one parent said to me in an email, in reference to the anonymity of my research subjects, “Sometimes I feel like everyone can find me ... and sometimes I think our numbers are growing so large that I will just be another parent.”

Moreover, the bulk of the parents I interviewed in 2013 were contacted based on replies via a listserv that largely caters to parents of transgender children (again, I did not directly pursue this space; a blurb was shared there on my behalf).<sup>34</sup> While the organization

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<sup>34</sup> I asked parents I had already interviewed to pass along information about my project, provided they were comfortable, within their support-group networks, which of course included the online forums. So in some

would never exclude parents of gender-variant children who are not necessarily transgender (and they certainly have such subscribers), by and large, the forum is populated by parents who are seeking community and support for raising a transitioned or transitioning transgender-identified child (as one of the educators told me when accounting for their population, “transgender” is explicitly in the organization’s title). This contrasts with the first group of parents, who were not drawn from this forum, but at a conference and via a blog, which many perceive as pursued by parents of a wider range of gender-variant children, and not “just” of transgender children, based on associations and connotations that surfaced in interviews. The author of the blog, for example, is actually not a parent of a transgender child but of a cisgender feminine boy; this parent very much writes with an interest in expanding (cisgender) boyhood possibilities (similar to tomboys). It is important to clarify, again, that this latter organization and its conference, as well as this parent’s blog, are by no means exclusive of transgender children; quite the contrary. In fact, both times I attended the conference, parents of transgender children seemed to be in the majority and were a visible presence. Nevertheless, these different forums and sources, and the timeframes during which I recruited from them, yield potentially different populations of parents (and children), some more trans-specific or –centric than others, all of whom comprise the broader sample of parents this study addresses.

These “historical,” contextual factors resonated with several observations of the data and prove substantively significant to the dissertation: while the first sample only speaks to 13 cases, 8 of the cases (children assigned male) were identified as gender-variant, *not* transgender, at the time of my interviews in 2009, whereas the transitioned transgender child,

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ways, I indirectly pursued this listserv. But I never directly approached the organization’s directors or moderators about posting my blurb there. I tried that once with another listserv in 2009, and was denied.



of comparable age (6-8 years old, if not younger—4-5 years old), represents the bulk of the children from the second sample (wherein only one of the children assigned male could be classified as gender-variant). Moreover, the identifications of 4 of the children from the follow-up sample had changed from gender-variant to transgender as of my second interviews in 2012-13. In these ways, the first sample represented something a bit more gender-variant than the second sample, which was specifically more transgender. This may well reflect the growing visibility and viability of transgender categories for pre-pubescent children since 2007, making it a bit easier for a parent to consider transgender possibilities, and transitions, more seriously and potentially act sooner (socially transition their child). This also speaks to the spectrum of (trans)gendered possibilities that parents are conceiving, understanding, and discussing among each other—binary and non-binary—as observed in their children and as encountered in different forums and spaces at any one point in time, some more trans-specific than others.

This latter point highlights another significant methodological problem of the study: taking “snapshots” of a variety of processes and perspectives that are actually in flux, which evolve and change over the course of childhood developments and parenting careers, and then, moreover, comparing them to each other contemporaneously (e.g. comparing one snapshot or interview, which speaks to a certain point in one parent’s experience, to another snapshot, which actually represents a different point in another parent’s transition). This poses an analytic limitation, as it results in my comparing and contrasting relatively disparate junctures in time across parents’ experiences and perceptions. This aspect of the study is reflected in the follow-up cases: some parents’ perspectives in the first interviews did not wholly reflect their viewpoints, if at all, in the second interviews, nor did these reflect their

children's now-affirmed identifications. However, I believe it is precisely such dynamic practices, processes, and perspectives, both within individual families and among the wider community of parents, that captures the gender change at work: what we think and say about gender at any given moment, and the variety of understandings and identity categories that pertain to such evolving bodies of discourse, is what ushers in new possibilities for gender. I often encountered the notion among parents that this is “*their* transition,” not their child's, that “everyone's on their own journey” and takes their own time. As such, while a child's gender identity may or may not be in flux, the notion that the parents themselves were part of an evolving, fluid process seemed integral to their understandings of their own experiences. Therein, in many ways, lies the sociology of this study.

### ***Risky Business: Sociologist as Advocate?***

On multiple fronts, I am an outsider in this highly sensitive terrain: I am not a parent, I am not transgender, I am not the kind of medical or mental health professional parents usually consult for immediate assistance, guidance, and support. I am a cisgender, gender-normative, childless sociologist, who, perhaps most importantly, is influenced by “social constructionist” frameworks for understanding human society. I am an “outsider without.” As such, the greatest challenge in this research has proved my sense of balancing between doing justice to the sociology of the issues, as I saw them—the makings of social life—and doing justice to parents' aims for participating in the project—which were, put simply, to make the world a better, safer place for gender-variant and transgender children. Nearly every interview ended on the note of, *Thank you for doing this research, it's so necessary for greater understanding and acceptance of our kids*, and every time, I felt a weight and a heaviness about risking not living up to those expectations, when the safety and well-being of

children were at their root. As one informant closed her email to me, “Thank you again for your work. We rely on it.”

I would be lying if I said those words have not reverberated throughout my thoughts and between the pages I write. Several informants checked in on the status of the dissertation, seemingly eager to read what I had found. As one prominent advocate told me at the end of our interview:

Here’s what I would say that excites me about what you have done, about what you’re doing ... and that is, *publish, publish, publish, publish!* ... That is one of the most important sort of systemic changes in all of this, is that the people who really are connected to boots-on-the-ground advocacy work are getting published ... so that I can put you on my web site and say *Look! Here is a study that was done and this is what it says! Use this when you talk to your school or whatever ...* . So see you might wonder why I spent so much time with you, and that’s one of the reasons I spent so much time with you ... is the more you all know, the better it is for us ... .

The issue was particularly driven home in my interview with Janice, whose ex-husband’s side of the family (including her child’s paternal grandparents) does not accept raising the child as transgender; they find it “sick and deranged.” Janice advised that she hopes research like mine will help “some of these folks who have difficulty [come] around to it”:

[I]t’s kind of like the debate about, you know, is all media exposure good media exposure, you know, and so in my viewpoint on this, the more that—especially academics—um can contribute to an area, the stronger the movement’s gonna be, because you know when folks like the paternal grandparents go to the internet, they’re not looking for memoirs of other parents, they’re looking for research, so you know it plays a big role, it’s super important.

As a sociologist who has studied feminist methodology (Collins 1986; Fonow and Cook 2005; Harding 1986; Naples 2003; Smith 1987, 2005; Sprague 2005; Stacey 1988; Taylor 1998), meeting my participants’ aims should not be a problem for me. As Tey Meadow (2013) reflected of her own work on parents of transgender children:

I remain keenly attuned to the sense carried by my research informants (which I share) that the products of the representation have the potential to influence the political and emotional landscape they inhabit. What I've come to believe fundamentally is that the goal of feminist ethnography, and perhaps for ethnography more generally, is to be "for, not merely about" (Risman 1993) the particular individuals we study. (478)

To be sure, I want to benefit my research participants, to give voice to their needs and issues, to better the world for otherwise marginalized, stigmatized, misunderstood identities and experiences (including their gender-variant children). I imagine a world where every child is unencumbered in their self-determination, where they have the greatest reins in realizing the most authentic possibilities of their selves, with regard to gender and all other axes of human identity, expression, and experience (Karkazis 2008; Landsman 1998; Panitch 2008). And I believe that conventional gender-binary norms and ideologies, founded on the sexed body, are one of the greatest encroachments to that self-determination. That is where, I believe, my interviewees and myself are well aligned. Unlike the responses of many "lay" persons to the prospect of a transgender child (which I've confronted so often over the years when asked about my research), it is unremarkable to me that a child assigned male says she is a girl, and is a girl, or that a child assigned female says he is a boy, and is a boy, or that some children do not feel like either of these two options. And it is perfectly right and reasonable to me that a parent would honor that self-expression, in the best ways they know how.

Of course, a researcher can be true to the themes of her subjects, but also find other important themes in what they say; indeed, that is the role of a scholar versus a journalist, in the simplest terms. Nor could I presume that my research interests and concerns were necessarily identical to those of my informants to begin with; even participant action research, while motivated by respondent interests, also often has additional interests, owing to the research as generation and dissemination of knowledge of the human condition

(McIntyre 2007; Whyte 1991). The research enterprise often entails bringing to bear on one set of purposes, another set of purposes, which may or may not serve both. Stacey (1988) has commented quite frankly on such dilemmas of “feminist ethnographers,” which she considers its own “contradiction in terms” (Oakley 1981):

[T]he research product is ultimately that of the researcher, however modified or influenced by informants. With very rare exceptions it is the researcher who narrates, who ‘authors’ the ethnography. In the last instance, an ethnography is a written document structured primarily by a researcher’s purposes, offering a researcher’s interpretations, registered in a researcher’s voice. In this sense ... elements of inequality, exploitation, and even betrayal are endemic to ethnography. ... [T]he published ethnography represents an intervention into the lives and relationships of its subjects. As author, an ethnographer cannot (and, I believe, should not) escape tasks of interpretation, evaluation, and judgment.<sup>35</sup> (114)

With this, I will get more to my point: As a sociologist, I am interested in exposing the discursive and ideological systems at play, and the social processes involved, in bringing various subjectivities into being—or in excluding and precluding them. As part of that enterprise, I feel beholden to attend to the social-structural, institutional, and/or cultural contexts that shape those subjective possibilities. Gayle Rubin’s (2011) explanation of “social construction” is helpful (here she is speaking of the study of sexuality, but the definition well pertains to the study of gender, childhood, etc.):

Historians of marriage note that, like homosexuality, marriage is not universal term or concept. They do not claim that no couples ever mated, lived together, had children, shared property, or were granted special legal status. They do point to the discontinuities between different ways of doing so and the distinct constellations of behavior, custom, and emotion involved. ... By showing that same-sex eroticisms and cross-gender behavior were historically and culturally specific, social construction cleared away obsolete assumptions ...

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<sup>35</sup> Stacey is speaking specifically to ethnography here, but her points easily resonate with using in-depth interview data and narratives.

[that sexual/gender identities were] stable and largely unchanging phenomena.  
(197-8)

But to speak of the “socially constructed” nature of social life, including its possible identity categories and modes of being, often sounds like, or is often interpreted as, speaking of those things as if they are false or “not real” or contrived—“constructed” (see Epstein 1998 and Weber 2012 for related discussions on essentialist “versus” constructionist frameworks). For many sociologists, these contextual processes and perspectives are as real as it gets, they are life in the making—indeed, they are all we often have, especially when other factors or processes, say biological or pre-cultural, are not fully at our grip, even if we give them credence. I actually feel it is precisely these parents’ experiences and deliberations on behalf of their young children, as detailed throughout the pages of this thesis, that attest to these processes.

This is why, for example, I have devoted an entire chapter to parents’ distinctions between “gay” and “trans” kinds of gender variance. For many of them, a lengthy discussion about the (ir)relevance of homosexuality to their transgender children is remiss, and risks regurgitating the very conflations and misunderstandings about “(trans)gender” and “(homo)sexuality” they have worked to tease apart. However, I would argue it is precisely parents’ distinctions from, and in many ways dismissal of, “gay” as an explanatory factor for their child’s gender variance—despite a history of psychiatric “research” that would suggest otherwise—that are forging childhood transgender possibilities in a way they haven’t been before (and which may well have implications for the “statistics”). I do not question the identifications of the children, or anyone else, for that matter; they are who they say they are, at any given moment in time. I seek to illuminate the social processes that are helping to *realize* these identifications and possibilities, in every sense of the word.

To my informants (and to others far more removed from the subject, or to persons who identify with LGBT categories), this may sound like I am saying their kids could “really be gay,” or that they are “making” their kids trans, or that other gay persons could “really be trans,” and vice versa. Indeed, one of the advocates I interviewed, Neil, said just this to me, when I asked him about all the previous studies that claim most gender-variant children grow up to be “just gay” and if he thinks those statistics would look differently, effectively, in this cultural moment:

[That’s] super provocative, and it gets at, I mean, if you really boil it all down, it gets at ... the people asking that question—I’m not saying about you—there’s some underlying motives about why that question’s getting asked, I think, that are about, like, ‘You see, they don’t really—trans isn’t real or trans is real.’ I mean it is fraught.

At another point in my interview, he insinuated that the kind of “conceptual arguments” undergirding my questions—gay versus trans, binary versus non-binary possibilities—were unhelpful:

So these conceptual arguments ... it’s like y’all have that conversation, I’m going to be down here working with some folks who’ve got real lives to live and choices to make in the moment that have real implications, and yes, all this stuff impacts that, but for them it’s about what do I put on tomorrow? [...] I would probably find myself more aligned with ... trying to understand the world in service of changing it versus trying to understand the world just to understand it in this really esoteric, intellectual way ... But yeah, that’s just me because I’m not an academic, I’m just a little old teacher trying to make a small difference.

The frameworks my informants use, and rely upon, in justifying and legitimizing their trans identifications of their children are often quite different from constructionist perspectives, which emphasize the cultural processes that shape and enable (a charged word alone) those identifications. As one mother said to me when the historical statistics came up in our interview, “You only grow up to be trans if you are trans ... so those people are being found

earlier now because of the trans movement, so the people that are gay that are really trans are eventually gonna come out as trans or they're gonna kill themselves.” For these parents and advocates, a treatise dedicated to the ways in which we think, talk, and act with regards to gender, sexuality, and identity, as a means of, in part, achieving gender and sexual identities (or precluding them), at any given cultural moment, does not necessarily sound like, “You only grow up to be [gay/trans] if you are [gay/trans].” Indeed, some might not consider it advocacy at all, like my interviewee above, but useless “esoteric” theorizing at the expense of real, material lives and experiences. Worse yet, some may feel I am insinuating a parent’s machination of something that otherwise may not be there (i.e. a cross-gender subjectivity on the part of a child)—precisely the kind of argument these parents have had to deflect (i.e. that they are “encouraging” or “causing” their child’s transgender status). This is nothing I would ever assert, and I understand it to be the antithesis of supporting these children and their parents. But my analyses, and the frameworks I draw from, could well be interpreted by my informants as a troubling or questioning of their identifications and decisions for their children. In turn, this could be experienced as a lack of support from the researcher in whom they entrusted their stories and their positions—and *their children’s stories*. For the record, I herald such identifications and decisions as exemplary of supportive, liberating parenting.

These conundrums are nothing new to transgender studies and transgender identity, which has been marked by a legacy of cisgender, gender-normative researchers—like myself—fetishizing it as some heady social phenomenon (Namaste 2000; Serano 2007). As Namaste (2000) says:

Recent sociological studies of transgendered people ... enact an objectivist framework in which the definition of a research problematic does not consider the everyday life of the subjects, but rather reflects the institutional and administrative questions identified as important by the sociologists. ... [T]he research agenda has



been defined by the sociologists rather than by members of the sample population. ... [Nor do these sociologists] clarify the implications of their research for social policy. (32-3)

It can be said that I am doing just this, and abandoning the principles that feminist methodology has taught me—that my work should serve to benefit the communities I study, and give voice to their needs, desires, aims. My informants do not want to hear about potentially provocative or “fraught” constructionist analyses regarding the ways in which LGBT-spectrum, as well as binary and non-binary, possibilities are enabled or constrained through culturally-specific practices and discourses. For me, again, these are at the heart of the social change I seek to capture as a sociologist. But what do such analyses do for my informants? Sprague’s (2005) distillation of “radical social constructionism” unfortunately comes to mind: “Scholarship separated from action can devolve into a form of intellectual game conducted by a privileged class of knowledge producers with no relevance to most everyday actors” (39).

These concerns truly came to the fore when I received an unexpected phone call from a participant toward the end of my dissertation (in truth, I had been trying to reach her for years about consent forms<sup>36</sup> for our second interview, but had finally given up and resolved to clear her data from the project). The conversation was tense and a bit unclear, and I was not nearly so articulate or clear-headed as this work requires. But in the days following, it occurred to me with more clarity what she was telling me: she felt I had misrepresented her story and had misgendered her child. When I first interviewed her and her husband in 2009, they were admirably determined *not* to assume that their then gender-variant-identified child

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<sup>36</sup> My phone interviews were all conducted with verbal consent, and then participants mailed me more formal, written consent; this is specified in my IRB protocol (as a side, securing original hard copies of written consent from my interviewees from all over the country was no small undertaking). I had yet to receive this parent’s consent forms for our second interview, despite numerous attempts and email exchanges.

was necessarily transgender or female, and, in my view, took pains to normalize a range of gendered possibilities for their child, both transgender and perhaps more genderqueer or gender-fluid (when asked about her gender, their child frequently said, “I don’t know.”). As of our second interview in 2012, these parents had recognized and affirmed their child as female. However, publications that came out of that first data set with parents (2013, 2015) reflected those earlier “snapshots” in their careers, when many were considering and imagining more gender-variant and non-binary possibilities for their children, and were often still using the pronouns of their children’s assigned sex.<sup>37</sup> It is *precisely* such attentive, thoughtful, and evolving gender-expansive practices and perspectives on the part of these parents that I feel are so important to capture—regardless of the “outcomes” of their children’s childhoods. They are the window into the sociocultural processes that are newly facilitating, expanding, constructing our gendered truths. But this parent felt that I didn’t understand that her child is female, that I was buying into the “children in the middle” narratives when her child is not, and overall that I was misrepresenting her story and not honoring her child’s identity. She told me that “doctors and researchers” like myself “who aren’t really living the life just don’t get it.” She also advised me that her child has always asserted herself as female, which is why she prefers “asserted gender” to “affirmed gender” terminology, and asked which I would be using in my work.

I take nothing more seriously than these kinds of concerns among the parents I interview. And I understand how such a critique of my work is part and parcel of the affirmative love and labor they do for their children—who are, and have always been, the

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<sup>37</sup> These pieces explained that they reflected early snapshots in time in parents’ developing consciousness and careers, and as such, reflected the identifications and pronouns parents were using at the time of the interviews/in the quotes. The pieces also explained that several of the identifications of the children had changed since these initial interviews, and that those parental transitions are the subject of further analysis.

gender they come to be recognized as. Indeed, I am aware that in any other context, referencing the wrong pronouns or identifications—and portraying the intimate transitional moments when parents are still operating with these—might be wildly inappropriate and trans-unaware. My concern remains: how to capture the sociological process and change at work, even at its murkiest, when the change so often refers to a static, sacred truth?

Admittedly, the conversation paused my writing, and resulted in several days of deep reflection and introspection about my positions and my stake in this field of work, which transcend this one particular case and tap into the broader analytic issues outlined above. I came to a few conclusions (which may well change years from now, and if I didn't admit to this I would be a hypocrite in vouching for the kind of long-term, comparative, qualitative analyses I do): I do not think that evading the “super-provocative” or the “fraught” is the most socially responsible thing to do, and I acknowledge that this needs to be done as cautiously and consciously as possible, and that that is very, very difficult to do, when the stories of real lives and real children are the foundations of this work. Feminist methodologists have held such risks of exploitation at the heart of their debates, concerns, and praxis for decades (Devault 1996; Frontiers 1993; Stacey 1988). But, as so many of these families' experiences attest, denying or shying away from an issue, as uncomfortable as it may make us, risks clipping the range of livable, authentic possibilities for all persons. Facing it head-on, as these parents have done for their children, is what ushers in a wider range of human potential.

As such, some of my analyses may well yield questions and implications about the limits of non-binary or gender-variant possibilities, particularly for male or assigned-male persons, in our current social milieu, or about a shift in “LGBT”-spectrum experiences,

identifications, and “statistics” in a culture that is becoming increasingly (trans)gender-aware and –inclusive, or about the risks of biomedical and/or essentialist logics for bodies and gender. And I understand that some of these considerations may well depart from the themes that my research participants expected or anticipated, or that it strikes them as overly “fraught” territory (even when I consider it particularly emancipatory territory). But to me these considerations are crucial to exposing the workings of a system that is discursively, ideologically, institutionally, and interactionally (re)produced and (re)negotiated—and as such, a system that intimately influences “what [folks can] put on tomorrow,” as Neil above would say, be it clothing or a self-understanding. To strive towards the widest range of self-determination, I feel that we must closely observe how some possibilities are (newly) engendered, imagined, supported, affirmed—in our thoughts, our conversations, our practices and perspectives—as well as how some might be limited, constrained, compromised. I feel it would be remiss of me to risk neglecting those critical dimensions of the data, after all of the incredible time, candor, and insights parents offered me, and it would misrepresent the deep critical thinking and awareness that all of these parents practice. I have promised these parents a copy of my dissertation, as they have asked for it. And as feminist methodologists have taught me, I hope, and I trust, that we will engage collaboratively, creatively, and critically about these issues (Sprague 2005: 143-8; Stacey 1988: 114). I believe that an honest, thoughtful sociological rendering of my informants’ experiences presents myriad, fruitful possibilities and opportunities for realizing both important advocacy needs and future research questions.

Of course, there is one last dimension to my ethical and methodological concerns, and it is the weightiest: the children, who do not speak for themselves in this study, but whom are

spoken for by the parents. While I really study “the parents,” it is their children who inform all of the testimonials that I capture in the pages that follow. This dissertation holds their stories, their identities, their truths, if not explicitly then between the lines that are spoken and written, and that is a profound, seemingly unspeakable honor, privilege, and responsibility that I carry in this work. Doing justice to their lives and their privacy, access to which I have been granted by sole virtue of my role as “researcher,” is what I ultimately hold paramount. One day, the children might speak to me about this work. I cannot presume or predict what they will say, but it is an interview, conducted by them, to which I will ever and always answer.

## CHAPTER 3

### **“He said this and it was so freakin’ profound”: Identifying the Transgender Child**

*“She was trying to find a way to describe it ... she said, ‘You know how when you put blue and red together and they make purple? Well, it’s kind of like that, except it makes a color that you’ve never seen before.’”*

*(Theresa, mother of a transgender girl, 12)<sup>38</sup>*

*“[I]t’s very seductive to think we all have same stories because there are so many parallels, but it’s important to be aware that there are unique things, because especially those of us who have such young kids, we’re all trying to predict ... [but] I really think that there are unique differences.”*

*(Bruce, father of transgender girl, 4)*

### ***Introduction***

In this chapter, I describe the aspects, moments, and observations by which parents first come to see their children as different from the norms of their assigned sex—what might be considered “gender-different” or “gender-atypical”—and ultimately identify them as transgender. Prompted by my own questions at the top of the interviews (e.g. “When did you first start thinking about ‘gender issues’ with your child?”), parents provided me with a wealth of behaviors, preferences, statements, anecdotes, and overall accumulated observations about their child that had come to constitute their gender-variant profile and story—as one advocate put it, the “constellation of things.” Indeed, several mothers had started formally logging and detailing these observations in journals or diaries, in part to shore up “data” for the professionals they eventually started consulting.<sup>39</sup> I learned it was not

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<sup>38</sup> Parents and children will be designated as such throughout this thesis: Parent’s pseudonym (child’s identification, age of child at time of interview).

<sup>39</sup> One mother, Martsy, volunteered a copy of her journal for me to draw from freely, an empirical gold mine of essentially “real-time” observations and anecdotes regarding her child to which I am forever indebted to and

uncommon for mental health practitioners to suggest that parents start documenting all of their child's gender-atypical behaviors—about which Martsy joked, “I laughed at her at the time, I’m like it would be easier to write down the things that would indicate that my child is the *gender they were born into*.” And of course, parents’ early interpretations of their child’s atypical patterns were not always, if ever, in terms of (trans)gender or gender variance, which I further detail below. I devote a chapter to this material to establish how parents like these come to conceive of their children as transgender in the first place, which serves as empirical foundation for the chapters ahead that address more complex conceptual and ideological terrain regarding parents’ reckonings with gender, (homo)sexuality, the binary, and the body more broadly.

In addition to the stereotypical stock of the “other sex’s” play interests, clothing, toys, etc.—as Eileen described it, the “very general stuff that I know you’ve probably heard a million times”—I will discuss: children’s seemingly profound commentary and verbal insights that were indicative to parents of a cross-gender sense of self; children’s comments about their bodies, specifically, which were also significant in parents’ identifications; the experiences and impressions of parents of *trans boys* in particular (children assigned female at birth), including how this group came to discount a tomboy interpretation of their child; and lastly, the wider support community that parents eventually seek out and from which they adopt a transgender identification of their child. A concluding section will synthesize these aspects in terms of how they legitimize an identificatory profile for a transgender child, but also how they expose important caveats and differences across cases. This is

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which, in hindsight, I would have asked all informants to create and provide at the start of the project, pending their comfort level (see Fenstermaker Berk 1985 for an example of using participant diaries). Having Martsy’s journal risked dominating my view; however, the wealth of interview data from all the parents I spoke with and reviewed, including Martsy’s, was marshaled over and above this one diary.

significant relative to traditional criteria and assumptions about transgender “diagnosing,” which are imbued with heteronormative, gender-normative, binary stereotypes for men and women (Bornstein 1994; Califia 2003; Meyerowitz 2002; Serano 2007; Spade 2006). I argue that the range of difference and ambiguity across cases challenges the notion of any one typical profile in important, (trans)gender-expansive ways. I begin, however, with the gender-neutral principles with which many parents started, before they were ever cognizant of transgender prospects.

***“So that kind of maybe muddied the waters in the beginning”: Gender-inclusive Foundations***

Like many of their contemporary counterparts (Kane 2006, 2009 2012; Martin 2005), many of the parents in my sample indicated that they entered childrearing with at least a modicum of gender-neutral or gender-inclusive principles, prior to ever thinking of their child as categorically gender-variant or transgender. As Kari (mother of a transgender girl, 5) said, “I’m pretty open-minded, before I even had children my goal was to raise more gender-neutral children anyway ... we had a play kitchen, vacuum cleaner, things like that ... .” Martsy (mother of transgender girl, 5) was particularly vocal about having espoused gender-progressive parenting politics in our interview. Martsy traced the first signs of her child’s gender variance to her adoration for a feminine cat shirt—“like sparkly, rainbow, puffy sleeves”—which her child, Cindy, selected herself from the girls’ section when she was just 18 months old. Despite her initial attempts to shift her child’s interests in the shirt, Martsy recalled feeling proud that her “male” child would walk so comfortably into the girls’ department: “I’m like, *Oh, that’s cute, look at me, pat myself on the back, my child sees no gender boundaries, la-la-la.*” As Martsy reflected in her diary, “Slowly we progressed from [girly clothing] style to a ‘girl’ toy preference. However, I still chalked it all up to our



attempts to raise a gender-neutral child.” Like many mothers, Martsy described to me the gender-progressive interests with which she had consciously started her childrearing career, particularly regarding “girls” and idealized femininity:

I am not a girly girl ... while I was pregnant ... I purposely didn't find out what I was having, I [didn't] want them to be feeling confined by any gender norms. ... So that kind of maybe muddied the waters in the beginning, because I was going out of my way to make sure that all doors were open and that my child never felt this is just for boys, this is just for girls. [...] If I was having a girl specifically, I didn't want a closet full of pink and ruffly, lacy, because I'm not the girly girl ... but it's kind of ironic, because now [Cindy's] a little bit of a girly girl.<sup>40</sup>

Martsy said that her husband Marco, too, was on board with these principles, prior to her considerations of transgender possibilities (to which Marco was far more resistant and was still trying to accept at the time of our interview):

He was fine, and he was open-minded to, yeah, we can raise kids that see no boundaries, and that will make them more sensitive as people when they're older, which is what we were both thinking, you know, that they're not going to feel contained or confined, and they're not going to do that to other people either. So that was our whole thinking ... . He was fine with the cat shirt that had sparkles and frilly, you know, and he would defend that. He was fine even ... when [Cindy] picked out the princess high heel dress shoes at *Disney on Ice*. And he even laughed about that and took pictures and, you know, kind of patted himself on the back. *Look at what a good job we're doing.*

Similarly, Carolyn (mother of a transgender girl, 9) told me that she and her partner had purchased their child, Casey, a Little Mermaid costume when she first requested it: “Casey has two moms ... I bring that up to say that, neither one of us was particularly concerned about gender roles being enforced in any way. We thought that was a bunch of hooley ... if

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<sup>40</sup> My use of ellipses throughout this thesis serves to excise portions of my respondents' comments that are either redundant of their points or contain “filler” words or stuttering (e.g. “you know, um, yeah”). My use of ellipses in brackets ([...]) serves to excise larger portions of our exchanges, so as to continue the flow of my respondent's overall point or thought. I am aware of the editorial risks of qualitative analyses, and I seek to best represent my informants' perspectives at any given moment, in the service of exemplifying the observation or theme I am describing.

this is what Casey wants, this is what Casey gets.” Dana (mother of a gender-variant male, 9) provided all kinds of toys for her children from the get-go (all children were assigned male at birth):

D: Yeah, we have princess costumes, but I’ve always strived to not separate it from, you know, “These are the girls’ costumes and these are the boys’ costumes,” and they’re all hung up on hooks, and it’s everything, it’s cowboys and knights and ninjas and princesses and fairies.

E: And when you say “you’ve always,” were you providing stereotypical girly toys or dress-up for Skylar<sup>41</sup> before this even came onto your radar?

D: Yes, absolutely.

E: So what kind of girly toys [were] accessible to him in the house before you started really thinking about gender issues?

D: He always had Barbies.

Parents of transgender boys (children assigned “female” at birth) also indicated having gender-neutral approaches early on. Karen (mother of a transgender boy, 10), for example, who expressly requested a female child when she adopted Izzy, nevertheless sought to avoid pigeon-holing her “daughter” into female stereotypes:

I was going for neutral, like Thomas the tank engine, and Leggos, and those, you know, the Diplo blocks ... I wasn’t allowing the more rough boys’ toys like the ninjas or things like that ... I didn’t wanna go like too over the edge “boy,” but I did definitely do cars and trucks and trains ... . I’m not a girly girl, I wasn’t looking for a girly girl ... Izzy’s preference was anything that rolled and moved ... Izzy’s given name is Isabella, which I think is about as feminine a name as you can get, but I never intended to make Isabella to be a girly name, flowery, and all pinky and glitz ... like I wanted to expose Izzy to a variety of things ... [including] dolls and things, but I loved the fact that she kinda gravitated towards the trucks and trains ... .

In a similar vein, Meredith (mother of a transgender boy, 7) told me: “I’ve always been really big about, society puts too much gender constraints on people, I’ve always been like, *Yeah, I*

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<sup>41</sup> As of our interview, Skylar identified as “two-spirit” or “both,” which he and his mother encountered in a parenting guide, and was using male pronouns. He had long hair and wore girls’ clothing, including skirts and dresses, and was almost always read as female. For these reasons, I consider Skylar the one categorically gender-variant male in the sample: he did not identify as female (but actually as something more bigender) “but” was female-presenting full-time. (However, when I came to the house, he introduced himself to me with a conventionally feminine name, which his mother told me he had been doing frequently as of late).

*was a tomboy ... We're female, let's show them what we can do ... Let's break all the gender barriers!"*

To be sure, not all parents embraced these kinds of gender-expansive philosophies at the outset of their parenthood. Bruce (father of a transgender girl, 4), for example, originally refused purchasing his child "girls" items from the store, despite her "demonic" public meltdowns about women's shoes. Julie (mother of a transgender girl, 5), too, was upset with her ex for allowing their child Barbie dolls, which she would not. And parents' gender-neutral principles certainly had their limits, especially with children assigned male (such limitations have been well discussed elsewhere; see Kane 2006, 2009, 2012; Martin 2005; Rahilly 2015). For example, not every parent purchased actual princess dress-up and costumes for their children right away, the way Carol and Dana did, and certainly not before their children started requesting them. Wendy (mother of a transgender girl, 6), for example, stated that they only purchased princess dress-up *after* they had adopted their second child/daughter a year later. They also insisted on a *red* snow suit, when Hazel, their trans daughter, had begged for a pink one. There were limitations among the "tomboys" too, as seen in Karen's testimonial above, where she drew the line at going "too over the edge 'boy'" with ninja toys and action figures.

Nevertheless, I marshal these claims from parents to demonstrate that many parents tried to create at least a moderately gender-neutral or gender-inclusive home environment from the beginning, in a way that accommodated at least some of their children's gender-variant or gender-atypical preferences. In addition to the feminist principles and politics that might have influenced these allowances, it is worth noting the potential influence of a neoliberal, consumerist economy, which encourages (catering to) individual preferences and

choice (including by parents of their children—see e.g. Hays 1996; Orenstein 2012). The young age of the child (2-4 years old), too, cannot be discounted in parents’ seeming openness to their child’s atypical preferences; in many ways, these were regarded as the stuff of child’s play and exploration that the parents’ lack of gendered restraint apparently permitted. All in all, early opportunities for a child’s engagement with, and expression of, gender-variant items and interests—as they would later come to be recognized—were made possible and available among many of these families, versus being quashed outright.

***“Very general stuff”: Clothes, Toys, Play Interests***

Within these relatively gender-inclusive contexts—and sometimes in more gender-typical ones—parents reported that their children exhibited a strong inclination towards the other sex’s conventional toys, play interests, clothes, and wider accoutrement, either regarding objects already at home or those found at the store. Typical of the characteristics parents relayed to me, Julie (mother of a transgender girl, 5) described her child’s predilection for all things stereotypically feminine: “Ok, so in the very beginning what I noticed is that, uh, he<sup>42</sup> gravitated at a very young age toward pretty things, flowers, he’d put flowers in his hair ... he was always grabbing at my jewelry ... a certain blouse that I had, and when he was in preschool ... very often he’d be dressed as a princess [from the dress-up box at school] ... and he usually hung out with the girls.” Julie also observed femininity in Macy’s mannerisms: “[He] always would eat with his pinky up, or pick things up with his pinky up, always really kind of dainty, very gentle ... .” Julie recalled the first time her child saw a

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<sup>42</sup> When speaking about the past, parents often used the pronouns typical of children’s assigned sex, before they had recognized their child as transgender. Some parents still occasionally used the “wrong pronouns” in the present, too, and acknowledged that they were prone to “slipping up” but that they were working on it. Because I am chronicling the parents’ journeys and perspectives, I leave the quotes as is and do not note “[sic],” as other contexts might call for. Outside of parents’ direct quotes, I only ever use the pronouns the child prefers, to the best of my knowledge.

bride's gown at a wedding, which he was excited about for days: "[W]e used to go on walks in the morning, and one time we saw a wedding and he was just, he didn't let that go for days, he's like, 'When I am gonna get married, I'm gonna wear a dress like that,' and I took out the computer and I showed him what he'd probably wear ... and he said 'No, I'm gonna wear a dress like that,' (*laughs*) and so I knew something was up." At this stage in her journey, Julie was not thinking transgender—even though several friends had mentioned this possibility to her, to which she actually took umbrage and offense. But her child's apparent persistence for "girls'" things grew to cause her concern.

Similarly, Wendy (mother of a transgender girl, 6) described "all the gender stuff" that started surfacing with their child, Hazel, around the age of 3:

[T]he third year we started seeing all the gender stuff come out, and we really didn't know what to think of it ... just constantly ... wanting to dress up, wanting only girl things to play with ... we would buy a snowsuit ... and she cried because she wanted pink, and we made her have red ... she cried because she wanted [a] Cinderella birthday and we made her have robot ... and then she cried again 'cause she wanted [a] Tinkerbell [birthday] and we made her have Thomas the train. [...] [W]e had a dress-up box at home, [she] just pretty much wanted to dress-up all day, and it was never the fireman, never the batman, never the superman, which we had in there, it was always the princess, the Tinkerbell, the Snow White. All of the [TV] shows that ... she wanted to see were always ... Angelina Ballerina and Strawberry Shortcake.

Wendy also recalled that during potty training, around the age of 4, Hazel would change out of her boy underwear and into her sister's girl underwear, which featured Tinkerbell and princesses and which they started letting her wear on a daily basis. Children's preferences for the undergarments of the other sex are often cited as a significant indicator of transgender.<sup>43</sup>

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<sup>43</sup> One of the nation's leading endocrinologists for trans youth, Dr. Spack, has said that almost invariably his transgender patients have been "dressing in the underwear of the other sex for years" (Kennedy 2008).

Additionally, some parents had observed their children make use of toys stereotypical of their assigned sex, but in gender-atypical fashions. For example, Claire and Rick (parents of a transgender girl, 6) mentioned that Amos<sup>44</sup> would line up matchbox cars and trucks inherited from her older brothers (or that Rick had purchased for her as potty training prizes) and pretend that they were conversing with each other. When they asked what she was doing with them, Amos would say she was “playing sisters” or “roommates” or having “tea parties.” In a similar vein, Jessica (mother of a transgender girl, 5) mentioned that her child, Talia, dismantled a toy drum set from her grandfather and “used the silver rings to make tiaras.” Like many children, both Talia and Amos drew on their mothers’ or sisters’ wardrobes for dress-up. Talia routinely wore Jessica’s old prom and bridesmaid dresses around the house, which Jessica obliged since she had little use for them anymore. Talia filled her closet with these dresses, as she did the rest of her room with feminine decor: “It basically just really looked like a girl’s bedroom when you would walk in ... fake flowers ... ribbons ... my old jewelry.” At a certain point, Talia also insisted on wearing some of Jessica’s smaller dresses underneath her boy clothes when they left the house. Meanwhile, Amos often wore large blouses of her mother’s and donned her sister’s flowery headbands, with which she also adorned the toy trucks.

Parents of transgender boys (children assigned female) also cited interests and behaviors that might be considered stereotypically masculine—as Karen said, “Izzy never wanted to go anywhere near those girl aisles, always was interested in the boy stuff”—but which many of them regarded as the stuff of tomboys, if not of typical girlhood. Reminiscent

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<sup>44</sup> Several of the transgender children in this sample preferred keeping their original birth names, even when their parents suggested changing it to a name more typical of their affirmed gender. Moreover, many children started out with gender-neutral names that they have kept. I have sought to represent this in the pseudonyms as much as possible.

of Jessica's description of her child's bedroom above, Grace (mother of a transgender boy, 7) described her children's shared bedroom as "his and hers" (both siblings were assigned female at birth): "[I]t was almost like there was a line down the middle of the room and, you know, his and hers." Nick's side was adorned with "all Lightning McQueen" paraphernalia (an anthropomorphic male racecar from the animated film *Cars*), which he got to choose himself. Grace also explained that Nick always wanted action figures, like Transformers, and the "boy toy" with his happy meal: "[G]oing through the MacDonald's drive-thru ... he was always yelling at us in the back [of the car], 'Boy toy, boy toy! I want the boy one!' He didn't want anything girl." Meanwhile, Meredith (mother of a transgender boy, 7) cited her child's love for a brown cowboy hat as one of his first gender-variant behaviors: "One of the first examples that comes to mind is, he wore a cowboy hat for a year, every day, it was an adult brown cowboy hat ... when he was 2, late 2's, almost 3, and anytime anyone came up to him and said, 'Oh ... you're a cowgirl,' he would say, 'No, I'm a cowboy.'" She also noted that as of the age of 3, he refused to wear any clothing that was expressly for girls:

M: [A]round the age of 3, he started making it very clear that he only wanted boy clothes purchased from the boy section.

E: And you obliged.

M: Yep, yeah. It started out with ... "I don't want anything pink or purple or ruffles or bows or glitter or—" and that basically, at that age annihilated everything (*laughs*), so we originally just went to the boy section ... and he liked superheroes, so we [got] superhero stuff, and as the years went on he very clearly stated, "I only want the boys' section," 'cause we would find something in the girl section that wasn't that list of things and he would ask me where I bought 'em from and if I said "the girls' section," no matter what it was like, he wouldn't wear 'em.

Moreover, like Julie's observations above, Nancy (mother of a transgender boy, 8) saw stereotypically masculine characteristics in her child's mannerisms and comportment:

[S]he just never wanted me to brush it or comb it or braid it [his hair] ... it would just slide around her face and it would get all sticky and dirty, she was like a real grungy kid ... I'm just like, *Oh my God*, you know, like sitting at the table, eating really fast, you know, going pee, doesn't even wipe herself, like I just thought, *What is wrong?!* ... [I]t was so embarrassing, but if you look back, and you ascribe like, that's traditional boy behavior, it makes sense—but then again, is that just stereotyping? I mean, not all boys are sloppy and whatever—but my kid just was ... [his hair] was always like a big rat's nest ... .<sup>45</sup>

Of course, a child's interests in the stereotypical accoutrement of the other sex was not always the case. Linda (mother of a transgender girl, 6) actually checked me on searching for this kind of pattern or profile during our interview, after she had described her child's playtime obsessions with cars and dinosaurs (what would be considered stereotypical for young male children):

E: How else did she start displaying a preference for more girly-typed things?

L: She really didn't, you know, I think that's a difficult question, I'm not sure if that's the *right* question ... Violet has always been herself ... the term "transgender" is indicative to me of how primitive we still are as a culture, as a literal societal framework, because she's just ... who she is ... .<sup>46</sup>

Several other transgender girls in the sample had a fascination for cars, their parents told me; Raya (transgender girl, 11), for example, was identifying the make and model of cars by 4 or 5 years old. And to several mothers' curiosity, several transgender boys "still" enjoyed playing with baby dolls (along with dancing, fashion, musical theater, and/or boy pop stars, which will be explored in Chapter 5). As Nancy said of Mickey (transgender boy, 8): "[M]e and my mother called it 'the factory' ... there was like 6 or 7 of 'em [dolls] all lined up, and he'd go one by one, burping, feeding, changing ... ." Nancy confided that she actually used to

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<sup>45</sup> As I observed among many parents, Nancy here is checking the potential stereotyping in her interpretations, which her experiences with her transgender child have increasingly illuminated for her.

<sup>46</sup> Linda did clarify, among other things, that her child consistently pretended to be "Valerie the Velociraptor" during role play, even though Linda tried to offer her conventionally masculine names and characters.



cling to this interest of Mickey's as a sign that he was not transgender: "That was his one like thing that I like held onto, *Oh he's a girl!*"<sup>47</sup> Similarly, Carolyn (mother of an agender child, 12)<sup>48</sup> described Vic's childhood as fairly stereotypically feminine, including playing dolls and dress-up with their little sister and liking "cute" things, such as Hello Kitty and My Little Pony.<sup>49</sup> As Carolyn explained to me, "I would buy dresses for them and there was never, *I'm not wearing that, I hate dresses*, there was never that." At one point she paused to say, "He wasn't overt at all, and I know that a lot of times ... kids who were transgender started when they were really young and it was so obvious, but then I found out after doing research that that was not always the case."

Evidently, while there was indeed a preponderance of children's preferences for the other sex's stereotypical toys, clothes, and play interests, not every case could be accurately described as such. This is one area where "traditional" gender-neutral or feminist principles (e.g. Bem 1983, 1998), as they are conventionally conceived and applied to cisgender children, could well inform and merge with trans-aware parenting practices: a child's interest in the toys and activities that are stereotypical of their assigned birth sex should be irrelevant

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<sup>47</sup> Nancy also stated, however, that whenever Mickey engaged with baby dolls, he identified as the "Dad," and that he had explicitly stated he did not want to have (birth) his own babies as a grown parent, he would be the "Dad."

<sup>48</sup> Carolyn and her child, Vic (assigned female at birth) explored several identity labels and understandings before Vic identified as "agender" (feeling neither female nor male), including at first gay/lesbian, then transgender, then androgynous (which means "both" for Vic), and finally as agender ("neither"). As one of the older children in the sample, as far as when the transition started (11 years old), it was apparent that Vic did much of their own learning, research and "coming out," versus the younger cases where parents observe, research, and apply an identification themselves. Nevertheless, Vic's gender/identity exploration was highly facilitated and encouraged by Carolyn through PFLAG meetings, LGBT youth groups, counseling and therapy, and getting Vic their own computer.

<sup>49</sup> "Bronies," incidentally, or adult (gender-normative) men who like *My Little Pony*, offer an interesting example of how items coded one way can be coded another in different contexts (see Hautakangas 2015 for how Brony fan culture re-negotiates traditional masculine/feminine stereotypes and gender identities). At the same time, the attention afforded this group of men in popular media demonstrates that *Pony* is still widely considered quintessentially feminine.

to honoring the (trans)gender identity and sex category they claim, just as proverbial dolls and trucks are made available to (cisgender) boys and girls, respectively, without scrutinizing or challenging their (cis)gender status. This perspective is no doubt intimated in the “outlier” parents’ observations above.

***“[He] was able to just express it verbally and we started to listen”: Verbal Commentary and Self-identifications***

More significant in parents’ stories than certain toys, clothing preferences, or modes of play were poignant comments that their children had made over the years. Throughout our interviews, parents recalled numerous moments during which their child verbalized a cross-gender sense of self or identification, or at least challenged the gender identity that had been imposed on them at birth (such as asking parents not to correct others in public when they read them as the other sex). Such verbal remarks from children largely precipitated parents’ considerations of “something more serious” and, ultimately, their decisions to facilitate a social transition. Indeed, a child’s repeated articulations about having a cross-gender identity (e.g. “I’m your *son*, not your daughter!”, “Say ‘she,’ not ‘he’”, “I’m girl with a penis”) are considered a defining marker of transgender children by the professionals, parents, and advocates engaged in childhood gender variance. Martsy (mother of a transgender girl, 5), for example, recalled several conversations with Cindy that challenged a “boy” identification: “I think the very, very first time that she said anything along those lines, she made a dandelion wish [4 years old]. You know, like when you blow the dandelion and you make a wish? And she’s like, ‘Do you want to know what I wished for? ... I wish that I could be a girl.’” Martsy wrote in her diary that “After this [Cindy] began telling me that (s)he was a girl on the inside

and a boy on the outside,”<sup>50</sup> and then later, “I would say almost daily this week [Cindy] has brought up on ‘her’ own something along the lines of, ‘I am a girl on the inside—I wish I were a girl—I feel like a girl.’”

Similarly, Wendy (mother of a transgender girl, 6) noted that “all of a sudden at the age of 3 and a half, Hazel just started saying ‘I’m a girl, I’m a girl inside and out, I’m a girl forever’ ... She came up with the terminology, and I swear I almost fell over.” Wendy also recalled several illuminating conversations that surfaced during car rides, which Hazel initiated seemingly out of the blue:

[O]ne day we’re in the car ... and she said, “Mommy, listen to me, rainbows are different, snowflakes are different, cars are different, and I’m different, *I am a girl*.” And that was almost one of the last straws for me ... . She also that same week—this was the week before we transitioned—she also that same week said, “Mommy, I feel dead in boy clothes,” so after that we never made her have boy clothes on.

By this point, Wendy had started consulting a well-known therapist and “gender specialist,” who has worked with many gender-variant children and has also written a book on the matter. From her, Wendy learned about three major “signs” or indicators to “look for,” which the therapist uses to help “differentiate” a gender-variant child from a “truly transgendered child.” Wendy advised that between 3-4 years old, Hazel demonstrated all of them quite vocally:

The first thing is, the verb “*I am*,” not “*I wanna be*,” and that was the verb that Hazel was using every day with that “*I am a girl, I am a girl inside and out ... I am your big sister*” ... “*I am*” is definitely one of the things that she looks for. The other thing that she looks for ... is discomfort with your body parts ... and my God right after she told me that ... my Hazel who is absolutely petrified of needles and going to the doctor ... she’s like, “Mommy can’t the doctor just give me a shot and get rid of my boy peepee? Can I just have a girl pee pee?” ... And then

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<sup>50</sup> Martsy recalled and wrote about these moments in her diary in August 2012, but noted that they actually occurred some time between October 2011 and August 2012.

the last part ... was asking to be called the name of the opposite gender, that was the last thing that she did ... and it was like, *Oh my God*, I remember texting my two sisters and I said, “I feel sick to my stomach, I think I’m gonna throw up,” because that was the last thing that we were like waiting for to see if it would happen, and she came up to us one night in the living room and said, “Can you call me Hazel, because that’s a girl’s name, and I just don’t understand why ... would you name me Nate when that’s a boy’s name?”

Wendy clarified that the therapist does not necessarily require any or all of these markers to make a firm identification either way (especially when considering “I am” versus “I wanna be” statements, which I probed during our conversation). However, these different ways of knowing, as specifically articulated by Hazel, without any prompting from her parents, were what solidified a transgender identification for them, including an attendant formal social transition.

Claire (mother of a transgender girl, 6) mentioned one memorable moment at bedtime when Amos said to her, ““When you say I’m beautiful, say ‘*she*’ is beautiful.”” Rick, Claire’s husband, referred to this as a “crucible moment” in their developing consciousness about Amos’s female self-identification: “[T]hen sort of wheels started turning for us.” As Claire said, “Well I just felt like ... you don’t screw with someone’s self-definition of beauty, and I just felt like I am not allowed to mess with that, that just felt sacred and holy and absolute ... .” Nancy (mother of a transgender boy, 8) also recalled that during Mickey’s toddler years (2-3 years old), he would correct her pronouns when she referred to him:

[W]hen he was like 2 and half or 3, and I would be talking about him, and I would say, “Oh well, you know, she likes apricots” or whatever the hell I was talking about, he would like—she would, whatever—would correct me and say, *he, him*, like [he] knew the pronouns were incorrect ... I was busy talking to another adult, and I didn’t really pay attention, but it wasn’t real aggressive but it was just like *him, he ...* .

Nancy reported that these corrections tapered off into childhood, which she attributes to all of the adults in Mickey’s life constantly using “girl” or “she” instead. In one final memorable example, Grace (mother of a transgender boy, 7) described a profoundly transformative moment in their family, when she was watching a Katie Couric special that featured a transgender teenager (by this point, Grace had already started researching and encountering transgender possibilities via the internet and media). Nick had wandered into the room to watch it, and Grace purposefully did not say anything to see how he would respond:

I just kind of watched him watch it ... he had just turned 7 ... he said, “You mean I’m not stuck this way?” ... I said, “Not if you don’t want to be,” and ... he ran over then and grabbed a post-it note and wrote on it [and it] said, “How do I get new private parts?” ... and then he went over and wrote me another note and brought it to me and [it] said, “Mommy, I am a boy,” (*starts to cry*) and I just told him, I said, “I know honey ... Mommy and Daddy have known for a long time.”

Despite the plethora of poignant anecdotal dialogues in parents’ stories, not all parents recall adamant cross-gender expressions or identifications from their children, and these parents had accounts for why that might be. Linda (mother of a transgender girl, 6) actually attributed Violet’s lack of assertiveness about being identified as a “girl” to the French side of family (Violet’s Dad is French)—as she said, “they will be polite until it makes you uncomfortable”—but also to the fact that no one was willing to recognize Violet as a girl. As Linda said, “[S]he was learning to squash that part of herself ... a very, very fundamental aspect of one’s self-expression as a human being [was] getting slowly choked to death by the environment ... .”. Similarly, Karen (mother of a transgender boy, 10) said that “Izzy was not like saying, *I am a boy!* all the time, he was just saying it more through his choices and actions, and I was attributing most of the raging behavior to adoption ... so it’s not like my son was demanding to be changed [transitioned] at that age [5 or 6].” Karen felt

that Izzy's adopted status was what made him feel less secure in explicitly demanding a cross-gender identification from her, as she feels he has anxiety about his place in wider family relations. Marie (mother of a transgender boy, 7) did not recall specific identificatory demands within the household either, only out in public: "I think he believed me when I told him that he was a girl, I don't think he wanted to challenge me on that ... he has never insisted to me that he is a boy, but he's insisted that I identify him as a boy to others." In these instances, direct verbal commentary from children—to the effect of, "*I am a boy/girl*," "*Call me he/she*"—is lacking in the overall profile that parents come to understand as transgender. Nevertheless, the discursive moments described above, and parents' dialogue with their children regarding their gendered sense of self—or their desires to live as the "other" sex category—proved consequential in their understandings of their children's behaviors.

***"Sadie does not hate her body ... she just desires to have the body of a female": The "Dysphoria" about "Body Dysphoria"***

Children's commentary about their bodies, specifically, were also significant in parents' stories and identifications of their children, which aligns with the DSM's criteria of the "Gender Identity Disorder" (now "Gender Dysphoria") diagnosis: "A strong dislike of one's sexual anatomy," and/or "a strong desire for the primary (e.g. penis, vagina) or secondary (e.g. menstruation) sex characteristics of the other gender."<sup>51</sup> Aside from its

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<sup>51</sup> A child's relationship to their own sexual anatomy is highly sensitive, private, and personal terrain (as is anyone's) to which I should not necessarily be privy (indeed, regarding persons other than the researcher, parents often voiced the politic that "what their child has between their legs is nobody's business"). However, I asked parents about this information ("Did your child ever say anything to you about their body" or "Do you think your child has any body dysphoria?") because I wanted to catalogue as clearly as possible the kinds of interactions and information parents used to make decisions about pursuing hormonal interventions for their children, or not, as well as how "body dysphoria" fit more broadly into their identifications of their children as transgender. Because of the significance of the desire for "sex change" in transgender identity and experience, I felt beholden to gather "evidence" about this aspect of parents' experiences with their children as much as I did any other.

significance in identifying a child as transgender, children’s comments about their bodies also informed parents’ decisions to pursue hormone blockers and/or cross-hormone therapy later in their lives, once it became developmentally appropriate.<sup>52</sup> Nevertheless, I encountered a range of nuance and ambiguity regarding these aspects of children’s comments and questions, both within and across cases, that did not really resonate with proverbial “wrong body” or “trapped-in-the-wrong-body” discourses—which numerous gender scholars have examined and interrogated relative to trans adults (Bornstein 1994; Roen 2002; Serano 2007; Spade 2006; Stone 1993; cf. Bettcher 2014). To ascribe a definitive “yes” or “no” regarding any child’s expressed (dis)comfort with their sexual anatomies was difficult, considering the various ways one might define, measure, interpret or code for “body dysphoria,”<sup>53</sup> either positively (present) or negatively (absent) in parents’ reports. And of course, this only refers to the parents’ assessments of their children’s sentiments, however much they are revealed to them and in whichever ways parents interpret those interactions. Yet, it is precisely the parents’ assessments and perceptions of these matters that facilitate transitional processes, perhaps more so regarding the body than anything else—the children

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<sup>52</sup> A cementing practice among clinicians of gender-variant children is the administration of hormone blockers or puberty suppressants, once parents and children decide that they want this. Puberty suppressants have been used for a long time in cases of precocious puberty, but starting in the late 1990s Dutch researchers started exploring their application in childhood gender transitions. At a certain stage in a child’s pubertal development, namely Tanner Stages 2-3, puberty suppressants are given to block the onset of the child’s natal puberty. Eventually, if the child wants them, blockers are phased out with cross-sex hormones to further actualize a physical transition. Even for children who do not firmly articulate a cross-gender identity, but sometimes feel more gender-fluid or non-binary, puberty blockers are recommended so as to “buy some time,” lest physical sexual characteristics develop that they may not want later in life. Through ongoing conversations about “medicines” and/or “shots at the doctor’s,” as age-appropriate as possible, children learn that such treatments will help them “look more like a girl/boy” and will evade the puberty that would make them look like otherwise, such as stopping breast buds from growing. While conclusive, long-term side effects of such hormonal treatments on the brain or the body (i.e. blockers followed by cross-sex hormones) are still considered an unknown, the latest data available indicate no real disruptions to standard maturation processes (Delemarrevan de Waal and Cohen-Kettenis 2006; Olson, Forbes, and Belzer 2011).

<sup>53</sup> I use “body dysphoria” to refer to a child’s (perceived) dislike of or distress over their given sexual anatomy and/or their desire to have anatomical characteristics of the “other” sex.

aren't the ones consulting pediatric endocrinologists. Indeed, this topic well captures the children-driven, but actively parent-facilitated, nature of the trans-parenting paradigm.

Nicole's interview, for example, included moments that could be coded as alternatively negative (absent) and positive (present) regarding body dysphoria, even while her daughter Sadie (transgender girl, 12) was actively and eagerly pursuing hormone treatments. In several instances, Nicole referred to Sadie's dislike of her genital anatomy as a young child; indeed, this was cited as one of the major prompts for Nicole seeking professional help from her pediatrician: "[The doctor] said this is not normal behavior, wanting to remove her penis at that age [3 years old] is just not normal ... she said take her to a specialist ... ." However, at other moments, Nicole's description of Sadie's relationship to body change was more complex:

Sadie does not hate her body, she's never hated her body, she just desires to have the body of a female, especially with the boobs, like with the bottom part we were always questioning her on that, 'cause she was like, "I dunno if I want surgery, 'cause it'll hurt" ... When she was little she was sorta like ... "It's not so bad," but now that's she's older, she knows that she really wants to be a full woman and she has to get rid of the penis to have that, but she's not like, *Ew, I hate this thing, get it off of me ...* .

Tracy and Kat's child Dave (cisgender male, 8), who lives and identifies as male as of our second interview, nevertheless requested a "vulva" for his 3<sup>rd</sup> birthday: "Well he didn't say he didn't want a penis, he just said he wanted a 'vulva' (*laughs*)." Conversely, Becca (mother of a transgender girl, 9) claimed she observed no body dysphoria in her child as of our first interview, and actually explicitly cited the absence of this for why she identified her child as "just" gender-variant early on, not "truly transgender." As of our follow-up interview, however, her child identified full-time as female and would likely be pursuing



hormone treatment (of which the child was explicitly aware). In these instances, body dysphoria was variable within and across cases, for both transgender and cisgender children.

To be sure, according to parents' reports, almost all transgender children (and a few non-transgender children) indicated to their parents at some point that they had a desire for the bodily characteristics of the other sex or for avoiding those of their assigned sex. But this did not refer to every index of sexual anatomy or to extreme distress and discomfort. Some children did indeed express significant dissatisfaction about their sexual anatomies, or about the biological puberty they would experience in the future (e.g. developing breasts and menstruating; growing facial hair). Several transgender girls (assigned male), for example, once insinuated that they had desires to "cut" or remove their genitalia (this surfaced in approximately 4 cases, 1 of which is not transgender). For example:

Janice: She's aware that there are people that have operations to alter their bodies to match their head ... I think I said "surgery" ... .

E: How do those conversations come about?

Janice: [I]t came about when she made a gesture at some point about chopping her penis off ... to my recollection it was during one of our dinnertime conversations, as delightful as that sounds (*laughs*) ... she said something to the effect of, "I want this thing off" ... it wasn't those exact words, and I said, "Well, some people choose to have surgery [on] those body parts when they're grown-ups if that doesn't match who they feel like they are in their head anymore," and she very much wanted to know when you can have that surgery and what age she had to be ... .

Such declarations did surface, then, but these did not present to parents as persistent or ongoing. There were far more examples of body dysphoria that would be characterized as less "severe" or "extreme" by parents, but nevertheless signaled to them that their child was interested in body change. As Julie said of Macy (transgender girl, 5): "[S]he would ask me questions, you know, her whole life about why she has a penis, and ... when I allowed her to start wearing dresses, she said, 'Is my penis gonna go away? Did *you* have a penis? Why

don't [you] have one?" Martsy (mother of a transgender girl, 5) recorded instances in her diary that were revealing to her of Cindy's desires for a body "like other girls": "Cindy had told me that Titi [stuffed toy cat] had pushed her pee pee in ... . Mama then asked if Cindy wished that her pee pee was pushed in all the way like other girls. Cindy said yes." Furthermore, many young transgender girls expressed wanting to have breasts to their parents, and played with bras as young children, but did not necessarily discuss other aspects of their anatomies. Skylar (gender-variant male, 8) also engaged in this activity: "I've asked him if he wants boobs and he says no, though he does run around the house, stuffing my bras wearing them, so I think he's still figuring that out, but I think where he's happy is just this non-gendered stage ... ." This case is indicative of a parent who is staying attuned to body change possibilities even when her child does not necessarily identify in a cross-gender capacity and seems otherwise comfortable with their anatomy.

Regarding transgender boys (children assigned female), the explicit desire for "boy parts" surfaced in at least 5 of the 14 cases. As Grace said of Nick (transgender boy, 8): "Oh, absolutely, that was his first question, was, how do I get boy parts? That was before he even told me he was a boy, [he was already asking] how do we change his private parts ... ." Similarly, Karen mentioned that Izzy (transgender boy, 10) "for as long as [she] can remember has wanted a penis." When I asked Karen to give me specific examples of how Izzy expressed that to her, she answered matter-of-factly, "Uh, how 'bout, *I want a penis.*"

In contrast, Marie said that Milo (transgender boy, 7) never explicitly said that he "wants a penis," but she did recall Milo stuffing his underwear at 3 years old. Nor did he try to pee standing up (which Marie actually attributed to the fact that his father does not do this either); the desire to "pee standing up," however, is considered a typical characteristic of

transgender boys. Overall, Marie said that the real “game-changer” for her was Milo’s apparent aversion to having babies (i.e. getting pregnant):

[B]ut really the game changer for me was when ... we were talking about babies and bellies and how he did not want to have a baby grow in his belly and he did not want to have boobies, that was a pretty big game changer for me too ... I would ask him every once in a while you know ... “This is what a boy looks like and this is what a girl looks like,” I got a book from the library and, “Mommies have the ability to have babies in their belly ... do you think you would ever be interested in having babies in your belly?” And he was like “*No way!*” ... .

This surfaced frequently among parents as an indicator of their child’s transgender status—a child’s stated desire, or aversion, to the notion of having/growing their own “babies in their bellies” when they are older (i.e. children assigned male express an interest in this, while children assigned female children do not).<sup>54</sup>

Additionally, parents perceived these body issues with varying levels of intensity, immediacy, or urgency, and were quite candid about the influence of life course developments on a child’s relationship to their body (and to body modification). See, for example, Tory’s layered discussion of her son’s feelings about his body (transgender boy, 7)<sup>55</sup>:

T: Connor’ll say, “I’m part girl because my body is female, but I’m a boy,” that’s how Connor describes himself ... and you know what, he doesn’t seem to have an aversion to his body, he would really like a penis, but he doesn’t, he’s not—you know how you read about those kids that are oh, when they were small they wanted to cut off their penis or whatever? Connor hasn’t expressed any of that, Connor has said that she doesn’t want boobs and can we cut them off, so I guess that’s the same thing, but with having like a preadolescent body, Connor doesn’t have an aversion to it.

E: Okay, sorry, what did Connor say about boobs?

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<sup>54</sup> The influence of hormone treatments on fertility and reproductive capacity later in life marks a key part of the conversations parents and doctors must have with children when deciding on these treatments.

<sup>55</sup> At the time of our interview, Tory was still using both male and female pronouns to refer to Connor (who prefers male pronouns). When we touched based in 2015, however, I noticed that Tory was using male pronouns exclusively in our conversation.

T: She says, um, I said, “How do you think you’d feel when you’re older if you got boobs?” and the first thing she said [was], “Well, I don’t know, I’m still pretty small, I hadn’t really thought about it, but I think I, I think I probably wanna cut them off.” (*laughs*)

E: And how did you respond?

S: I laughed, 'cause it was kinda funny the way she was like, “I don’t know, I’m still pretty little” ... .

Similarly, in our follow-up interview, Becca (mother of a transgender girl, 9) said that only “recently” has her child started inquiring explicitly about body change options—particularly after her experience at summer camp, where other transgender children were discussing body modification—whereas before, “the body was not even a piece of the picture”:

I think ... in the context of, like, how do you see yourself, the body piece of it doesn’t really come into it, as far as I can tell ... the body is a secondary piece of it, and it doesn’t ... it’s more of like, you know, I think different kids have different, uh, feelings about this, but I think some kids are like, really, um ... dysphoric [...] And, and that’s not the case for Bo. Um, however, now she is starting to recognize, she’s starting to put the two things together, I think, and now she’s starting to see that, y’know, body features and identity, now she’s starting to put those together, and I can see that. They’re still not totally, y’know, um, married, for lack of a better word, but ... I’m starting to see that. Whereas before, it was, the body was not even a piece of the picture. [...] And that was the case, like I said, before camp [a summer camp for transgender kids]. But, y’know, recently ... she has talked about, y’know, wanting to go on blockers, and wanting to have The Surgery, capital T, capital S, and, y’know, wanting to have boobs, and we’re like, *Wow! Okay. So let’s talk about that when the time comes.*

In this example, Becca is attributing her child’s relatively new interests in body change, without necessarily any current body-related distress, to life course developments, as she grows older with the rest of her peers/cohort and becomes more aware of the kinds of anatomies that are attributed to boys and girls. Becca also attributes Bo’s awareness of specific medical interventions for body change (i.e. hormone blockers, “surgery”) to peer socialization and education occurring among other transgender children, whom Bo has befriended through conferences and summer camp. In these ways, Bo’s growing desires for

body change are understood more in terms of her age and social context, versus as a result of feeling “born into the wrong body.”

Lastly, according to some parents, there were children who did not seem to exhibit any discomfort or distress about their given anatomies; this characterizes approximately 3-5 cases. Bruce (father of a transgender girl, 4), for example, felt that his child was comfortable with her given anatomy, and wondered if this is because her body did not prevent her from being a girl, effectively, as of 4 years old. Bruce’s “cheap theory,” as he calls it below, recalls fraught debates among academics and activists alike regarding one’s “need” or desire to change the body if gender was not so linked to anatomical sex (e.g. Lorber 1994: 40; Serano 2007: 26-7, 345-62):

Yeah, ok, this is actually fascinating ... 'cause I don't often think about that [child's comments on her body] until I talk to other parents: uh, my child, she doesn't really seem to be dysphoric, and I realize that that's the term that makes people feel like, you know, *Then we are certain, we're trans!* or something like that, but I think my child is not dysphoric because ... we didn't withhold the things that she wanted very long and very stridently, we didn't keep her from expressing her gender very long or very hard or very directly ... so this is a cheap theory, um, but I'm thinking maybe she's not showing signs of hating her penis because we haven't taught her that that's the thing that's keeping her from having a dress ... I dunno, I talk to parents who have very young kids who are hitting their penises, who are like wanting to cut it off, and I'm shocked ... .

With similar caution, Kari (mother of a transgender girl, 5) echoed Bruce's musings above, wondering about the occurrence or “need” for body change if society could “expand” its rules for bodies and gender. Kari expressed interest in the possibility of her daughter staying “a girl with a penis” in the long-term, without pursuing surgical options, which she feels her child is comfortable with at this stage in her development:

I think that you should be allowed to be born a male and transition to a female and have male parts and still be a female ... this is not a blanket statement, this is particular for Emma right now, she does not seem uncomfortable having a penis, and I hope to continue that with her, because she *wants* to have a vagina, she's

like, “Well, when I grow up, am I gonna have a vagina?” and I said, “I dunno ... you might” ... but she doesn’t like, you know, I know of kids her age that are cutting at themselves and they hate their penis ... but I also feel that part of the reason that, you know, transgender people are uncomfortable is because in our society, you want to fit in, you know, it’s her mentality, and it’s very understandable to want to fit in, and so it’s not a judgment, but I think that if we could expand, if the rest of us could expand our minds more, then it wouldn’t be necessary ... but you know I can’t say that for everybody else ... .

Evidently, some parents’ encounters with an absence of body dysphoria prompted them to think concertedly about alternative gendered embodiments for their children. These are strong examples of how parents see that transgender experiences can resist the social obsession with the binary; transgender identity and embodiment can be a “yes/and” situation, rather than “either/or.”

In sum, body dysphoria and/or the desire for body change permeated the interview data, but it manifested in a range of different ways, some more fluid, nuanced and complex than others, which were not quite comparable to notions of “feeling trapped in the wrong body,” at least not in the here and now of early childhood and pre-pubescence. A child’s relationship to their sexual anatomy, of course, and to the anatomy of the other sex, is an important piece of “evidence” that parents used in coming to transgender and gender-variant—and in some cases cisgender—identifications of their children. I marshal the examples above to demonstrate the wide array of ways that body dysphoria was or was not present in parents’ understandings of their children. Given traditional narratives and assumptions about trans identity and “sex change,” and about gender and the body more broadly, this variation across cases is worth capturing.<sup>56</sup>

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<sup>56</sup> Of course, much of parents’ efforts to understand and explain the embodied issues of their children’s gender variance confront the pressures of prevailing narrative constructions for transgender experience, especially “wrong body” narratives. I return concertedly to this issue in Chapter 6.

### ***The Tomboy Factor: From “Tomboy” to “Trans Boy”***

Given the cultural latitude that is afforded little girls’ “boyish” expressions and interests—often to the point of praise, in a way that is largely unavailable to feminine boys (Thorne 1993: 111-34)—parents’ reckonings with the “tomboy” category was the subject of much probing on my part in the trans boy cases. Indeed, parents’ reports of their early reactions to their presumably “female” children well attest to the seeming freedom and ease that is applied to a gender-nonconforming “girls” behaviors, and posed a stark contrast to the cases of transgender girls (children assigned male). Imagining the following parents’ commentary in the case of a male child who wants to wear dresses to school is difficult: “I started to notice that he was getting very particular in the shoes that he would wear, the underwear that he would wear, the type of clothes he was comfortable in, *and I allowed him the freedom of his choice, I did not make him wear anything that he was not comfortable in*” (Marie, mother of a transgender boy, 7; *emph. mine*). And later, “I don’t know if I could say that I was open about this ... I was not aware of um even the terminology of being ‘transgender’ at the time, I was just open to letting my child explore ... whatever his interests were ...” (Marie). Similar observations can be made of Nancy’s morning routines with Mickey: “[S]he was very clued into what she would and would not wear, and so I was, you know, trying to get ready for work and it wasn’t a big deal to me ... if that’s gonna, you know, avoid any problems in the morning—you wanna wear the basketball shorts and the brown T-shirt? Fine.” As Trish (mother of a transgender boy, 11) said of permitting her child boy-like clothes, toys, and haircuts through 10 years old, “We just cruised.”<sup>57</sup> One family’s

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<sup>57</sup> This case also includes health/behavioral health factors that the family feels influenced their readings of his behaviors, including fetal alcohol syndrome, which has delayed his psycho-social development. For these reasons, Trish feels that his seeming tomboy preferences—and now transgender status—are just one more part of him that is “outside the [normative childhood] box.” The family feels that since his social transition, his

experiences truly exposed the differential treatment that this “tomboy factor” (as I call it) yields for male and female children, as they had both a trans girl and a trans boy: these parents were concerned about their “male” child’s behaviors as of 2 years old, but it wasn’t before 8 years old that they became cognizant of their “female” child’s gender variance.<sup>58</sup> As Lacy reflected on the contrasting situations, “Yeah ... we just didn’t really focus on clothes with her because whether she wore sweats or like a sun dress, it didn’t matter for a girl; it mattered for Avery to go out in a dress, you know, because it’s not acceptable for, in our society, for a boy to wear a dress, so I guess it just wasn’t noticeable for Jared.” In these ways, a child assigned female can evade the stereotypical markers of their sex category (skirts, dresses, sparkles, pink, dolls) in early childhood, in a way that children assigned male simply cannot. Few parents “just cruise” through their “sons’” preferences for skirts, dresses, and princess paraphernalia (Kane 2006, 2009).

Not surprisingly, then, parents of children assigned female often first interpreted their child’s gender-variant preferences as the stuff of tomboys if remarkable at all. As Tory (mother of a transgender boy, 7) said, “Truthfully, I didn’t notice because I was a complete tomboy. Connor never came and said to me ‘I’m a boy’ or anything, I just thought Connor was actually typically female, just really, really tomboyish.” As such, the “tomboy” question looms large: how *did* these parents eventually move from “tomboy” to “trans boy” understandings of their children, often by 7 years old, when the former offers a well-established interpretive frame for masculine little girls? In answering that question, parents’

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maturity and psycho-social development has advanced exponentially. As such, Trish feels that in some ways his early development may have been hampered by not being able to grow into his true gendered self.

<sup>58</sup> Like several cases in the sample, this child’s profile included other salient behavioral factors, namely an Autism-spectrum disorder, which influenced the parents’ interpretations of his behaviors (they attributed his preference for more gender-neutral clothes as a hyper-sensitivity to certain fabrics and textures, which could still be relevant).



narratives did testify to the *limits* they encountered with the tomboy category, as their children's behaviors seemed to progress or intensify over the years, and it felt like "something more" or "something different." As Meredith (mother of a transgender boy, 7) said:

You know, it crossed my mind a couple of times [transgender], sure, but I always thought that he was too young, he was too young to have it, so that this just might be, you know—I was a tomboy, my mom was a tomboy, my grandma was a tomboy, so I kind of justified everything there, although, I *knew* something was different, I actually didn't think he was a tomboy, I thought there was something different about him than me being a tomboy, but I couldn't put my finger on it.

Nancy (mother of a transgender boy, 8) also described how she started seeing her child as something different from the typical tomboy:

She played sports, she gravitated towards like the traditional ... there's like a progression boys do, like pirates, dinosaurs, zombies, zip cars, and she did all of that, we never did Snow White or any of that stuff, it always Spiderman, Batman, the freakin' Hulk ... from head to toe, the shoes, the Big Wheels ... I dunno, I didn't know anyone whose kid was that extreme ... I mean people would say like *Oh, it's just a phase, she'll outgrow it, my daughter was a tomboy, now she's the prom queen*, you know, and I thought, *Yeah, but was your daughter wearin' boxers, you know?* Like my kid was takin' it to [another level]. [...] I see [tomboyish] girls like that ... they'll go head to toe boys, but then they'll have the pink sketchers, or they'll have their hair braided, or they'll have pierced ears, or they'll have one thing ... that is not completely ["boy"], but Danny was just like camouflage wallet, and just the whole nine [yards] ... .

In fact, several mothers took conscious efforts to inform their child that their preferences were just as fine for girls as they were for boys, as if to disabuse them of any potential confusion about sex category, particularly when the children starting intimating or voicing a male identification—but to no avail. See Nancy's tactics with Mickey below:

I tried to show her strong female models, like maybe she doesn't realize that girls can skate board, and girls can play guitar, and so we took her to like a Sparks game [women's basketball team], and every time I saw ... a girl playing rock 'n

roll, I'd be like, *Look at that girl playing guitar, look at that girl, you know, skateboarding*, thinking, you know, girls can do anything a boy can do ... and she was completely not interested ... I think she saw through it ... .

Karen (mother of a transgender boy, 10) described practicing a similar “mantra” with Izzy, especially as she grew “fearful” of what his masculinity could mean:

I never used the word [“tomboy”], I think my inclination is to avoid labels, but I would always say, it's okay, girls can like, you know, girls can like trains, it's no big deal, there's nothing about trains that are only for boys, you know, I would kinda frame it like that, I ... just tried to get him to expand ... the world of view ... his first [job] preference that he ever expressed was to be a truck driver, and I would be like, okay, girls can drive trucks ... . [...] I was becoming very fearful at age 5 and 6 and 7 as this progressed, but I wasn't expressing any of that to Izzy, I was just continuing with the mantra of ... you can be whoever you want to be and talking about like the continuum from girly girl to macho man ... because I really, really wanted Izzy to settle for a very manly girl ... I wasn't even beginning to think about sexuality ... [but] that's what I was kinda trying to say to Izzy ... you don't have to be out on that extreme end of girliness.

Ultimately, several key factors surfaced in parents' explanations about departing from a tomboy conceptualization of their child, which evidently did not quite fit viscerally for them, and considering something “deeper” or “more”: namely, their child's repeated self-identifications as a male/boy, or desire to be one (e.g. “I wanna be a boy”), as well as their commentary about their bodies (as described above). Karen, for example, felt that her “mantra” was losing relevance to Izzy, who persistently identified with male identity and embodiment:

[A] tomboy doesn't usually want a penis, and Izzy for as long as I can remember has wanted a penis ... . Um, he's tried peeing standing up, which, I think, a tomboy or any girl who's experimenting does for a while, but [he did] some ongoing peeing standing up, you know, trying to pee standing up is definitely one, but I think a tomboy says I like what I like, where, um, this kid was, *I really, really wanna be a boy, I wish I was a boy*, and it's not, *I wish I was a boy right now because I see boys doing really cool things*, it was over time, never ever, ever wanting to be a girl, this was, *I wish I was a boy* ... a tomboy ... doesn't say things

to me like, "... I don't want to ever have breasts ... I don't want to grow into a woman, I want to grow into a man." I'm kinda like, okay, this is not tomboy.

Grace (mother of a transgender boy, 7) said that while she was still fairly ignorant about transgender early on in Nick's development, she was already thinking about something relating to gender variance when she first approached a psychologist at 4 years old: "You know, I remember saying, 'I don't know if she's just a cross dresser,' so you know, that's something that we had already thought about at an earlier age." When I asked her to clarify the specific behaviors Nick had exhibited that caused her to think about something "more" than just tomboy, Nick's commentary about his body specifically, as of 2-3 years old, proved a significant influence:

I mean he's been telling us God made a mistake, crying at night, praying for a penis, telling us, you know, at an early age that he was a boy ... I mean he was like 2 and a half when he started telling us that God made a mistake, and we'd be in the bathtub bathing him and he'd ask us why he didn't have a penis, and of course you know, I'm thinking, *Well that's a strange question*, 'cause I'm bathing him next to his girly-girl sister who's never talked about wanting a penis (*laughs*), and he would say things like, "God made a mistake, why didn't God give me a penis?"<sup>59</sup>

Grace actually reported that in light of these comments, it was a running joke between she and her husband that Nick's college fund would go towards "some day buy[ing] her a penis," even before they identified him as transgender: "We didn't share that with anyone but we just kind of light-heartedly, you know, that was always in our minds ... her college fund would go towards buying her, you know, whatever reconstruction surgery she wanted ... ."

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<sup>59</sup> Grace, Nick's mother, did identify as Christian, but I encountered children's invocations to "God" in their early commentary (like Nick's here) in a preponderance of parents' accounts, including among those who do not identify as particularly religious or observant in any capacity.

Additionally, Monica (mother of a transgender boy, 5) said that perceiving her child's "shame" and secrecy about dressing up in his father's clothes after school was a major awakening for her (he had asked her not to tell anyone): "And then the shame, like when the shame started, that's when I started to realize that, like, this was much, much deeper." In terms of their child's self-identification, Dan and Monica cited a key incident regarding Hayden's reaction to family address labels, wherein he was represented as a girl with long hair in the family's cartoon depiction of itself—and he made clear that female is not how he understood himself: "[He said], 'You made me look like a girl!' ... I'm like, 'You are a girl!' I didn't know what to say, and so, from that point, I could just see the pain, the tears flying, I was like *whoa*, and he was devastated, and that night in bed ... he said, 'When the family dies, I'm gonna cut my hair so I can be a boy.'" Dan, who was originally much more resistant than Monica to seeing his child's behaviors as anything other than tomboy, said that this was the moment that pushed him to consider something "more" going on:

[These were] very heavy comments for a five year old to make ... in my mind ... that's not a typical thought process for a five year old, to kind of in a way, not wishing we were dead, but kind of looking forward to that moment ... so that [he] could be who he wanted to be. And for ... me, that was the *Ok, time out [moment], yes, there is something going on, we need to explore this a little bit more* ... thankfully Hayden was able to just express it verbally and we started to listen.

One last aspect, which surfaced across interviews, was parents' observations that their child enjoyed being perceived in public as the other sex (in these instances, as male). For many parents, seeing their child's comfort as the other sex was significant in their developing understandings of their child's gender. I would argue that parents' permitting these attributions to occur without interference—what I have called "playing along" elsewhere (Rahilly 2015)—helps to realize transgender identities and transitions later for these children.

In these moments, parents witness the possibilities of their child's being the other sex. This is well exposed in Marie's (mother of a transgender boy, 7) accounts:

[T]here was a year in there that my child was *insisting* on telling strangers that he was a boy and that I was not allowed to identify him as my daughter, and he would get really angry with me if I said his name ... so I would say between the age of 5 and 6, I did not introduce him as my daughter anymore ... and I did not correct people when they identified him as a boy ... I just let it go, so um that eventually lead to the progression of [changing his name].

Through all of these observations and encounters, these parents start to think of their “boyish” child as something other than “just a tomboy.” I do not marshal these explanations to suggest definitive, objective distinctions between tomboys and trans boys. Indeed, it is possible to imagine some or all of the above factors occurring for a child who lives as a tomboy in another family or context, well past the ages of transition for the children represented above.<sup>60</sup> But these particular parents cited these behaviors—including repeated male self-identification and desires for body change—as the catalysts that pushed them to consider their child's gender as something “deeper” than tomboy. The growing visibility of transgender children could well harbor implications for the circumscription of the tomboy space and childhood female masculinity, as other categories and understandings become relevant to young gender-atypical children.

### ***Finding the Label***

In the face of these ongoing behaviors, expressions, conversations, and overall experiences with their children, parents seek professional guidance and support. Some start with mental health therapists and counselors in their area, although many parents who sought

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<sup>60</sup> Imagine, for example, a masculine little “girl” who does ranch work with her family in the Midwest, whose parents, and especially her mother, might well understand and embrace her behaviors as something other than transgender (as opposed to, say, a child in uptown Manhattan).

a counselor (not to mention an endocrinologist, when the time came) advised that it took several trials and referrals before finding one that was familiar enough with childhood gender variance to assist. As Wendy (mother of a transgender girl, 6) said:

[T]he thing that discourages me most is on the education of the ... mental health professionals. It is outrageous, we go to [a big research hospital], it is like the cutting-edge teaching hospital, it's supposed to be like the most innovative, forward, progressive kind of hospital there is ... there was not one person in there that had any gender experience.

Several parents told me that their original pediatrician or counselor told them “not to worry,” that it was “just a phase,” and/or to attempt more gender-neutral options with the child (versus allowing full cross-gender expression, especially outside of the home).<sup>61</sup> The parents in my sample found this advice to be faulty, in light of their child’s persistent cross-gender preferences and self-expressions, and pursued other therapeutic options and/or agencies.

Based on associations within my own sample and the major metropolises represented therein, I sensed that there were 1-2 forerunning therapists who treated the bulk of an area’s families with affirmed transgender children. One of the therapists I spoke with provides children with a gender worksheet of sorts, where children fill in, “I was born with a BLANK body, I think I have the heart of a BLANK, I think I have the brain of a BLANK” (e.g. body of a boy, brain of a girl, heart of a girl). These therapists advocate for following the child’s lead and honoring the gender identities and expressions the children claim (e.g. Ehrensaft 2011, 2012; Lev 2004), which may include social transition. With transition, the children are acknowledged and recognized as the other sex category full-time, by their parents and by the other adults in their lives whom parents inform (principals, teachers, extended family,

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<sup>61</sup> Parents told me it was these kinds of experiences that helped motivate their participation in research like mine, so that future parents can avoid this kind of professional ignorance and misinformation. For example, Karen was first told by a professional that she might want to consider dressing and looking more feminine herself, as an instructive model for her child. At the end of our interview, Karen recalled that incident and asked if my research would help prevent parents from having to confront such professional scrutiny.

neighbors, old friends, etc.), and are newly enrolled in school as such. Social transition includes new pronouns and new names, if requested, and any remaining barriers on children's clothing and daily, public presentations are effectively relinquished. Grace (mother of a transgender boy, 7) recounted the kinds of illuminating conversations her child had with their therapist to these ends: "She asked, 'If you could be any age, what age would you be?' and he said, 'Zero' ... and I asked him, I said, 'Why did you pick zero?' ... and he goes, 'Because then I would have started out as a boy from the beginning.'"

It is worth noting that several mothers were frustrated with some of the counselors they had approached, because these professionals did not give them the definitive answer or "diagnosis" they were looking for (i.e. transgender or definitely not transgender), especially in the face of skeptical family members. Grace, for example, was very upset with their first counselor, who was still uncertain about Nick's gender variance as of 7 years old and recommended more "data collection" (the counselor was still entertaining homosexuality as a possible theory). Grace, however, felt that she had plenty of "data" since they first took Nick to see him at 4 years old, and ultimately pursued other options through her own therapist. Martsy and Meredith were also hoping for some kind of official designation, but were dismayed when the psychologist did not want to make any claims to that effect, citing the limited long-term research to date on transitioned transgender children. These moments were indicative to me that parents had already developed their own strong transgender assessments of their children via other research endeavors and were hoping for a definitive stamp of assurance from the "experts" who might be vested with the authority to give it.

On a related note, one parent advised me that she, along with a group of other parents, organized a medical training for doctors in their region, whom many parents find generally

resistant to endocrinological interventions or referrals because of how “new” and under-researched they consider the use of puberty suppressants for childhood gender variance. These parents recruited one of the leading specialists in the country to conduct this training, and have helped push for the formation one of the major medical clinics in the country.<sup>62</sup> In these ways, parents have taken a hand in educating the professionals or “gatekeepers” from whom they are seeking authorized treatment for their children.

Equally if not more important in their efforts are parents’ queries and research online, which lead them to a virtual community of other parents, advocates, and educators, as well as to “live” regional support groups and conferences (therapists also refer parents to these groups)—what Meadow (2011:728) aptly calls a “diagnostic community.” On the internet, parents swiftly discover listservs and online forums for parents of transgender and gender-variant children, which are managed by several leading support organizations and for which there is a formal intake procedure (Menvielle 2012). Here, parents readily discuss and share their experiences with each other. These online interactions and education are very informative in parents’ journeys, and were frequently referenced throughout my interviews. Connecting with and attending regional support groups, which meet regularly, is also very influential in parents’ developing transgender awareness (see also Kusalanka, Weiner, and Mahan 2014). As Carol (mother of a transgender girl, 9) said, “I don’t really remember what changed my mind, I think it was maybe—maybe it was realizing there were other kids just like Casey. What happened in the middle of this ... is that [my ex] helped to start the [support group] here in [town] ... so that Casey could find other kids like herself.” A similar process occurred for Julie (mother of a transgender girl, 5): “After one meeting, I decided I’m gonna

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<sup>62</sup> In a similar vein, Trish brought their doctor several articles she had researched on the use of hormones blockers for trans children, as a means of convincing him to provide them for Joe; he was otherwise ignorant of the practice.



let him wear some more things ... and after the second meeting ... I just decided I'm gonna let him buy a dress.”

In short, through their online research, support group interactions, and consultations with therapists—and sometimes through annual conferences and summer camps for children—parents become immersed in a trans-affirmative education, discourse, and consciousness regarding childhood gender variance. These experiences attune parents to a transgender understanding and labeling of their child, who was assigned one sex at birth but continually expresses themselves as the other. Through these experiences, all of parents' observations over the years become intelligible as “transgender.” The “exogenous” influence of all this training in discourse, identity categories, and narratives that is provided by the conferences, listservs, and support groups offers parents what medical and mental health practitioners are often hesitant to endorse or recommend (Drescher 2012, 2013; Friedman 2015), as seen in Grace's case above: a firm identification or categorization of a child (and the practical steps forward that such a categorization entails).

On a final note, several parents in my sample came into their awareness of transgender through alternative avenues to what I've discussed above. Martsy and Nicole, for example, were actually familiar with the “GID” diagnosis from their graduate studies and had a copy of the DSM in their households; they started consulting it when they first started wondering about their children's behaviors: “[That] really kind of solidified, I kind of um diagnosed her [at 3 years old] before I took her to the specialist [at 4 years old] ... it was life-altering, when I read that, *We definitely have a problem and I need to get her into somebody*” (Nicole, mother of a transgender girl, 12). Several other parents in my study were referred to outside resources or professionals by friends, co-workers, or teachers, who had observed

their child as significantly gender-variant. For example, Harmony (mother of a transgender boy, 8) was asked by teachers to speak at a staff training regarding her gender-variant child (who was presenting as a boy at school and often told peers he was a boy), before she was even aware of anything related to transgender. This experience introduced her to the moderator of a local support group, which she started attending and which sparked her identification of Baldwin as transgender. Harmony told me that she actually felt this was part of the teachers' tacit "plan" to educate her in this capacity about her child.

These experiences mark a notable contrast from those I catalogued during my first interviews in 2009-10, where parents saw people in the social landscape as far more ignorant of childhood transgender possibilities. No friend or teacher in their milieu recommended that they look into their child's "gender issues" more concertededly, or referred them to a particular therapist or support group—let alone invited them to a staff training on gender-variant children. On the contrary, they were the ones first searching for contacts and answers, and felt totally alone. This testifies to the rapidly increasing visibility and advocacy infrastructure that is developing around transgender-identified children, in schools, community organizations, hospitals, and other institutions across the country.

***Conclusion: Challenging the "Profile"***

These testimonies capture the rich history of experiences parents have with their children, which come to signify their child's categorical gender variance and which ultimately legitimize a transgender identification, from the clothes, toys, and activities they prefer to their repeated articulations about their sense of self and their bodies. Starting with at least a modicum of "gender-neutral" or gender-inclusive principles in their childrearing, these stories demonstrate the profoundly child-directed, child-centered nature of this trans-

affirmative parenting phenomenon (Corsaro 2015; Hays 1996; Knapp 1999; Lareau 2002, 2003). It is the children's actions, expressions, and commentary in these contexts—contrary to the normative expectations of their assigned sex—that lead parents to consider, quite seriously, if there is something “more” to these behaviors that warrants exploring. But these stories also demonstrate the significance of the parents' active—or reactive—role in these particular familial contexts. For it is the adult figures in these children's lives who listen to and observe their children in these significant ways, from buying the first princess costume or haircut to ultimately seeking trans-affirmative counseling, education, and support. These parents provided a developmental context that offered at least a baseline level of openness to gender nonconformity, where opportunities for cross-gender expression and identification on children's parts would be possible, versus disallowed outright. Here, the children reveal who they are, through their actions, choices, preferences, and commentary, and the parents ultimately “scramble,” as one mom put it, to understand, facilitate, and affirm that sense of self.

There were noticeable patterns and similarities across these experiences, which are what bring parents such as these, from disparate regions and locales, together in online forums and live support groups. But there were also exceptions in several different domains that merit attention. At a basic level, these experiences were heavily inflected by the birth assignments of the children, whether it was male or female. Children in the latter category could live and express themselves rather unremarkably in a tomboy space early on, as their parents so often interpreted their behaviors and in a way children assigned male so often could not. In this respect, the tomboy category stands as a kind of a waiting room or staging area for some, where the leap to trans—or out of assigned sex—can be made. Per many

parents' stories, children presumed to be little "boys" simply do not have access to a comparable, problem-free gender-variant space (as far as exceptions to the rule, Dana and Carol posed obvious outliers here). At the same rate, however, parents of transgender boys testified to the eventual limits of the tomboy category, which could not seem to absorb or account for the "whole nine [yards]" of their child's extreme masculinity, as Nancy put it. Tellingly, Grace was taking her child to a therapist as of 4 years old; Nancy, Karen, and Monica were feeling concerned when their children were 5 years old. In these ways, this material also challenges the notion that all children assigned female necessarily have it "easier" by the tomboy framing; at a certain point, in some cases, their behaviors were just as problematically "gender-variant" as the assigned males, sometimes by comparable ages (4-6 years old).

Furthermore, not all children had unequivocal appeal for the other sex's stereotypical accoutrement; indeed, several parents listed interests and preferences that were quite "typical" of their assigned sex. Not all children were vocal or adamant about a cross-gender or cross-sex self-identification, or demanded this of their parents. And many children's degree of body dysphoria, or interest in bodily modification, presented as more complex and varying than, "I'm in the wrong body" or "I hate my body." In a few cases, parents did not perceive any dysphoria at all. As various institutional agents and structures, including schools and health professions, become increasingly aware of, and interested in supporting, transgender children, it will be important to attend to the array of experiences that come to constitute a transgender childhood, lest a parent or professional "hang their hat" (as one advocate put it) on things their child did or said that did not "fit the profile."

Several scholars have tackled the undue gender-normativizing trends that adult transgender and transsexual persons have experienced, particularly by the “gatekeepers” of the psychiatric and biomedical establishments (Bornstein 1994; Califia 2003; Meyerowitz 2002; Serano 2007; Spade 2006). Historically, one’s claim to a transgender identification (and related medical/bodily treatments) often hinged on their ability to present as a (hetero)normative man or woman to professionals, with stereotypically masculine or feminine interests and dispositions (see also Garfinkel 1967). As Spade (2006: 329) writes,

[T]he medical approach to gender variance, and the creation of transsexuality, has resulted in a governance of trans bodies that restricts our ability to make gender transitions which do not yield membership in a normative gender role. The self-determination of trans people in crafting our gender expression is compromised by the rigidity of the diagnostic and treatment criteria. At the same time, this criteria and the version of transsexuality that it posits produce and reify a fiction of normal, health gender that works as a regulatory measure for the gender expression of all people.

One of the first parents I interviewed in 2009, Clarise, also critiqued this kind of undue gender-normative scrutiny relative to her own transgender son (19 years old at the time of our interview). Clarise asserted that her son’s feminine interests as a young child should not be taken at odds with his male identification:

I’m not sure who decided what was girly and what wasn’t ... I happen to be the mother of many children [5], I really found that if I was able to offer my children different choices ... or just be open to whatever they chose ... you know, if I had dolls and trucks and blocks and art supplies ... they didn’t seem to gravitate towards what they were supposed to do according to their gender, and I don’t think children will, actually, I think that’s really a social thing that we’re very unaware of a lot of times that we do to children, so why did Justin wear skirts? Well, *pfft*, why not, they’re pretty cool ... so I don’t have a problem looking back at Justin’s childhood, seeing the dresses and whatever and saying well, he [can still] be a transgender person ... I struggled with that at first because people were telling me what the transgender narrative was for childhood and it didn’t fit my child ... there seems to be so much emphasis on

this, you know, *What did your child play with, what did they dress, did ... she say she was a boy?*

Expanding what transgender can mean and look like for any particular child extends a gender-inclusive, often feminist agenda, widening the range of conventionally masculine and feminine options that are available to any girl or boy (cisgender or transgender); it does not presume any behaviors, interests, or expressions based on body *or* identity. In the case of body dysphoria and body change specifically, parents' listening to what their children actually say and want—versus assuming the kinds of anatomies they might want based on their gender identity—yields a range of possible embodiments for their children that are disruptive of sex-deterministic logics for gender. For example, a transgender girl may be comfortable with breasts and a penis, or a transgender boy may seek out hormones for secondary sexual characteristics, such as facial hair, but nothing else. Or, a gender-variant child who does not necessarily identify as the other sex may still pursue body change options in the future. A child assigned male can prefer race cars and dinosaurs, “but still” claim a female identity; a child assigned female can prefer baby dolls and the occasional dress, but still identify as male. These experiences bear interesting implications for the meaningfulness of the male and female sex categories, as parents' awakenings to the seeming arbitrary gendering of these categories troubles the relationship of gender to a sex-determined binary—even while parents may return to that binary in more biological accounts of their child's transgender status (an issue I return to in Chapter 6).

In the next chapter, I explore the ways in which parents come to a transgender identification of their child with specific regard to homosexuality and gay identity—that is, how parents come to embrace their child's gender variance as specifically trans (gender variant) and not as “just gay” (sexually variant). These newfound conceptual reckonings, or

cross-roads, as I call them, between “gender” and “sexuality” are shifting deep-rooted historical and cultural connections between gender nonconformity and homosexuality, by parents, professionals, and advocates alike.

## CHAPTER 4

### Gender and Sexuality at a Cross-roads:

#### (Re)Mapping the Logics of (Childhood) Gender Variance

*“I know that the research that we have until this point, from what I’ve read and you may correct me if I’m wrong, but 1 in 4 essentially at this point continues on the transgender path and maybe 2 out of the remaining 3 wind up to be gay, and I guess that’s a majority, but I don’t think that’s gonna hold true over the coming years.” (Eileen, mother of a transgender girl, 7)*

#### **Introduction**

Throughout my interviews with both parents and professionals, “gender-variant” or “gender-nonconforming” broadly described a child whose gender expressions significantly contrasted with the expectations of their assigned sex—but who was not necessarily identified as transgender. As my interviewees often put it, there is a “spectrum” of gendered possibilities and variation, only some of which—those “further to the right on that spectrum” (Gail)—are actually transgender. However, the ways in which “gender-variant” was distinguished from the more specific “transgender” varied, such that “gender-variant”—and the related “gender spectrum”—carried fluid valences and associations, sometimes more (trans)gendered and other times more (homo)sexual. In these ways, the proverbial spectrum intermittently allowed for both sexual and gendered variation and implications, or LGBT-spectrum possibilities.<sup>63</sup>

In this chapter, I explore the ways in which gender-variant was more closely associated with (homo)sexuality, or “gay,” in contrast to (trans)gender.<sup>64,65</sup> Gender-variant

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<sup>63</sup> This “spectrum” does not preclude cisgender and/or heterosexual possibilities either, but this chapter focuses particularly on distinctions between gay and trans kinds of gender variance, given their significance in reigning historical statistics on childhood gender variance.

<sup>64</sup> In the next chapter, I explore another valence of “gender-variant” and “spectrum,” which is indeed regarded as a matter of (trans)gender variance, but in non-binary, gender-fluid, and/or genderqueer capacities.



was not always considered a matter of homosexuality (if anything at all) by my interviewees; I encountered much more nuance and sophistication in my interviewees' constructions than that, as they were adamant not to assume any long-term projections related to childhood gender variance. This chapter, however, addresses those instances when gender-variant was contrasted with transgender as, potentially, something in the realm of sexual variance, not gender variance, and vice versa. I argue that it is precisely such distinguishing work between "gay" and "trans" conceptions that is at the heart of the gender change occurring within these families, such that the realm of (trans)gender is becoming increasingly available to non-normative expressions, sensibilities, and (self)conceptions. In the way of David Valentine (2007), this is not merely descriptive work, but productive work.

The ways in which (trans)gender and (homo)sexuality<sup>66</sup> are distinguished and defined within the wider parent-advocacy community I studied is arguably at the crux of this trans-affirmative parenting phenomenon. In line with mainstream LGBT rights discourses (Valentine 2007), my interviewees hold sexuality and sexual orientation as distinct from gender identity and expression; these are wholly separate realms of experience and self.

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<sup>65</sup> In this chapter, "gay" refers to an adult identity in a cisgender or cissexual capacity, as compared to "truly transgender," which entails changing sex category (i.e. from male to female or vice versa, but which could also include gay/straight/bi sexual orientations in adulthood). That is, while these categories certainly are not mutually exclusive, they surfaced as such in the kinds of contemplations this chapter explores about potential adult outcomes and meanings of childhood gender variance. To be sure, parents were well aware that gay and trans are not mutually exclusive categories.

<sup>66</sup> I realize these terms are not parallel constructions, in the way "transgenderism" or "transsexuality" might be with "homosexuality," nor are they particularly grammatical. Part of the problem is that there is no real "transgender" equivalent to "homosexuality." "Transgenderism" is largely considered a problematic and negative term (Valentine 2007), and "transsexuality" risks connoting matters of the body and physical sex, versus my emphasis here on gender identity, expression, and presentation. Similar to Valentine's analysis (2007), I use the terms "trans" and "gay," or "(trans)gender" and "(homo)sexuality," to refer to a particular conception of, or interpretive frame for, non-normative expression and sense of self—that is, as something about "gender" or "sexuality," respectively, as it is lived, felt, and experienced, and less about a self-proclaimed LGBT identity category. I do this especially in the context of young children, who rarely think in "LGBT" categories. The following phrase helps illuminate my particular deployment of these terms: "Parents begin to see their child's atypical behaviors as transgender, not as gay—that is, as a matter of gender, not sexuality."

Indeed, parents' emphasis on gender identity and expression, and not sexuality, when accounting for their child's gender variance is at the ideological bedrock of their parenting consciousness. And this is necessarily so—the former uproots sex category, the latter does not. As Heather (mother of a transgender girl, 8) said in our first interview: “[I]f you started talking about a four-year-old's sexual preference ... with any number of people, they would look at you like you needed to be institutionalized.” Given reigning historical statistics that link childhood gender variance with adult homosexuality (see Chapter 1)—not transsexuality—parents' distinctions between gay and trans kinds of gender variance are no small part of the story.

Below, I address 4 major areas where distinctions, and sometimes close associations, between gay and trans appeared in interviews. Broadly these include: parents' early, passing thoughts about their child's gender variance as “gay”; assessments of previous research on gender-variant children and their attendant statistical outcomes; cisgender, gay-identified adults in parents' milieu; and lastly, parents' “openness to change” about their children's status over the life course, even as they are firmly embraced now as transgender. In some instances, the realms of gender and sexuality are indeed held up as ontologically distinct. However, in other instances, close associations between gay and trans are given credence and relevance, such that the otherwise separate realms of (trans)gender and (homo)sexuality intermittently merge and permeate one another. Put differently, gay kinds of gender variance, as these were perceived and/or conceptualized, occasionally re-surfaced as potentially trans kinds of gender variance—and vice versa. The very notion of a “spectrum” is quite emblematic of the kinds of discursive and intellectual work being done here, by both the parents and advocates I interviewed: gender and sexuality are not, necessarily, laid out as

radically separate spheres of identity and experience, but as a moving continuum of non-normative possibilities. In these formulations, gender variance becomes increasingly conceivable *as* a matter of (trans)gender. In turn, a widening range of LGBTQ, or “genderqueer,” possibilities are becoming viable, such that both gendered and sexual subjectivities are increasingly available for self-determination, throughout life course developments.

Scholars have documented a deep, cross-cultural history and legacy of the relationship between gender and sexuality. The development of the “homosexual” as a diagnostic category among Western European psychiatrists and sexologists actually began as a “gender inversion” condition (Valentine 2007: 40-42; see also Hekma 1994; Katz 2007). And scholars from various disciplines have demonstrated that what is conceived of as gay or trans—or straight, for that matter—in one culture or time period is not so easily translatable to another (Halberstam 1998; Rubin 2011; Rupp 2001, 2009; Valentine 2007). This has resulted in contentions among contemporary LGBT scholars and activists regarding how and which gender-variant figures from the past can be reclaimed as “gay” or “transgender” in the present (Halberstam 1998: 45-73; Valentine 2007: 29-31).<sup>67</sup> My analysis draws on the social-constructionist, post-structuralist, and queer theoretical paradigms these various accounts represent. These paradigms consider the discursive constructions and socio-historical processes that help to shape gendered and sexual categories and possibilities in a given cultural milieu (Rubin 2011: 197-8). This approach has been perhaps most famously advanced by Foucault (1978), but has etiological roots in Sociology (e.g. Berger and

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<sup>67</sup> Leslie Feinberg’s (1996) *Transgender Warriors*, for example, has been criticized for giving gender-variant persons in the past transgender designations from the present (see Halberstam 1998).

Luckmann 1967; Gagnon and Simon 1973; MacIntosh 1968; see Epstein 1996 for a concise overview of this intellectual history).

In this vein, I am particularly inspired by the works of Bryant (2006, 2008), Rupp (2001), and Valentine (2003, 2007), who, in different terrains and studies, consider the sociocultural dimensions of those realms of experience marked as gay or trans—that is, as matters of gender and/or sexuality. For example, concluding her extensive historical review of “same-sex” sexuality from across the globe—or maybe “different-gender” sexuality—Rupp (2001) writes: “The point here, of course, is that our construction of these interactions as same-sex may be totally foreign to the people involved,” and “we need to consider carefully ... the meaning of sex acts in their historical contexts” (291, 302). Similarly, speaking of his transgender-identified informants, who often actually personally identified as “gay” within their own communities of color, Valentine (2007) argues: “[T]he deeper point that I want to make here is that age, race, class, and so on don’t merely inflect or intersect with those experiences we call gender and sexuality but rather *shift the very boundaries of what ‘gender’ and ‘sexuality’ can mean* in particular contexts” (100, *emph. his*). Drawing on Foucauldian theory, Valentine explains: “Like Foucault, I am interested in how these categories [‘homosexual’ and ‘transgender’] do not simply *describe* discrete histories but rather are *productive* of the very phenomena they seem to describe” (30, *emph. his*). In a similar vein, Bryant (2008) emphasizes the “generative,” productive potential of the GIDC diagnosis and its related debates:

[C]ritics miss one of the most important aspects of the GIDC–homosexuality relationship—its *generative* functions. Instead of GIDC being seen primarily as a threat poised to eradicate homosexuality ... GIDC should also be understood as one of the sites where forms of homosexuality, especially respectable homonormative forms of homosexuality, are *produced*. (464, *emph. his*)

I harness the constructionist insights from these scholars to explore the ways in which my own research participants are actively producing, constructing, and normalizing explicitly (trans)gendered understandings and possibilities for their young children, in ways that were largely unavailable to previous generations of children, and as distinct from gay.

To be clear: I do not question the gay or trans identifications of anyone, past, present, or future, especially the children in this study. I believe, as these parents know, that a child is only what they express themselves to be, at any given moment. Nor do I want to over-state the relevance of potentially gay identities to gender-variant children and their parents; that would misrepresent the sample: these children are transgender, or less often gender-variant, as identified and accommodated by their parents in the present moment. Indeed, I imagine many of my participants would wonder about a chapter devoted to the ways in which homosexuality was (ir)relevant to their children. But childhood gender nonconformity has a long, fraught history with adult homosexuality, to which several scholars have attested. Aside from previous longitudinal studies on gender-variant children, many parents, as well as parenting guides and experts, still regard gender-atypical preferences as an indicator for adult same-sex orientation, and avoiding gay outcomes is why many parents feel concerned about said behaviors in the first place (Bryant 2006, 2008; Kane 2006, 2009, 2012; Martin 2005, 2009; Sedgwick 1993). Moreover, culturally, persons still often code—and harass—gender nonconformity as a matter of (homo)sexuality, particularly for male-bodied individuals who do not live up to prevailing normative conceptions of masculinity (Pascoe 2007; see also Califia 2003: 241-2). The use of the “gay panic defense” by perpetrators of transgender hate crimes is another stark cultural referent for this (Schilt and Westbrook 2009).<sup>68</sup> In a different

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<sup>68</sup> It is worth noting that as of Fall 2014, California became the first state in the union to explicitly outlaw defendants from using the “gay panic defense” in transgender/LGBT hate crime cases (Assembly Bill 2501).

vein, visible forms of gender transgression marked the emergence of gay subcultures in 20<sup>th</sup> century America and later the gay liberation movement (Chauncey 1994; Engel 2002; Taylor, Kaminski, and Dugan 2002).

In short, gender variance and gay are intimately bound to each other, culturally, politically, and historically. And for contemporary parents of gender-variant children, it is hard to avoid the association. Tellingly, Claire and Rick (parents of a transgender girl, 6) were reported to Child Protective Services for allegedly “forcing a child to be a homosexual.” Glenn and Jayne (parents of a transgender girl, 6) said that an older therapist friend asked them quite bluntly if they would be comfortable raising a “gay son,” in light of their child’s feminine preferences (as of just 2 years old). And Beth (mother of a cisgender male, 8), whose child is not transgender, reported that she and her husband have all but assumed that their son will be gay-identified as an adult, per his feminine preferences. The following sections thus explore quite earnestly my informants’ negotiations and distinctions, and sometimes associations, between gay and trans interpretive realms for gender variance.

### ***“Oh the kid’s gonna be gay”: Early Associations***

Not surprisingly, given such deep-rooted associations between gender variance and gay, many parents (although certainly not all parents) originally wondered about their child’s gender variance in terms of homosexuality, in both male and female cases. Janice (mother of a transgender girl, 7), for example, recalled an early incident when her child was seemingly consoled by the prospect of having matching décor in her bedroom: “[I thought] *Oh the kid’s gonna be gay ... no big deal, that’s fine*, so I really wasn’t thinking gender at that point, I was thinking more, [sexual] orientation ... .” She went on to say, “I didn’t even know gender identity was a *thing*, I still didn’t think this was a matter of gender identity so much as a

future orientation issue ... .”<sup>69</sup> Similarly, Julie (mother of a transgender girl, 5) recalled an early incident when her friends mentioned the possibility of transgender to her, but she resisted, thinking her child might be gay instead: “I said, ‘I’m kinda worried,’ and they said, ‘You know, maybe he’s transgender,’ and I was like, *Noooo, he’s not*, you know, I thought maybe he would be gay ... .” I heard similar considerations among parents of the presumed tomboys, too: “I remember saying to one of my friends when she was small, ‘I don’t think it’s actually possible to learn this early but I think Connor might be gay ... .’” (Tory, mother of a transgender boy, 7). And as Monica (mother of a transgender boy, 5) reported, “I actually thought for a long time that Hayden was just a lesbian [...] I was actually, actually hoping for that, but I started reading books.”

Monica’s comment reflects the sentiments of many parents once they started encountering transgender explanations for their children’s behaviors—that gay would be the preferable, easier outcome. Karen (mother of a transgender boy, 10) grew quite impassioned during our interview when explaining why she felt gay is the better outcome, as it is devoid of all kinds of negotiations that she must manage regarding her child’s newly affirmed sex category:

I can deal with gay; if you’re gay you can still use the bathroom, you can still wear your clothing, you can still keep your name and your mother doesn’t get called to the county for abusing you, you know what I mean? ... I signed my kid up for swim lessons and I had to bring him home in his wet suit in the car in the snow because we don’t feel comfortable in any [public] bathroom, you know what I mean? This is an incredibly difficult life ... our world has been *rocked*. What’s gay? I don’t care.

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<sup>69</sup> Interestingly, Janice seems to reserve “identity” for matters of gender, not (homo)sexuality (which is about “orientation”). This strikes me as indicative of parents’ understandings of gender as fundamental to one’s sense of self and personhood, as to who someone can be and live as in the world.

Several other parents, however, claimed that gay was never on their “radar,” in part because any sexual orientation seemed irrelevant to their young, pre-pubescent child (see, for example, Heather’s response above). Nevertheless, ongoing research, in the face of their child’s persistent cross-gender expressions, ultimately led parents to adamantly distinguish their child’s gender variance from anything related to (homo)sexuality, as the remaining sections explore.

***“Apples and oranges”: Notorious Statistics and Distinct Types***

For both the parents and professionals represented in this study, the historical, longitudinal body of research on gender-variant children is relatively well-known, namely for the generalized statistical outcomes it has produced (e.g. Green 1987; Wallien and Cohen-Kettenis 2008, which includes an overview of similar prospective studies, 1413-14). Parents quickly hear of it through online research, in parental forums, and from some of the professionals they consult for guidance. Admittedly, I often had a hard time clarifying from parents just what research they had read or where they had encountered it (i.e. which authors, articles, web sites, etc. they found to these ends, if any). Nevertheless, its statistical legacy—that “most of these kids grow up to be gay”—frequently came up among my informants, as if it was in the general ether of the discursive landscape regarding childhood gender variance. This oft-referenced body of research, and the notorious statistics it has produced, proved one key site where distinctions, and sometimes connections, between gay and trans kinds of gender variance surfaced in narratives—often in terms of purportedly distinct types of gender-variant children.

The ways in which this research and/or statistic were relevant to a transgender child varied. On the one hand, some parents and advocates argued that these studies really only



addressed “merely gender-variant” children, versus categorically transgender children like their own—in other words, these studies refer to the type of gender variance that is not transgender. As such, these studies are not even relevant.<sup>70</sup> As Wendy (mother of a transgender girl, 6) said: “I couldn’t find anything on transgender children, just more gender-nonconforming and gender-variant ... I think [I read] that you know some of those studies are because they weren’t even like transgendered kids ... their sample was just a lotta gender-variant kids that wouldn’t even be transgendered ... .” As she had heard from other advocates and educators along the way, “[T]hey didn’t even use transgendered kids, they were just taking gender-variant kids and considering them as transgendered ... .” On these terms, the children did not turn out to be transgender because they were essentially a different kind or type of gender variance in the first place (the kind, implicitly, that is more likely to be “gay”).

Several other parents echoed a “fundamental difference” between gender-variant children who do not necessarily have a core, cross-gender identity, the likes of those most frequently purportedly captured by these studies, and their own transgender child: “I think that there is a fundamental difference between a gender-nonconforming child and a trans child because I do think that there are children who say that they like girls’ things, they feel like a girl, and I think there are others who say, *I am a girl, like don’t you get it, I am a girl!*” (Bruce, father of a transgender girl, 4). As a gay-identified man himself who came of age during gay liberation, Bruce has reflected on his own experiences with gender nonconformity (“I was a child of the sixties,” he told me, when “genderfuck was alive”), but he distinguished this kind of gender variance as a “whole different thing than [his] child”:

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<sup>70</sup> Notably, the protocols and assessment tools used in such research established a significant degree of gender dysphoria for the majority of participating children (see, e.g., Wallien and Cohen-Kettenis 2008: 1414-17). In light of this, most of the children in these studies apparently exhibited behaviors quite similar to those of the children represented in this sample.

Well I was aware of studies that say that large numbers, like 80-90% of boys who are gender-nonconforming, end up becoming gay men, and when I read that that was very familiar to me because I am a gay man ... I had my own sort of long history with pushing at gender, [but] when my child did it at such an early age and really with very few examples—like we're two gay men, and we're gender-conforming gay men, we do not have dresses in the house, we do not have earrings in the house ...—I thought, *Wow, this is something to take note of*, but then it wasn't just sort of play, it just seemed so in her *core being*.

Similarly, Nicole (mother of transgender girl, 12) said, “It’s a very small fraction of people that become adult transgender people, you know there’s [many] more gay, lesbians than there [are] transgender, so chances are if you have a kid that’s gender-nonconforming, the odds are they they’re gonna be gay more than they are transgender ... it was very obvious with [our daughter], there was just no doubt, there was so much more than gender-nonconforming going on there ... .” In these instances, different kinds of gender variance fracture between the realms of (homo)sexuality and (trans)gender.

I encountered these distinctions among the professionals I interviewed as well. As Neil (advocate/educator) said: “[S]ome of the numbers that get reported about persistence of who does end up being trans, and oh three-quarters of them will end up being gay, that’s a skewed population ... we’re talking about apples and oranges, we’re talking about different kids ... .” Similarly, Meryl (advocate/educator) argued that researchers need to better capture the right “kind” of children:

I think that some of those ideas and conclusions are based on *any* kind of gender-variant children, anything that is different than what people think is the norm, in other words, a boy who wears pink nail polish ... I don’t think those children .... should be included in those kinds of studies ... if you’re going to really try to study ... those that they may be identified as transgender children, then you need to narrow the scope drastically ... .

In a similar vein, Gail (advocate/educator) emphasized the particular “demographic” of child that her organization most commonly supports, i.e. the transgender child:

I don't think we have parents who come to us in the midst of trying to sort out those possibilities [gender-variant versus transgender] because again, I go back to, we're getting a certain demographic coming to us, I believe other organizations ... may be hearing that ... I think if you're talking about quote-unquote “these kids,” you are talking about a big spectrum of children, whereas if you were talking to me about the children of *our* parents, “these kids” mean the kids who are further to the right on that spectrum ... of you know, the trans umbrella ... .

Interestingly, while Gail distinguishes different types or “demographics” of gender-variant children, she locates them all along a gender “spectrum,” or under the “trans umbrella.”

On the other hand, there were multiple instances where my informants noted, quite incisively, methodological flaws of the studies, rather than any distinct kind of gender variance, which make them unreliable or irrelevant. Wendy, for example, also said, “[A] lot of the kids weren't even available for the follow-up but they still counted [them] in their studies, so their statistics were like way off ... .” Neil (advocate/educator) also cited external factors that compromised the merits of the studies: “[M]any of the people [who] showed up at the clinic for help were sent to that clinic because there's a lot of pressure to fix it. There's like a whole group of kids who never went ... or who were very turned off by what was emerging as essentially a reparative approach ... I just tend to dismiss that [research] entirely. I mean ... it's so old, the research protocols were horrible ... .” In a similar vein, Meryl (advocate/educator) said,

I think that part of the problem with these kinds of studies is that the people that they're talking about ... were not followed long enough; in other words, when you look at adult transgender people, you can see that some don't come out until their forties, their fifties, their sixties, their *seventies*, so how long were those people followed? ... [J]ust because somebody hasn't come out as transgender by the time they're 25 doesn't mean that we can dismiss the fact

that they may be transgender, so it depends on the measurement tool that you're using.

Gail (advocate/educator) cited several factors other than essentially different types of children—familial, psychological, cultural—that might influence the labeling of a gender-variant child. For example, she said: “[N]ow if you talk to Kenneth Zucker, I'm sure when he talks about ‘these kids,’ he's talking about a *way* bigger population, way bigger spread [than our organization].” Dr. Zucker is notorious for practicing potentially reparative or corrective approaches to childhood gender variance. Thus, the gender variance cited in this “sample” of children could implicate tendencies on the part of certain kinds of parents or professionals, not the kind or demographic of gender-variant children. Gail also reflected on the cultural policing of masculinity, over and above femininity, that might influence which children are captured in studies in the first place: “[A]nd what do we mean by ‘gender-exploring’? So a boy throws on a dress ... [or] puts on a pair of sparkly shoes that are pink, it draws attention. Girls get those Michael Jordan sneakers, nobody even knows ... .” Later in our interview, Gail was more explicit, perhaps unwittingly, about the implications these examples have for essential types of gender variance, some ostensibly more trans than others: “And you have to keep in mind the age of the child and how on board the parent might be or not be to having a transgender child ... I think there's a lot of factors that go into the descriptors you use for your child.” In all of these instances, factors other than essential types of gender-variant children were raised, such that particular kinds of childhood gender variance generally marked off as more-likely-to-be-gay could well be relevant to the transgender children for whom the parents and professionals in my sample speak.

Moreover, several of the professionals I spoke with discounted some of the “signs” that I often heard cited for differentiating gender-variant and transgender children, namely

the kinds of identity statements that a child might verbalize, if any (i.e. “I feel like a girl” or “I *am* a girl”). This further complicated and muddied otherwise firm distinctions between trans and not-trans kinds of gender variance. Meryl, for example, advised that some children will not have either the gumption or the self-knowledge to firmly articulate to their parents a cross-gender sense of self, and that is it important to look for “non-verbal” cues too:

M: I mean I think that there is something to be said for the child who just adamantly declares with no wavering ... but also I think that ... what kind of non-verbal message is the child giving you? ...

E: So in light of that, you would not, for lack of a better term, *require* a specific statement like, “I am a girl” or “Call me *she*,” [to identify a child as transgender]?

M: No, no! It’s sort of a constellation of things ... You know, my kid never said, ‘I’m a boy,’ never, never said ‘I’m a boy’... like all the signs were there, [but] he never said it ... and a lotta kids are like that ... they don’t say it in that way ... .

Gail also cited a preponderant lack of specific identity statements from children:

I’m basing it on the hundreds and hundreds of intakes I’ve done, and I’m going to go to the lower end of the age range, particularly the under-sixes, it’s just not what I’m hearing, I’m hearing a lot about a parent who ... [thinks] they have to say it, okay, they’ve got all these other signs ... but they never uttered those exact words ... many parents will say, “He’s never said I’m a girl, he’s never uttered those words” ... And it’s not definitive of anything ... sometimes kids don’t say it because they don’t know they can say it or they don’t know, they don’t have the verbiage for it ... .

These interrogations of any definitive verbal or nonverbal profile for transgender kinds of gender variance resonated with additional remarks from Charlotte, a therapist whose mental health practice assists both gender-variant children and transgender adults. Charlotte discussed the range of children’s “temperaments,” as well as the retrospectives of adult transgender clients, all of which variously affect the ways transgender experience can manifest:

I mean ... young kids, some of them don't really know, it totally depends on temperament, some kids are very clear about what they want about everything, and other kids are not, and so if the child's more anxious or more inhibited in general, [that] is going to play out in this, too, as far as asserting it ... [And] what level of consciousness is this? You know, it's interesting, just with my anecdotal experience with [transgender] adults, and their awareness of this as children, you know some were fully aware but their parents didn't listen, some were fully aware but didn't know what to do about it, some were not aware and just held off, and they didn't realize what it was until they were adults, some were not aware of *anything* [until adulthood] ... so it's just such a broad spectrum of when this becomes very conscious and very uncomfortable ... enough to ... do something about it ... .

These professional insights further challenge possibilities for distinguishing between different kinds of gender variance, including the kind ostensibly represented in the majority of research conducted to date. Nicole seemed to capture the “blurriness” of all these factors in the midst of determining otherwise firm distinctions between “merely gender-variant” and “truly transgender”: “[I]t's a really, really blurry line between a kid that might just be gender-variant or gender-nonconforming and transgender, 'cause being transgender is very rare, so I really think you have to analyze that kid and re-analyze and super-analyze and put them under a microscope and ask them a lotta questions before you transition, that should be like the last resort ... .” Here, Nicole signals the presumptive condition that transgender is really a rare kind of gender variance—even as it manifests in myriad different ways, some more overt and explicit than others—from which emerges all sorts of deductions about what parents are in fact observing in their own children.

More explicit debates and distinctions between “just gay” and “truly transgender” kinds of childhood gender variance consumed my interview with Leigh, who founded a support group, and later a listserv, for parents of gender-variant children in the late 1990s. Leigh's principal focus was on gender-variant “boys.” Even though Leigh was aware of

transgender prospects,<sup>71</sup> she feels that (male) childhood gender variance is almost always a matter of proto-homosexuality, as historical statistics and research would suggest. Leigh's impetus for establishing the group was to help other parents avoid the repressive measures<sup>72</sup> that she and her husband had practiced with their own gender-variant son in the 1970-80s and to be comfortable with the gay outcomes that childhood gender variance could well foretell. She has also carried out these aims through her directorship at a regional PFLAG.<sup>73</sup> As she explained to me, parents raising socially transitioned, transgender-identified children were virtually non-existent when she started the group. Nor did transgender ever surface among the professionals that she and her husband had consulted about their own son; it was always about gay or not. Despite the wariness and resistance she and her colleagues experienced in trying to publicize the group—supporting “girly boys,” or “gentle boys,” still felt so taboo at the time—Leigh learned that their web site received more hits than any other page at the hospital: “[S]o you see, I mean, it was out there, but people didn't know what to do with it.”

Over the years, the group has grown to include children assigned female and transgender-identified children. Leigh believes that these changes came after the advent of Jazz, a transgender girl who gained (inter)national visibility starting in 2006-7. Many consider Jazz and her mother the “poster child” and pioneers of the trans-parenting movement. Indeed, Leigh said that whenever she speaks to others about this topic, she frames

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<sup>71</sup> Leigh and her colleagues had conversed with Richard Green's affiliates about his clinical studies at UCLA, who, she told me, were expressly interested in studying and cataloguing the childhoods of transgender adults. This is ironic, though, since Green's casework (1987) is arguably the origins of the notorious “most-likely-to-be-gay” statistic and the understanding with which Leigh largely operates in this field of work.

<sup>72</sup> This included enrolling him in essentially corrective psychotherapy and forbidding gender-atypical play, which she now considers child abuse.

<sup>73</sup> Leigh's son now lives as a cisgender, gay male, and has never thought he might be transgender, based on conversations she has had with him. She told me that he too made identity-type statements as a young child to the effect of, “I want to be a girl” or “I wish I were a girl,” before she quashed these kinds of expressions and behaviors.

it in terms of the “pre-Jazz and post-Jazz” eras. Leigh went on in our interview to express concerns about the advent of trans-affirmative parenting—largely aided if not catalyzed by the visibility that Jazz has afforded, in her view. Leigh worries that our culture continues to cloud out room for the “gay boys.” As she put it, at first we repressed them altogether (with the likes of she and her husband’s corrective practices), and now we are fast transitioning them to girls. Leigh compared the relatively new trans-affirmative paradigm to other “fads” and theories in mental health, which for a time become the overriding explanatory model, but which practitioners eventually move away from: “I mean we are prone, as you know, as a society, to look for quick fixes and then we always overdo it a little bit too much. Some good comes out of ... if we can identify the [transgender] kids early, that would be great, but right now everybody’s assuming [they’re transgender].” In fact, she later voiced that she wants to distance herself from the field because it is “too painful”:

I’m trying to actually move on a little bit from this because when I see all this stuff actually it hurts me, I mean I feel like gay little boys are getting lost again, first of all we didn’t let them be gay little boys and now we’re transitioning ‘em all to transgender. ... I don’t know whether it’s good or bad, like I said, I don’t have a crystal ball, but I don’t wanna be part of it anymore, it’s too painful ... .

Leigh’s general principle is to tell parents to avoid transitioning until 9 or 10 years old (similar to the “Dutch Approach”), unless there is extreme duress and/or body dysphoria (this is the age where she feels the “persisters” and the “desisters,” effectively, truly differentiate). Instead, parents should push the “all-different-kinds-of-boys” message, versus offering up the option of being female—which Leigh feels can be done prematurely by parents:<sup>74</sup>

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<sup>74</sup> Incidentally, many parents strove to practice this approach with their own children, including taking every opportunity to show them models of visibly gender-variant persons (male and female), but it did not “work” in the face of their child’s persistent cross-gender expressions and identifications. However, as expressed in Chapter 3, parents of children assigned female seemed to all but start their parenting careers with these mantras,



I mean just put yourself in the mindset of a four-year-old, oh my God, so the parent, well-meaning, God love them ... they mention to their kids somewhere along the way, “Well you know if you still wanna be a little girl when you grow up, there are some doctors who can help you,” or they say something *along that line*, or, when the kids say, “I wanna be a girl, I think I’m a girl,” they don’t say ... “Well you know there’s different ways of being a boy” ... See ... [kids] don’t know what is wrong with them, and they think they’re half boy and they say things like, “I’m a boy on the bottom and a girl on the top,” or, “I’m a boy in the front and I’m a girl in the back,” they try to figure this out, you know, they’re learning about the world, so they’re trying to learn about themselves. So now, at Post-Jazz, the parents would say, “Well, maybe you are a girl.” Now, if you are highly stigmatized, and your life is miserable because you never see another person like yourself, and people give you strange looks when you do things that you like, they [the children] latch onto that *hook, line, and sinker* ... You know, people I think do not appreciate how desperate these kids can be ... so you throw out to them the possibility of being a girl and they *want to do it. Now*.

Over the years, I occasionally heard Leigh’s group characterized as one that is more particular to gender-variant, and not transgender, children, but these associations varied as to whether this was a matter of the children’s innate orientations or if it was the parents themselves, who are resistant to transgender understandings of their child or to even permitting gender-variant expressions outside of the home. Leigh’s perspectives above, as well as these varying characterizations of her group, are duly emblematic of the sometimes fraught distinctions between “not trans” and “truly trans” childhood gender variance(s) that are being newly debated and defined among my informants, which are differentially mapped onto (homo)sexual and (trans)gender realms of experience, identity, and understanding.

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and effectively lauded atypical interests early on (i.e. “You don’t have to be a girly-girl”)—in their view, so as not to pigeon-hole their child into idealized forms of femininity (with which many themselves did not identify), but also arguably due to the devaluation of femininity in our culture in the first place (Serano 2007). In contrast, parents of children assigned male were less comfortable with their children’s femininity, and arguably took longer to get to, “Boys can wear dresses, too.” Indeed, for some, the option of a dress is the final frontier. In other words, there are not that many options for “all different kinds of boys,” at least not at the beginning. The inflections of these experiences against male and female cases pervade this study. In any event, for many parents, all of this work ultimately just felt like yet another hedging tactic to resist embracing the gender their child was repeatedly expressing to them.

For all parents and professionals, a child's level of perceived distress, anxiety, and unhappiness stands as a significant factor in determining their transgender status or not, regardless of verbalized identity statements. I marshal the comments above because they expose areas where ostensibly distinct types of childhood gender variance ("truly transgender" versus the kind more likely to be "just gay") were suddenly more permeable and relevant to each other or were up for debate. As my informants variously articulated, sometimes more explicitly than others: There wasn't enough follow-up done in the research and several of the research subjects could be transgender after all; some of the parents from the old studies might have had reparative aims, inhibiting an otherwise transgender outcome; the cultural rules for maleness and femaleness impact who is labeled anyway; some transgender children may not be explicitly vocal or assertive about their cross-gender identity, so they may be less identifiable<sup>75</sup>; some family environments, not to mention socio-historical contexts, are more receptive to, or aware of, transgender possibilities, while others are more likely to curtail them in the first place. Of course, these comments do not mean that my informants would explicitly argue that gay childhood outcomes are really trans; rather, they would argue that the latter were not captured or represented in the original cohorts, *or* they were not adequately followed long enough in the life course. Nevertheless, all of these critiques and comments, by parents and professionals alike, forge an ever-evolving body of discourse and understanding that legitimizes transgender kinds of childhood gender

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<sup>75</sup> Along this vein, I was interested to see that in one of the representative studies, one of the measures researchers used to gauge the degree of a child's gender dysphoria was their answer to a question about their gender—that is, whether they said definitively "Yes, I am a girl/boy" or "I don't know" (Wallien and Cohen-Kittennis 2008: 1416). A child's awareness that their sense of self may be the culturally "incorrect" answer, or their willingness or not to tell the researcher exactly how they feel, might certainly affect the kinds of answers they gave. I was also interested to see that "I don't know" received a lower score, effectively, of dysphoria.

variance—and widens the spectrum of viable, possible outcomes—in a way that counters the institutional authorities and research that have long suggested otherwise.

### *The (Cisgender) Gay Adult*

Another site where (trans)gender and (homo)sexual possibilities intersected concerned adult gay-identified persons in parents' lives, who often surfaced in parents' stories as key figures who either validated what they had observed as some LGBT-spectrum difference in their child or to distinguish their child from future gay or lesbian outcomes. It is worth noting that I never explicitly asked parents about gay-identified friends or confidantes in their lives (although I did ask parents if they had any familiarity with things relating to "LGBT," particularly with transgender). Rather, the adults referenced below surfaced organically in the experiences and perspectives parents relayed to me. This was particularly true for parents of transgender boys (children assigned female at birth), several of whom mentioned an adult masculine, lesbian-identified friend whom they had consulted about their child and who, apparently, had recalled similar sensibilities as a child. Grace (mother of a transgender boy, 8), for example, mentioned a close lesbian friend, whose childhood retrospective stood as a kind of reference for Grace and her husband early on, when they first considered their child's behaviors as a signal of a future lesbian orientation:

G: We were doing more research along the lines of homosexuality and traits and we have um a good friend who is a lesbian ... so we talked to her ... about you know him wanting the boy clothes, saying he was a boy, he would pee standing up outside ... and our friend the lesbian said "Oh yeah ... that was me as a child ... I wondered why I wasn't a boy" ... so we kind of thought, *Ok, this is ... how lesbians think, like they do wish that they were boys ...*

E: How do you make sense of that now then?

G: And I told [my husband], I said maybe she is transgender and doesn't really know it or maybe you know some lesbians *do* think that way, but you know there definitely is a difference ... someone who is just a lesbian like knows that they are a certain sex, and they have qualities and like characteristics of the other sex ...

like my lesbian friend knows that she's a female but she may like male things, you know, like to dress more masculine ... whereas Nick, like he yearns to be able to [pee standing up], not out of convenience, because he feels, as a man, as a boy, that he should be able to do that.

E: Ok, did your lesbian friend ever say, *I wanted to be a boy growing up* or *I wished I was a boy growing up*?

G: Oh yeah, no, she said that she, she wished she had been a boy growing up, she wanted to be a boy.

In these evolving deliberations and distinctions between (trans)gender and (homo)sexuality, Grace once wondered if her friend was not transgender herself, and originally thought her own child might be a lesbian. Yet, in the face of highly similar childhood profiles and “traits”—but different axes of outcome, namely gay and trans—Grace has worked to distinguish two different kinds of gender variance, where “there definitely is a difference.” For her friend, gender variance is a matter of taking on certain gendered qualities that do not affect her sex category and sense of self, whereas for her son, these are a matter of who he *is* as a male. This is an example of parents’ intellectual work in carving out explicitly (trans)gendered kinds of knowing and experience, as distinct from gay, starting in early childhood development.

Several other mothers confided that they had wondered whether certain gay-identified adults were “really” possibly transgender themselves or if they wanted to be. For example, Meredith (mother of a transgender boy, 8) mentioned that a lesbian-identified friend disclosed to her that (s)he was too considering transgender self-conceptions, following conversations they had had about Meredith’s transgender child: “[T]he interesting thing about her is that after ... that conversation ... [she] came out to me ... that she has always wanted to be a transgender male ... she’s in an exploration phase, I think, [with] what she’s

gonna do ... .” Here, gay and trans subjectivities are potentially merging and being re-defined in Meredith’s milieu as she continues to dialogue about her transgender child.

Similarly, Tory (mother of a transgender boy, 7) mentioned a lesbian-identified friend, with whom she has apparently conversed about the diverse trajectories that gender variance can take or mean, in both childhood and adulthood:

I have a friend who is gay who said to me ... “If all these options were available when I was small, who knows, I may have transitioned” ... Even now, she goes, “I still feel like a boy, but you know, it doesn’t make me unhappy to have the body I have, and I have a good relationship,” and um, she looks like a boy ... 'cause at school the kids will say, “Are you a boy or a girl?” ... She dresses like a boy, like she has short hair, and I think to myself, well you know what, who knows, maybe Connor will be there, maybe Connor won’t, but it just shows that you can be anywhere on the spectrum. I don’t know how far to the edge Connor is, only Connor’ll know that.

In Tory’s musings with her friend, distinctions between the realms of (homo)sexuality and (trans)gender easily merge and change on the “spectrum” of non-normative variation, and Tory does not rule out a potentially (cisgender) gay adult outcome for her child, even as she now embraces and raises him as a transgender male.<sup>76</sup> Nancy (transgender boy, 8) too confessed that she finds herself wondering about “very butch,” “very masculine-looking” women she notices in public, including those she has seen at the LGBT center where she takes her son for support:

You know, homosexuality and transgender, they get lumped together 'cause they’re fringes, but they’re really totally different ... but there’d be a lot of women that would come in, they’d have these like lesbian group meetings ... and I’d be sitting there waiting for [my son] ... [they’re] expressing themselves really masculine ... and ... a lot of these women were older and ... I wonder, if things had been different thirty years ago ... if they had been allowed to transition and knew that there was such a thing ... I wanna go up to them and like ask ... *Do you*

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<sup>76</sup> In these instances, it is worth reiterating that a gay outcome in adulthood is framed as the non-transgender option, even while parents understand that transgender options can include hetero and non-hetero sexual orientations.

*like being a woman and do you like being gay? Do you think that if you had the opportunity? ... Like obviously this isn't anybody's goddam business, but [I wonder] ... .*

Again, even while Nancy holds homosexuality and transgender as “really totally different,” they are intermittently open to re-consideration and re-definition in her observations. In these instances, what was once understood as a matter of sexual variance and gay is re-considered as potentially a matter of gender variance and trans, now that parents are increasingly aware of transgender possibilities.

Similar deliberations and comparisons occurred regarding transgender girls and adult gay men, although, admittedly, the planes of reference between (trans)gender and (homo)sexuality seemed far less malleable and permeable in these instances than for the parents of transgender boys—exposing, arguably, a rigidity to maleness to which femaleness seems less subject on the continuum of gender and sexual variance. Shella (mother of a transgender girl, 10) recalled one interaction she had with a parent at a summer camp for gender-variant children, whom this other parent surmised were all “just gay”:

[This other mom] said, “You know, I look around and I look at all these boys, and I just think they're gay, that's all” ... [But] having grown up around a lot of gay people, I've asked a lot of ... male gay friends about this ... none of them say that they ever denied their physical parts, so to me, the difference between a trans person and maybe like a gay boy is that gay men, they love their anatomy, that's not the issue for them ... .

Here, Shella defines the desire to change or “deny” one's sexual anatomy as a substantial factor that differentiates a “gay boy” and a transgender child. Along with embodiment issues, Shella went on to mark “gay” as strictly a matter of sexual attraction and desire and irrelevant to a young, pre-pubescent child:

[‘C]ause when [my daughter] was younger people would say, “Well do you think he's gay?” And I would say, “Well I don't know.” I mean ... there were no

hormones then, how do you know if you're gay? Gay is how you, who you're attracted to, right? That has nothing to do with your identity, but people get that confused, and I understand, and so this woman making that blanket statement [above], I think that's fascinating and it may be true, I mean Tegan could still turn a corner ... she might, you know, end up being a gay man, I doubt it, though, because ... she does not want her body parts ... .

Shella's thoughts are emblematic of the kinds of intellectual work, and key observations, that parents actively engage in to differentiate homosexuality from transgender kinds of childhood gender variance (indeed, Shella indicated that she has asked "a lot of" gay men "about this"). However, even as she defines them as "nothing to do with" each other, Shella is careful not to completely discount gay as a future possibility for her child ("She might, you know, end up being a gay man"). Shella's notions about the irrelevance of homosexuality to a young child recalled those of Jessica (mother of a transgender girl, 5), too, who ruled out gay interpretations in light of how young her child was:

E: ... Did you ever think, *Maybe I have a gay son?*

J: Yeah I did, 'cause before I mean I had never heard 'a transgender ... I mean I kinda did think about it, [but] we were just like, there's no way that like he could be gay at this early of an age, like he hasn't even developed ... like we never really thought that somebody at that young of an age, like three or four, that somebody could decide who they're gonna be attracted to ... [We just thought] that developed later in life ... .

Furthermore, Nicole (mother of a transgender girl, 12) mentioned that she has had to clarify differences between her own transgender child and adult gay men, the latter of whom have apparently interrogated her along these lines:

[T]here'll be gay men actually that will question [me] and say, "Well I don't understand how your kid's transgender, I don't get it, because when I was little, you know, I used to love the girly stuff ... and I'm a femme-y guy ... I was just like [your daughter] when I was little, and how do you know?" And I'm like, "No you weren't ... did you ever say to your parents that you *were* a girl, did you ever feel like you were trapped in the wrong body, that you wanted to live as a girl, that you didn't want your penis, that you want a vagina, that you didn't want to

leave the house looking like a boy, that you wanted your hair long like a girl?”  
And they say, “No no no,” and I’m like, “Well, there’s the difference right there.”

Evidently, parents’ come to understand and define their children as transgender through, in part, extended comparisons to and distinctions from gay-identified adults. To these ends, the desire for physical, bodily change at the level of sexual anatomy, the sense that one *is* the other sex category, and/or the irrelevance of (homo)erotic attraction to a young pre-pubescent child all stand as key criteria that separate their child from a kind of gender variance understood as gay. But as observed, differentiating gay and trans in these ways often occurs along an imagined continuum of LGBT-“spectrum” subjectivity, where both of realms of gendered and sexual variance are intermittently significant, relevant, and possible.

This cross-roads between (trans)gender and (homo)sexuality was perhaps best exemplified during my interview with Trish (mother of a transgender boy, 11). Trish advised that she was offended by wider cultural associations between gay and trans that the “LGBT” acronym creates—the former is a “sexual thing,” she explained, and unrelated to her gender-variant child:

I personally ... don’t like ‘LGBT.’ LGB is a sexual thing, T is a gender thing, and they don’t belong together in my mind ... I think it’s disrespectful to transgenders when they’re lumped together that way. I understand the history ... but I still would love someday for it to be separate so that the general population ... understand[s] it as separate.

Trish went on to say that she never thought of “lesbian” with regards to her son “because lesbian is sexual and he was 11! ... [T]hat’s not fair!” As an example, the family described a gay-identified male friend of Trish’s who would often dress up in women’s clothes around the house, but that “he didn’t want to be a girl,” it was “just all for fun”—that is, “it was a sexual thing, it wasn’t a gender thing, and that’s so different.” However, later in our interview, Trish’s elder daughter troubled these simple distinctions between gender and



sexuality, perhaps unwittingly, demonstrating more openness and ambiguity in reading such gender-variant expressions in light of her newfound awareness of transgender: “[M]y eyes are more open. That boy wants to be pretty today and have fun? Is it a sexual thing, or a gender thing? That’s what I feel has changed for me ...” (Vanessa). Here, what was once so clearly demarcated as gay and a “sexual thing” is now suddenly open to—if not more appropriate for—particularly (trans)gendered interpretations, identifications, and possibilities.

Interestingly, while parents established critical differences between gay adulthoods and their own transgender children, many often mused about potential genetic or hereditary relationships to other gay-identified family members. Bruce, who identifies as gay, confessed to wondering about his own genetic influence on his child: “[A]nd don’t you know that there’s a part of me that wonders if somehow I passed on the gene for gender nonconformity ... .” Towards the end of our interview, Grace revealed that her father-in-law now identifies as gay, and that she has wondered if there’s not something “in the DNA”: “I wonder if it’s a hereditary thing, I’ve wondered, you know, does it go along with homosexuality? Um, my husband’s father is gay, you know, is it something that maybe is in his bloodline ... or just in [our] DNA ... ?” While Dan (father of a transgender boy, 5) was more skeptical about LGBT heredity, Monica (his wife) was more convinced, citing Dan’s brother who is gay-identified: “I think that there’s a genetic connection between—I just see a lot of trans kids with gay or lesbian aunts or uncles, like a lot ... so I see a genetic connection between that.”

This resonated with similar commentary from Charlotte, a therapist, regarding observations of her adult transgender clients: “I don’t know if it’s pre-conception or in utero ... but I do think ... there is a hereditary component ... pretty much, anecdotally ... there can

be some connection in families ... there might be someone who has a lot of gay family members ... I think there could be a hereditary piece to that ... ." In short, homosexuality was often contemplated as a potential genetic source or cause of a child's (trans)gender variance, re-linking these two separate spheres of self at the earliest stages of development. The double-helix of DNA, formed by bridging disparate strands of material, serves as a fitting metaphor for the ways in which these parents often re-associated explicitly gendered and sexual types of non-normativity in the womb; gay is different from trans, but still holds powerful potential in accounting for early childhood gender variance. This also demonstrates parents' biological explanatory models for gender and sexual differences.

### *Open to Change: A Spectrum of Outcomes*

One of the more profound reckonings between (trans)gender and (homo)sexuality regarded those instances when parents' cited being "open to change," as I coded it—that is, when parents voiced awareness that their child, affirmed as they are now as a transgender girl or boy, could grow up to be a (cisgender) feminine male or a (cisgender) masculine female, respectively, and possibly gay-identified. Of course, parents would not discount the possibility that their children could grow up to identify in cisgender, heterosexual capacities, either, but given statistical associations between childhood gender variance and homosexuality, they seemed conscious about including gay in the realm of (accepted) possibilities. While parents felt strongly that their child will always be transgender, based on their child's repeated cross-gender assertions, they intimated, almost as a moral imperative, that they understood that the "other box" may not always be their child's status or identification. As Wendy said (mother of a transgender girl, 6), "[W]e can't become too

comfortable with the box ... we have to be prepared for that ... we know that we need to be aware of that.”

This presents a fairly radical perspective on the mutability of gender identity and sex category over the life course (and not just of gender expression), given the lengths parents had gone to embrace and facilitate a formal social transition for their children. In other words, there was nothing tentative or playful about the ways in which these parents were honoring their child’s current cross-gender sense of self. Nevertheless, several parents articulated this spectrum of possibility and potential for change, quite explicitly and profoundly, which I find pertinent in the face of concerns that these parents might be doing permanent or irreparable damage by “locking their child” into any outcome “too soon.” In many ways, these parents embrace the approach of “parenting here and now,” even if that means a formal social transition and hormone blockers in childhood and a change in that course down the line. This perspective is made plain in the following excerpt from Marie (mother of a transgender boy, 7):

E: Ok, um, did it ever ... cross your mind in the last five years that you might have a gay child or a lesbian child or a quote-unquote “butch” child?

M: Um, yeah, I mean I think that my child right now falls into all those (*laughs*) ... I would say yes to all of the above, I mean I call him a transgender child right now, but who knows what he will be feeling in the future.

E: Ok wait, so lemme clarify, you just said, you said yes, you do consider your child some of those things.

M: Ye-eah, um ... my child is attracted to females, so um yes, it’s possible, or I see my child identifying as being gay, and yes I identify my child as being, you know, butch, and yes I identify my child as also being transgender. I think that my child is interwoven with all of those, just the word “transgender” is maybe the way I identify him right now, um, but I think he could be one or all of the above ... All I really know to be honest is that *today* he identifies as being a boy and he’s attracted to girls, so if that makes him a straight transgender boy, then that’s what it makes him today, but, um, I don’t really know what the future holds for him ... I feel that anything is possible ... he’s only 7 ... .

Tory (transgender boy, 7) similarly indicated an awareness of both gay and trans outcomes for her now transgender son, and strives to make him aware of a range of viable identities in the future (lest he worries about causing her duress in “switching back”):

I’ve read [that] gender [is] a spectrum, there is a lot of plasticity in that, by plasticity I’m not saying, I wanna mold Connor, but when I do look at Connor ... I think to myself, *Were you born transgender? Are you more likely to end up gay? Or where’s it gonna end up by the time you’re that age?* I don’t necessarily know if we’ll be in the exact same place, or not. I’m trying not to put Connor in a box as far as I’m affirming, but I also want Connor to ... be flexible in thinking and knowing that when you’re older, you may be gay, and realize there’re—I don’t want her to think binary, do you know what I mean? I’m not trying to make her fluid, or anything like that, I just want—kids that are very small have a black-and-white view of everything, and I was very aware when Connor was very young that Connor liked girls, so I would wanna go forward with Connor going on blockers when [the time comes] ... [but] I have friends that are ... lesbian and stuff, I want her to know that that’s okay, too ... .

While parents of transgender boys seemed more open to a level of ambiguity about trans-masculinity and adult homosexuality than parents of transgender girls, awareness of future non-transgender possibilities surfaced among the latter group as well. Claire and Rick (parents of a transgender girl, 6), for example, still regarded male homosexuality as relevant to their young transgender daughter, in light of some of the research they were reviewing:

We were also doing research at the time because we still thought—ok, and we still do think that there’s a chance that we’re raising um someone who will eventually be, you know, identify as a male, possibly, who knows, and gay—so we were looking at the older brother effect ... saying look, you know, this is still statistically, she fits this profile.”<sup>77</sup>

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<sup>77</sup> My discussions with this couple regarding the “older brother effect” (which posits that, effectively, a child is more likely to be gay the more older brothers they have because the mother’s womb starts to “reject” the male fetus as a foreign body) proved a particularly memorable, and slightly tense, methodological moment. As we discussed on the phone, and later over email, Claire said she “could hear [my] wheels turning on any kind of like sociological reasons as opposed to scientific, biological reasons” for homosexuality, and she wanted to impress upon me that it was not “hokey fanokey” science. Claire, of course, read me well (although such apparent skepticism for an informant’s theory is not something I would like to think I readily practice): I am indeed wary of biological theories for gender and sexual variance that risk framing it as a pathology or as

Similarly, Michelle (mother of a transgender girl, 5) reported that a close friend has a child, 11 years old, whom both think will be gay as an adult, and that she and this friend have often discussed whether her own child is more like him (i.e. “just gay”) than transgender. When I asked Michelle how she might clarify for someone that she knows her child is transgender, versus “just” a more “feminine pink boy” like her friend’s child, she responded matter-of-factly:

Well, I don’t need to know that. Why do I need to know that? I’m supporting Rian where Rian’s at now, who Rian needs to be, and this is really clear ... So you know what? Rian may not be—that’s a, that’s a label. And y’know what? If that’s helpful, then ... we’ll go with that, if that’s gonna help us in some ways.

In short, while parents concertedly embrace their child as the other sex in childhood, they do not wholesale refute the possibility that their child could grow up to identify as a cisgender gay adult. This signals lingering associations between, if not openness to, childhood gender variance and adult homosexuality, even while they mark gay and trans as radically separate entities of experience.

### ***Discussion and Conclusion: Re-thinking (Trans)Gender Variance***

The foregoing analysis explores the intellectual and discursive work that parents and professionals engage in regarding distinguishing gay and trans expressions, identities, and possibilities. In line with mainstream LGBT rights discourses and understandings, my informants operate according to critical distinctions between the two: gender identity and expression is, clearly, a different thing from sexual desire and attraction. However, the sections above also expose instances when the conceptual realms defining (trans)gender and (homo)sexuality become less fixed or firm, and more permeable and open to re-

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something that went awry (i.e. that a gay man is a result of hormonal interruptions in the womb because the mother had an errant immune response to the fetus). I return to similar theories and logics in Chapter 6.

interpretation—just the kind of fluidity and flexibility that the very notion of a “spectrum” of gender-variant possibilities allows. As Vanessa said, “That boy wants to be pretty today and have fun? Is it a sexual thing, or a gender thing? That’s what I feel has changed for me ... .” Ironically, in many ways, this work puts the “gender” back in “queer”—and I would argue in particularly liberatory, emancipatory ways, relative to the sex-gender binary and the constraints of assigned sex. To be sure, some of these deliberations expose lingering confluences and elisions between gender variance and sexual variance—wherein gender non-normativity is associated with gay. However, it is precisely such deliberative, comparative work between these realms of experience that is making transgender viable at earlier and earlier points in the life course, such that early childhood gender variance becomes increasingly relevant to cross-gendered kinds of knowing, experience, and considerations—versus to proto-homosexuality, in the way that parents and professionals during Leigh’s parenting career might have immediately presumed. Janice (mother of a transgender girl, 7) actually mused, unexpectedly, about just such a paradigm shift relative to historical statistics: “I know that the research that we have until this point, from what I’ve read and you may correct me if I’m wrong, but 1 in 4 essentially at this point continues on the transgender path and maybe 2 out of the remaining 3 wind up to be gay, and I guess that’s a majority, but I don’t think that’s gonna hold true over the coming years.”

As observed, the interviewees established firm distinctions between gay and trans, effectively defining distinct types of gender variance. Previous research that largely only addressed the “most-likely-to-be-gay” kinds of gender variance, for example, did not pertain to their own gender-variant child, and necessarily so—their child is transgender. In understanding and identifying their child as “truly transgender,” parents listed key

characteristics and criteria that would differentiate them from “just gay,” including: the desire to modify sexual anatomy (albeit not in all cases), and the stated desire to be and live as the other sex—if not explicit self-identifications as such. Furthermore, several parents expressed the notion that (homo)sexuality and sexual orientation would be irrelevant to a young, pre-pubescent child anyway; the latter is a strictly “sexual thing,” the other, a “gender thing.” With these understandings and observations, parents carve out a kind of childhood gender variance that is, specifically, a matter of (trans)gender, and they allow their child access to the “other box” accordingly, in a way that gay interpretations would preclude. In these ways, “not gay” is constitutive of trans.

Necessarily, however, close cultural associations between gender variance and gay lingered throughout, if not pervaded, these distinctions. To identify certain kinds of gender variance as “truly transgender” requires, at least in part, contrasting them—or comparing them—to other forms that are “just gay.” Indeed, as emblematic of these connections, several parents wondered if gay-identified family members potentially passed on quintessential genetic material for their child’s gender variance. Here, gender and sexuality are not such radically separate realms of the self, but one is actually envisioned as the biological life source of another. More notably, previous research that purportedly refers to the proto-homosexual kind of gender variance was frequently, incisively critiqued for its methodological flaws and limitations. And several professionals noted that a transgender child can express him- or herself in myriad ways, some more overtly and explicitly than others. They also explained that the labeling of a child as transgender in the first place may well be contingent on cultural, familial, and historical factors. In these instances, perhaps unwittingly, parents and professionals were not necessarily speaking to distinct kinds of

gender variance—some more essentially gay or trans than others—but were rather opening up space for re-interpretation and re-identification, where “merely gender-variant” cases could well be “truly trans” after all. Parents’ intermittent references to gay-identified adults in their milieu, whose gender variance now struck them as something potentially (trans)gendered, were further indicative of this deliberative, malleable relationship between these two otherwise distinct realms of personhood. This is where, on the imagined “spectrum” of possibilities, (trans)gender gains awareness, significance, and opportunity, even as it is distinguished as a rare and specific type.

Again, this discussion has no intention of questioning the identifications of these children, or of anyone else, past or present; nor do I mean to question the veracity or logics of a distinction between gender and sexuality. I do mean to show how the parents, professionals, and advocates who make up the wider support community for gender-variant children are giving transgender subjectivities increasing credence and viability—and, in turn, how gender is coming into sharper focus as the plane of reference for non-normative possibilities. There are no established biological factors that are believed to explain gender and sexual variation, especially as these factors would pertain to genetic influences or prenatal hormones (let alone hereditary relationships among LGBT family members). Geneticists, neuroscientists, and endocrinologists, including one I interviewed, would reiterate these uncertainties, even though plenty of scientific findings have been debated and implicated in this terrain for decades (e.g. LeVay 1991, 1993; Hamer and Copeland 1994;



Pillard 1997; Rametti et al. 2011; for the limitations of these kinds of studies, see Birke 2002, Fausto-Sterling 2000).<sup>78</sup>

Similarly, there are no clear biological markers for gay, trans, or straight “outcomes” to childhood variance. But these parents must proceed without these biological “givens” anyway, supporting their children as best they can “today,” as Marie put it, despite the ambiguity between (trans)gender and (homo)sexuality that long-term projections, and age-old statistics, might entail. Indeed, several parents were keen not to dismiss the possibility that their child could “still” grow up to be a (cisgender) gay-identified person, or perhaps non-binary or genderqueer, even as they affirm them now as transgender girls or boys. Such cautious perspectives on the part of parents entertain a remarkably fluid and mutable perspective on gender and gender identity over the life course. Parents have decided that whatever debates or potential “outcomes” for childhood gender variance arise, these should not impact their parental accommodations and responses in the here and now; today, their children express themselves as (transgender) boys and girls, or something as less binary altogether, and should be recognized as such, regardless of what next year brings. In a society that is increasingly LGBT-aware—but that comes with a history of confluences between gender variance and homosexuality, as well as profound resistance to changes in assigned sex status—these parents find themselves newly defining and carving out LGB/T subjectivities for their young children. They do this in a way that at once conceives of transgender possibilities, but does not entirely preclude other forms of gender or sexual variance either. Through this discursive and conceptual work, parents open up a seemingly proliferating

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<sup>78</sup> Interestingly, research regarding a biological or genetic basis for both homosexuality and transsexuality has involved brain scans of conventionally sexually dimorphic regions of the brain (in some instances the same region).

range of (gender)queer possibilities for their young children—and perhaps for others, too—today, tomorrow, and at far future phases of the life course.

In the next chapter, I explore another valence of “gender-variant” and “gender spectrum,” wherein gender-variant and transgender were distinguished less as matters of gender or (homo)sexuality, but more as non-binary or binary identities, respectively. Here, transgender refers to a child who identifies in binary capacities, boy/male or girl/female—that is, at one or other end of the imagined “spectrum”—whereas gender-variant refers to a child who is non-binary, including genderqueer, gender-fluid, or somewhere in the “middle.” Parents’ discussions in this vein expose the difficulties of a binary social order, such that non-binary expressions seem impossible and unintelligible, if not dangerous. This material also reveals the fact that such “binary versus non-binary” possibilities are deeply inflected by the male and female sex categories themselves; society offers little room or safety for male gender variance or male femininity.

## CHAPTER 5

### **“It’s nice to have your kid fit in a box, even if it’s the other box”: The Transgender Child and the Trouble with the “Messy Middle”**

*“The very criterion by which we judge a person to be a gendered being, a criterion that posits coherent gender as a presupposition of humanness, is not only one which, justly or unjustly, governs the recognizability of the human, but one that informs the ways we do or do not recognize ourselves at the level of feeling, desire, and the body ... .”*  
(Butler 2005: 58)

Gender-variant and transgender were not always contrasted in terms of sexuality and gender, and gender-variant was not always implicated with “gay” in parents’ narratives. In this chapter, I explore other valences to these comparisons, namely how interviewees contrasted transgender and gender-variant as binary and non-binary possibilities, respectively, on the imagined gender spectrum. Here, the spectrum more explicitly refers to male/boy and female/girl identities (binary), imagined at either “end” or pole of the spectrum, with less binary options referred to as the “middle” of that spectrum, including gender-fluid, genderqueer, bigender and/or more ambiguous gender expressions and identities that cannot be defined firmly as boy or girl (i.e. both, neither, sometimes boy, sometimes girl, a “boygir,” as one child coined it, etc.). These also include agender identities, like Vic’s (12 years old), which resist any relationship to gender (male or female, masculine or feminine); these technically would be separate from a gender spectrum altogether, but they were no less part of parents’ awareness of possibilities that fall outside the proverbial male/female boxes—even if those boxes are transgender (i.e. a transgender child who identifies firmly as boy or girl). Of course, in the “real world,” the analytic distinctions I have sought to capture between these different comparisons and valences were not so uniform and clear-cut, but inevitably overlapped and merged with each other: gender-variant as gay,

possibly, or gender-variant as something non-binary or “in the middle,” neither of which are necessarily mutually exclusive but both of which are different from specifically transgender. Yet it is precisely such slippages between these categories, and along the proverbial spectrum of possibilities, that are sociologically significant to the story this research narrates: they signal a multiplicity of meanings and possibilities for gender and sexuality that fall outside the normative “heterosexual matrix” (Butler 1990), but which firmly distinguish transgender as a specific option within that midst of childhood gender-variant potentiality.

This conception of gender-variant, as something non-binary, was almost always framed by the parents in terms of how difficult or seemingly impossible it was relative to the transgender child—that is, how hard it would be to support a child who was “somewhere in the middle.” Wendy’s commentary below typified this outlook, which she gleaned from a recent conference experience (mother of a transgender girl, 6):

Because it is easier, it is easier for us as parents—as hard as it is for us to have the transgendered child—to have her walk into a school and someone says, “Oh what a cute little girl” ... as opposed to if she was still “Nate” and only wanted to wear dresses ... I mean there you're setting yourself up more for the school bullying, I can't just have the principal change the gender marker, you know ... and the girls aren't gonna wanna play with her and the boys aren't gonna wanna play with her and she's gonna be somewhere in the middle. And when we listen to parents at the conference ... those people in the middle [whose] kids have flip-flopped, we're like, *Oh my God*, I mean we have to be prepared for that, but *ohhh* what a scary thing, [because] it is nice to have your kid fit in a box, even if it's the other box ...

Notably, and as I will discuss below, this outlook contrasts with several of the parents from the follow-up sample, whom I originally interviewed in 2009-10 and who were identifying their children as gender-variant, but not necessarily as transgender. At the time, these parents indicated opposite sentiments—that “going all the way” in a formal cross-gender, social transition struck them as the scarier, more difficult option (in part because of its associations

with “sex change”)—and were actively vying for the non-binary spaces in the middle. For most of the parents in the cumulative sample, however, whom I interviewed in 2013 and whose children are firmly transgender-identified, binary transitions and identities seemed to afford some relief and security, ultimately, from the prospects of gender ambiguity, as Wendy testified above.

These perspectives on the part of parents hearken to a long-standing debate across multiple disciplines, which is in many ways constitutive of scholarship and theorizing on gender, as well as of trans activism and politics: binary versus less-binary gendered identities and embodiments, the intelligibility and viability of which are constrained by the limits of the male/female binary order itself. The “debate,” as I am calling it, actually carries two dimensions, which are recalled in the sections below: One, a politicized, moralizing strand that considers “less binary” genders as more progressive, radical, or enlightened (Bornstein 1994; Califia 2003; Halberstam 1998; Roen 2001; Serano 2007). Serano (2007) refers to such politics as “subversivism”: “Subversivism is the practice of extolling certain gender and sexual expressions and identities simply because they are unconventional or nonconforming. [T]hese atypical genders and sexualities are ‘good’ because they ‘transgress’ or ‘subvert’ oppressive binary gender norms” (346; see also Roen 2001: 501-2). Another dimension, however, examines more fundamentally the very possibilities of living out less binary genders in the first place, without necessarily any valuation, in a world so accountably ordered around “two and only two” options (Bem 1993; Butler 1990, 2005; Lorber 1994; Lucal 1999; West and Fenstermaker 2002; West and Zimmerman 1987). As Betsy Lucal (1999) said of trying to live life on the “boundaries of a dichotomous gender system”:

[A] person who fails to establish a gendered appearance that corresponds to the person's gender [sex category] faces challenges to her or his identity and status.

First, the gender nonconformist must find a way in which to construct an identity in a society that denies her or him any legitimacy ... . Second, the individual also must deal with other people's challenges to identity and status—deciding how to respond, what such reactions to their appearance mean, and so forth. (784)

In a related vein, West and Zimmerman (1987) gave the example of a friend who, years later, still remembered a time when she could not determine the sex of a salesclerk, leaving her feeling “disturbed” (133-4). So long as sex category is “omnirelevant” to social life, one’s gender presentation is susceptible to scrutiny and evaluation, making gender-variant identities and expressions particularly vulnerable: “[T]he notion of accountability is relevant not only to activities that conform to prevailing normative conceptions [of males and females] ... but also to those activities that deviate. The issue is not deviance or conformity; rather, it is the possible evaluation of action in relation to normative conceptions and the likely consequence of that evaluation for subsequent interaction” (West and Fenstermaker 2002: 65). Reinforcing the gender-evaluative nature of micro-interactions is the fact that the gender binary is instantiated in countless macro-structural, institutional arrangements (Acker 1990; Martin 2004).

The dialectics concerning binary and less-binary possibilities are inflected by the gendered inequalities of the male and female categories themselves—that is, by the differential cultural dynamics exacted on female masculinity and male femininity and the rigidity of masculinity in particular (Kimmel 1994; Pascoe 2007; Schrock and Schawlbe 2009). This is why Serano (2007) speaks specifically to “trans-misogyny,” which she argues is the most pervasive kind of transphobia that is rooted in a sexist binary system: “[O]ur society tends to single out trans women and others on the male-to-female (MTF) spectrum for attention and ridicule. This is not merely because we transgress binary gender norms per

se, but because we, by necessity, embrace our own femaleness and femininity” (14). She adds, “In a world where masculinity is assumed to represent strength and power, those who are butch and boyish are able to contemplate their identities within the relative safety of those connotations” (18). Feminine gender expressions from persons perceived as male mark particularly precarious social territory.<sup>79</sup>

Before proceeding further, it is important to clarify that more visible forms of gender variance, including male femininity, are not necessarily non-binary—persons perceived as markedly gender-variant relative to normative conceptions for males and females may well identify in binary capacities (e.g. as female even if they are scrutinized as visibly masculine or misgendered as “Sir”; see Lucal 1999). However, parents’ reckonings with non-binary possibilities inevitably collided with such visible “variant” expressions and presentations, which do not cohere at the gender-normative “ends” of the gender spectrum (e.g. masculine males and feminine females). For a child who does not necessarily identify or express themselves in binary, normative ways (e.g. a boy who prefers girl clothes), parents were confronted with seemingly murkier and potentially non-binary, genderqueer terrain.<sup>80</sup>

In the following section, “The Non-binary ‘Messy Middle,’” these themes and debates pervaded parents’ narratives, as parents revealed their conceptual and practical conundrums with the gender-variant middle, in contrast to more binary, transgender identities

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<sup>79</sup> Halberstam (1998: 141-73) would disagree with this scale. Halberstam would argue that visibly butch masculine or genderqueer persons assigned female (what she refers to as the “transgender butch,” contrasted from the “female-to-male transsexual”) experience as much cultural scrutiny, prejudice, and danger as feminine persons assigned male. I am mindful of that, particularly with regard to the limits of the tomboy category for young female masculinity. At the same rate, so many of parents’ stories gestured towards the seeming impossibilities of the “boy in the dress,” not the boyish girl, as I go on to discuss.

<sup>80</sup> Interestingly, by way of example, Lucal (1999) problematizes feminine males who are automatically sex-categorized as “women,” even while she asserts that masculine and male are usually the default interpretations in society (784). I take the opposite stance in this chapter: the troubles when such feminine persons are read as, or identify as, males or men (or boys), “despite” their feminine expressions. For Serano (2007) and others, this is where real prejudice, if not danger, can ensue with male femininity or trans-femininity.

and expressions.<sup>81</sup> Bruce (father of a transgender girl, 4) actually romanticized the rebellious potentials of the “messy middle,” as he put it, which nevertheless does not relate to his own “conformist” girly-girl:

[Early on], I was just thinking a gender rebel! And I hear all these parents who are so jealous of me because my child has at least fallen on one side of the binary, and I would *love* to have a child who just messed with the binary, who just was, you know, gender-pushing every boundary ... I’m envious of the people who have children who are this messy middle that the world is so intolerant of, and I feel like I would be such a good parent to that child because I would say, well the world is wrong, but instead I have this child who is *so* conformist, just against her own birth sex ... .

This material also attends to male gender variance in particular, as the gender-variant “messy middle” in parents’ thoughts and experiences so often referred to the “boy in the dress,” or to particularly feminine children assigned male who do not necessarily identify as girls (see Wendy’s quote above). In the section thereafter, “Movement Across the Gender Spectrum,” I examine the follow-up cases from 2009-10, which entailed changes in the identifications of children assigned male who developed in either transgender or cis-normative directions. In a concluding section, I will synthesize the tensions and insights that all of this yields for the specter of (trans)gender diversity, for both male and female persons.

## **THE NON-BINARY “MESSY MIDDLE”**

### ***Transgender as “Easier,” Gender-variant as “Harder”***

Whenever the non-binary kind of gender-variant surfaced in interviews, it was almost always with respect to the greater difficulties in parenting or accommodating it, than of those faced with a transgender child (boy or girl). The unique struggles of the parents of non-binary

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<sup>81</sup> I do not like to characterize non-binary or genderqueer identities and expressions as remotely “messy”; however, this phrase, which surfaced in one parent’s interview, was duly representative of parents’ reigning perspectives and experiences on the difficulties of realizing gender-variant possibilities for their children in a binary social matrix, as reflected throughout this chapter.



children came up across interviews and at conference workshops. I often heard that these parents did not feel fully supported in the forums available to parents of transgender children:

[T]he other thing is the parents that have kids that are gender-variant or gender-nonconforming or don't fit into any box, they feel like ... they're in the minority ... they feel like people forget about them ... like, "We don't feel welcome here in this group ... you're always talking about transgender this, transgender that ... well I have a kid that was you know male and now female and back to male ... we feel very excluded from the conversation ... your kid's, you know, one way or the other and mine, I don't know if they're gay or what." ... I think [those parents] feel very alone if their kid is not transgender ... . (Nicole, mother of a transgender girl, 12)

Both Bruce and Wendy intimated feeling the "jealousy" of parents of gender-variant children because their own children fit within the binary order of institutions and daily interlocutions: "[Those parents] were like almost jealous [of us] ... they are in the middle of nowhere's land ..." (Wendy, mother of a transgender girl, 6).

While parents expressed sympathy with the parents of gender-variant children, they also often confessed to feeling uncomfortable or "freaked out" by the prospect of having a gender-variant child themselves early on:

E: Did you ever consider ... maybe she's somewhere on a spectrum versus she identifies as a girl?

Marty: I did for a while, and it freaked me out ... that freaked me out more than being transgender ... because I think that that's a little bit harder. Transgender, you can tell other people, "Look, it's like having a girl's brain in a boy's body." It seems like you can simplify it for those that are able to hear it and simplify it. So that freaked me out because then that would be—I felt like that was going to be harder for people to understand or digest ... and harder for me to explain to others in some ways.

Nancy (mother of a transgender boy, 8) was very candid about her discomfort with non-binary possibilities (which she revealed later in the interview might be more relevant to her transgender son than she originally thought, as detailed in the section below):

[T]he therapist [in the support group] talked about—which is another thing that freaked me out—was like ... some kids feel like they're both and some kids feel like they're neither, and I struggle with that concept ... I feel for those people but I cannot *imagine* ... in theory like it sounds great if you've got like these really artistic parents that can like support that, but I think that would drive me nuts ... I just can't wrap my head around that concept because ... I was brought up traditional, and it's like there's two genders, and the whole thing was really hard for me to grasp ... .

Heather (mother of a transgender girl, 8), who identified her child as gender-variant in our first interview and as a transgender girl at follow-up, reflected on how impossible living in the middle seems, even though her child lived as such for several years:

[A]nd my thinking about it would be different if the genderqueer option seemed more doable. Like how do you—I know the answers to, how can I make my body not be a boy and how can I look like a girl, that's straightforward. But how can I be who I am and still live a happy, well-adjusted life in the middle? I don't know how to do it ... I've listened to panels and I've listened to people say it all the time, but that seems really hard. It seems like every morning when you wake up you have to make all these choices and decisions ... “How do I fit into the world today?” And so that seems like it would take a lot of energy to be that, and especially for kids ... .

Heather also referenced visible examples of (gender) non-normativity in her children's lives, which she imagines affects her own transgender child's development and sense of self:

Even today, there's a teacher at school who's either trans or has hormone issues, so she has a beard but she identifies as a woman and I believe is biologically a woman, and the kids can't stop staring at her ... [but] that kind of image, I think, is off-putting to a really feminine boy ... no kid wants to stick out ... . The analogy I sometimes use is we have a friend who has a port wine stain on pretty much the whole side of his face, and I said, “Look, he can't hide that, and that's something he has to live with.” And we talked about, *Did he get teased because of it? Do people make fun of him? Do people stare at him? Yes, they do. Well how does he live with that? Well, that's who he is, that's just who he is.* And so I wish that [it] was a little more okay for the binary to be more fluid ... because there's no other space.

Janice (mother of a transgender girl, 7) highlighted a story that she thought would be particularly illuminating for me—the time her child (whom she still regarded as male at the time) asked to wear a dress to see Santa Claus:

I did not realize how far down the gender path we had gone until Eileen wanted to wear a dress to see Santa Claus, 'cause that's what you do, you get dressed up to see Santa Claus ... I was scared to death, I was absolutely petrified because not only was I taking a child who very much at that point looks like a little boy in a dress to see Santa [...] [I was] fearful of who we're gonna run into and what explanation I'd possibly come up with ... .

Janice decided to let Eileen wear a dress for one photo and made her change into boy clothes for another. As she explained, “At that particular moment, it was about complete self-preservation because a picture had to be sent to the relatives every year ... I couldn't send a Christmas picture out with [my “son”] in a dress.” They did in fact run into the children's baseball coach, who awkwardly but “thankfully” did not comment, but Janice remarked that she then “realized how ... distancing this can be for folks ... .”

Laurie (mother of a cisgender boy, 11) has interviewed many parents herself regarding childhood gender variance (she was one of the first parents to blog about gender-variant children on the internet, and she and her husband have since penned a related children's book). She was very forthright on the difficulties she has observed among parents raising children “in-between”:

I think people are super uncomfortable with in-between. I have a friend who, whose kid is now trans, and who for a long time we just thought was gender-nonconforming, and she's you know transitioned at school ... and I remember how *uncomfortable* my friend was in that period of not knowing, and she's sort of *relieved* now that this kid is trans—she is *not* a person who pushed her kid into being trans in any way, she was totally open ... but now she's relieved, and even though it has its own set of challenges and she's meeting with endocrinologists about blockers and that's freakin' 'er out, but ... I just watched that discomfort and the not-knowing and see that in so many parents, it's *hard*, it's like ... *shit*, it's hard to dwell right here ... it's hard not to know ... .

Laurie's thoughts resonated with the recollections of several other parents, who spoke of the difficulties of trying to exercise more gender-neutral or gender-ambiguous compromises before accepting a cross-gender identity and transition for their child, practices I have described as "gender hedging" elsewhere (Rahilly 2015):

The thing of it is, when you're trying to find gender-neutral clothing for your transgender child or your gender-creative child ... it was awful, Elizabeth, it was like ripping, slowly pulling your entrails out of your stomach, going into Kohl's and going into Target and going into Gap Kids and trying to find the clothes that look like boy clothes but could be girl clothes, it was agony, agony for me, I was just miserable, depressed, ashamed, crying in my car ... . (Julie, mother of a transgender girl, 5)<sup>82</sup>

Karen (mother of a transgender boy, 10) described her child as a total "misfit" when they attempted a "gender-neutral" year at school, in the midst of the schools' highly "gendered" practices:

For the whole fourth grade year I was trying not to use any pronouns ... he was wearing pants [boys' uniform] ... but he was also wearing the vest that the girls wear [girls' uniform], I felt as though ... we were walking a tight rope,<sup>83</sup> and it was so easy to fall off, and [it] was probably a big source of anxiety for Izzy ... I [once] saw Izzy's class walking ... in boys' and girls' lines, and I saw Izzy walking along, clunking ... in the girls' line ... lookin' like, just totally a misfit ... .

While Karen and Julie have both come to recognize their children as a boy and a girl, respectively, their previous pained attempts in more gender-neutral spaces exemplify the

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<sup>82</sup> Julie's agony here speaks to the deeply gendered and binary ordering of our social worlds, including and especially children's clothes and toy options in retail domains. It is worth noting that as of August 2015, Target stores have started removing the "boys" and "girls" labeling and signage of their aisles and merchandising, in response to customer input and complaints (Rhone 2015).

<sup>83</sup> Interestingly, back in 2009, Beth (mother of a cisgender male, 7) also described such gender hedging strategies as a "daily tightrope act" and a "fine line that [they] walk," signaling perhaps the felt precariousness of gender-variant possibilities in the spaces "in between."

challenges that many parents' face trying to realize "middle-ground" or genderqueer possibilities for their kids.

Several parents, although by far the minority of the sample, could speak more personally to raising a categorically gender-variant child. Dana (mother of a gender-variant male, 9) testified to the daily struggle that her child's feminine gender expression entails:

[I]t's really uncomfortable for me in the grocery store to have to explain this to random people I don't know, because I've just said 'Come on boys' and obviously someone appearing female follows me ... even just going to the park to play with random people, I have to adjust my speaking to remove pronouns.

Dana believes that her child's gender variance turned away potential renters of a spare room in the house (which is a source of extra income for the family). Dana feels compelled to tell potential tenants about her child's gender and how her family accepts him, but she reports that she does not hear back from about "75%" of those who express interest: "A few times I've had comments, one specifically sticks out in my mind of, 'Well I don't want your child to confuse my child, so I don't think that this will be a good fit for us.' And that one just sort of sticks with me ... ." She considers the experiences of the parents of transgender children she knows a "luxury" compared to her own deliberations managing her highly feminine male child (who identifies as two-spirit and uses male pronouns).

While Carolyn's child, Vic, identifies as agender and prefers the gender-neutral pronouns "they/them," Vic is enrolled in school as a boy because it is "easier." However, Vic is often misgendered by peers and teachers because others still read Vic as female. Carolyn actually admitted to feeling "extremely relieved" when Vic ultimately identified as agender, in large part because she had anxieties about the body modification that a transgender

transition would entail,<sup>84</sup> but also because she was “perfectly fine with Vic being gay and [she] was terrified of Vic being transgender.” Nevertheless, when I asked her if she had encountered the notion that transgender was “easier” to parent than gender-variant, she was well familiar and agreed:

Oh yes, oh yes, yeah, and I’ve had conversations with some people [on the listserv] ... about that, I think it’s much more difficult when they don’t choose a box ... Vic doesn’t identify just as a boy, I know that, so it’s difficult for me to get completely behind it [enrolling Vic in school as a boy] because I know that’s not the case ... [and] you question the validity of it more 'cause you’re like ... are they gonna settle on one or the other at some point?

In one unique instance, Janice advised that she became familiar with gender-variant prospects only after she had formally embraced her child as a girl and became more immersed in the parental-advocacy community. She confessed, in turn, that she has wondered if she should have tried to “stay in the middle” longer, had she been aware of those possibilities sooner and in light of the “boy mode” behaviors her child easily obliges in her in-laws’ company (where she is not allowed to be a girl).<sup>85</sup> Janice admitted, though, that she was “extremely uncomfortable with the middle” prior to her child’s transition (as recalled from the Santa Claus dress story above):

Janice: It’s kinda like going through a really blinding rain storm ... it’s one of those situations where if I had known a little bit more, I probably would have let us stay in the middle a little bit longer ... but I was extremely uncomfortable with the middle.

E: ... Knowing more about what?

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<sup>84</sup> I do not mean to suggest that transgender necessarily entails body modification. However, in this story, Carolyn advised me that Vic’s ultimate identification with agender, and not the former, was in part because Vic had decided against hormone treatments. As a person who identifies with no gender, (trans-)masculinizing or feminizing hormones did not make sense for Vic.

<sup>85</sup> Eileen’s ability to switch into “boy mode” at her grandparents’ house (including being “physically aggressive, kicking, hitting ... simulating martial arts punches in the air”) is at the root of the strife between Janice and her in-laws, who do not accept raising the child as transgender. They claim that Eileen is comfortable as a boy around them, and do not observe the same feminine behaviors (and identity statements) that Janice has observed for years, which ultimately led to her decision to transition.

J: Knowing more about gender-variant kids ... well to me at that time, I only—and again, I know this sounds really crazy, but I only knew, or at least could conceptualize ... the two polar ends, and I didn't realize that there was this whole group 'a kids that kinda live in the middle, um, and I never, never pressed for a transition, because again, like I've said multiple times, Eileen was way there faster than I was, and I was not ready for the transition when it happened ... but I might have liked to stay in the middle a little bit longer, only because I see how easily Eileen moves back to boy mode when she has to ... see her grandparents.

Janice is confident that Eileen is living as the person she feels herself to be (when she is not in her grandparents' care), but learning about gender-variant children who occupy more “middle” spaces in the context of her in-laws' skepticism has afflicted her: “[S]eeing that she can move fluidly like that makes me wonder ... if we shoulda stayed in the middle longer.” On the other hand, Janice also wonders if Eileen is “just picking the lesser of two evils”—getting to see her grandparents as a boy versus not seeing them at all (on these terms, gender-variant is very much a crutch against full sex-category relinquishment in her grandparents' eyes).

In all of these moments, parents attest to significant and/or non-binary gender variance—particularly when it comes to male-bodied gender variance—as something near impossible to understand or “grasp” conceptually, let alone facilitate or manage practically within our current social order, including schools and everyday actors with whom parents interact (indeed, Vic and their mother still had to “pick a box,” ultimately, at school). As Laurie said above, a gender-variant child—versus a firmly transgender one—means “not knowing,” and in the words of others, is cause for feeling “freaked out.” Janice's analogy of the “really blinding rain storm” that one strives to get through seems particularly reflective of many parents' sensibilities about negotiating categorically gender-variant, non-transgender terrain.

### *Parents and Politics: Dissecting the “Messy Middle” Debates*

Aside from this more visceral discomfort or confusion over non-binary possibilities, parents further reflected on gender-variant and transgender identities in markedly intellectual and politicized ways, hearkening to long-standing academic debates in feminism, queer theory, and social constructionism about “reifying the binary” or not (e.g. Lorber 1994; Raymond 1973). And several were not unfamiliar with narratives that frame “genderqueer” or non-binary identities as the more progressive option. Indeed, being aware of distinctions between a transgender, binary-identifying child (boy or girl) and more gender-variant, non-binary possibilities was important for parents in defending themselves against the notion that they are “pushing a child into a box,” or put differently, that they might be formally socially transitioning a child “too soon” into the “other box” (i.e. “reifying the binary”). Parents are only affirming, as they would tell me, what their children continually express themselves to be, which happens to be the “other box”; if their child were truly less binary, which they know that some are, of course parents would have never facilitated a formal social transition, to paraphrase the resounding response. Claire, for example, grew impassioned during our interview about tensions that have surfaced along these lines, in some ways defending her own family’s decisions to support a young child as a transgender girl “as young as” 4 years old:

The other one [debates among parents] is between parents who ... have truly gender-fluid children and parents who have transgender children ... so we get the squeeze from the right, which is saying, tell your kid to put on their goddamn pants and put an end to this and you’re screwing your kids up and it’s all your fault, and then um, the left, though, can be equally as dangerous, and the left is squeezing us with ... you’re just forcing your child to be a girl because you can’t stand the idea that gender is a binary, that’s a social construct, and you’re just



playing into it because you guys are white<sup>86</sup> ... so it's easier for you to have a girl than it is to have a genderqueer child or a gender-nonconforming kid and if you just had the cajones ... like blah blah blah ... .<sup>87</sup>

She went on to give a practical example where this surfaced:

So one woman just was on the transgender listserv saying this is really tricky for me because, you know, gender's just a construct, and we were like *no no no no*, the pink and blue is random, that pink is one thing and blue is another, but when you wake up in the morning and you know you're a girl ... [or] you know you're a boy, that's not made up from society, that is, that is your identity ... that's important ... .

Rick, Claire's husband, added that while they had been aware of the "social constructs" of gender in terms of men's and women's stereotypical roles, their experiences with a transgender child were teaching them about the "science of gender," which is more a matter of "your identity, your sense of self." Rick was the stay-at-home parent of four while Claire was the breadwinner of the family, and he often had to educate his male friends that full-time parenting is *not* the "easier" job—this for Rick is the "social" side of gender. But there is nothing "constructed" about feeling like a boy or a girl—that is a biological (pre-cultural) fact, he explained—only about what society determines boys and girls can do, like, act like, etc.<sup>88</sup>

Tory (mother of a transgender boy, 7), in contrast, who identifies her child as a transgender boy, confided that she feels that many parents are "so affirmative" in the way of

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<sup>86</sup> Claire's awareness of the raced and classed terms of such debates is noted and will be revisited in Chapter 6.

<sup>87</sup> At the same rate, Claire advised that she has also encountered this argument from lesbian-identified acquaintances and/or academic theorists and professors.

<sup>88</sup> Many parents, it seemed, would have similar biological accounts for gender-variant, genderqueer self-conceptions too—that these are wired in "during those first duplication of cells," as one parent once said of his gender-variant child. For most if not all parents, gender-variant, gender-fluid or genderqueer, and transgender were all considered as essentialist types or outcomes; thus, parents abandon strictly binary possibilities for gender but not pre-cultural, essentialist explanatory models of these. Essentialist frameworks are revisited in Chapter 6.

transitioning that they ignore or are oblivious to less binary possibilities (precisely the kind of argument that irks Claire and Rick above):

[I]t just surprises me that people are so affirmative and it's so 100% one way ... it's like some of the parents look at it as completely binary also, it's like she was a girl, now she's a boy, and that there couldn't possibly be anything in between. I get the impression that some people are somewhat black-white thinkers too ... I think the ones that think like me are probably more reserved in saying anything [in forums].

She gave a recent example of one parent who expressed reservations online about pursuing a formal social transition for his child, and Tory felt that many parents “jumped in” to warn him about “losing his child” if he delayed the process—insinuating, in her eyes, that he might be in denial about or unsupportive of transgender options:

[I]t just seems like a lot of political—when I talk about political dogma, that's kinda [what I mean], I can see the huge split between the people that ... jump right on the bandwagon and never question it, and then the people that wanna learn more and are open to more than one opinion ... and it does seem that if you're not completely affirming [you're criticized].

Despite currently identifying Connor as a boy (although she was using female pronouns frequently in our interview), Tory wants to afford Connor as much “latitude” as possible, and was particularly mindful about the potential for change down the line, including Connor's living as a masculine female as an adult:

I don't believe in 100% commitment to anything, having said that, I don't think there's a definite way to be a boy or a girl, so, if you're more flexible in thinking, maybe it wouldn't be such a big deal, even to Connor ... it's great to know you're a boy, but if you don't have to conform to what society thinks a boy is, would you really feel the need to change for anybody and just be yourself?

Similarly, Ally (mother of a transgender girl, 11) ruminated on the potential allures of a “simplistic” transgender narrative for gender-variant children (a narrative, incidentally, that Martsy above embraced quite candidly, precisely for its simplicity), even as she now

embraces her child as a transgender girl. As a preface: Ally asked if I had connected with another potential interviewee in town, who had transitioned her child “blazingly fast,” as Ally put it, which she described as the “bleeding edge” of the issue. She then elaborated on her observations of parents who seem to be transitioning their children at younger and younger ages (she joked that this was her “talking-trash-about-the-other-parents” part of the interview):

“Gender-variant” was always, uh, an awkward term. It was what we seized on first, and it had more, it was more stretchy. But the transgender identity is more tightly bound, and, okay, I’ll go there, this is my thing with [some parents] ... I’m thinking it might be, in a way, easier to explain to yourself that, oh, we just had him in the wrong box, some people, somehow, are cross-wired, and they’re in that box, not that one, and you can conceptualize your kid ... but to tear down or weaken gender categories, eh, that’s harder. So is it a relief to be told that, hey, y’know, not very many people know this, but there are some babies that’re just born with, for whatever reason, their brain got cross-wired, and they’re the opposite of what you thought, and ... their brain is not in line with the rest of their body ... I guess I wonder [about] being quick to say, “Ah! That’s it! We have an explanation here! He’s just transgender. Okay, done” ... [versus the] uncertainty about what you, what you’ve got here, and having to deal with, um, the unpredictability of your kid, um, not developing on a clear trajectory, and not being able to look forward to, y’know, ten years hence, we’re gonna be on blockers ... I almost sometimes see the, um, the narrative of the transgender person as nearly cross-gendered [as] temptingly simplistic.

I encountered just such dialectics quite intimately in one family’s story, during my follow-up interview with Lorraine and Cory (parents of a transgender boy, 11). Lorraine had since separated from her ex-partner, Sam (who identified as butch and gender-nonconforming and whom I had interviewed during our initial interview in 2010).<sup>89</sup> Their child, Jamie, was affirmed by both parents as a boy as of 5 years old. However, I learned that Lorraine and Sam were in the midst of great conflict over their Jamie’s physical transitions (if any):

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<sup>89</sup> I was unable to reach Sam for a follow-up interview.

Lorraine wanted to pursue hormone blockers, while Sam and her new partner apparently were adamantly opposed. At the time of the second interview, Lorraine and Sam were embarking on legal negotiations over “medical custody” of Jamie, for just these reasons. Based on conversations with Jamie, Lorraine feels strongly that hormone blockers are “a perfectly appropriate track to put him on” and are “protocol,” since Jamie expresses to her that he does not want to go through female puberty. But Sam and her partner, she told me, do not get this impression from Jamie, and do not want him engaging in bodily modification; Lorraine feels they are trying to push genderqueer possibilities onto him instead and that they want him to be “a poster child for being genderqueer”:

Well Jamie is caught in the middle [of us], and I feel sorry for the poor dude, I mean, really, I could care less except when he’s with us, he says “I don’t want to go through female puberty,” when he’s with them, they talk about how awesome it is to be genderqueer and that he doesn’t have to do anything to his body and he can just be as he is and he can still be male with female, with a female body—which is absolutely true, there’s nothing they’re saying that is wrong about that, except that, it’s not how Jamie feels, and he is afraid, and he told us flat-out on numerous occasions he is afraid to disagree with [them] ... I don’t know, maybe he’s afraid to disagree with us too [...]. [They] seem very bent on, from my perspective, making Jamie into a poster child for being genderqueer ... they’ve stated repeatedly in writing that Jamie is not averse to going through female puberty, but when I asked him about that, he’s *horrified*, he wants nothing to do with female puberty, he knows he’s transgendered, he’ll label himself as transgendered ... .

Jamie’s step-father and Lorraine’s new partner, Cory, is the one transgender parent in this study. Cory offered me his perspectives on the developing landscape of childhood gender variance—certainly not available or visible to him when he was growing up 40 years ago. As part of this, Cory admitted that he does not quite understand gender-variant or non-binary identities, that he is quite binary-oriented in his worldview:

You know, it’s a new world, and I can’t even possibly begin to understand it, you know I’m an older guy, I’m from [a] very conservative state, I went to Catholic school, I’m really just kind of an old fuddy-duddy in comparison to Jamie, you

know, and so that's okay ... but I really just try to relegate myself to answering questions [...]. If I had had his choices, I definitely would have taken 'em ... I mean I had my fantasies and my prayers to God at the age of six or whatever ... to make me a boy ... but I mean ... that's water under the bridge, that was forty years ago ... I'm a conservative guy, gender-wise ... I don't even understand the twenty-something's who are genderqueer, I don't get it, you know, but that's the new thing ... I like my stereotypes right where they are, I like my binary genders right where they are, but ... that's not the new thing, and I understand that people wanna be fluid, um, to me, that's not what I want ... for myself ... .

As Lorraine (who identifies as queer) said to me, “Elizabeth, it took me a very long time in our relationship to understand that I'm not in a relationship with somebody who's queer, I am not in a relationship with somebody who is trans, I am in a relationship with a man whose maleness was sustained with medical intervention ... .”

It is clear from these excerpts that parents find themselves immersed quite intricately in political, ethical, and/or intellectual debates about gender-variant “versus” transgender identities for their children. These discursive processes at once give voice to non-binary options and embodiments, but also validate and normalize binary identities and transitions for children as authentic to who they are (inclusive of body modification, if desired), not as a “sell-out” to the binary. Notwithstanding, the prospect of gender variance—that is, gender expressions that are perceived as explicitly or visibly “non-conformist” relative to binary standards, as Bruce would put it—continuously butted up against specifically male femininity in interviews, an inflection to which I now turn.

### *The (“Male-to-female”) Transgender Adult*

Tensions over perceived male femininity<sup>90</sup> surfaced quite sharply in parents’ admitted early associations with transgender. Inevitably, whenever parents described their previous understandings of transgender, they conjured up images of grown “men trying to be women,” which they acknowledged as sensationalistic and problematic. The transgender figure they described of these early conceptions was always a male-bodied adult in women’s clothing—that is, a male who was visibly gender-variant. Nancy gave the flagship response:

[M]y only exposure to like transgender was, like I’m gonna date myself here, but like ... Sally Jesse Raphael or Maury Povitch, like those talk shows where they have like these *transsexual* or cross-dressing men and they’re like forty who suddenly divorce their wives and live as a woman and you know I was thinking, *Oh my God, like I don’t want this to be my kid* ... I didn’t have anything that said like four year old girls that, you know, wish they had penises ... .

Near identically, Wendy said: “[W]e don’t think of [transgender] as like a [kid thing]—you know, the stories on Oprah where the guy’s like been married for thirty-five years and then he changes sex ... you just think of it as that kind of adult man who never had hormone blockers that just puts on the dress ... .”<sup>91</sup> Similarly, recalling their early reservations about using trans terminology to explain their child to others, Bob (father of a transgender girl, 12)

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<sup>90</sup> As indicated in the introduction, this term refers as much to others’ perceptions as to a subject’s own identification: often when I am speaking of “male femininity,” I am referring to a person who actually identifies as female, but is perceived as male or as having a male body by others.

<sup>91</sup> Incidentally, Gamson’s (1998) *Freaks Talk Back* challenges the notion that such sensationalistic talk-show depictions of gender and sexually variant persons are necessarily bad or problematic; rather, he argues, this kind of visibility, including the audience’s reactions, offers important exposure of more phobic understandings and treatment of such persons, which are otherwise packaged as tolerance in other popular media venues. This exposure enables candid, critical dialogue about the real state of LGBT acceptance in society. Here, the parents’ indeed recognize their associations from these talk shows as problematic and sensationalistic, but only in the very personal context of affirming their transgender child. As such, it seems to take more than the kind of “freakish” exposure Gamson discusses for people to recognize their own problematic understandings and stereotypes.

was fairly blunt about its cultural connotations: “[T]hey’re thinking 6’4” tall hookers that they’ve seen in the streets of New York ... .”

In light of these sensationalistic associations, parents said it was difficult thinking that the label or category could be relevant to their young child. Even after embracing their child as a girl and switching pronouns as of 4 years old—seemingly seamlessly relative to other parents I interviewed—Claire (mother of a transgender girl, 6) advised that they could not accept that transgender applied:

I knew that I had a child who was really a girl but who was anatomically a boy ... [but] I was resistant to the very basic fact that ... this word applied ... the term was something that we completely and utterly just didn’t think applied to us ... [it] was still something in our minds that applied to older men who cross-dressed ... .

As her husband Rick elaborated: “[T]he problem is that the word ‘transgender’ to us had a definition that included a little picture next to it of a fifty-year-old guy in pumps and his mom’s sweater, you know what I mean? That is an awful thing to say, but it is the stereotype that goes along with the term ‘transgender.’”<sup>92</sup> In subsequent emails, Claire wrote that our interview had reminded them of their own “transphobia” when they started this journey, including towards trans terminology. As I learned, an educator eventually told Claire that transgender is indeed relevant to their child and to transition they had already facilitated, at which point they started warming to the term.

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<sup>92</sup> This made for an interesting moment in our interview, when I marveled candidly at how seemingly seamlessly and early they made such a switch, all before embracing a transgender conception of their child. Claire and Rick were admittedly and understandably “defensive” about my reaction, as they felt I was insinuating they had done something “too soon,” or as Claire put it, had “put the cart before the horse.” I would never assert that there is an objective relevance of one particular identity category over another (i.e. transgender or gender-variant), especially considering how differently these can be defined, or that social transition must follow a certain sequence. But for most parents, embracing the category transgender paves the way for a formal, earnest pronoun switch, which often proves the last major boundary parents cross in accepting their child as the other sex (indeed, many parents were still in the midst of that transition during the interview, as noted by the pronouns used in the quotes). Hence my candid reaction, which was inappropriate, even as I strive to resist the role of the “objective” researcher who keeps all subjective responses under wraps (which my respondents may well have a right to know about).

Like Claire and Rick, many parents seized on descriptors like “gender-creative,” “gender-nonconforming,” or “gender-fluid” to use with others and evade trans associations (even as their child identified in binary capacities). As Monica (mother of a transgender boy, 5) said, “Even ‘transgender’ is a harsh word because it’s like associated with, you know ... the adult male or ... the adult transgender woman who’s like trying to get rid of her Adam’s apple ... .” Indeed, at another point in our interview, Monica attributed the marginalization of trans persons in society to such (male) embodiment issues, such as “having huge Adam’s apples, huge hands and feet.” I excerpt these comments to showcase parents’ admitted early discomforts with transgender, which are reflective of wider cultural hysterics regarding male femininity. It is noted that “freaky” or being “freaked out” (associations parents now eschew) and similar linguistic variants (“creepy”) surfaced around both the imagined “male-to-female” transgender adult and the gender-variant child who falls outside of conventional binary boxes. Interestingly, tensions around male femininity were relevant to several of my interviews with parents of transgender boys, whom parents described as not stereotypically masculine once they had formally socially transitioned (which I came to see as gender variance in the “other box”).

### ***Gender-variant in the “Other box”: Trans Boys and (Non)Hegemonic Masculinity***

Early in our follow-up interview, Molly and Joe (parents of a transgender boy, 11) told me that Gil engages in interests and behaviors that many would call “effeminate” for a boy, including wearing nail polish and bright clothing, playing with baby dolls, and being a *Wizard of Oz* fanatic. At the time of our interview, Gil had also told his parents he thinks he might be gay.<sup>93</sup> As Molly said, “[H]e would tell us, ‘Well I’m not like the other boys,’ so he

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<sup>93</sup> Several other parents of trans boys specifically indicated that they think their child might be gay or bisexual, based on conversations with their children, although they are not sure if this is part of the child’s own sorting



did feel really bad that he felt like he was stuck in the middle. Girls didn't want him, boys didn't relate to him." Meredith (mother of a transgender boy, 7) stated matter-of-factly that she thinks her son will be "gay," in light of a major crush on Harrison Ford since toddlerhood. Similarly, when I asked Harmony if she felt her son did anything stereotypically feminine, she joked that Baldwin (transgender boy, 8) is a bit of a "metrosexual"—heterosexual male who engages in stereotypically feminine practices concerned with grooming, beautification, and appearance. She elaborated:

He's very [concerned] with his style and his looks, like my older son will reach into the drawer and pull out any random shirt and any random pants and put them on, not take a single look in the mirror, and walk out the door. Baldwin um tries on five thousand outfits, um, leaves them all over his room, super fashion-conscious, he watches um music videos online like um ... Justin Bieber, and ... One Direction, and oh my gosh, Baldwin will watch those videos over and over and over, [his brother] is like ... why is he doing that? And Baldwin just loves it, so that I feel like is very, like, female-oriented, you know stereotypically female-oriented, to you know watch those videos and be so concerned about your looks—but also I know that that's like what society says a girl's supposed to do, and not a boy so ... He's also very socially aware, like the teachers, um, say that Baldwin has his thumb on the pulse of the classroom at all times and it's true, he's very socially conscious about what's going on, and who's upset with whom, and who got in a fight with this other person, and he's a huge tattler ... [that] is another like kind of stereotypical female thing that he does.

Rather than a kind of male femininity, however, Harmony believes that at least some of these behaviors concern his efforts to secure his male status among his peers and actually learn and perfect masculinity:

He does not want to give *any* indication that he might be in any way, shape, or form female, so he's very careful, like I feel like he watches those videos, he looks at the way they walk, the way they talk, the way they act, their mannerisms,

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out of their gender and sexuality (recalling themes from Chapter 4) (this relates to at least 5 of the 14 transgender boys; there are 17 children total who were assigned female at birth in the sample). That these children feel safe to vocalize these feelings to their parents is a testament to how particularly open and communicative these parent-child relationships are and to how *listened to* the children are within these households—arguably the crux of this child-directed, trans-affirmative paradigm.

what the clothes they wear, and he tends to emulate that with his own clothes, you know, like he'll wear his, you know, hip hop baseball cap on sideways and he's got his skinny jeans and his big tennis shoes ... he picks out all his own clothes, like if I ever try to buy him anything I'll end up taking it back because he won't wear it, so um, I feel like he's really paying attention to what society says is a boy and, *I wanna do that*.

Similar observations pervaded my interview with Nancy (mother of a transgender boy, 8), who was admirably candid about her own discomfort with her son's stereotypically feminine interests, including Justin Bieber, Barbies, preferring playing with girls (to roughhousing with boys), expressing interest in dress-up with dresses, and thinking he might be gay: "I gotta be *hooonest*, it was a little embarrassing for me because ... I'm saying [to my friends] that my daughter feels that she's a boy and she got the wrong body, so I'm gonna raise her as a boy, and now she's Mickey, *however*, she likes boys—or he likes boys—and he plays with Barbies ... ." When Mickey first told Nancy that he thought he might be gay, she thought, "absolutely not ... you're not gonna live, like, multiple, alternative lifestyles ... ." Nancy relayed multiple instances where Mickey's preferences did not live up to the stereotypes of the male sex. She expressed her discomfort, for example, when Mickey played dress-up in the house post-transition: "[S]eeing a boy dressed like a girl ... in my traditional mind, like, that's not right, you know?"<sup>94</sup> Nancy also remembered the time Mickey confessed to wishing he had asked for Barbies at the toy store instead of the army action figures they had purchased. He said he had felt pressured not to want the dolls: "I was kind of frustrated with him I think for getting the wrong toy, but I think it's more about like, *fuck*, what are you, are you a boy or—'cause I'm having my own trouble with this ... ." (Nancy, of course, ultimately

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<sup>94</sup> This reminded me of my first interview with Lorraine (mother of a transgender boy, 11), around which time her son had started expressing interest in playing dress-up at home. Despite her strong identifications with queer community and queer politics, Lorraine joked, "You know, be a girl or be a boy, but please God don't be a boy wearing dresses ... it's getting to be too Victor-Victoria for me."

bought Mickey some Barbies, too, which he adores and plays with frequently.) Additionally, Nancy mentioned the time that Mickey got hurt and cried at the skate park, and she had to work hard to check her thoughts about “sissy boys” in front of him: “[T]he thing that almost came outta my mouth was, *Boys don’t cry ... like part a’ me kinda felt ... You’re at the skate park now with a buncha’ teenage boys ... don’t be a baby, don’t be a sissy ...* I had to just really bite my tongue because I was angry at him, like, well you wanted to be a boy, then get tough ... .”

Nancy went on to say that she felt “envious” of other parents whose children were more stereotypical boys: “Because I think it’s just like, ok, then you’re fitting into my little box ... .” Evidently, Nancy was very cognizant of her own “traditional,” “conservative” outlooks on “gender stereotypes,” which her child continually troubled for her and which she consciously tried to resist. She mourned the hardships that such stereotypes have caused for her son, including getting teased by other boys as a “fag” at school and wishing he could dance with the girls at the school talent show: “I just felt so bad ... we live in this world where you have to be just like this or that at this age, and you know I’m the same way, because I know in my head I would probably be cringing if my kid was up there dancing to Justin Bieber with the girls ... .” All of this signals the trouble with visible, transgressive forms of male femininity or “girly boys” in our culture, in both cisgender and transgender cases, for parents and children alike. Tellingly, these kinds of post-transition gender-variant observations were not nearly so prevalent, if present at all, among parents of transgender girls, and why I take the time to note them.

***“As a tomboy he was great; we got away with ... tomboy”:* The “Princess Boy” Problem**

The above material begs at least brief commentary on the valuation of masculinity in our culture that is afforded both young boys and girls (which has been well documented elsewhere, e.g. Kane 2006, 2009; Martin 2005, Thorne 1993: 111-34). Chapter 3 detailed the eventual limits of the tomboy category for parents of transgender boys—and relatively soon into childhood (starting at approximately 5 years old). Nevertheless, it is hard not to observe the cultural fact that females can avoid the stereotypes of their assigned sex relatively easily—pants and tee shirts over frilly skirts and dresses, for starters—in a way that male children are rarely allowed to do. Indeed, permitting “boys” skirts and dresses outside of the house surfaced as one of the final frontiers that parents of children assigned male had to cross, and not without extreme trepidation [one parent was so loathe to allow her male child access to girl clothes that she sewed feminine appliqués (flowers, hearts, etc.) onto her child’s otherwise masculine attire].<sup>95</sup> As Serano (2007) says, “When it’s okay for women to wear ‘men’s’ clothing, but when men who wear ‘women’s’ clothing can be diagnosed with the psychological disorder transvestic fetishism, that is not transphobia—that is trans-misogyny” (15).

Halloween is very emblematic of this differential: children assigned female are seemingly easily permitted stereotypically masculine costumes, from Peter Pan to the Hulk to various superheroes and ninjas, whereas children assigned male rarely get to dress up as famous female icons (e.g. Ariel, Cinderella), at least not without deliberation and negotiation

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<sup>95</sup> Interestingly, another parent of a transgender boy did this with his underwear—she found the plainest girl underwear she could find (white and blue) and sewed on super-hero appliqués, versus buying the “regular” superhero underwear from the boys’ department. The distinction worth noting is that the former parent had to engage in this practice with outerwear, whereas this latter parent had already started buying clothing expressly from the boys’ department for her female child. At the same rate, that a parent engaged in these practices for garments that no one else would ever see signals the hold of accountability to the binary.

among their parents. Martsy's in-laws, for example, swiftly nixed allowing her child (transgender girl, 5) to wear an Abby Cadabby fairy costume for Halloween (which she had spent weeks giddily anticipating). In contrast, Karen (mother of a transgender boy, 10) took out her photo album during our interview and listed her child's Halloween costumes as of 3 years old: "Clown, Bob the Builder, Woody [from *Toy Story*], firefighter, knight, magician—a boy magician ... hockey player, Captain Edward Smith of the Titanic ... "; these were all costumes procured well before she had conceived of him as transgender. Karen said that she never expected or wanted her child to be a "girly girl": "Yes, absolutely, I was thinking tomboy and in the very beginning I was enjoying it ... ." Similarly, Dan (father of a transgender boy, 5) reported that he was thrilled to have a tomboy who liked to engage sporty activities with him ("hike, rock climb, run" etc.). These positions contrast starkly with the furor that was ignited when a J. Crew executive captured her son painting his nails pink in a photo shoot; some pundits called for professional intervention (James 2011).

It is also worth noting that a preponderance of mothers identified themselves as tomboys growing up (I came to expect this in interviews). Save for one parent (commenting on her husband), I never encountered a father who identified with a particularly feminine childhood, let alone in unabashed ways. Moreover, most parents of trans boys readily admitted that parents of trans girls probably had it harder. At one point Dan insinuated that the two categories were hardly relatable: "I didn't really relate much to the male-to-female [families] because it's just like, I feel like it's very different. I mean, yes we're kind of under the same terminology, but it's just, to me it's going from—it's just different." As a cisgender, masculine male himself, Dan was clearly reacting viscerally to the vast cultural differences between trans-feminine and trans-masculine expressions and transitions.

One educator I interviewed, Gail, who has spoken with an estimated 600 families since she started this line of work, was very direct about how this dynamic affects the age skew among the families represented at her organization. She told me that the majority of trans girls fall under 11 years old, while the majority of trans boys fall over 11 years old. She unequivocally attributes this to society's allowances for gender nonconformity among "girls" over and above "boys":

[W]e have a double standard, we *encourage* our girls to where what you want, dress how you want, get out there, throw that football if you want, you know, if you wanna play with trucks, here, you can be president. With our natal boys, we're not doing that, they're not walking out of the house in a dress, they're not, you know, running giddily down the aisle of pink toys with their parents saying *whoo-hoo!* And ... we've had many discussions among ourselves as well as with [other organizations] and ... we do feel there is a strong difference because of cultural expectations for the transgender [boys] ... most of them are just allowed to be, because they're called tomboys, and there's nothing pejorative about that term, but there is something pejorative about being a sissy ... .

In short, the differential treatment of "girly boys" and tomboyish girls, and the overbearing rigidity of masculinity that even early childhood is not immune to, cannot be overlooked when evaluating these parents' experiences.

The above section covers vast conceptual terrain, as well as lived experience, among both parents and children regarding the kind of gender variance that lies "somewhere in the middle" and challenges the limits of the sex categories. I marshal all of this commentary to assemble the prevailing conceptions, struggles, and associations with non-binary gender variance that these parents evidently confront, either politically and theoretically or in personal experience, particularly as these are inflected by male femininity specifically. The "messy middle," as Bruce called it, strikes parents as hard, scary, stigmatizing, especially for "boys in dresses." At the same time, awareness of its potentials pressures parents to consider

non-transgender options for their children, as difficult as they may be, before pursuing a more formal (and binary) social transition, lest they risk “pushing their child into a box” because it seems the “easier” option. Ironically, many parents actually cling to gender-variant possibilities early on, in the hopes of evading “truly transgender” outcomes, or “going all the way,” for their children. However, the perceived or experienced difficulties of more gender-variant identities and expressions leave many parents feeling relieved, ultimately, that their child is firmly binary-identifying—“even if it’s the other box.” In the next section, I turn to specific follow-up cases wherein parents had to wrestle with these debates in more concrete ways on the ground, as they realize and facilitate their own child’s most authentic sense of self over the course of his or her childhood development, in both transgender or cisgender directions.

### **THE FOLLOW-UP CASES:**

#### **MOVEMENT ACROSS THE GENDER SPECTRUM**

In this section, using four representative vignettes, I discuss 9 follow-up cases in my sample, namely those cases I interviewed in 2009-2010 whose statuses and/or identifications had changed as of my follow-up interviews in 2012-2013. While this spans a short time period, it marks fairly significant change in these families’ lives, and in some ways not surprisingly, as the children moved from early childhood (Kindergarten-1<sup>st</sup> grade) to later in elementary school (2<sup>nd</sup>-4<sup>th</sup> grades). Of the 13 follow-up cases total, all of the longitudinal change in identity or status occurred among the children assigned male at birth: 4 have since

transitioned to identifying as girls full-time, while the other 5 have developed in more normative fashions (although “normative” has its caveats, as I discuss below).<sup>96</sup>

These vignettes cannot exhaustively capture all of the dynamics and observations parents articulated about changes in their children’s gender over time. However, I select them as duly illuminating of the dialectics between childhood gender-variant and transgender possibilities (particularly for children assigned male), in ways that are perhaps more “tangible” than parents’ discussions in the first section: they showcase quite intimately children moving in both transgender and cisgender directions out of the less binary “middle,” as well as parents’ differing impressions of these developments. More specifically, these vignettes include notions of both internal, organic gender authenticity and external social norms and pressures, as well as child-directed and parent-facilitated dynamics, themes I encountered across all 9 cases. Using a small number of vignettes allows for more detailed time and attention to the nuances of these processes and perspectives and, in turn, sharper analytic clarity of the themes they represent (see Thai 2008: 19, 163 and Meadow 2011: 729 for similar usages of vignettes).

When I first interviewed these parents, they seemed very deliberate about whether their child was some degree of gender-variant or “truly transgendered.” Entertaining what I would consider the middle on behalf of their child, versus “going all the way,” surfaced as a prominent consideration these parents seemed consumed with, in a way that proved them

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<sup>96</sup> The one transgender girl at the time of our first interview still firmly identified as a girl at follow-up. All of the children assigned female at birth had maintained their gender identities and/or statuses according to the parents at follow-up (2 transgender boys, 1 gender-variant female). In short, the entire follow-up sample, composed of 13 cases, includes: 5 transgender girls (4 of which mark a “change” in identity status from gender-variant to transgender), 5 cisgender males who have developed in more normative directions (this group also entails some change), 2 transgender boys (no change), and 1 gender-variant female (no change, although she identified as a “boygirl” as a younger child).



veritable theorists and deconstructionists of the gender binary. In some ways, their efforts in imagining “beyond the binary” struck me as deflections of “truly trans” trajectories, which marked a scarier outcome in their minds and included the prospect of “sex change.” On these terms, trying to hold out for non-binary possibilities seemed a potential crutch against, or evasion of, fully relinquishing their child’s (male) sex category. And relative to the new sample—who by and large regard “truly trans” as the “easier” outcome to parent because it ultimately still fits within binary norms and institutions—this is an ironic contrast. But in other ways, these efforts imagined a wider array of gendered subjectivities and embodiments on behalf of their children, and challenged the limits of the male/female boxes altogether. As Shella said, reflecting many of these parents’ sentiments at the start of their journeys: “Tristan’s just everything, he’s not limited, and I think part of it is that gender thing, there’s no boxes for him ... I just want to keep it that way, I don’t want the world to crush him.”

From a methodological standpoint, I wondered if I just happened to capture the first set of parents when they were in the thick of those early deliberations—at a certain earlier snapshot in time of a more general “journey to trans” (or journey to cis-normative)—and just happened to capture the second set well after they had arrived at transgender, when those deliberations were thus less likely to surface in the interview. However, a comparison of the children’s ages at the time of the interviews challenges this supposition: all of the children who live as girls full-time were 6-7 years old at the time of the initial interviews, whereas the majority of the transgender girls from the new sample were fully transitioned as of that age. In other words, the new parents did seem to move to a transgender categorization sooner in the child’s development (5 years old) than the original sample of parents (7 years old); the follow-up parents, in contrast, lingered longer in the gender-variant area of the imagined

spectrum. As discussed in Chapter 2, too, the new set of parents were making parenting decisions in a historical context that was readily and rapidly more aware of, and hospitable to, childhood transgender possibilities. As such, I take the liberty of detailing some of these follow-up vignettes, which seem to capture a rare snapshot in time when parents were actively trying to carve out space “somewhere in the middle.”

### ***From Gender-variant to Transgender***

Four of the children who were assigned male at birth and were identified as gender-variant at our first interviews now live and identify as girls. Parents’ accounts for these transitions were divergent and not so clear-cut. In 2 of the cases, parents seemed certain and confident about their child’s female identity, as an authentic gender they had eventually come to realize and recognize, while parents of the other 2 cases exhibited a modicum of questioning and uncertainty about their child’s current status. Below I discuss one of each of such cases in the hopes of capturing these different parental impressions of affirmed transgender girls.

1. *Becca and Nathaniel (Bo, transgender girl, 6 and 9 years old).* In our first interview, Becca and Nathaniel felt strongly that their child was not transgender but gender-variant, and were using the label that Bo had derived herself, “boygir”: “[I]n terms of like, the identity part of it, I think he identifies himself as a boy or, you know, this slightly other category” (Becca).<sup>97</sup> Becca had actually started blogging about her child’s gender variance (this is how I first found her), writing and thinking quite earnestly about non-binary

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<sup>97</sup> Doing follow-up work with these parents proves tricky as far as honoring the children’s current gender identities. Bo, for example, identifies and is recognized as a girl now by everyone, and her parents use female pronouns to refer to her. During our first interviews, however, parents were using male pronouns and/or masculine birth names. In the interest of charting the longitudinal journeys that these parents took, I quote them directly while acknowledging that the names and pronouns they used do not necessarily reflect the children’s current affirmed gender. Outside of direct quotes, I will only ever use the pronouns that the child prefers (i.e. “she” and “her”).

possibilities. Like many parents, Becca cited her child's seeming comfort with her anatomy as a sign that she was not transgender: "I don't think that he's truly transgender, from what I understand ... like when it comes down to it, there's no dysphoria, there's no body issues ... there's none of that." She added, "[H]e wasn't necessarily like, um, you know, all out ... saying 'I'm a girl, I'm a girl, I'm a girl, I'm a girl!'" Around the time of our first interview, Bo was allegedly experimenting with more masculine expressions from time to time, too, wearing all boys' clothes to summer camp and bonding with other boys her age. In our interview, Nathaniel marveled at Bo's apparent ability to hang with both the boys and the girls competently, referring to her as a kind of gender "double agent":

You know, to me, he's like, he's a spy, and he snuck into the world of women and he's in there, and he's got 'em figured out, he's got 'em nailed, you know, there's no question that he speaks "girl," and that part fascinates me because now ... it feels like, even though he's a boy, he snuck over to the boys' side, and he's checking out that side of the plate, and getting them all dialed in and figured out, and you know, [he's learning] how do you fart and burp and hit people and do stuff so that you're acceptable on that side of the world, too, when the world seems to have, you know, this binary construct. It's like he's a double agent, you know, and he's somewhere in between, and he's just constantly, you know, picking up on stuff ... and it's just *amazing*.

At our second interview, Becca and Nathaniel reported that Bo is now an affirmed transgender female. They advised that Bo had been presenting and dressing as increasingly feminine at school, where all her peers knew her as a "boy," through third grade, at which point they started observing distress, anxiety, and behavioral issues, which seemed to catalyze the decision to formally socially transition to "girl." To these ends, Becca and Nathaniel recalled a rather pivotal moment when they asked Bo how she wanted to be enrolled and identified in school—as a girl or something else—and that Bo was "writhing" distressed on the floor shouting, "*I just wanna be a girl!*" At first, Bo requested female

pronouns but not a change in her masculine birth name, but after a short time, Becca and Nathaniel felt compelled to step in and say that that was confusing for her peers and that she should use her chosen gender-neutral name instead. When I asked them what they made of Bo's request to keep her masculine name, Becca felt it was Bo's own fears over an explicit "male-to-female" transition among her peers—that maybe, in her eyes, keeping her old name would make things more subtle and seamless among others. Ensuing disagreements with the administration over Bo's use of the girls' restroom ultimately resulted in their enrolling Bo in another school privately, meaning that only a few key staff persons are aware of her transgender status. As Becca told me then, "there's more [of] a resolve in my mind that really nobody needs to know this." It is noted that a masculine birth name and female pronouns proved literally untenable in this scenario, symbolic in many ways of the troubles expressed above with non-binary and/or visible forms of gender variance, even though Bo at this point did not represent a gender-variant case.

2. *Ally and Elias*<sup>98</sup> (*Raya, transgender girl, 7 and 11 years old*). Like Becca and Nathaniel above, Ally was very cautious about staying cognizant of non-transgender possibilities, in part because she had observed a seeming dexterity in her child with both masculine and feminine modes of interacting, sword-fighting with boys one minute and gabbing with girls about Hannah Montana the next: "I just noticed how he would sort of flow from one to the other, it was very situational." Raya had exhibited feminine preferences since childhood, including fashion, dress-up, dance, pink cowboy boots, wearing towels on her head to simulate hair, etc. (she also had a mastery of different types of cars). Like many of these parents, Ally was very reflective about options outside of, or in between, the

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<sup>98</sup> Elias, who is Mexican, is not as fluent in English as Ally; this made for more limited conversation between the two of us, though he was equally candid about his feelings along their journey. Like many cases/interviews in this thesis, the quotes marshaled here are mom-centric.

(trans)gender binary: “I sometimes wonder whether what we’re looking at is just another intersex condition of sorts that is much more subtle.” And she mused about possible “other spaces”: “He says, ‘I’m more girl than boy, so I’d rather they ... think of me as a girl.’ What remains kind of unanswered is, if he could just have it exactly the way he likes, would he rather just have a whole ‘nother space opened up for him that doesn’t have to be just girl, just boy, and he just kind of *be*.” Informing some of these deliberations, Ally did not recall explicit cross-gender identifications or declarations from her child early on: “Yeah, none of that [i.e. ‘I’m a girl, stop calling me a boy’], which is partly why I find that I kind of hang back, and I’m in this watching mode now where I’m like, okay, did I just totally miss something before or do I have a gender-fluid child?”<sup>99</sup> At the time, both Ally and Elias were avoiding using pronouns around Raya at Raya’s request. During these earlier years, however, Ally felt that she had observed some conscious amplification on Raya’s part of her femininity, so that peers were less likely to question her behaviors: “I got the impression towards the end of the school year that he had drawn a few conclusions ... one was that people weren’t gonna let you be a blend, they were going to insist that you had to be one or the other ... so he has decided just it’s easier if everybody says he’s a girl.”

As of our second interview, Ally and Elias had embraced Raya as a transgender girl, and reported that she had formally transitioned in third grade, when she “edited out” all the boy articles from her wardrobe. Nevertheless, Ally has always bemoaned the polarizing forces of the male-female binary, especially among young school children (she identifies as bisexual and says she would have adopted “genderqueer” for herself if it had been available in her youth), which she wonders might be an influence in her child’s trajectory. For

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<sup>99</sup> Ally does remember other kinds of statements, though, such as “‘I’m gonna get out of the girls’ side of the car’”—as Ally explained, “she started putting a girl label on stuff and claiming it.”

example, after a conference that included several “genderqueer” teen speakers, Ally felt that Raya returned home to experiment with more bigender or fluid clothing interests and socializing, much the way she did as a younger child: “[These teenagers were] kind of dress however you feel like it, uh, one day to the next, [and Raya saw that] she didn’t have to have a consistent gender presentation that was carefully crafted for the world ... .” But Ally observed that this quickly ceased soon into the fourth grade: “[A]nd then it was really noticeable--boom, back to the closet again. [M]y theory is that she got push-back, she found that, oh, we’re back in [our hometown] again ... .” In light of these observations, Ally went on to say (I did not raise the “sociological component” myself):

So that, that is always in the back of my mind, is ... would we get a different arc of development for her if we were magically transported to a place where, um, where gender is perceived differently and not so polarized? ‘Cause she really, really cares about belonging. So, yeah ... I think a lot about the sociological component ... ‘cause I don’t know how much of her identity is actually being shaped by the culture and its language, and what the acceptable categories are in her age group ... .

Heather similarly wondered about her daughter’s transgender status, in part due to her seeming disinterest in body modification (like several children in this sample, Samantha was not a fan of the idea of having to get routine shots or injections and seemed happy to avoid hormones):<sup>100</sup> “So she self-identifies as a girl, she’s asked to use feminine pronouns, she’s changed her name, and I see her as a girl. However, she is still very, for lack of a better word, *un-adamant* about it. ... could she be one of these kids who’s in the genderqueer category, who’s going to just go back and forth? So bottom line, I don’t really know.” In these

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<sup>100</sup> Parents are well aware that not all transgender persons pursue hormonal interventions or body modifications (or have body dysphoria). Nevertheless, a child’s comfort, or not, with their sexual anatomy, at various stages in their development, is one indicator parents carefully consider about their child’s (trans)gender identity/status, as well as whether such medical technologies are an appropriate course of action.

instances, parents indicated more uncertainty than others about their child's current transgender status.<sup>101</sup>

### ***From Gender-variant to Gender-normative(ish)***

Similar to the parents above, the parents of the children who have developed in more normative directions have differing accounts for what those changes over the years, with parents in 3 of the cases attributing at least some of this change to social pressures and normative imperatives, while parents in the other 2 cases were confident that their child's status is truly authentic to who they feel they are. I will discuss one of each of such cases in the hopes of capturing these different parental impressions of children who developed in cisgender or normative directions. Before I proceed, I note that using "gender-normative" feels inaccurate relative to these children, as none of the parents would describe them as stereotypically masculine. The children have not departed from their assigned sex "male," but it might be more accurate to describe them as "cisgender boys" than "gender-normative." One child, for example, is still often read as female in public (despite all-boy clothes), and another still occasionally wears pieces of girl clothing as part of his fashion sense (e.g. hot pink pants, but never skirts and dresses like before). Notwithstanding, for all of these children, parents report that their more outwardly feminine expressions and interests have waned, especially outside of the home.

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<sup>101</sup> Both Ally and Heather are unique compared to the other parents of transgender-identified children in this sample: the other parents, represented in the section above, were confident and certain about their child's transgender status, that it is *not* a kind of acquiescence to the male or female boxes, effectively. Ally and Heather, in contrast, exhibit more agnosticism, so to speak, as I've sought to show here, in light of the "polarizing" pressures of the binary, and the seeming limits of genderqueer possibilities, that both have observed in their journeys, especially for persons assigned male. In light of the perspectives that all parents voiced about the limits and challenges of more gender-variant options, such considerations and concerns on their parts beg highlighting.

1. *Beth and Barry*<sup>102</sup> (*Tim, cisgender boy, 5 and 7 years old*). In our first interview, Beth offered an exemplary host of gender-variant markers to describe their son (wanting a princess party for his 4<sup>th</sup> birthday—which he didn’t get—women’s purses, Barbie bikes, wearing a hoodie on his head, which he referred to as his “hair,” etc.). Tim was obsessed with an Ariel Mermaid costume, for example, which he often wore around the house (at first with matching jewels and heels but he was later disallowed these). Beth also recalled one moment where she was talking to both of her children about what it is like to be a boy or a girl: “I said, ‘Well I sometimes wonder what it would feel like to be a boy, you know, that’s natural,’ and Tim told us, ‘Well I know what it feels like to be both a boy and a girl,’ and so I said to him, ‘Really, what does that feel like?’ And he said, you know very matter of factly ... ‘The same, just both the same.’”

At our follow-up interview, Beth reported that Tim has “toned it down, like by his own choice” regarding his gender-variant preferences: “I think he started in first grade being much more, you know, self-regulating ... .” When I asked Beth why she thinks this change is a matter of self-regulation, and not just a disinterest in more feminine things, she replied, “[B]ecause he’s sort of extreme about it.” For example, “[H]e’s very cautious now that his favorite color’s blue, and that he only wears blue.” Beth feels that Tim is uncomfortable engaging in his more “flamboyant” behavior around his father and brother, but allegedly did a fashion show for the babysitter while they were out, and enjoys doing a workout video with Beth provided the other two are on a different floor of the house. Interestingly, Beth reported that Tim once described his experiences with gender as “discrimination”: “[H]e’s really smart and he said it was discrimination [not getting to play with the girls] ... because they had studied ... Black history month ... and he’s just like, ‘You know that discrimination still exists

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<sup>102</sup> I was unable to secure a follow-up interview with Barry.



in the world, with gender?’” Beth advised that she would love to find literatures that might help her with childhood gender variance, but that so many strike her as “extreme”: “I’m constantly ... wishing there was a book ... just for the lay person, there’s nowhere I can go ... [but] it seems like everything else is just, um, there are a lot of extremes, a lot of extremes, and so it’s hard to get in that conversation if you feel like your kid is definitely this way, but they’re not wearing lipstick and dresses to school ... I mean he wouldn’t grow his hair long and wear dresses to school.”

Beth mentioned that Tim is in therapy for anxiety, and that the therapist does not think the anxiety is necessarily related to his “gender stuff”—but Beth “beg[s] to differ”: “I think if you know instinctively that you don’t fit in somewhere, like how can you not ... feel anxious. It’s got to come out in some way; you can’t sublimate the whole, like—he obviously does not fit in with the typical boys.” When I recalled Barry’s concerns in our first interview about Tim’s seeming “repression” of his feminine side, and what damage that might do to him, Beth advised, “I think maybe we’ve accepted the repression now ... it’s kind of his way of being, that he’s more repressed in general. But he still always has that ... relating-to-girls ... .” Beth also reported that they have accepted “the fact that we basically think he’s going to be gay,” although Beth still fears transgender possibilities, which to her is a scarier outcome.

2. *Laurie (Phillip, cisgender boy, 7 and 11 years old)*. When we first spoke in 2009, Laurie identified her son as gender-variant or a “pink boy.” He was wearing dresses to school throughout pre-school and Kindergarten, which a letter to other parents explained on his behalf, and had asked for girly bedroom décor, among other things. Laurie also said that he voiced the idea of starting Kindergarten as a girl, but Laurie felt this was a strategy for

avoiding all the questioning from peers, versus an authentic gender identity: “[W]hen we were gonna start kindergarten, he said he wanted to go to school as a girl, and we said why, and he said because then people wouldn’t ask me questions, and I think he just wants to be himself ... .” Phillip has developed in more normative directions (i.e. preferring boy clothes full-time, more boy friends and more classically boy play interests, such as Star Wars Legos).<sup>103</sup> As such, Laurie sees him more as a “purple boy” as a sixth grader (i.e. he loves Opera and hates sports). Still, her son is often read as a girl in public due to his long hair and quasi-feminine physique, Laurie explained, despite fully boys’ attire, and he is not allowed to use public restrooms alone because of these constant misattributions. Laurie is very confident her child developed in ways authentic to himself, versus succumbing to social pressures, as exemplified by his first several years in school in dresses. However, Laurie reports that Phillip requested that she and her husband use pen names when they published a book on “pink boys,” to avoid the associations and being mocked or teased (which he experienced a lot of in 1<sup>st</sup>-3<sup>rd</sup> grades). Laurie wishes there were more room in our culture for “pink” or “purple” boys like her son, and she feels that all the discourse about transgender and/or “gender-fluid” children obscures the issue of just opening up the boyhood box, as we have permitted of girls and tomboys.

In short, these children and their genders have developed in different directions, and their parents’ accounts for what brought about those “outcomes” differ, with varying degrees of parental certainty, as can only be informed by years of rigorous reflecting on the binary. Some report distress and anxiety as a catalyst for newly realizing their child’s gender, wherein the parents take on a more active facilitator role, while others describe a relatively seamless transition to girl that is still largely child-directed. Some attribute the changes to

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<sup>103</sup> These interests had already started as of our first interview.

“social pressures” to conform, while others are confident that their child’s current identity and expression reflect them authentically (even when bullying and teasing was part of the story). The present childhood “outcome” is perhaps less sociologically pertinent than parents’ different perspectives and processes for accounting for them—often relative to the same stage or identification (i.e. a transgender girl or a cisgender boy). Parents identified multiple and varying factors, both external and internal, that were potentially influential in their child’s current (trans)gendered identity.

### ***Discussion and Conclusion: Gender Variance and Male Femininity***

This inventory of parents’ experiences and perspectives offers a compelling demonstration of the complicated character of the gender binary and the power of the social organization around it. Either through their own children or through the experiences of other parents and the dialogues that attend, these parents come to newly understand gender not only as a matter of cisgender or transgender possibilities, but inclusive of non-binary, gender-variant possibilities that cannot be easily coded as, or reconciled with, a normative sex-categorical box. As Janice said, “I only knew, or at least could conceptualize ... the two polar ends, and I didn’t realize that there was this whole group ‘a kids that kinda live in the middle’—as several of the children from the follow-up sample seemingly did for several years. Now that these parents recognize these children as boys or girls, perhaps they might not think their child was ever “really” a child in the middle but was trying to express and realize their gender as such. Nevertheless, parents’ early negotiations within and around the binary certainly attest to their attempts to conceive of the middle as a viable option for their children.

We cannot conclude that gender-variant, non-binary, and/or genderqueer possibilities are so difficult to manage culturally and institutionally, for both young children and the persons who parent them, that they are quickly abandoned for a “box,” either the assigned one or the “other” one. That polemic has plagued academic and activist discourses and theorizing for decades. Indeed, some of this material raises the question as to whether parents’ early efforts to envision gender-variant and genderqueer possibilities for their young children—particularly for children assigned male—is in part a deflection of “truly trans” trajectories (not the other way around) and an evasion of relinquishing sex-category assignments. In light of many parents’ original notions of transgender or transsexual as such a culturally stigmatized status, parents’ motivations to actually evade transgender possibilities for their children stands as one logical interpretation against the narrative of “succumbing to the binary”. And no parent—as much as it pains parents, advocates, professionals and researchers alike to state—enthusiastically or unthinkingly jumps to the “other box” for their young child just because it is the “easy” thing to do. These transitions never feel “easy” for parents, even if many of them ultimately envision binary social transitions as easier than the gender-variant places in the middle. As one prominent advocate said, when the notion of “transitioning to the other box too soon” came up in the interview:

[W]hy would a parent—and this is, you know, *ugh (sighs heavily)*—why would a parent think that this would be so awesome (*laughs*), like having your child go through this process, having your child go through surgeries and everything, having your child go through marginalization and prejudice, why would a parent, you know, sign their kid up for that ... like, *really?* ... I have not known a parent yet that would not step off of their child transitioning, given that information from the child ... there’s not a parent I’ve ever worked with that wouldn’t do it, *ever*.

Fundamentally, these parents are only affirming and responding to what they see and hear their children do and say at any point in the life course—which is often the “other box.” And

for many parents, that revelation is, ultimately and admittedly, relieving relative to the specter of more nebulous or visible forms of gender variance that they no doubt tried to accommodate. Even while they move toward more distinct identifiers for their children, as informed by their children's own assertions and expressions, parents demonstrate that arriving at these conceptions is not easy, that there are signposts and turning points and re-interpretations, not to mention fears of either the unknown or the very much known. As such, parents find themselves thinking through just such polemics and debates about binary and less-binary possibilities on their own, as they venture into the greater parental-advocacy community and develop a new (trans)gender consciousness. That parents find themselves deliberating over non-binary possibilities on behalf of young gender-variant children, as they come to newly understand a world so ruthlessly ordered around a rigid male-female binary, is remarkable, in multiple senses of the word. Through these deliberations, parents recognize that there are children all over the map, or all across the proverbial gender spectrum, producing a nascent set of interpretations and categories that were unavailable to previous generations of children (especially ones that don't have to mean "just gay").

This discussion cannot speak for or speculate about the children's own sensibilities, considerations, and authentic senses of gender, about why they felt drawn to one particular gender identity or expression over another, nor can or would I project any final adult "outcome." (Indeed, I would sooner interrogate the notion that there might be any finite "outcome" at all, versus an array of gendered possibilities that are as true and authentic as they can be for any one person at any moment in time during the life course). I can only assess parents' own accounts of those revelations as they unfold over a particular part of the life course (sometimes over a matter of a few months or years). But these parents are the

principal agents who effect and facilitate their children's self-expressions and self-identifications, whether that means a formal (binary) social transition or not, so their accounts of these developments, amidst a seeming proliferation of gendered options, both now and in the future, are one grand part of the sociological story.

At the same time, it would be remiss to neglect the burdens and limitations all of this means for persons assigned male specifically, for whom more visible forms of gender variance are so often cause for anxiety, distress, hyper-vigilance and daily negotiation—that is, are ever subject to the oft-ruthless consequences of gender accountability, for parents and children alike. The two sides of the binary are far from equal, and the process whereby one locates oneself (or one's child) is far more fraught for males than females. At least some of this discussion begs the question, would the notion of the gender-variant “messy middle,” or being “somewhere in the middle”—almost always the feminine boy in parents' narratives—even surface if our culture were less phobic of male femininity? As Laurie said: “I think that part of trying to parse this language so thoroughly is, um, discomfort in our culture about ‘pink boys’ [feminine boys] ... .” I seek to emphasize that parents often find themselves wondering and speculating within just such parameters, marking admittedly murky, disquieting, and uncomfortable practices and processes—with themselves and with others—that nevertheless prove essential to the journey of identifying and supporting their gender-variant and/or transgender child. These parents are realizing that while the “middle” may be “messy,” conceptually and practically, there is indeed a gender-variant middle to be reckoned with in the first place.

In the next and final substantive chapter, I turn to parents' negotiations with privacy, (non)disclosure, and advocacy on behalf of their transgender child. As I will discuss, such

privacy practices are related to parents' newfound understandings of transgender as a matter of biomedical privacy and confidentiality. Parents' often analogized their child's "contradictory embodiment" to a physical disability or a birth defect, which should be nobody's business outside of the parents and/or practitioners who manage it. I examine these issues in tandem to explore how this new generation of parents attempts to normalize transgender in the 21<sup>st</sup> century, in the most compelling ways they know how, for their children and for others. Parents' perspectives truly rupture the import of the physical body from one's gender identity and expression; their child's body should have nothing to do with how they are allowed to live and be recognized in the world. At the same rate, however, biomedical frameworks or theories for transgender realities risk eclipsing more sociocultural challenges to normative logics for sex and gender, which render gender variance—particularly more visible forms of gender variance and "contradictory embodiment"—a social "problem" in the first place.

## CHAPTER 6

### **Normalizing Trans (?): Privacy, Biomedicine, and Body Logics**

*“It is time to move beyond pseudoliberal sound bites about how we all need to accept people who differ from us. Mere tolerance is insufficient. ... [W]e each need to take personal responsibility for our own presumptions ... because the truth is that every day, each of us is guilty of committing countless acts of assumption.” (Serano 2007: 251)*

#### ***Introduction***

This chapter examines a prevalent theme in my interviews with parents: their negotiations with privacy and (non)disclosure of their child’s transgender status<sup>104</sup>—which are, at root, parents’ management of their children’s bodies. Parents’ discussions about their children’s privacy—about keeping their children’s “privates” private—inevitably confronted the terrain of the body and, in turn, normative logics for sex and gender. To put it in many parents’ terms, “What their child has between their legs is nobody’s business.” On these terms, their child’s transgender status is a physical, bodily matter, echoing long-standing arguments that trans is not a mental illness or psychiatric disorder, but a medical matter most appropriately addressed in the medical realm, if assistance or treatment is desired at all. In turn, few if any persons should know about their child’s transgender status, lest they invade or exploit their child’s “medical privacy” or “medical confidentiality.” One parent, for example, cited a “violation of HIPPA” laws in her confrontations with school personnel about bathrooms; another parent said, “I don’t walk up to you and say, ‘Hi Elizabeth, it’s

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<sup>104</sup> I use “status,” and not “identity,” because these children do not necessarily identify as transgender or disclose themselves as such to their parents, even if they later come to embrace this term, which their parents have explained to them. Rather, they identify as boys and girls. I prefer “status” so as to emphasize matters of transgender embodiment, not “identity” and the related identity politics or politicized identity categories that pertain. Such matters of identity categories and labeling are actually substantively related to this analysis.



nice to meet you, and by the way, I have a vagina and I have yeast infection right now.” In the interest of protecting their child’s affirmed gender, including their bodily privacy, many parents felt conflicted about engaging in more public advocacy regarding transgender children, and the majority of parents preferred keeping their child’s transgender status as private as possible, per their children’s wishes.

In line with this biomedical framework, I frequently encountered some parents, although certainly not all parents, analogizing their child’s transgender embodiment to a disability or medical issue, including, sometimes, a “birth defect,” which resulted in a “mismatch” between their child’s sexual anatomy and their gender identity. One parent mentioned that this came up in an online debate among parents about privacy-versus-disclosure, wherein many parents felt that telling others that one’s child is transgender is like telling them they have a birth defect; it is inappropriate, immaterial, and an invasion of the child’s privacy. In these ways, parents’ reckonings with normative logics for sex, gender and the body often intersected with our discussions about privacy and (non)disclosure. However, some parents for whom a “birth defect” understanding was meaningful were not necessarily private about their child’s transgender status, but were actually quite public. As such, there is not necessarily a one-to-one correlation between birth defect analogies and staying private about one’s child; some parents drew on this as a reason for explaining their ethic of non-disclosure, others drew on it apart from privacy negotiations. As I will discuss, I merge these themes because they all hinge on the body, transgender embodiment, and related negotiations and narratives in a culture that presumes cisgender/cissexual embodiment.

At other junctures of our interviews, I also explicitly asked parents if they “ever thought about ‘causes’ of gender variance or transgender,” to gauge how they regarded

theories that circulate about gender and/or sexual variance (e.g. “hormonal washes in the womb”), as well as to gather their more general explanations for gender diversity. As such, it is arguable that I primed parents for the kinds of biomedical frames, and disability analogies, that I detail below; indeed, the term “causes” in our culture almost always has a biological or biomedical connotation. However, several parents responded quite specifically to the question, having already thought considerably about, if not researched, various biological factors, processes, and/or “correlations” that might have resulted in a transgender child. These moments in our interviews also reckoned quite intimately with normative logics for sex and gender and transgender embodiment.

The wellspring of much sociological theorizing on gender actually stems from this issue—one woman’s (Agnes’s) management of her status as female while keeping her “male” genitalia private and undisclosed, save from the few doctors (and family members) who were privy to it (Garfinkel 1967; West and Zimmerman 1987; West and Fenstermaker 2002). Indeed, one’s ability to live accountably to a self-identified sex category—and not necessarily to an assigned sex—is the basis of particularly sociocultural, versus biological, renderings and interrogations of “gender.” It is the revelation of one’s bodily “criteria” for sex that can bring their status as male or female under serious scrutiny, to potentially dangerous ends (Schilt and Westbrook 2009). As West and Zimmerman (1987) wrote:

It is the *presumption* that essential criteria [genitalia] exist and would or should be there if looked for that provides the basis for sex categorization. ... Agnes's claim to the categorical status of female ... could be *discredited* ... if her possession of a penis became known ... . In this regard, Agnes had to be continually alert to actual or potential threats to the security of her sex category. Her problem was not so much living up to some prototype of essential femininity but preserving her categorization as female. (132)<sup>105</sup>

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<sup>105</sup> It is important to note that, the authors do not mean sex assignment, but sex categorization during everyday interactions when the “essential insignia” (i.e. actual physical body parts) are not available for inspection. The

The parents in this study have well-subscribed to this understanding of gender—their children can live as boys and girls, regardless of their sex, which has little relevance to daily interaction anyway (especially for pre-pubescent children whose secondary sex characteristics have not yet developed). As Meredith (mother of a transgender son, 7) said of keeping her child’s transgender status private, “I don’t go around telling everyone I have a vulva.” In the way of visibility, to be “out” as transgender is to effectively reveal that you were not “born with the body,” or may not currently have the kind of body, that is otherwise presumed of the sex category with which you identify—what Connell (2012) would refer to as “contradictory embodiment” (see also Jenness and Fenstermaker 2014).

Thus, in the discussion that follows, I grapple with several different themes that continually collided in my interviews, and I draw on a range of related fields of scholarship to do so: privacy and (in)visibility politics regarding being transgender; disability and disability rights discourses; essentialist understandings about sex and gender, or “body logics,” as I call them; and lastly, the raced and classed dimensions of these frames and experiences. I explore the intersection of these themes to cautiously and critically consider the ways parents, advocates, professionals, and scholars alike newly attempt to conceptualize and normalize transgender in the 21<sup>st</sup> century, particularly in the context of early childhood development and middle-class modes of childrearing (Lareau 2002, 2003). Which perspectives on transgender embodiment might cultivate a context that is safer and more receptive to transgender realities, bodies, and experience, *should* these be revealed, disclosed,

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“problem” for Agnes was not so much to live up to an accountable femininity, but that the only way to preserve the categorization of female in the eyes of others—given the circumstances—*was* to appear accountably feminine. This, according to the framework, is how Agnes prevailed as a woman.

or “outed,” or if they represent particularly visible forms of gender variance? How might we normalize gender variance in culture at large, beyond the safety of the biomedical clinic and the privacy of the families who support it? Moreover, how might we achieve such gender-expansive understandings while honoring everyone’s deeply felt sense of self, whether it be having the “wrong body,” a “birth defect,” or other? Serano (2007), for example, speaks quite fervently to this. She explains that her trans experience, like many people’s, had less to do with her “gender” and more to do with her body; she had a strong, intrinsic dissonance between the “subconscious sex” she knew herself to be (female) and her physical sex (male). Once she finally embarked on sex change modifications, things just felt “right” (86). This is why she identifies as transsexual, more than transgender, and gives much credence to theories for the “hard-wiring” of gender identity in the brain (81). All of the above questions and concerns motivate the present analysis.

LGBTQ experience and identity is often compared to disability (Clare, 1999; Corbett 1994; McRuer 2006; Samuels 2003). Much like the fields of gender, sexuality, and LGBTQ, disability rights activists and scholars have challenged traditional medical models that frame (and seek to “correct”) disability as an individual pathology or abnormality, instead adopting a social model that interrogates normative institutional practices and beliefs that differentially en-able and dis-able different kinds of bodies (Clare 1999; Kafer 2003; Oliver 1990). Intersex rights discourses marshal the same critiques to de-pathologize intersexed bodies (Chase 1998; Colligan 2004; Fausto-Sterling 1993). Given the level of physical embodiment that “difference” means for transgender and gender-variant experience in particular—as well as the accommodations of various institutions and specialists that parents of children with

disabilities must seek out (Litt 2004; Landsman 1998, 2000; Panitch 2008)—such frameworks are particularly relevant to the parents here.

Much of disability rights activism concerns the impetus to publicly and proudly proclaim a politicized “disabled” identity:

Coming out, then, for disabled people, is a process of redefinition of one’s personal identity through rejecting the tyranny of the *normate*, positive recognition of impairment and embracing disability as a valid social identity. Having come out, the disabled person no longer regards disability as a reason for self-disgust, or as something to be denied or hidden, but rather as an imposed oppressive social category to be challenged and broken down. . . . Coming out, in our analysis, involves a political commitment. (Swain and Cameron 1999, qtd. in Samuels 2003: 237)

However, the imperative to “come out” and openly identify as gay and/or disabled, as well as the frequent analogizing between the two for political purposes, has been criticized by many scholars (Corker 2001; McRuer 2006; Patsavas 2014; Samuels 2003; Thomsen 2015). Thomsen (2015), for example, argues that the hegemony of visibility politics for LGBT and disability—and not, say, for being a man, a woman, a person of color, and/or from a particular location—elides issues of race and/or geography, which might pose more salient issues of oppression, identity, and/or experience for some people. This is what she calls the “post-racial” and “post-spatial” ideologies of visibility politics. Similarly, Samuels (2003) argues that analogies between gay and disability create false dichotomies between other categories of difference and inequality, such as race: “[T]he identities of gayness and disability are stabilized and opposed to those of gender and race. Such an analogy not only relies on an overly restrictive, unilateral view of gender and race but implies false equations between the two identities on each side of the opposition (gay = disabled; gender = race)”

(235).<sup>106</sup> Samuels also notes that visibility cannot be achieved by one simple declaration, or is even appropriate in every interaction (242). In sum, these scholars challenge the idea that making gay or disabled public and visible—as well as the use of analogy between the two—is any guarantee of social progress or equality.

Many scholars have addressed the challenges and tensions of trans visibility specifically. Much like the impetus to be out in gay or disability rights activism, to be out as trans has been framed as a political challenge to cisgender culture (and to the medical establishment that historically reified this—see Meyerowitz 2002; Spade 2006), especially in ways that are visibly transgressive of the male/female binary altogether (Bornstein 1995; Califia 2003; Nataf 1996; Roen 2002; Serano 2007).<sup>107</sup> But not all trans people want to be out as trans-identified, or engage in a political agenda (see Rubin 1995, quoted in Roen 2002, 506). Nor is it safe for all people to be out in certain contexts, no doubt the extent of the stakes that parents worry about in this study (Butler 1993, 227). As Ally (mother of a transgender girl, 11) said in our first interview: “[M]y first reaction was, uh, fear for his safety ... we had the Gwen Arajo case not too, you know, that was very recent, uh, and that, the image of her ... was everywhere, you know, this beautiful kid, and what happened, that just terrified me.”

Additionally, many trans people (and non-trans people, myself included) reject the notion of “passing”—along with its related “going stealth”—as it insinuates the false

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<sup>106</sup> Here, “gender” does not refer to matters of cissexism and transphobia, but to inequalities between the male and female sexes.

<sup>107</sup> Califia (2003) and Roen (2002), like many others, seem to equate being out as “transgender” as being necessarily genderqueer, gender-transgressive, or “both/neither,” as Roen puts it. This is a false construction (and arguably cis-sexist in origin). There are plenty of out transgender/transsexual scholars and activists who identify in binary terms, i.e. as male/men or female/women (e.g. Serano 2007; Green 2004; Mock 2014). They do *not* consider themselves “both” or non-binary just because they were assigned the other sex at birth, much like the majority of children represented in this sample.

presentation of something one is not, the machinations of gender “deceivers” (Bettcher 2007; Serano 2007: 176-7). The notions of “passing” and “stealth” implicate a burden or duty of trans people to “disclose their truth” to others, lest they lie or “deceive” them (this is a classic trope in problematic films such as *The Crying Game* and *Ace Ventura*), versus placing the burden on cis-normative society to re-evaluate its presumptions about all persons. Janet Mock, for example, a transgender activist, has famously challenged the term: “I have such a difficult time with the concept of ‘passing’ because I feel it gives this idea that there's some kind of deception or trickery involved in our identities. I am a woman, people perceive me as a woman, and when I walk on the street, I am not ‘passing’ as anything. I am merely being myself” (Valenti 2014).<sup>108</sup>

I cite these critiques of visibility politics, and of the political imperative to disclose, as a cautionary frame to the analysis that follows, which largely concerns parents’ dealings with privacy, disclosure, and advocacy. Equally importantly, I consult these literatures for their attention to other kinds of social inequalities, namely race and class, which inflect my considerations here. To be clear, this chapter is not a call for parents to “out” their transgender children or to take up transgender advocacy. Rather, it considers the impetus to conceal “contradictory embodiment” for these young children in the first place, and how that embodiment is ultimately understood and managed by these particularly situated parents. Harnessing the insights of these various strains of scholarship, I begin my discussion with parents’ practices regarding their children’s privacy, including the anxieties that seemed inherent in this area of their lives. I follow with a review of the biomedical frameworks—

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<sup>108</sup> For similar reasons, the founder of a prominent trans kids advocacy organization cautioned against use of the term “stealth” at the first conference I attended; I was surprised, however, to find both “passing” and “stealth” routinely used in interviews with parents, as seen below.

including the disability analogies—that parents, and professionals, often drew upon to explain their children’s bodies and, in turn, their reasons for maintaining privacy around that embodiment. I conclude with a synthesis of these narratives and what they might mean for normalizing gender variance at large.

***“[It’s] the rigid, unforgiving binary world that we live in, it’s all about navigating this world”: Privacy and Power***

One of the most salient, dense themes that arose across the interview data concerned parents’ management of their child’s privacy—that is, how public and known they made their child’s transgender status, if at all.<sup>109</sup> Parents’ commentaries about these topics were often marked with anxiety and fear about the potential effects that being marked as transgender could mean for their child. As Bettcher (2014) says, “[F]or trans people, the risk of reality enforcement (including genital verification) is most certainly part of the fabric of everyday life” (393-94). When I asked parents to advise me of any potential sources of debate or contention among parents, this topic was almost always cited, and “there’s two camps on the issue, basically,” as Janice put it: those who feel their child’s transgender status is “nobody’s business” and should be kept totally private, and those who entertain more openness with outsiders, in the hopes of promoting more awareness and tolerance of transgender persons. Both “camps” seek to normalize the experience for children, but from very different

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<sup>109</sup> As of our interview, for example, Martsy had not yet told her mother-in-law that they had formally socially transitioned Cindy to female and had enrolled her in school as female. As such, upon my arrival to the interview, I was very subtly told to my make myself scarce, because Marty’s in-law was still standing in the driveway picking up the other child, and Martsy did not want to have to explain who I was. Though we had never met or spoken before (save for email), I immediately understood Martsy’s subtle gesturing, and aimlessly walked back down the driveway, pretending to be lost in the neighborhood. Later, when our interview ran long and her in-law had returned, I ran to hide in the bathroom (the in-law proceeded to use the bathroom anyway, so Martsy and I just pretended that I was a neighbor). When Martsy and I met several months later at a conference, we joked that her in-law must have thought she was having a (lesbian) affair. In this case, few people at school knew Cindy was a transgender girl, while few people in the extended family were aware they had formally embraced her as such. This anecdote signals the delicate, and sometimes precarious, maneuverings that protecting their children’s privacy and safety (and their own parenting choices) can mean for these parents.



perspectives. All parents, of course, have to make decisions about whom to tell and when, and some circumstances beg frank discussion, such as with old neighbors and close friends and family, who effectively witness the social transition. The vast majority of parents in this sample, however, erred on the side of privacy and non-disclosure, per their children's wishes, particularly when it came to new persons in the child's life, including peers, teachers, school staff, neighbors, extracurricular instructors or coaches, and/or new friends. Moreover, children are often purposefully enrolled in new schools as their affirmed gender, so as to maintain such privacy.

Nicole feels very forthright about being open about her transgender daughter, Sadie, who, at the time of our interview, was 12 years old and was well into the domain of dating and romance among her peers. Nicole does not want Sadie pursuing any crushes or love interests who do not know that she is transgender. Nicole feels strongly that openness in this capacity is the safer, more ethical route to take, for all children involved. In fact, Nicole referred to the prospect of a (male) suitor as "social suicide" if he did not know Sadie was transgender, and cited the serious dangers of dating without disclosing, even though she hates having to warn Sadie in these ways:

I don't want like a little boy to be teased in school because he likes the—they call her sometimes the "chick with the dick," that's what she's called behind her back [by a few peers]. [...] [B]ecause that's where they get murdered, is if they go on a date and they don't disclose, they can be harmed, greatly harmed or even killed. ... I mean at this point she's not interested in boys, she knows it's just too complicated, and we said, you know, "Well, if you like somebody, you can tell us, but you cannot tell your peers" ... but I've told her, I said, "I know it's wrong, but if you have a crush on a guy and it gets out, people will be mean to him," and it's really difficult to have to tell your kid that ... . [...] [T]hat could cause that kid to question their own sexuality or, you know, *I* know that it doesn't mean anything, it doesn't mean that that person is gay or whatever, but they wouldn't

understand it enough, you know what I mean? It could be very harmful to another child, and other people don't feel this way, like other parents of transgender kids, they'll be like, *It's nobody's business when my kid goes on a date, it's nobody's business what's between their legs ...* and I could debate this all day ... .

Here, it is the anticipated risks of her child's transgender identity that motivates Nicole's desire to stay open; for Nicole, it is the failure to disclose that breeds the greatest threats, especially in the context of her child's budding sense of romance and sexuality.

The majority of transgender children in my sample, however, are enrolled in school privately (or what parents often referred to as “stealth”), meaning that outside of a few key staff persons (e.g. the superintendent, principal, school nurse, school counselor, and/or the child's immediate teachers), nobody is aware that the child is transgender, including peers. In many parents' views, keeping their child's status private has the potential to offer their child a “normal, regular” life as a “normal” boy or girl, versus as the token “transgender” boy or girl among their peers. As Jessica (mother of a transgender girl, 5) described the position, “If your child wants to present that way, as a female, they want to be known as a female, they don't want to be known as a *trans* female.” Similarly, Martsy (mother of a transgender girl, 5) said, “More often I feel partial to the stealth side, because I think that she deserves to have just a regular, normal childhood ... there's enough negative stuff out there already about it ... I don't want that to shape her in a negative way at this point.”

Tellingly, several parents who started out with a more open position, and whose children had socially transitioned relatively publicly among their peers, starting feeling more inclined to privacy further along into the transition, as their child's gender identity felt more familiar and as problems surfaced in their institutional and/or social milieu. As Janice (mother of a transgender girl, 7) said: “I initially felt strongly that people know ... I felt like it

was important for people to understand that hey, this is just a normal variation in society, we're not crazy people ... [But Eileen] was not invited to a single birthday party last year ... so since [then], I've really [tried to] fly under the radar." Heather (mother of a transgender girl, 8) had similar experiences, whereby negative events with her child's peers were making her re-think a more open approach. The school Samantha was attending—a very progressive, explicitly gender-inclusive institution—was highly supportive of Samantha's social transition, but near the time of our interview, a classmate had kicked Samantha in the crotch on the playground, exclaiming, "You're not really a girl, I know where you're not a girl":

I think my thinking's evolving on that. I have and I continue to feel that it's not the right message to give your kids that you need to hide who you are, and so it will be hard for me to let go of that. However, like this situation that happened just recently with Samantha, [it] wouldn't have happened, probably, if everyone didn't know who she was. And I can see having increasing safety concerns as she gets older, and I can see her having a desire to not have to navigate constantly ... I think she's going to have some decisions to make and she's going to have to figure that part out, and I could see supporting the stealth track if it felt safer for her.

Like Heather's child, Becca's child, Bo, had lived relatively publicly at school as gender-variant, which Becca blogged about regularly (while keeping her child's identity anonymous). But as of our second interview, Bo had transitioned to identifying full-time as female. Due to fraught negotiations with administrators about bathrooms, Becca had since enrolled Bo in a new school privately, and changed the gender markers on her legal documentation. I learned that by this point, Becca's sentiments had changed: "[T]here's more [of] a resolve in my mind that really nobody needs to know this." In these examples, parents are moved to be more private, and avoid active advocacy, as their child ages through the school system and experiences increased scrutiny, by children and other persons, in more and more social settings.

Amidst these privacy concerns, a few parents mentioned coaching their children in ways to maintain their male or female status in the eyes of others, in ways that recall Garfinkel's (1967) notions of "practical methodology." Nancy, for example, told her son how to comport himself if he is hit in the crotch while playing ball with his friends (i.e. he needs to act like it hurt). Similarly, in response to questions from peers about why he always uses the stall (versus the urinal) in the bathroom, Tory told her son, "Well you tell 'em you're having a number two, or just say 'My mum doesn't like me making a mess.'" Several parents of transgender girls mentioned that finding bathing suits and leotards that don't reveal "the bulge" is an ongoing project, and they describe it to their children as, "We don't want your 'privates' showing," as in, all people's "privates" are personal. Parents tried to frame this kind of privacy as something that all of the children/siblings should be mindful of, but advised in interviews that they worried about how emphasizing such concerns would particularly affect their transgender child.

Related to these issues is the fact that these young, pre-pubescent children do not "come out" as "transgender" to their parents per se (although many eventually embrace the term), but rather are labeled as such by the adult figures in their lives. As such, not claiming a public transgender identity goes beyond matters of privacy: can a child be "transgender" if he/she does not personally claim this category? As Meadow (2014) writes, "Politically and personally, what does it mean to label a particular child transgender? If what an assigned male child tells you is that she \*is\* a girl, does the term truly represent her personal identity? ... Fundamentally, do we, the adults, get to decide the answers to these questions?" Parents were not oblivious to these problems of labeling, either: "[A]t one point there was a thread [where] we were talking about labeling our children, and I realized that, you know, I was still

labeling, and so, you know, I started changing the way that I talk to Emma and telling her ... ‘You’re not a transgender ... you are a little girl who happens to have a penis’” (Kari, mother of a transgender girl, 5).

Nevertheless, some children do claim a transgender identity quite proudly and publicly. Jazz, a transgender girl (14 years old), is perhaps the most notable example, who, along with her family, has participated in several high-profile interviews and documentaries, including a *20/20* series with Barbara Walters (at 7 and 12 years old).<sup>110</sup> Many consider Jazz, and her mother, the trailblazers for young transgender children and their families (Jazz was socially transitioned at 5 years old in 2005, when seemingly no other parents were doing this). But Jazz and the kind of out, public advocacy she represents was cited by several parents as a major source of contention in the wider parental community. Again, many parents feel that a child’s transgender status is totally confidential, and has no place in the public media (some parents, I heard, consider it borderline exploitive of a child’s experience). Karen encapsulated the debate:

K: [O]nly one time in like two years ... there was something that I thought just kinda got nasty and they immediately shut it down, the moderators of the [list serv] ... I think it was about how public you are ... someone was chastising someone else for being very public ... I think that’s a struggle for everybody, you know how public versus how private you wanna be ... like some people would say that I absolutely have no right sharing this information with you because it’s my child’s information, and some people are like, like Jazz and Jeanette, they’re out there, and you know, I think, how can you criticize Jazz and Jeanette when probably every single one of us, when they were trying to get their mind around this for our own children, stumbled upon Jazz and Jeanette ... that Jazz, she’s a face on transgender, and ... I found it was *very* important for me to stumble on them, so how can ... you criticize them for goin’ public?

E: And is the argument about, against going public that you’re compromising the child’s privacy?

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<sup>110</sup> The family also will star in a reality TV series on TLC starting in August 2015.

K: Yes, which is true, you absolutely are ... it's kinda scary to think like, at some point in that kid's life, if she wanted to be private she couldn't ... that decision is made, I mean I'm grateful to them for making it, but I sure get how hard it is ... .

Despite the controversies surrounding publicizing transgender children, many parents, like Karen above, were profoundly appreciative of such public advocacy efforts. They struggled, however, with practicing such advocacy themselves at this point in their children's lives (some parents cited feeling guilty that they were private or "stealth" while families like Jazz's advance the cause for all). Parents advised that their child's desires to stay private could well change as they age, although many imagined that their child would be more inclined to privacy in adolescence. Moreover, parents worried about whether a 5-7 year old truly understood what being out meant and if they would regret this down the line. I encountered a few stories, for example, where a child agreed to doing a media piece in their early years and has since retracted from any kind of public identifications with transgender, and the parents have regretted the engagement.

Claire (mother of a transgender girl, 5) articulated the conundrums of advocacy to me in a separate email. Claire is a successful writer, and has spoken publicly on many issues in several major media outlets, but her new role as the parent of the transgender child has muzzled her inclinations to speak out, particularly after her family's experience with Child Protective Services. Claire and Rick ultimately quashed the case, but it spooked them deeply about being more open, and resulted in their moving to a whole new region of the country to protect Amos's confidentiality:

Because of our run-in with [CPS] and hearing the stories of other families like ours, I've become very protective. For example, I like that we're now renting; it gives us more freedom [to vacate]. ... I've thought deeply about the importance of writing something about our experiences. ... [But] there are things that I won't write about in this "comment-box era". My pieces exist online forever and ever --

and so do the comments ... I don't want my children to see what's written there, ever.

As Claire and Karen testify, many parents feel they have to check their desires to advocate against their priorities to protect their child's safety and privacy.

At the same time, parents also feel they have to balance their privacy efforts against notions of shame, secrecy, and stigma, in light of the anxiety that comes from evading potential disclosure, a precariousness I often sensed in parents' stories. Revealing of this anxiety, I would argue, was the recurring notion of "power" in parents' testimonials—that is, the power another person might hold over their child if they became privy to their transgender identification. If it did get out that their child was transgender, what would happen? (Anonymous calls to Child Protective Services were one sharp example, which at least 4 families in my sample have experienced). How would this affect their child? Moreover, how does a parent still manage to instill pride and positivity about being transgender to their child? In this field of anxious sensibilities, the child's transgender status often surfaced as a vulnerability to the potential power of outsiders who are otherwise kept ignorant.

This dynamic was exemplified in my interview with Karen (mother of a transgender boy, 10). As a tool for managing her child's general anxiety, Karen uses a diagram of "big circle worries and little circle worries," and asks her son, Izzy, to put his "big" and "little" worries in their respective circles. While Izzy is more comfortable at his new school where everyone knows him as a "regular boy," he recently described his fear over someone "finding out" as an "infinity circle" worry: "[H]e told me just the other day, 'that's an infinity big circle.'" Karen elaborated on her concerns over Izzy's privacy, where the notion of "power" came up:

I would support [him telling a friend], but you know I would worry because ... if Izzy felt like he needed to tell ... I would worry so much about having only one kid know, [I prefer] either nobody knowing or everybody knowing ... you know how kids change their best friends one day and then not the next ... so even in an instant, without giving it any thought, they have the power to change the world, so that whole scenario makes me very nervous ... what are they gonna do with that information? ... At some point Izzy, as you know, is probably gonna be interested in girls, I believe it's girls, and he's gonna have to tell, and so there's a girl that's gonna have a whole huge amount of information and power, and that's what scares me more than anything, and that's why I would have rather had him transition where everybody just knew.<sup>111</sup>

These concerns were also starkly exemplified in my interview with Theresa and Bill (parents of a transgender girl, 12), who cited several stressful anecdotes regarding their child's privacy. In one, a peer from their child's past (before she had formally transitioned) had threatened to "out" her on social media. Specifically, Lisa had posted a photo of herself on her Instagram account, remarking on how "pretty" it was; the peer responded, "Don't you mean handsome? Because Lisa is a man." Lisa immediately deleted the photo and was incredibly distraught, but nothing further came of the incident. In another story, a friend had heard from some "cross-over" people from the past that "Lisa used to be a boy." Upon hearing this, Lisa immediately worked to dismiss it: "[T]he way she handles it is, I mean, she'll use bad language, she'll get very all sophisticated about it, she'll go, 'What the fuck?!' She turns it on its head, or she'll say, 'Who told you that lie? They're lying, they're lying, you shouldn't be friends with them 'cause they lie.' [...] I remember thinking, *Oh, this is like gaslighting this poor friend of hers*" (Theresa). These moments were exemplary for Theresa and Bill about how their child has learned to manage her privacy adroitly among her peers.

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<sup>111</sup> Karen would have liked to transition Izzy at his old Catholic school, but due to his extreme anxiety issues that were affecting his school work, they decided to enroll him in a "special needs" school. Both Karen and staff at the new school decided to him enroll him privately; a more public transgender identification might exacerbate an already stressful acclimation to a new school/peer environment.



But Bill highlighted some of the tension and stress that is involved in preserving this level of privacy, also nodding to the notion of “power”:

And I think that is her fear, if someone were out to get her, how would she stop that? Someone who says something by accident, she’d figure out a way to throw up a smoke screen and then things will die down ... but that if there were an entity, an older kid, or an adult that had some kind of agenda to whom this was important, to really make her miserable, then make our lives miserable, that person would have an incredible amount of power to do exactly that, because if we couldn’t embarrass them out of it or ... straighten them out ... we are really at their mercy.

While Bill and Theresa are determined to honor their child’s wishes for privacy—whom they now realize was never a “boy,” they just didn’t know better—they also mourn the sense of well-being and safety she might experience if she could be more open about her (trans)gender status with her friends and if this weren’t such a source of stigma management.<sup>112</sup> As this story reveals, parents seek to protect their children’s privacy, in part to evade harassment and bullying, but they also feel the risks of one’s sense of having to “keep a secret”—which may cause loneliness, isolation, and fear for their child.

Claire offered a related anecdote concerning the felt social risks of disclosure. While Claire and Rick have decided to adopt much more confidentiality around their child’s status, they do practice some openness about it when it comes to close friends and family (provided Amos is comfortable). However, Amos’s comments during one such interaction signaled to Claire that Amos was developing the sense that being transgender could be risky for her:

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<sup>112</sup> Historically, as I learned in our first interview in 2009, Lisa has been deeply resistant to the term “transgender,” including going to conferences for “transgender children” (Lisa ultimately went to the conference). She has interrogated Theresa about why she felt the need to attend support groups for other parents, as she is “just a girl.” This is one obvious instance where the identity categories parents adopt for their children do not necessarily resonate with the gendered self-conceptions of the children themselves—and why Lisa would be so adamant to deny ever living as a “boy”; she was never a boy in the first place.

Amos and a childhood friend were talking about doctors' visits, and while the other little girl referred to the doctor checking her "vagina," Amos said that she calls hers a "penis." At this point, Claire felt the need to pull the mother of the friend aside and explain, but Amos prefaced the conversation as follows:

Amos comes running, [saying] "I wanna hear this, this will be interesting ... my Mommy's gonna tell you [something], but you have to still like me after she tells you." That was the first time that I realized that she understood that this could be something that could turn a friendship, this could be something that someone could see as a negative ... I didn't understand that she knew that because ... we'd been careful in a lotta ways to shield her from [the] discriminatory type of stuff.

While parents want to disabuse their children of the notion that being transgender is a "shameful secret" that must be hidden, these stories nevertheless testify to threats of stigma, vulnerability, and/or disempowerment that managing a child's privacy and confidentiality often entails. Indeed, the phrase "it's *private*, not secret" resounded as a childrearing mantra across interviews and conference spaces as a way to intervene on these feelings.

I conclude this section with a story from Kari (mother of a transgender girl, 5), which I feel pinpoints the stakes of privacy and "power" that parents often feel they are managing on behalf of their children. Kari's family had recently moved to a new state, and per Emma's wishes, had enrolled Emma in a new school privately, whereby only the principal was aware she was transgender. However, near the time of our interview, a child had peered under the stall when Emma was using the restroom, leaving Emma feeling agitated and anxious about staying private among her potentially nosey peers (nothing came of this encounter). Emma had proposed to Kari that she just tell everyone she is transgender, so that she could, in her words, "feel free." Kari, however, was unsure if this was the wisest

decision for her child at this time, responding, “Freedom is a state of mind, maybe it’s not getting picked on and feeling like a normal little girl like everybody else, there’s freedom there too.” Kari fears the consequences of her child being public, in part because of the relatively conservative area they have moved to (and from which Kari actually wanted to move at the time of our interview). But Kari does wish that Emma could be more open, sans worry: “I’d rather her be out ... scream at the top of her lungs, *God made me perfect! I am who I am and I love exactly how I am!*”

Emma’s comments about wanting to “feel free” signal the anxieties, and potential compromises, that are often involved in privacy negotiations, for children and parents alike—as Izzy would put it, it’s an “infinity circle worry.” I marshal these stories to highlight the vulnerability that many parents and children feel in these privacy negotiations and the risks that these sensibilities reveal about a cis-normative landscape. If it does get out, would the child be mocked, ostracized, excluded? Would the family encounter challenges from other families or the state? Could the child be physically harmed, as Nicole spoke firmly about above? In the words of Kari and Emma, what personal freedoms are clipped in a world that relies upon cisgender assumptions about bodies and gender? More importantly, how might that power be challenged? From here, I turn to parents’ narratives about sex, gender, and the body.

### ***Disability Analogies, Biomedicine, and the Body***

Throughout interviews, I frequently encountered the notions of a “birth defect” or “disability,” to which some parents compared their child’s transgender status and more specifically their given embodiment, as something that went “wrong” during development. Furthermore, many parents argued that a biomedical explanation for being transgender would

be liberating from cultural stigma, so that people could understand why it happens (not unlike notions about a “gay gene”). I often encountered these frames when asking parents if they had ever thought about potential “causes” of gender variance. See, for example, Harmony’s response to the question, in which she immediately referred to two “traumatic experiences” that potentially influenced her child’s gender development:

E: Do you ever think of causes of gender variance?

S: Ohhhhh, all the *tiime*, oh my God, I think about it all the time because, um, I had two really traumatic experiences with Baldwin [the tsunami and the window accident] ... and I wonder all the time if there’s some sort of like correlation and relationship between a traumatic experience in utero or a traumatic experience in early childhood [...]. It would be interesting, you know, if some like research revealed that there’s a direct relationship between physical trauma for a child and trans and we would all have this kind of like *Oh*, that’s *why this is happening*. It wouldn’t change who the child is, it wouldn’t change anything, it wouldn’t make me wanna tell him that he needs to go back to being a girl, I mean it’s who he is, I mean maybe it would be more of a relief like, *Oh that’s why*, and maybe it would like help society be more accepting of kids that are like this, you know, like ... it’s completely beyond the control of the child ... .<sup>113</sup>

I take the time to carefully explore these kinds of responses because of their fundamental relevance to normative logics for sex and gender. Moreover, these responses weren’t unrelated to matters of privacy.

As Karen (mother of a transgender boy, 10) reported, the “birth defect” analogy often undergirded the “stealth” camp in parents’ online discussions, as far as why a parent would keep their child’s status totally private: “People with like a six year old [say] it’s just a birth defect, *I don’t need to tell anybody, it’s nobody’s business that my child doesn’t have a penis or has a penis or whatever, it’s a birth defect, I don’t walk around telling people that I do or*

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<sup>113</sup> These traumas were, her being swept up in a tsunami when she was pregnant with him and his falling out of a second-story window at 2 years old.

*don't have certain body parts ...*” When I probed Karen about how she felt about the notion of “birth defect,” she aligned with it.<sup>114</sup>

E: How do you feel about that notion? [...] The term “birth defect” has the connotation of, something went “wrong.”

K: Well you know what, I think something went wrong. I mean I know a lot of people don't feel that way ... and I totally get that, but I think something went wrong, you know your brain and your body don't match, it's not right, and it's not easy, you know.

In my interview with Nicole, I asked her about a famous 20/20 interview where a parent of a transgender child referred to transgender as a “birth defect,” a question Nicole evidently readily anticipated from me. But she also concurred with the conception:

E: ‘Cause, you know, [the] mother [in the 20/20 interview]--

N: Are you gonna say birth defect, are you gonna say birth defect? (*laughing*) ‘Cause I knew, I thought that you were gonna ask that. You know, part of me agrees with her, um, I hate the word “defect,” but she looked at it, you know, a girl with a penis could be considered, you know, a person with a cleft palette or born with one arm or born deaf or blind, you know? Like it’s not supposed to be that way, you’re not supposed to have a penis if you’re a girl, so to me it is a birth *abnormality*, let’s say, I mean I don’t like the word “defect,” but it is certainly not what was *supposed* to happen.<sup>115</sup>

Similar body logics were voiced by Trish, who nevertheless advised that such (“wrong body”) logics have been hotly debated among parents:

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<sup>114</sup> While Karen agreed with the notion of “birth defect,” she argues that privacy around this concept is much easier to practice with a younger child (6 years old) than an older child (11 or 12), whose body might be more visibly sexed to others.

<sup>115</sup> Incidentally, in the 20/20 interview with Jazz’s family, her sister said that she describes it to others as a “disorder.” When Barbara Walters turned to Jazz to ask her about how she feels about “disorder,” Jazz resisted: “Um personally I don’t like that word um that much, I prefer ‘special’ or ‘unique’ ‘cause that’s what I think transgender is.” While I cannot know for sure what Jazz meant, her response seems to signal at least an implicit resistance to pathologizing frames for gender variance, such as “disorder” or “defect.” Similarly, Stephen Beatty (Warren Beatty and Annette Bening’s young adult child), who identifies as a trans man, has publicly criticized Chaz Bono for analogizing trans to a “birth defect” or “cleft palate” in interviews, saying that Bono “does not represent us” on his blog.

I bring it back to the simplicity of, his brain is a boy and unfortunately he was born with girl parts. [...] [T]he simplicity for him is that that's how a boy is and that's how a girl is ... a vagina is a vagina and it does belong to a girl, and a penis is a penis and it does typically belong to a boy, and if you happen to be born with the wrong part, I believe more that it's you're born with incorrect parts, and I know there's this whole big discussion going on from the current TV media—I don't know if you saw “Born in the Wrong Body” that was the Katie Couric special, and that was the title of it and there was this huge debate going on with parents about telling their children they were born in the wrong body ... it's huge right now on the [listserv]. ... I've never used that phrase for him, we stick to, “Your brain's a boy, your body's [a girl's].” We'd put him in denial if we didn't acknowledge that to him. The reality is his body is a girl's, girls have breasts, you know what I mean?

In several other instances, parents described transgender as something that went “wrong,” implicitly or explicitly, during the child's gestation. Monica said, for example, “[T]he way that I think of it is, just like, my body didn't make a penis while Hayden was in my belly, my body kind of screwed up and didn't make a penis [...] because truly that's what happened, Hayden's penis didn't come out ... .” This logic continued in our conversation, as Monica and Dan compared their son's transgender issues to his being deaf and how they see both as aspects of his development that were not quite “normal”:

M: [I]t kind of reminds me of like the deaf thing, like a lot of deaf people don't think that they're handicapped, they don't think there's anything wrong with them ... they're like proud of being deaf, that's why they don't like us because we changed him [cochlear implants], we made him hear, you know ... .

D: Yeah ... I look at it as something went wrong, something didn't go as it was—yeah, I think that, God I hate using the word “normal,” but like typical human development is to have a brain that is—

M: Matches your genitalia—

D: Matches your body and ... so I think that the fact that that isn't what's happening here and that those two aren't—

M: Connecting.

D: Yeah ... I think there was something developmentally that went, that changed something different, something took a different path, who knows, but I really

hope one day they identify exactly what it is because it would just make this so much easier.

E: Like a medical, biological—

D: Something [so] you can say, look my child's this way because of this, you know? My child has Autism because of this, my child is deaf because of this, and people go, *Ok*, they don't question it. If my child is transgender because they've identified this, that and the other, that is the same in all of that.

Karen actually elaborated on more specific biomedical causes and processes that she had researched and theorized, including some that ideally would be “avoided,” such as the use of certain drugs and/or alcoholism during pregnancy (which she suspects of Izzy's birth mother):

K: It's either a naturally occurring thing ... or [maybe] it's something [that] goes wrong with this kind of hormone wash, and I don't know which it is ... so that's a possibility, that this is just nature's way ... it's kind of all part of the continuum from male to female ... but the other possibility is something happens with the endocrine system in those nine months before birth that the brain gets one message and the body gets another ... . One of the things that I read, you know, I'm looking all around [for] relationships between particularly like drug use and transgender and one thing I found was the abstract of a study [where 3 of 147 children were transgender of mothers who had been given an anti-convulsant] ... so that's definitely a possibility, 'cause with Izzy's birth history, I don't know anything [...]. I think there was probably some alcohol going on there ... it wouldn't surprise me in the least if there was something her birth mother did or took or whatever during pregnancy that could have caused it also, but ... if they can figure out certain things like this anti-convulsant medication, that's helpful, to be able to say *Hey, this is not a choice, this could be even biologically, it's hormonally, this is part of the whole very sensitive hormonal system*, that's what I think I as well as many other people are trying to grab onto ... *Hey, we're not choosing this, we're not a bunch of wackos.*

E: You're making me think ... how would you respond to someone who says, “Well then you're saying let's do all these things to prevent gender variance from being caused in the womb?”

K: [Well] ... I don't look at it as, *Ra-ra transgender, it's all good!* ... I see it as something to be avoided, I mean I know people would disagree with me, but I consider it like a disability or a disorder, because it's a huge problem, so if you have a choice and if we know what caused it, I would see it as something to be avoided.

Interestingly, Wendy also mused about a range of potential biological factors and correlations, including artificial insemination, alcohol/drug use, and Autism. She had heard about these informally through interactions with other parent forums and practitioners:

[W]e do know from the conferences that we've gone to and through our time with [a therapist/gender specialist] that there's a strong correlation between adoptive kids, foster kids and[or] kids that are artificially inseminated or in vitro and they don't exactly know why that correlation is but ... that population has higher drug exposure, alcohol exposure, [such] that something might be happening hormonally during the prenatal period, they're talking about some of the synapses ... being like off-balance ... but we definitely are under the belief that that is something organic in the brain and it definitely must have something to do with the sensory processing symptoms because that's why [the therapists] will say like one third to higher of all of the kids that come through their clinic are, either have sensory processing disorder or have Autism [...]. [S]o anyway whatever it is in the brain [that's] causing some gender issues is also causing sensory issues in kids and that's why the Autism thing is so high, they just don't know why and why is it so high with the adoption or artificial insemination or in vitro people ... they just haven't had enough studies to factor all that stuff out.<sup>116</sup>

Notably, Monica and Dan, Trish, Karen and Wendy have all parented around a range of other biomedical or behavioral health issues with their children, which require seeking out skilled specialists, as well as navigating various medical and/or social work institutions and insurance agencies, to attend to their children's needs (this includes deafness, severe anxiety, reactive attachment disorder, fetal alcohol syndrome and delayed cognitive development). In light of these experiences, biomedical or psychiatric frameworks, as well as disability analogies, would well inform their understandings of their children's transgender embodiment.

In other moments of our interviews, several parents compared their children's transgender status to a disability or a medical ailment. For example, when discussing her

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<sup>116</sup> Incidentally, potential correlations between Autistic children and gender dysphoria have been formally discussed by practitioners elsewhere (de Vries et al. 2010).



legal battles with her ex-husband (who does not support raising the child as transgender), Jessica compared the seriousness of being able to pursue hormonal interventions for her child to being able to pursue cancer treatment: “[T]o me, it’s just like if she had cancer and he wasn’t willing to get treatment for her or something like that, like I just can’t deal with that ... .” Like the parents above, Jessica echoed the notion that finding a biological cause for transgender embodiment would be beneficial:

I feel like she has a girl brain or whatever and a boy [flesh/inaudible], so if there was something like that to explain it, I’d just be like, *Oh okay, well that’s it*. It’d be nice—it’d almost be nicer because then there wouldn’t be as many questions ... just like Autism or Down syndrome, it would force people to accept it more ... .

Nancy drew on the analogies of disability or birth defects as motivation for accepting her child: “[Y]ou just think like, how you could ever disown your own child? Like, when you decide to have a kid, if the kid’s born with no limbs, if the kid’s retarded, that’s my feeling, you agreed to accept responsibility for whatever you get, you know, and this (*laughs*), this is what I got, so, I can’t just go, *Oh no, that doesn’t work for me ... .*”

I encountered similar biomedical frameworks and analogies with some of the professionals I interviewed, too. For example, when discussing the implications of having a GID diagnosis in the DSM, Lina (a therapist) refuted the notion that transgender is a “mental disorder,” referring to it instead as a “medical condition that creates a mismatch of the brain and body ... I mean you can have a lot of mental distress from having a brain tumor or something else that’s ailing you, but that doesn’t give you a mental disorder ... .” And when discussing issues of privacy-versus-disclosure, Gail (an educator) turned to disability and/or medical analogies:

[S]ome people feel that by not being out you are, um, keeping a secret. We prefer to say, his body is private. You know, if you have a kid with a colostomy, are you

going to school and tellin' everybody "Hey, I wanna train you, I wanna let you know my child has a colostomy"? ... I think if we take all of the questions like that out of the trans thing and just go, okay, would you be asking that? ... Would we be asking that about [another child] who has a mild case of cerebral palsy, you know, would we be asking that same question [i.e. should we let others know]?

Not surprisingly, several parents referred to "medical confidentiality" when discussing their children's privacy. Glenn and Lacey, for example, told school directors that should other parents ask about their child using the girls' restroom, they can respond, "It's not their business ... this is a medical confidentiality issue."

Disability analogies and biomedical frameworks surfaced poignantly in my interview with Tory, who compared her son's "transgender stuff" to her other son, Will, who has Autism and epilepsy. Tory joked that in light of all Will's health issues and quirks (he happens to be left-handed too), she would have expected him to be the "one who's having these issues, questioning gender." For Tory, the medical labeling and diagnosis of Autism resonates with that of gender dysphoria, as both of have enabled her to get her children the resources and assistance they need. Again, in this instance, a parent's management of another disability or health issue offers a parallel model for how she conceives of and manages her child's gender variance. At the same rate, Tory clarified, "some people consider [Autism] a disability; I don't, I consider it a different way of thinking, different than the norm ... ." Tory went on to say that the gravity of Will's epilepsy makes the "transgender stuff" with Connor seem non-issue: "If someone said to me do you want your child to be transgender or have epilepsy, I would pick transgender in a second, I know that sounds stupid ... [but] health is more important." In fact, near the time of our interview, Connor had had a seizure, and they were looking into whether he has epilepsy, too. Despite her general lighthearted, jokey manner, Tory got quite serious in our conversation: "Uh, I feel like I'm, I can barely talk

about it because the transgender stuff is nothing compared to their health to me, and the seizure stuff, [it's] really upsetting ... ." In these moments, Tory sees transgender as something quite different from the other "health" and biomedical issues that concern her children.

To be sure, these were not the only frameworks marshaled to explain transgender. Some parents advised that they did not much think about potential "causes" because it did not matter, they have a transgender child and have to parent that transgender child, regardless of why or how it happened. See, for example, Jessica's response to the question about "causes":

I kind of decided that like, I mean, I never looked into it in like studies or anything ... I kinda question like ... spirituality ... like, why does God do this? And I'm like, well, maybe he just makes people different so that we can learn to love each other no matter what, and just to look past differences and just that type of questioning, I guess.

(Evidently, and like many other parents, Jessica also did give passing credence to notions of a disorder in other moments of the interview.). In other instances, parents gestured to a spectrum of natural human variation, in a way that might challenge a "biomedical mishap" line of thinking. Linda (mother of a transgender girl, 6) was exemplary of this:

I call her an evolutionary inevitability, there's just no way that human beings aren't gonna get to the point where gender gets revealed as being a complete and total mental construct and it's reached its limits in her, she is a manifestation of that, she is one of my greatest teachers, I think she has a lot to teach many of us about human existence.

As she went on to say, "gender is completely an utter construct that we have been force-fed for generations, and it's starting to get revealed and that's part of what makes people so fucking terrified." In a similar vein, Kari (mother of a transgender girl, 5) said that she used

the metaphor of X-Men and “genetic mutations” to explain transgender to her other child, but she went on to clarify just what she meant by this:

I said, “These are special kids with genetic mutations, and mutations in the gene pool are important because they sustain life, they’re how the species carries on.” [...] I hate to use the words “genetic mutations” because you know the connotation is pretty negative, but as a science major, it’s not, it doesn’t feel that way to me [...] because [trans people have] been around forever ... [but] we are evolving as a species ... and I think it’s an important step in humanity because what it does is, [it gets] us out of our binary thinking [...] it brings unification to our minds and our spirits ... I think that you should be allowed to be born a male and transition to a female and have male parts and still be a female ... .

Even with the use of genetic mutations, these parents describe transgender less as an individual biological misstep, as something that went “wrong” in development, but more as a matter of natural biological variation, or evolutionary potential. Notably, Linda and Kari are two of three biracial parents in this study, and mentioned that their experiences with race were informative of their viewpoints on trans. As Linda said,

One thing I should clarify, though, is that ... I’m biracial, my father was Black and my mother was white ... I grew up ‘passing’ quote-unquote as a white girl living a Black experience ... I’ve lived a lifetime of being seeming to be one thing and perceived as another in the world of race, so I have a lot of history with this world, in a totally different context.

Similarly, Kari, who identifies as half Arab, half white, said, “I’ve always questioned everything, I question society, I question society’s rules [...] [I was] always living in between worlds anyway, never quite fitting in ... it’s always been a blessing because you know I have questioned a lot of things ... .” These women drew on their own experiences with mixed-race identity as an analog for making sense of their children’s gender-nonnormative experiences.

In summary, in many instances, both parents and professionals drew on biomedical frameworks and analogies for explaining transgender as a biological or physiological

disorder, defect, or maladapted process that interrupted the appropriate “matching” of genitals and gender, or of bodies and brains. And for many trans people, including the children here, such frames may well register with exactly how they feel. As parents will report, it is not uncommon for these children to say, “God made a mistake, why don’t I have [the other part]?” or to express a desire for the anatomy of the other sex, however nuanced and varied those body-change sensibilities might be. As such, it is important to recognize the validation that such accounts may offer to children, when those are the accounts that resonate and make sense.

In terms of having the “wrong body,” none of these parents would pursue biomedical treatments for their children (e.g. hormone blockers, cross-sex hormones, and/or surgery) without their children’s consent. That is held as a thoroughly child-directed decision and process, when the appropriate time comes, and parents take pains to engage in dialogues with their children that explain those options as age-appropriately as possible. Indeed, parents were cognizant of a range of body-modification options in the future, and hoped that their child would feel comfortable to choose whatever felt best for them. Many parents intimated that on some level, they wished their child didn’t have to change their body at all, indicating an awareness that bodies and gender do not necessarily “match” in the normative sense. I cite all this to make clear that the narratives above do not necessarily mean that parents expect their children to pursue changing their bodies, or that biomedical technologies are understood as the “fix” for the “abnormal” processes they have theorized or researched. Indeed, these parents were quite cautious to avoid ever directly articulating to their child that their particular embodiment is “wrong” or a “defect.” In contrast, parents strove to articulate different body logics, or body rhetorics, to their children, such as, “You’re a girl who has a

penis,” or “Some girls have pee-pees on the inside, some girls have pee-pees on the outside,” and “You’re perfect the way you are.” As Linda (mother of a transgender girl, 6) said:

I want her to get that her privates are private ... and that there’s nothing wrong with them, she’s whole, perfect, and complete and beautiful, and she is a girl who has a penis, which is very, very unusual and very unique, and then I always say that every human has their own strengths, gifts, and talents.

Linda’s child has expressed that she wants a vagina, and Linda plans to fully support her in that if that desire continues. Linda did not seem to regard this as mutually exclusive from her thoughts above. It is precisely this kind of discursive opening among parents, as practiced with their children, that motivates my consideration of the more bio-pathologizing frames and analogies they marshaled above.

### ***Conclusion: Normalizing Trans, Challenging Power?***

In this chapter, I have merged seemingly two distinct, disparate areas of parents’ dealings and thoughts about their transgender children, which nevertheless referenced each other in interviews: one, managing their children’s transgender privacy and confidentiality, and two, their biomedical frames for understanding transgender. The fundamental bridge between these two is the body, or normative logics for sex and gender. To identify a child as “transgender” to others is to effectively announce that they were not born with the body (or the “correct part”) that is conventionally attributed to their affirmed gender. Much of parents’ management of privacy concerned keeping their child’s “contradictory embodiment” personal, private, and concealed: “I don’t walk up to you and say, ‘Hi Elizabeth, it’s nice to meet you, and by the way, I have a vagina.’” In the world of gender displays, these parents well understand that sexual anatomy is presumed in social interaction, but rarely explicitly revealed or referenced, and nor should their children’s be. Their children are boys and girls, they should be treated like boys and girls, and their bodies should have nothing to do with it.

In these ways, these parents radically afford their children the lives and identities of “normal” boys and girls they claim, desire, and deserve. From a sociological point of view, this reveals both the otherwise invisible and practical scaffolding that makes gender and sex intelligible and natural to others. And it provides the detail that portends a great deal about how practices and presumptions can change.

Notwithstanding, many parents understood their children’s embodiment as the result of a biological mishap, “defect,” or “disconnect,” as something that didn’t go as it was “supposed” to go in “normal” development: if you’re a boy, you should have a penis (or your mother’s body should have made one in gestation); if you’re a girl, you should have a vagina. To these ends, parents (and professionals) often drew on analogies of disability or medical impairment to explain transgender, such as cleft palates, Down syndrome, cerebral palsy, brain tumors, and limb development issues. Claire and Rick, for example, considered very seriously the “older brother effect,” a scientific theory that proposes that (male) homosexuality is a result of having multiple older brothers, which induces an “in-utero maternal immune response” to later male fetuses down the line (Blanchard 1997). As Claire explained it to me, “They think that [women’s bodies] eventually see male children as a foreign body to them and that they start restricting testosterone.” As many parents put it, their child was “supposed” to be born with the “correct parts,” but something “screwed up.” For a child who actively expresses interest in having the “other parts,” or wonders why they were born otherwise, these theories and frameworks are an affirmative, empowering response, and make meaningful sense. They validate, with much cultural authority, the kind of embodiment that feels so contradictory, or wrong, to their child. Bettcher (2014), for example, argues that “wrong body” narratives—in the way “birth defect” frames would insinuate—have resistant

potential, since transphobia is most often experienced when trans people are wrongly held accountable to their physically perceived sex (assigned sex), and not to the sex category with which they truly identify. To assert that one is in the “wrong body” is effectively to resist being wrongly held accountable to it.

Moreover, parents’ analogies to disabilities do not necessarily pathologize gender variance; disability rights activists and scholars have challenged that logic for decades. Rather than seeing disability as an individual, medical abnormality or anomaly that has no place outside of the biomedical clinic, this field targets the sociocultural domain, which constructs certain bodies—or certain ways of thinking, as Tory would say—as “normal” and “able” and others as “abnormal” and “disabled.” As such, parents’ analogies to disability could well harbor challenges to normative logics for sex and gender: Boys *shouldn’t* necessarily have penises, and girls *shouldn’t* necessarily have vaginas; normative expectations about the correspondence between bodies and gender are interrogated, not the embodiments themselves. And as observed among several parents in this study, who have parented around other disabilities and health issues for their children, “disability” seems like an analogous framework indeed; both entail keen institutional maneuverings among schools, teachers, psychologists, doctors, and other support specialists to accommodate their children as they are.

However, parents’ analogies did not quite exhibit the tenor of such ideological deconstruction. These frames do not really challenge or disrupt normative expectations—and the power these hold beyond the privacy of the family—but arguably re-instate them, even as they affirm their child’s own embodied expressions and self-knowledge. I encountered a



critique of such biomedical frameworks from a prominent advocate and educator, Meryl, who was quite uneasy about them:

I think sometimes [a biological theory] would make people feel better because ... it would have more validity with people, if I could say my child has been *tested* and we know for certain because of this test that it is what it is, I just think that that would give people, um, possibly a lot of comfort ... I think it would simplify the conversation for a lotta people ... It gives *me* discomfort in a lotta ways, because then does that open the door to, you know, aborting fetuses who have this particular gene, what does it give rise to? Is this now a defect that we should get rid of? ... [These kids] can teach us how to jump these gender roles and stereotypes [...].

Later in our interview, Meryl actually raised questions about the normative status of these children, who have been raised in otherwise normative families and contexts and thus might not identify with, or relate to, “transgender” identity and politics, in terms of a politicized, gender-expansive consciousness:

[K]ids who transitioned early who are—are our parents trying to fit our kids into a heteronormative sort of mold, you know? ... It just sort of dawned on some of us one day that, do our children live a transgender experience, or is their experience becoming something we’ve never seen before and are we consciously thinking about that and what that looks like? ... Are we de-transgendering them, kind of, are we putting them in the position of being ashamed of having a transgender identity, and I do think that’s a risk of parents of transgender children that we could be making ... because does that prepare them for the world that they’re going to go out into? Like have we created such a protective bubble for them to live in ... . I think that we’re at that point where we have enough kids who are transitioned early and ... you know, have we done such a good job of it that we somehow have made them feel that being transgender is a bad thing?

Meryl’s comments greatly resonated with a physician I spoke with, Dr. Molio, who is heavily involved in the medical treatments of gender-variant children. In Dr. Molio’s view, many of the transgender children she sees at her clinic are living in a “cisgender world,” which their parents have helped to create and protect; there is nothing really transgender about their lives, other than a contradictory embodiment that will be addressed through hormone blockers and,

eventually, cross-sex hormones. As she told me, “We’re [hormone] blocking all the white, upper-class kids”; she feels that in many ways, transgender as an identity and experience will really only relate to trans persons of color, especially trans-feminine persons of color, who do not experience these kinds of childhoods.

As these parents understand, every person has a right to privacy and confidentiality about their own embodied experiences and identities, including the sense of normalcy, safety, and stability such privacy might deliver—what many of these parents might call life as a “regular, normal boy or girl.” And as many scholars have claimed, making visible certain non-normative identities or experiences, such as LGBTQ or disabled, does not necessarily advance social progress and equality. Nor do all transgender people want to be identified as such (again, many of these children are “transgender” by virtue of the parents who label them, not by their own proclamations). Neil, another prominent advocate and educator, quickly rejected the imperative of being “out and proud,” but with the explicit alternative of addressing society’s cisgender assumptions instead:

[I]t is not the job of the oppressed to make oppressors know about their oppression, um, it’s a job of culture, society, to be more expansive and accepting, and so you know that really flows into [my] organization [...] we are an organization that’s about *gender*, we’re not an LGBT organization, we’re not a transgender organization, we’re an organization focused on gender as it relates to all children and teens, and the constellation of adults surrounding them ... I think for us it starts with gender and society and really unpacking that, and *that* is what’s going to lead to the change for those kids ... who have no obligation to all this—their obligation is to try to live authentically ... we don’t need to add another challenge to them, they have enough to [deal with than for us to] say, “You now also have to represent this issue.”

As such, this chapter’s analysis is not to advocate for public transgender identities or politics for these children. Nor, admittedly, I am concerned with overly “protective bubbles” for transgender children that may not prepare them for trans-related prejudices; these children

are being acknowledged as they know themselves to be (and it may not be as “transgender”). I certainly would not mourn the loss of a “resilience,” creativity, or politics that was born, by necessity, out of the struggle in trying to be someone that others oppressed. But Meryl’s, Neil’s, and Dr. Molio’s comments all signal the broader issues I am considering here—the state of gender variance in society at large, outside of these families who protect it and nurture it. To these ends, I am drawn to narratives, logics, frames for bodies and gender that undergird the cisgender assumptions that operate daily, and dangerously, in our lives. Which frameworks start abandoning those expectations altogether, and cut the cord of normative gender-binary ideology, even as we honor and de-pathologize persons who fully know themselves to be the other sex and seek modifications accordingly? Riki Wilchins (1997), for example, has advocated treating trans-related health care as we do pregnancy—hardly a response to something that went “wrong,” or that was not “supposed” to happen, but in the vein of biomedical care that many persons would naturally seek out and receive.

Parents’ experiences with privacy do not beg for more visibility, but they do underscore the anxieties that transgender disclosure often means in a world still grounded in cisgender assumptions, and they highlight the risks and fears about safety and well-being that animated, and in many ways motivated, these families’ imperatives to remain confidential. No doubt these parents are affirming and facilitating gender-variant and transgender subjectivities for their children in unprecedented ways: children assigned male can be raised as girls, and children assigned female can be raised as boys, and with the help of hormone treatments, many of them will evade the biological puberty that would otherwise yield “contradictory embodiment.” But when gender variance is absorbed and managed by the gender-normative, middle-class mainstream, whose resources enable the kinds of biomedical

interventions, and arguably frameworks, observed here, what happens to broader cultural ideologies that make gender variance—especially more known manifestations of gender variance—a “problem” in the first place? How will such powerful presumptions about bodies and gender be challenged? Our current cultural moment presents an important opportunity to imagine a world in which all peoples and bodies can—as Emma put it—“feel free,” to be invested in the kinds of creative rhetorics that engender those possibilities, and to speak new truths to power.

## CHAPTER 7

### CONCLUSION:

#### **Trans-Parenting, Here and Now**

To borrow a phrase from David Valentine (2007), this thesis “is a snapshot of a moment in a rapidly changing field of meanings” (253), both within these families’ lives and culturally. Transgender identity as we know it today is not new (Califia 2003; Stryker 2008; Valentine 2007). But the category transgender seems to be ever central to popular awareness, discourse, and politics in current North American society, as evidenced by legislative and school-policy initiatives to explicitly protect matters of “gender identity and expression,” popular trans-specific TV programs (*Transparent*, *Life with Jazz*, *I Am Cait*), and public figures who are giving trans experience increased visibility, including Janet Mock, Laverne Cox, and Caitlyn Jenner. Within this cultural context, some parents are newly conceiving of and raising young children as transgender, facilitating early childhood social transitions from one sex-categorical “box” to the “other” that seemed to be unavailable, inconceivable to their generational antecedents, as Leigh so thoroughly reflected upon in our interview. This allows a child to express and identify themselves in cross-gendered ways at relatively unprecedentedly early points in life course developments.

The advent of this parenting phenomenon itself is reflected in the psychiatric literature and the reservations of mental health and medical practitioners, some of whom still seem wary of pursuing such “early” transitions for children, for which they feel there is little professional precedent or prospective, longitudinal insight (Drescher 2012; Friedman 2015). The parents in this study navigated around that wariness, which, as I write these pages, seems to be an ever-waning professional response (e.g. Ehrensaft 2012; Lev 2004; Pyne 2014). The

experiences captured of these parents bear significant implications for research and literatures in the realm of feminist and gender-neutral childrearing (Bem 1983, 1998; Kane 2006, 2009, 2012; Martin 2005), masculinities (Kimmel 1994; Connell and Messerschmidt 2005; Pascoe 2007; Schrock and Schwalbe 2009), and childhood socialization (Coltrane and Adams 1997; Corsaro 2015; Knapp 1999), as well as for reigning intellectual and political debates about binary and non-binary identities and possibilities (Butler 2004; Lucal 1999; Roen 2002; Serano 2007; West and Zimmerman 1987; West and Fenstermaker 2002), to which I point below. In this concluding chapter, I summarize and synthesize the major points and observations from the preceding chapters, offer some more personal contemplations about the trans-parenting phenomenon, and think ahead to future research projects that will be pertinent to this burgeoning research frontier.

### *(Trans)Gender and (Homo)Sexuality*

This thesis examines the social practices and processes, including the discursive strategies, that are helping to bring seemingly uncharted transgender childhoods into being for young children. Valentine (2007) theorized shifts in meaning for “(trans)gender” and “(homo)sexuality” across racial and class categories, and aspects of race and class are certainly significant to the parenting work observed here, in light of the resources that their time and child-centric attention demands (Hays 1996; Lareau 2002, 2003). But this thesis also considers a potential shift in meaning across “categories” of the life course, namely early childhood, adolescence, young adulthood, and beyond. Associations between childhood gender variance and adult homosexuality run deep, historically and socioculturally, and gender variance is very often interpreted as a matter of “gay” (Bryant 2006, 2008; Green 1987; Kane 2006, 2009; Martin 2005). Indeed, just the other day, a friend told me that her 4

year-old child (assigned male at birth) wanted to show off his new, bright green necklaces from a St. Patrick's Day parade at pre-school, and she joked that all the teachers are "gonna think he's gay" or think that she is "trying" to raise a gay child.

But the parents I studied, and the wider support networks they populate, are giving new significance to childhood gender variance as a matter of (trans)gender, not (homo)sexuality. To many of these parents, it is preposterous that (homo)sexuality would even be a relevant interpretive grid, even when acknowledging that gay is what first came to mind early on. This is where I see the productive and generative, not merely descriptive and identificatory, potentials of this parental labor. I do not mean to argue that these children "could really be gay," as in not transgender; rather, I seek to emphasize the discursive, intellectual, and practical labor among these parents that are giving expressly *(trans)gendered* possibilities newfound viability and legitimacy for young, pre-pubertal children. Gay interpretations would maintain sex-category birth assignments, but trans emancipates these, such that the child's cross-gender expressions and identifications can be newly legible in the "other box."

Currently, these parents do not have a biological exam or test that could somehow verify for them their children are "really" transgender, or will "really" grow up to be transgender, even though many wished such a test or marker were available as a means of some kind of biomedical authority, legitimacy, or "proof." What parents do have is a powerful new set of understandings, discourses, and identity categories that are validating and honoring their children's cross-gender senses of self as, precisely that—cross-gender. Parents are not trans-gendering their children, per se, they are trans-gendering childhood gender variance, and in emancipatory capacities, I would argue, relative to the dictates of

assigned sex and conventional gender binary ideology. As Lorraine said to me years ago, “I expected this child to be a girl, the sex identification was female, I was wiping a little yoni clean in that diaper, not a little penis ... I had a girl, you know?”

As such, parents’ conscious distinctions between trans and gay kinds of gender variance, and the differential criteria they establish there, are a substantial part of the trans-affirmative labor they do for their children. In the context of wider LGBT rights organizing and discourses, as well as trans advocacy and awareness, these distinctions are hardly revelatory or profound (Valentine 2007). For many of us, the disparate ontological statuses between gender identity and expression on the one hand and sexual desire, attraction and sexuality on the other is obvious. But in the face of oft-cited, longitudinal studies on gender-variant children, where the majority outcome is statistically gay (and cisgender)—and where the children were not being raised as the other sex—parents’ active distinctions between these two realms are critical to the process. As part of this work, parents come to understand these studies and their childhood subjects as irrelevant to their own, as a different kind of gender variance—the ones that don’t, and wouldn’t, grow up to be trans anyway. On these terms, such notorious statistics should have no bearing on the decisions these parents make; they refer to a different type of child. Yet parents, and the advocates they consult, also wager incisive methodological critiques of these studies, wherein the flaws of the research might belie the fact that trans is relevant after all. In both lines of argument, these parents work to legitimize transgender identifications for their gender-variant children, either as a distinct but rare possibility, or as a possibility that has been poorly studied and captured to date (or both). To affirm one’s child as trans here and now is, in part, to reject the category gay, and why I highlight such distinguishing work. This critical interpretive move on parents’ parts departs



from much of the research on parents' experiences with children's gender-atypical behaviors, wherein parents readily associate these behaviors with homosexuality (and curb them as such) and rarely if ever seem cognizant of transgender prospects (Kane 2006, 2009, 2012; Martin 2005). This also departs from gender-neutral or feminist parenting principles as they were originally conceived and practiced, wherein the fundamental link between sex and gender is flexed but maintained (Bem 1983, 1998; Pogrebin 1980; Statham 1986).

*Gender Variance, Male Femininity, and Tomboys*

This trans-gendering of gender variance, where a particularly gendered (and not gay) understanding is afforded childhood non-normative expressions, also allows for conceptions of gender identity that fall "in between," or "somewhere in the middle" of the normative "ends" of the imagined gender spectrum (if not wholly apart from it). Such gender-inclusive awareness on the part of parents is particularly important for children who do not necessarily identify in binary capacities and/or who seek to express themselves in ways that are markedly "variant" from normative conceptions (e.g. boys who prefer to wear dresses). Skylar, who identified as two-spirit, and Vic who identified as agender, at the time of our interviews, offer critical examples of these possibilities, along with several children from the follow-up sample during their earlier childhood years.

Yet, parents' awareness and considerations of a wider range of gendered possibilities inevitably confronted the limits of less binary identities and expressions, and of male femininity especially. In fact, discussion of gender-variant or genderqueer possibilities for children was almost always couched in terms of how difficult parents found these to navigate, either based on first-hand experience or from the observed experiences of other parents in their networks. I would never want to characterize non-binary, or less binary,

gender-variant possibilities as “murky” or as the “messy middle,” but given the relentless binary ordering of our social world—both institutionally and in interaction—it is not surprising that such descriptions surfaced among parents of young children, as these subjectivities have been experienced elsewhere among adult persons (Lucal 1999; Roen 2002).

These aspects of parents’ experiences well expose the compulsory character of the gender binary, the omnirelevance of “two and only two” options, especially for persons assigned male at birth—and why our culture sensationalizes and stigmatizes “male-to-female”-spectrum persons (Serano 2007). There seems to be little room within the borderlands of the binary for male femininity, or for children assigned male to explore and realize non-binary and/or gender-variant sensibilities. I cannot speculate about the reasons for various changes and developments among some of the children in this sample. However, I observed quite intimately the tensions and anxieties that so often surfaced in parents’ narratives around the feminine male child, especially when that “male” child wanted to don “girls” clothes and accoutrements in public. Parents’ testimonials also indicated that few if any children assigned male maintained a categorically public gender-variant expression; instead, there was movement across the proverbial spectrum, either in cis-normative or transgender directions.

Many scholars would argue that asserting this kind of blanket differential about the male/female binary is overly simplistic and not nearly attentive enough to the specificities of gender, or of masculinities and femininities, as they are variously expressed, interpreted, and received in different locales and contexts, for male and female persons (Bridges 2014; Connell 1995; Connell and Messerschmidt 2005; Halberstam 1998; cf. Schrock and

Schwalbe 2009). To be sure, it would be remiss to assume that manifestations of female masculinity are simply easier everywhere and/or within every family, over and above their feminine male counterparts. Furthermore, several parents of trans boys testified to the limits of the tomboy epithet relatively early on in their development (4-5 years old), which could not seem to contain or account for their child's pronounced masculinity. Indeed, the increasing visibility of childhood gender variance could well subsume the viability of this category for young female children.

Notwithstanding, the data continuously referenced the seeming limits of boyhood femininity, and I am compelled to emphasize it. To be candid, throughout this project, I often found myself wondering about the realities and prevalence of all the "children in the middle," or more accurately, male children who like "girl" clothes, "girl" things. These kinds of gender-variant children were referenced, alluded to, sympathized with, but only rarely were explicitly or directly represented in specific cases in this study. Gender-variant males are featured in news stories about special camp retreats or conferences, as well as in Lori Duron's popular blog and memoir about "raising a fabulous, gender creative son" (2013) (two of whose close, gender-variant friends have since transitioned). Gender-variant males seemed relevant to several of the cases I interviewed in 2009-10. But as of the present sample of 43, only one might be characterized as gender-variant (per my use of that term in this thesis)—he dresses and presents as a girl but does not identify as one—and he is homeschooled. They are "out there," as Leigh would say, but they presented as such a "minority" in this study (Nicole).

Parents' negotiations with, and attempts at, the more gender-variant or genderqueer "middle," particularly for children assigned male, add new light and perspective to

masculinities scholarship, and re-assert the profound cultural constraints on maleness, even as scholars increasingly attend to a range of possible masculinities in different contexts (see Schrock and Schwalbe 2009 for an overview). Schrock and Schwalbe's (2009) cautions against fixating on the pluralities and specificities of masculinities are particularly relevant, which can, as they claim, "cause us to lose sight of what these allegedly diverse gender-signifying practices have in common" (281)—and that is, "signify[ing] a masculine self" (280). Female masculinity certainly does not experience unbridled self-expression throughout our culture, especially amongst older persons; at the same time, it would be hard to find the locale where taking one's "son" to see Santa Claus in a fancy holiday dress is not met with great anxiety, trepidation, and careful navigation on the parent's part. One might say the same of taking a young "girl" in a suit, but those parents have (and had) "tomboy" available to them, in a way that the former does not. In a similar vein, I never encountered a father who easily characterized himself as an effeminate boy growing up, unlike all the mothers who near unanimously described themselves as tomboys retrospectively.

The seeming rarity of young male femininity, especially after early elementary school (7 years old), does not necessarily signal a kind of conscious acquiescence to the male or female box, but it may well signal the limits of its intelligibility for one's own recognition and identification (Butler 2004; Lucal 1999). It is hard to understand oneself as something, or identify as something, when it seems so rarely expressed or livable in the first place. I am not necessarily speaking of trans-feminine, genderqueer, or homosexual possibilities for persons assigned male. I am speaking of, plainly, males who prefer "girl" clothes, "girl" things—tomgirls (notably, my word processor does not recognize the word). As Laurie (mother of a cisgender male, 11) would say, "[W]e don't spend time doing that [parsing out gender-

variant terminology] with girls, we don't go, *Well there's the tomboy and then there's the thumbalina* ... they're just tomboys or they're not even talked about." Ironically, attempts to carve out and label new gradations of masculinity and femininity for young male children could well be another symptom of deep cultural anxiety around shaking up the male box too much in the first place. As far as engendering new possibilities for authentic personhood, the male box still is more circumscribed than the female box.

This observation was reinforced in the cases of transgender boys, many of whose parents described them as not stereotypically masculine and who were at times socially isolated for this. I did not encounter comparable observations from parents of transgender girls, who were more often described as ultra-feminine "girly girls" or as "conformists." In other words, their femininity, once affirmed as female, was hardly so remarkable. Moreover, parents' comparisons to cisgender, gay-identified adults seemed to carry different tenors relative to transgender boys and girls: gay-identified male adults were often held as the defining contrast or difference from trans, whereas gay-identified female adults seemed to be given greater relevance, either as representative of possible future outcomes or as potentially representative of (trans)gender variance themselves. The membranes between gay and trans distinctions of gender variance, as it were, seemed to be thinner in the context of persons assigned female. Parents' differing interpretations, conceptions, and comparisons of these different possibilities for male and female persons are further indicative of the profound limits of the male sex category. Like the gender binary, the imagined gender spectrum hardly seems equitable either, for trans-feminine and trans-masculine ranges of self-expression. These observations, especially as examined among the follow-up cases in the study, bear significant implications not "just" for the range of possible masculine and feminine gender

expressions and presentations for male children in society, but for the limits on the formation of one's possible self-conception (not male, not female, something else).

While constraints on maleness and trans-femininity are an overbearing finding of this project, despite changing social awareness about transgender and gender-variant possibilities for young (male) children, the constraining effects of the tomboy label must be considered, too. The tomboy category is often described as a potentially liberating or expansive space for female children to live out gender-variant interests and behaviors (see Kane 2006, Thorne 1993), a latitude often lamented by parents of male children who do not have access to it. Indeed, the allowances of the tomboy label was used by advocates to explain why transgender boys are often identified and affirmed later in childhood compared to their transgender girl counterparts, whose gender variance is much more readily “noticeable” in childhood (as Glenn and Lacy's experiences exemplify). Nevertheless, this space for young female masculinity might serve as an impenetrable buffer zone prior to puberty, and thus might preclude more earnest considerations of transgender prospects on the part of parents. As Trish (mother of a transgender boy, 11) said about her presumed tomboy, “We just cruised,” through 10-11 years old. While male femininity is overly scrutinized and limited, the relative normalization of young female masculinity might compromise the identifications of young transgender boys.

### *Biomedicine, Body Logics, and the Binary*

While the limits of non-binary and/or gender-variant options for young developing children, especially for male children, is important to note, it is equally important to recognize that the trans-parenting experience very often presented as a binary one, as directed by the children's own sensibilities and expressions: these young children identify as pink or

blue, so to speak, even as their parents strove, turbulently, in the beginning to realize more purple possibilities on their behalf. Indeed, for many of these parents, seeking more gender-variant or gender-neutral possibilities was a crutch against having to truly relinquish their child's assigned sex. In these ways, contrary to notions about the liberatory potentials of non-binary or gender-fluid options (as discussed in Bornstein 1994; Roen 2002; Serano 2007), gender-variant served as a kind of constraining holding pen against a child's most authentic sense of self (i.e. the "other" sex).

These parents are only and ultimately responding to who their children claim they are, which happens to be the "other box." As Claire (mother of a transgender girl, 6) said, "She's *such* a girl, it's hard for people to understand she was ever born a boy ... everything she was saying and doing was, *I'm a girl I'm a girl, I'm a girl*, and her beauty was, *Call me a girl ...*" Moreover, almost all of these children express interest in body modification, or ask about sex change possibilities, in various forms. These aspects of parents' experiences showcase the profoundly child-directed, child-centered dynamics of childhood socialization (Coltrane and Adams 1997; Corsaro 2015; Hays 1996; Knapp 1999), especially among white and/or middle-class parents (Lareau 2002, 2003), in a realm that these schools of thought have not necessarily considered before: gender identity formation and gendered childrearing. The *children* are the agents asserting their male and female identifications, and the parents are attempting to respond and parent accordingly. While these parents acknowledge that concerns about crowding out the "middle," or about "having to choose a box," are certainly relevant to some children, they simply do not relate to their own child, who has "picked a box" and has been in that box from the beginning—the "other box." In fact, these young children do not necessarily identify with the category "transgender"—although some do after

their parents explain the category to them, once the parents themselves have understood it—but as boys and girls. And with the help of a rapidly evolving biomedical infrastructure, these children will evade the puberty that would result in more substantial “contradictory embodiment” (Connell 2012; Jenness and Fenstermaker 2014), which the majority have indicated they do not want.

Several of the professionals I spoke with intimated that these children are not really living a transgender life, but a “de-transgendered” one, and wonder if this new paradigm risks losing a more conscious trans identity or politicized trans consciousness, for these children and for others who follow. I cite these perspectives cautiously, as it is hard to argue that these children are not living a transgender life when many of them learn quite early that revealing their bodies to others might threaten their status as boys or girls among their peers, among other consequences. But these children’s fervent articulations of who they are—and it is often not “transgender”—are a powerful reminder of the limits of assigned sex and the sexed body, and of why we have the term in the first place. So, necessarily, if we work to erode the import of the flesh you were born with for who you can be in the world, “transgender” indeed might pose a disappearing category. On these terms, it is hard to mourn the loss of something that was a bridge away from a formula that was faulty in the first place, and that may never have applied to these children anyway. Even a very binary, normative kind of self-determination is self-determination nonetheless.

As parents’ narratives exhibited, such departures from traditional norms and expectations about sex and gender, even in binary, gender-normative capacities, must be made meaningful and intelligible, if real social change is to occur. As Garfinkel (1952) wrote decades ago, “The big question is not whether actors understand each other ... The fact is



that they do understand each other, that they *will* understand each other, but the catch is that they will understand each other regardless of how they *would* be understood” (367). In making meaningful sense of their child’s gender variance, parents often gestured to the notion of a natural, biological or “evolutionary” continuum of gender possibilities, some cisgender and some transgender, but all an “inevitable” part of human diversity. Linda indicated these sentiments when she said, “the term ‘transgender’ is indicative to me of how primitive we still are as a culture, as a literal societal framework ... .”

In other instances, however, parents often theorized about other biological processes or frameworks, on a more individual level, in which something went “wrong,” in which a gendered brain was inappropriately cross-wired or mismatched with a sexed body. This perspective was also implied in frequent analogies to disability. On multiple levels, these body narratives well make sense, and are incredibly validating to, and resonant with, how many trans people and trans children might feel (Bettcher 2014; Serano 2007). Because trans difference is so often a matter of the physical body, which many seek to address through the use of hormone therapies and other body-modifying practices, placing it in the biomedical realm is appropriate—especially if this removes its status as a “mental disorder” or “mental illness.”

But biomedical frameworks that gesture to “birth defects,” necessarily, implicate the same cisgender logics and assumptions that are exacted everyday on everyone outside the clinical domain—certain bodies “should” underlie certain gendered self-expressions and displays. Of course, these parents are well aware of the implications of such logics, as well as of a range of embodied possibilities, and they practice articulating as much to their children (i.e. “You’re a girl with a penis,” “You’re perfect the way you are”). They also seek to

normalize body-modifying practices to their children (“If you want to change, there are medicines and doctors that can help you with that”). As such, while these parents often (re)situated their understandings of trans in traditional, essentialist frameworks that (re)link sex and gender, they also indicated new discursive conventions and strategies for normalizing trans to their children. I highlight these kinds of discursive openings that come about in the trans-parenting process, which would well make meaningful, logical sense in a world in which a child born with a penis is not presumed to be a boy, or a boy at the grocery store is not presumed to have one. I am invested in logics and rhetorics in which non-normative bodies are not such a social “problem,” nor so policed, wherein cisgender expectations get quashed from the start, even as we seek to normalize and de-stigmatize desires for gender re-assignment procedures. Indeed, scholars and activists in the realm of disability rights (Clare 1999; Kafer 2003; Litt 2004; Landsman 1998, 2000; Oliver 1990; Panitch 2008), as well as intersex rights (Chase 1998; Colligan 2004; Fausto-Sterling 1993), have demonstrated parallel and adaptable de-constructionist tactics, discourses, and politics. Such logics would also make more explicit room for more genderqueer or gender-variant possibilities and embodiments, which are harder to graft to birth defect analogies and theories of hard-wiring in the brain.

As far as more personal contemplations and ruminations: I was often, rightly, strongly cautioned against speculating about the “what if” questions regarding the longitudinal body of psychiatric research on gender-variant children. As John (educator/advocate) told me, questions about “gay versus trans, then and now” are overly fraught territory. However, in the concluding thoughts of this thesis, I will take the liberty of offering more contemplative speculations about the trans-parenting phenomenon, which ultimately make the case for the

emancipatory potentials of more constructionist outlooks on gender and sexuality. For many of these parents, the notion that their child is unequivocally transgender, would and will always have been transgender, regardless of the historical time or place—both within their own lifetimes and more broadly—is essential to legitimating a transgender identification and the social transition it entails. Indeed, in light of many professionals’ skepticism that these children will “actually” be transgender (e.g. Drescher 2013; Friedman 2015), or that social transition should be an advisable course of action, this essential claim on parents’ parts is critical to validating their decisions.

The logical implications of this claim is that we are not witnessing more persons become transgender, or get labeled as transgender, per se, than would otherwise exist in the population and/or relative to other historical moments (as Leigh insinuated); parents are just identifying the rare transgender cases sooner in the life course (and sparing persons years of undue pain, confusion, depression). In other words, transgender possibilities are not being enabled or caused or (falsely) identified by these parents, in a way that would alter the long-term trajectory of a child (who might otherwise grow up to be non-transgender). Nicole (mother of a transgender girl, 12) was rather explicit about the logics of this position: “You only grow up to be trans if you’re trans ... so those people are being found earlier now because of the trans movement, the people that are gay that are really trans are eventually gonna come out as trans or they’re gonna kill themselves.”

I understand how paramount this framework is to defending and validating the affirmed self-expressions of their children, which is not new to other LGBT rights discourses and identity categories (Epstein 1996; Weber 2012). However, I do not think this position reflects or testifies to the discursive, deliberative, conceptual, and ideological labor being

done by these parents—the productive, and not merely descriptive, work—that gives transgender possibilities new room and opportunity in a way they have not necessarily been allowed before, especially in the absence of biological “proof” that would somehow mark these children as transgender for the parents and for others (genetically, neurologically, or otherwise, as parents often theorized about). In these contemplations, I find myself thinking about the other gender-variant children distinguished from, or imagined outside of, this sample—the cases I cannot directly describe and whose parents I never interviewed, all of the other “tomboys” and “girly boys” for whom such possibilities and opportunities are foreclosed, forestalled, as yet unrealized. Presumably, according to the logic represented in Nicole’s commentary above, these other subjects just wait, or waited, until decades later to assert a transgender, or differently-gendered, sense of self—or not, depending on what they were essentially going to be anyway. They were always going to be gay, or trans, or not, regardless of their childrearing contexts and what conceptions of self-expression and self-identification were presented to them. But this perspective strikes me as speculative, presumptuous too, as far as projecting what any of us can become, absent the practices and processes that help to realize, validate, make sense of what that might be in our becoming, at any given point in time. Is there only one inherent way to properly interpret and conceive of non-normative expression, sensibility, identity and experience?

Interestingly, perhaps unwittingly, I actually observed something more malleable than that position intimated in parents’ recurring notions of a “spectrum” of non-normative possibility. Here, gender and sexuality are not radically separate realms of experience and identity, or distinct types, but relevant and permeable to each other, such that certain kinds of gender variance can “bleed into the realm of,” or are re-conceivable as, transgender

(Valentine 2007). Parents' constructions in this vein signaled to me expanding, changing possibilities for authentic modes of being—rather than distinct, unalterable, pre-ordained ones—which, I argue, might offer more liberating perspectives and practices regarding gendered and sexual subjectivities. Rather than locking down categories as unequivocally true—which, effectively, are pressured to be verified and then have to be defended against those who might claim they are false—why not honor a range of possible self-understandings that are contingent on a multiplicity of factors, at any given point in time, some no less true than others?

This latter position has political implications for all the talk of “desisters” and of the prospects of such a child having to “switch back.” For on these latter terms, there are no “risks” in socially transitioning a young child who asserts a cross-gender sense of self, against which some mental health practitioners might caution. There are no fundamental truths to try to capture as scrupulously, accurately or correctly as possible, where social transition should be the absolute last resort, lest a parent make the “wrong” decision “too soon” and skew their child’s trajectory forever (or lest someone is constructed as “living a lie”). A child raised as a transgender boy, for example, from 5 through 10 years old, who comes to embrace a genderqueer sense of self later, or perhaps a female-masculine sense of self in adulthood, was not “transitioned too soon” or “pushed into a box”; the parents did not make a mistake, get it wrong, act too hastily, as some practitioners, or other family members, might insinuate about the prospects of “switching back.” Rather, these parents were honoring and accommodating their child’s most comfortable sense of self, as this came to be known, expressed, and guided by the child, within a particular field of meanings and at each phase of the life course the parents were charged with nurturing.

For some children, this scenario may well be the case; for many others, they may never change in their affirmed identifications. And in either scenario, there is nothing false or mistaken about it. I can only hope for all persons such emancipatory, liberatory possibilities, where there is no “right answer” other than the one that feels best in the present moment, precisely as these parents are blazing on their children’s behalf. Ironically, this perspective entertains a similar kind of malleability to childhood development and/or gender identity formation as that expressed among some psychiatrists, who rely on it to effectively coerce a child back into their assigned sex or to evade transitioning because the gender variance will most likely “resolve” anyway (e.g. Friedman 2015; Zucker 2008). But here, the malleability frames all possible subjectivities—male, female, gay, straight, transgender, gender-variant, genderqueer, others—as legitimate and viable for one’s self-determination, at any given time, not as potential falsehoods or “phases” that need to be closely monitored or steered away from, in the hopes that they prove to not “actually” be the case. And it is a malleability that ruptures any fundamental constraints between one’s assigned sex at birth and the person into which they can grow.

### *Future Research*

This study charts the practices and processes that depart from conventional, cisgender modes of childrearing, and the parameters of how such departures are made meaningful, possible, viable by a particular group of parents and their children. The substance of such processes, however, cannot generalize to other situations or groups, who might make their own change through the same process, even though it looks different. To these ends, I suggest several future research avenues. First, this dissertation mainly concerns white, middle-class parents, who are particularly accepting and supportive of gender-variant

children. Studies that pertain more specifically to working-class or low-income families, and/or families of color, who experience significant childhood gender variance are needed. Such projects would require different recruitment and sampling strategies from the ones deployed here, which may have entailed raced and classed selection biases. For example, rather than relying on conference venues or online portals via the listservs, one might start with school institutions and/or after-school programs that are provided to low-income families and children, including the school counselors and administrators involved there. One might also more heavily target local LGBT centers or social service agencies, whose resources are often more financially accessible (if costs are involved at all) than the kinds of clinicians, professionals, and/or “experts” that were represented in this study, especially in states where insurance programs do not guarantee trans-related health care coverage. It would be important to learn how these other groups of parents observe, understand, and identify their children, what they are seeking to do when approaching these other avenues, and how they accommodate cross-gender identities and/or transitions for their children. Other pertinent projects would concern studying parents who are more wary or resistant to the prospect of transgender transitions for their children, or to permitting gender-variant displays outside of the home (which no doubt several of the parents here represented at early phases of their journeys), including parents who attempt to quash or correct their child’s gender variance. This might also require different sampling techniques, as it is hard to recruit such parents in the venues that are catered to categorically identified gender-variant or transgender children.

Moreover, this thesis largely represents parents of young, pre-pubertal children, versus older children and adolescents who personally, formally “come out” to their parents.

This sample certainly represents a few such cases, but it is arguably a very different parenting model and experience, and begs a separate study in its own right. Karen testified to this, when reflecting on her experiences trying to connect with parents of older children:

[B]ut it also seemed clear ... that there's a big difference ... when your kid kinda comes out and is making their own decisions and you have to deal with them, I think that's a certain kind of struggle, I think when your child is very young and you're making the decisions, it's a different kind of struggle ... like for me, I'm being accused of being physically and emotionally abusive to my child, I'm trying to defend my decision at my child's school with all the people who say, *This is too young, are you crazy, what's your agenda, you did this to your child*, and they [other parents] were at a stage of, probably flippin' out because their kid was making these decisions ... but their kids came out at 21, I think it's a different challenge, and I don't wanna minimize either one or the other because I had some say over this ... so that made it a little bit easier, but on the other side, I have so much responsibility makin' this decision for my kid; for them, their kid made a decision and bam, it hit 'em in the face and they had to deal with it ... so it was a little bit of a feeling, too, like we weren't talkin' the same language ... .

Additionally, young, grade-school children live in a very “pink and blue” world; in contrast, older children and teenagers, as well as college-aged youth, may be able to engage more concertedly with non-binary discourses and understandings. The facilitator of an LGBT youth group, for example, recently told me that many of the youth joining now identify as “genderqueer,” “non-binary,” “agender,” not as “lesbian,” “gay,” “bi,” or “queer.” This well signals the particularly (trans)gender-aware moment we are living in, but also the fact that contemporary older children often draw on gender-variant, genderqueer identities in their transitions in a way that, arguably, younger children cannot. Vic (12 years old), for example, identified as lesbian/gay, then transgender, then androgynous, and finally as agender (but also still as “super gay”). A comparative study regarding parents of specifically pubescent or post-pubescent youth would be illuminating.



Additionally, like many childhood scholars would attest, interviews with the children themselves would be profoundly insightful of additional dimensions of these processes, which were so often child-led and child-directed. Lastly, given the implications this data yield about the profound limits of gender-variant and/or non-binary possibilities for young children, particularly for children assigned male and/or trans-feminine children, a comprehensive study that is exclusively devoted to parents of children identified as non-binary, gender-variant, gender-fluid, and/or genderqueer is needed.

Many scholars in this burgeoning research terrain are interested in tracking these children and their parents in a much more longitudinal capacity, over a large stretch of time (5, 10, 15 years apart). Given how new this trans-parenting paradigm is to contemporary parents and professionals, I think many wonder what the long-term future will look—will there be any changes, will some children “switch back,” are these children “really” going to be transgender as adults? I am not interested in tracking more long-term “outcomes” or experiences. I understand these can be important questions, especially as far as cataloguing the healthiest practices for supporting gender-variant children, but I believe they risk overshadowing the profound work occurring in the present by prioritizing some finite truth or “right” answer in the future. I seek to give voice to new possibilities that are being forged here and now during early childhood development, by these parents and the children they so exceptionally support; these are as significant to new cultural reckonings with, and rupturing of, the gender binary as anything the children may or may not “really” grow up to be in the long-term.

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