

GENDER ISSUES IN CHILDREN AND ADOLESCENTS

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OBJECTIVES

1. List 3 critical issues related to gender and non-conforming gender children and adolescents face.
2. List definitions of sex, gender, non-conforming gender, gender identity, gender roles, and gender fluidity.
3. Specify 3 strategies how to best support gender nonconforming youth to prevent negative health and behavioral health outcomes.

Question 1

One of the most critical issues regarding gender that children and adolescents of nonconforming gender face:

- a) suicidality
- b) nonsuicidal self injury
- c) lower school performance
- d) all of the above
- e) a and b

Question 2

2. The definition of gender fluidity is:

- a) flexible range of gender expression
- b) interests and behaviors shift over time
- c) a & b
- d) None of the above

Question 3

3. Strategies to help support gender nonconforming youth are:

- a) be alert for gender nonconforming students and bullying
- b) listen and learn what youth feels about gender
- c) encourage school district policy addressing protection of gender nonconforming students
- d) All of the above

EPIDEMIOLOGY OF GENDER NON-CONFORMING YOUTH

- No formal epidemiologic studies exploring the prevalence and incidence of gender nonconformity in youth
- Estimates exist in GN adults, about 1%

Vance et al, 2014

GENDER AND GENDER NONCONFORMITY

“The “why” of gender and gender nonconformity continues to be a mystery, but all evidence points to gender development being an intricate interweaving of nature, nurture, and culture.” Diamond, 2002

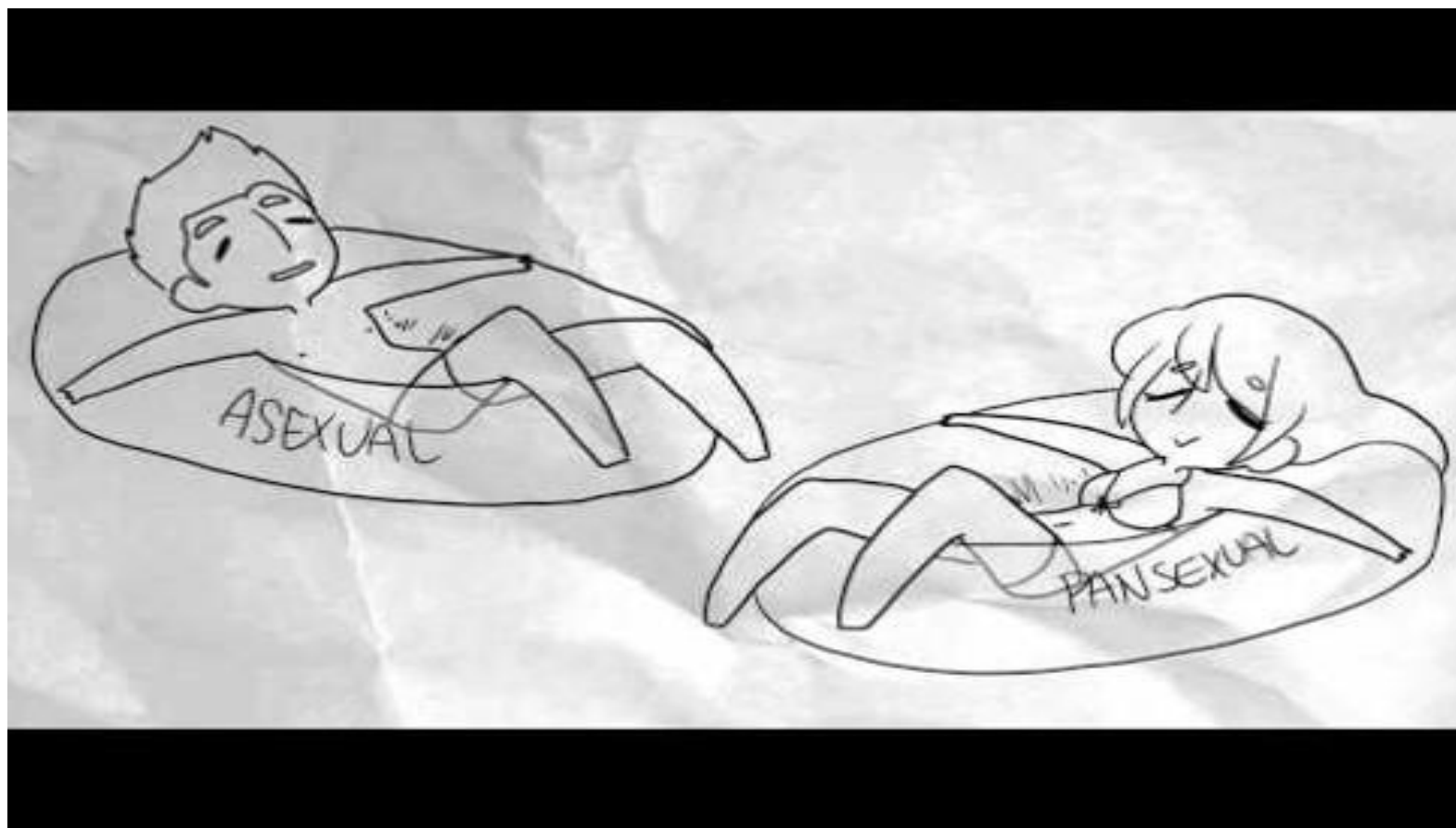


GENDER DEVELOPMENT

- Endocrine, genetic, and neurological data **support biological component.**
- Past psychosocial paradigm = parents have the greatest influence on a child's deviation from acceptable social gender norms or a child's refusal to accept the implied gender based on the natally assigned sex
- Currently understood to be a “feedback loop” with the child shaping the parents as much, if not more, than the parents shaping the child.
- Within this interaction, the child's gender is perceived as generated from within while also being influenced by the social environment

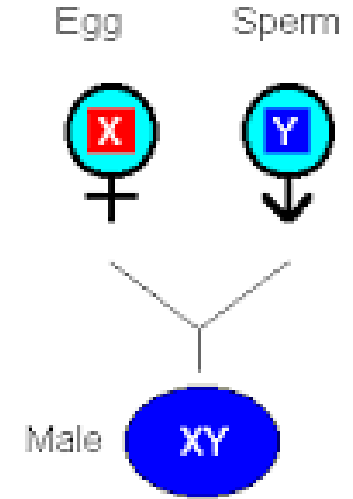
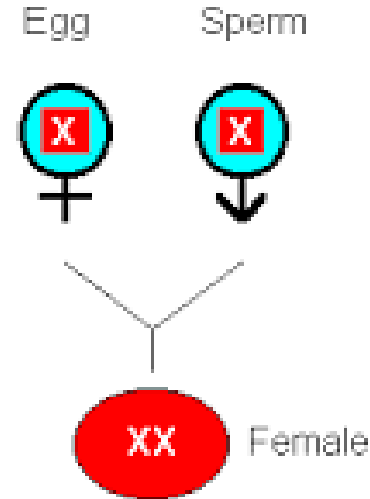
DEFINITIONS

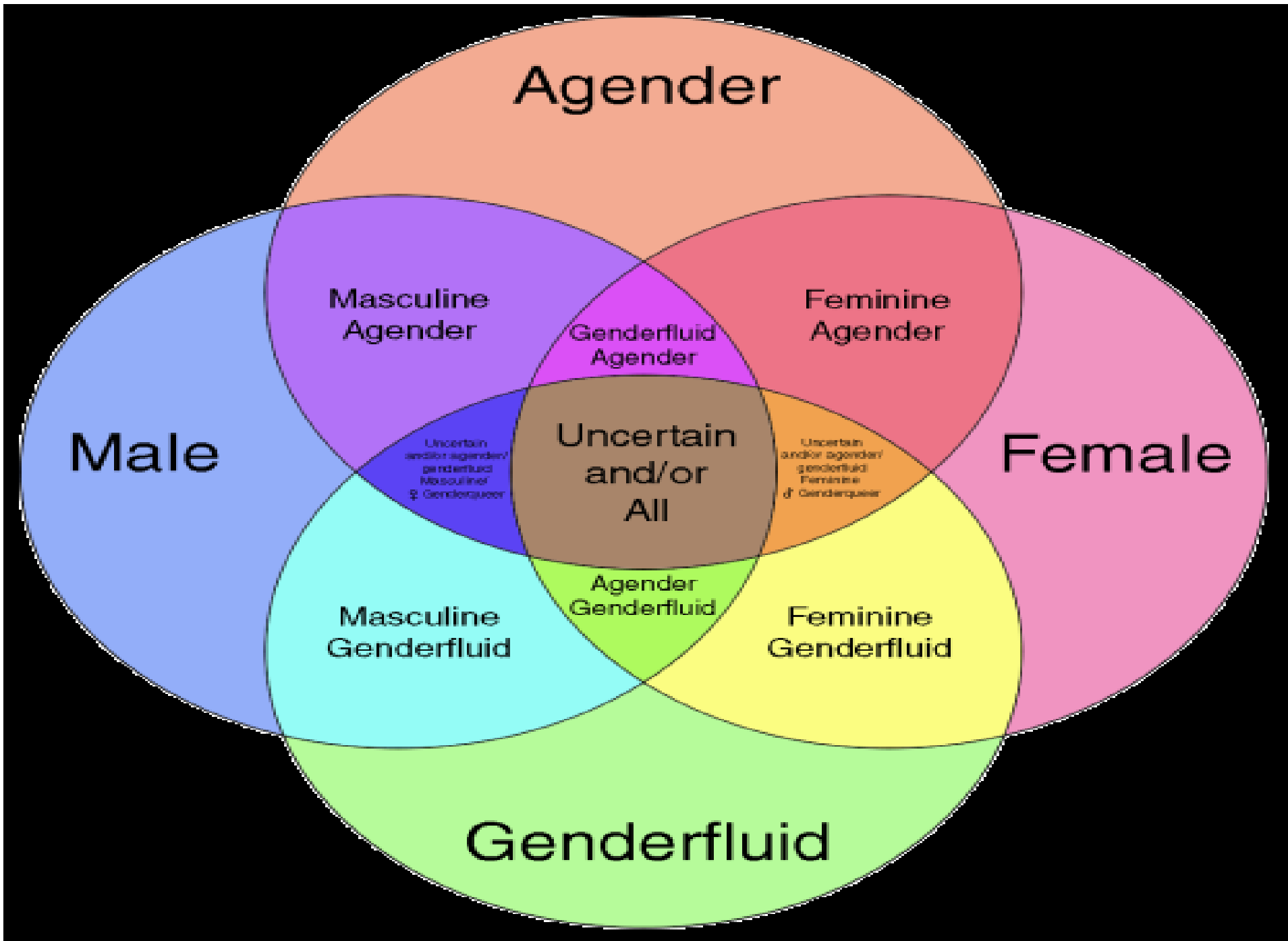
- Sex
- Gender
- Non-conforming gender
- Gender Identity
- Gender Roles
- Sexual Orientation
- Coming Out
- Gender Fluidity
- Pan Sexual



SEX- a person's biological status

- **Typically categorized as:**
 - male
 - female
 - intersex (1.7%)
- **Sex chromosomes**
- **Gonads (ovaries, testes)**
- **Internal reproductive organs**
- **External genitalia (labia, scrotum, penis, clitoris)**





GENDER

- Taught “blue for boys” “pink for girls”
 - **Culture** determines gender
 - Attitudes, feelings, and behaviors that a culture associates with a person’s biological sex.
 - **Gender normative-behavior**
- compatible with cultural expectations***
- Gender non-conformity- behaviors that are *viewed as incompatible* with these expectations

NON-CONFORMING GENDER

- A person who doesn't adhere to societal pressures to conform to gender norms and roles.

GENDER IDENTITY

- How an individual **identifies in terms**
- **of their gender.**



Since **gender identity is internal**, one's gender identity is not necessarily visible to others.

GENDER ROLES

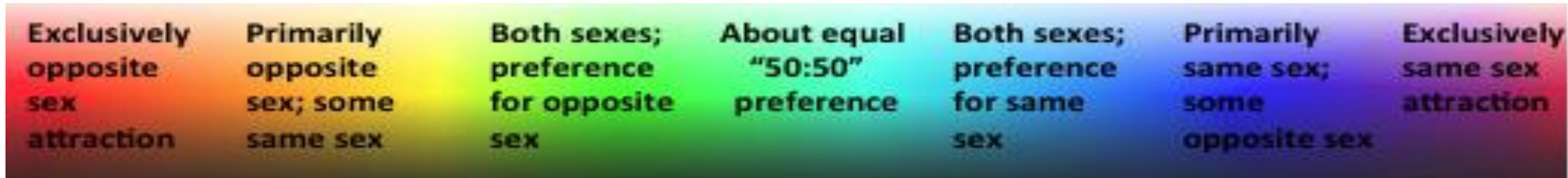
- Set of societal norms dictating the types of behaviors which are generally considered acceptable, appropriate, or desirable for people based on their actual or perceived sex or sexuality.

SEXUAL ORIENTATION

- Determined by one's emotional, physical and/or romantic attractions.
- Categories of sexual orientation include, but are not limited to:

Gay	Bisexual	Heterosexual
Lesbian	Attracted to some members of more than one gender	Pansexual
Attracted to some members of the same gender	Attracted to some members of another gender.	Gender Fluid

SEXUAL ORIENTATION AS A CONTINUUM



- Sexual orientation does not always appear in such definable categories and instead occurs on a continuum (e.g., Kinsey, Pomeroy, Martin, & Gebhard, 1953; Klein, 1993; Klein, Sepekoff, & Wolff, 1985; Shiveley & DeCecco, 1977)
- In addition, some research indicates that sexual orientation is fluid for some people; this may be especially true for women (e.g., Diamond, 2007; Golden, 1987; Peplau & Garnets, 2000).

COMING OUT

- Process in which one acknowledges and accepts one's own sexual orientation.
- Figure of speech for lesbian, gay, bisexual and transgender (LGBT) people's self-disclosure of their sexual orientation and/or gender identity

GENDER FLUIDITY

- Conveys a wider, more flexible range of gender expression, with interests and behaviors that may even shift from day to day, over time or depending on the situation

GENDERFLUIDITY



PANSEXUALITY

- A person who is emotionally, physically and/or romantically attracted to some people, regardless of that person's gender identity or biological sex.
- Describes people who are capable of being attracted to multiple sexes or gender identities.

GN HOW IDENTIFIED IN CLASSROOM/SCHOOL?

- Child of one biological gender wears clothing or plays exclusively with toys of the opposite gender or states they prefer to be called a name of the opposite gender.
- Child may wear clothing typical of one gender and then the next day wear clothing typical of another.

GN HOW IDENTIFIED IN MEDICAL CLINIC?

- Younger children:
- Parents bring in to clinic as concerned their son prefers to play with dolls or wear dresses or bring their daughter because she prefers to be called a traditionally male name or even explicitly wishes she were a boy.
- Is this a phase?
- Is this early indicator of being transgender? Homosexuality?

HOW IDENTIFIED IN MEDICAL CLINIC?

- Adolescent:
 - GN youth may present after progression of puberty triggers increased gender dysphoria (prior to DSM 5 known as gender identity disorder) or presence of clinically significant distress associated with one's biological gender being different than their gender identity

DSM5 GENDER DYSPHORIA – HAS OWN CHAPTER

- Marked difference between the individual's expressed/experienced gender and the gender others would assign him or her
- Must continue for at least six months
- In children, the desire to be of the other gender must be present and verbalized
- Causes clinically significant distress or impairment in social, occupational, or other important areas of functioning.

GENDER DYSPHORIA

- No validated measurement scales
- Prevalence data unknown 1.3% of San Francisco middle school students identify as transgender 1
- New Mexico data unknown
- Sex ratios² Initially data suggested 2:1 ratio of natal males to females, now 1:1 (since roughly 2005)
- Not all gender TGNC youth have gender dysphoria
- Not all youth with gender dysphoria want medical or surgical interventions

- Shields, 2013; Aitken, 2015
slide of

Adapted from Nate Sharon, MD

GENDER DYSPHOIA MANIFESTATIONS

- Strong desires to be treated as the other gender or to be rid of one's sex characteristics
- A strong conviction that one has feelings and reactions typical of the other gender.
- The DSM-5 diagnosis adds a post-transition specifier for people who are living full-time as the desired gender (with or without legal sanction of the gender change).
- Ensures treatment access for individuals who continue to undergo hormone therapy, related surgery, or psychotherapy or counseling to support their gender transition.

CRITICAL ISSUES FACED BY GN YOUTH

Stigmatization, social rejection + lack of family support leads to adverse mental health and medical outcomes

- Risk of victimization by their peers
- Suicidality
- Depression
- Anxiety
- Oppositional Defiance
- Lower school performance
- Nonsuicidal self-injury
- Drug abuse
- Alcohol abuse
- Physical assault
- Sexual violence
- 40% of homeless youth are LGBTQ
- More likely to have lower GPAS, miss school or drop out of school early because of harassment.
Greytak, 2009; Haas, 2011

CO-OCCURRING MENTAL HEALTH PROBLEMS

- Higher rates of PTSD, depression, anxiety, self-harm behaviors, suicide attempts compared to cis-gender and LGB peers ^{1, 2}
- Observed 7% co-occurrence of Autistic Spectrum Disorders in TGNC youth
Recent study showed 23% of youth 8-20 presenting for gender services had “possible, likely or very likely” Aspergers
- Higher rates of
 - At risk sex behaviors
 - Substance use
 - HIV
 - Trauma
- Protective Factors₄ Caregiver acceptance
 - Positive school environment

CLASSROOM/SCHOOL INTERVENTIONS

- Learn about gender issues
- Be alert for children and adolescents who are GN and whether or not they are being bullied
- Encourage the implementation of best practices- get district policy on transgender and GN students
- Make curriculum inclusive- Insert into your curriculum topics around GN students where able
- Insert in curriculum general skills regarding how you like to be treated and how to treat others
- Share GN material with your students
- Make referral to counselor when needed

CLASSROOM/SCHOOL INTERVENTIONS

- <http://www.glsen.org/webinars>
 - School Push out of LGBTQ Youth
 - US Anti-Bullying Efforts
 - LGBT Youth in Rural schools and MORE

MULTIDISCIPLINARY APPROACH BEST MEDICAL/PSYCHOSOCIAL INTERVENTIONS

- Professional should get TRAINING as in gender issues or become gender specialist
- Clinical assessment
- Psychotherapy
- Family Support
- Evaluation for social transitions to affirmed gender
- Later for psychological readiness for medical intervention
- Especially puberty blockers and cross –sex hormones.

MENTAL HEALTH PROFESSIONAL

- Listen and learn what youth is experiencing and feeling about gender
- Comprehensive gender history from birth to the present from youth and from parents
- Can begin with delineating their name, gender identity and preferred gender pronoun
- Challenging tasks
 - Assess if youth's GN signal of or solution to independent underlying emotional or psychiatric issues
 - Determining authenticity of affirmed gender identity.
- Young children who:
 - Early on wish they are different gender than biological gender assignment
 - Tenacious in both their gender-fluid or gender-crossing expressions and identity affirmations
 - Demonstrate distress about the incongruence between their physicality and affirmed gender
 - Will more likely evolve into transgender teens or adult

POSSIBLE GOALS OF GENDER NONCONFORMING YOUTH

- May seek care to understand their internal gender identities,
- Socially transition to their affirmed genders, and/or physically
- Transition to their affirmed genders

(Vance, Ehrensaft, Rosenthal, 2014)

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RESOURCES, SUPPORTS

International/national World Professional Association for Transgender Health (wpath.org)

- Endocrine Society guidelines
- <http://www.glsen.org/article/educators-support-trans-and-gnc-students>
- Trans Youth Equality (transyouthequality.org)
- GenderSpectrum (genderspectrum.org)
- Trans Youth Family Allies (imatyfa.org)
- Transparenthood (transparenthood.net)
- Gay, lesbian, straight education network (www.glsen.org) –Schools in Transition: A Guide for Supporting Transgender Students in K-12 Schools (genderspectrum.org)
- Camp ARANU'TIQ
- Trans Active Gender Center (transactiveonline.org)
- The Trevor Project (thetrevorproject.org)
- Trans Lifeline, 1-877-565-8860