A retrospective look at the perceived effects of parental acceptance/non-acceptance on transgender adolescents

Tara Ryan

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The focus of this study is to retroactively explore the effects of parental acceptance or non-acceptance on transgender adolescents. In this study, transgender adults report retrospectively on their experiences as adolescents regarding their relationship with parents. The purpose of this study is to answer the following question: What are the retrospective perceived effects of parental acceptance/non-acceptance of transgender individuals during adolescence?

The participants in this study were 22 self-identified transgender adults. Participant ages ranged from 25 to 63 years. There was limited racial/ethnic diversity in the study, as all participants identified as White, with five of these participants also identifying as Biracial. Quantitative and qualitative questions were both used to collect data, although most questions were open ended to allow participants to provide a narrative response.

The findings revealed some perceived long-term effects these participants experienced as a result of parental acceptance or non-acceptance during adolescence. Participants who felt unaccepted during adolescence reported experiencing confusion over their identities and low self-esteem into adulthood. Other findings revealed that there was a significant difference between the age of awareness of gender variance and the age of disclosure of gender identity to parents.
A RETROSPECTIVE LOOK AT THE PERCEIVED EFFECTS OF PARENTAL
ACCEPTANCE/NON-ACCEPTANCE ON TRANSGENDER ADOLESCENTS

A project based upon an independent investigation, submitted in partial fulfillment of the requirements for the degree of Master of Social Work.

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“We are all tied together in a single garment of destiny... An inescapable network of mutuality... I can never be what I ought to be until you are allowed to be what you ought to be.”

-Martin Luther King, Jr. (1929 – 1968)

To all of you who participated in this study, thank you for sharing with me the depth of your experiences.

To my thesis advisor, Pearl Soloff, thank you for your unending patience and gentle persistence.

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To my parents, thank you for teaching me that love can endure the complexity of relationships.
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CHAPTER I
INTRODUCTION

Adolescence is a developmental stage within which much of a person’s identity begins to be shaped. As adolescents individuate from their parents, they simultaneously begin to develop their own worldviews, explore their sexual identity, and rely more on peer relationships for companionship and support. Although much independence from parents is gained during this stage, parental acceptance has been shown through research to be a major protective influence in the lives of adolescents, particularly in the lives of lesbian, gay and bisexual (LGB) youth (Brookmeyer, Fanti, Kupermine, & Henrich, 2008). While some research exists that demonstrates the risks transgender youth face (Grossman & D’Augelli, 2007; Bockting, 1998; Gagne, Tweksbury & McGaughey, 1997; Wyss, 2004), there is much less research available to explore protective factors for these individuals.

Transgender is a term that describes people who express gender nonconforming identities and behaviors. This can include transsexuals, people who have undergone surgery or hormone treatment to alter their physical appearance and those who have not done so (Ryan & Futterman, 1997), or anyone who is gender atypical in their presentation, behavior or identification. The term transgender encompasses persons who identify as gender benders, transvestites, androgynous, and/or transsexual. Many transgender people feel as though they are ‘trapped in the wrong body’ (Ryan &
Although transgender people are often lumped under the sexual minority umbrella often referred to as LGBT (lesbian, gay, bisexual, transgender), it is important to note that being transgender does not imply a sexual orientation. Transgender people identify as heterosexual, gay, lesbian, or bisexual, just as the rest of the general population (Grossman & D'Augelli, 2006).

Awareness of the problems transgender people face in the world has begun to spread in the United States, as there has recently been an increase in the presence of transgender individuals in the media. In the past few years, stories of children such as Jazz, a 7 year-old MtF child, have been told by news reporters on shows such as 20/20. Thomas Beatie, a transgender man, recently gave birth to his second child. Transgender celebrities are ‘outing’ themselves in front of the world. Chaz Bono, the child of Sonny and Cher, is undergoing a transition from female to male. On the 2008 season of America’s Next Top Model, 22 year-old contestant Isis King was the first transgender woman to compete on the show.

Although Jazz, Isis King, Thomas Beatie, and Chaz Bono have been boldly open to the world about their true identities, it is still a scary place for transgender individuals. This is evidenced by the frequency of news reports on violence and hate crimes committed against transgender people. Such hate crimes have been reported worldwide, and are calling attention to the painful, and sometimes fatal realities that transgender individuals face. The movie Boy’s Don’t Cry, which is based on a true story, portrays the last few weeks of 21 year-old Brandon Teena’s life. Brandon, a transgender man in Lincoln, Nebraska was the victim of a brutal sexual assault that two of Brandon’s friends
committed against him after finding out that Brandon had female genitalia. After Brandon reports the assault to the police, he was murdered by the same two men.

In the most recent news, reports are of a 36 year-old transgender woman attacked by a group of teenagers in Seattle and of increased violence toward transgender persons in Venezuela, including four sex workers found murdered there. Reports such as these are showing up more often in the news, and speak to the need for more protective influences on the lives of transgender people, particularly those who are younger and more vulnerable.

Transgender individuals are sometimes included in research exploring the lives of lesbian, gay, and bisexual people. They are, however, often underrepresented in the research sample. Language used when talking about LGBT individuals is more often geared toward sexual orientation, and less toward gender identity or expression. Specific research on gender-variant or transgender youth is greatly lacking. The experiences of transgender youth may somewhat parallel those of LGB youth, but more research is needed to understand the unique experience of young people who do not feel they fit into society’s gender binary.

In this study, I will be using the terms risk factors and protective factors. Protective factors can either be innate in a person or environmental. They serve to provide resilience to an individual, promote growth and development, and strengthen one’s ability to cope with stressors (Davis, 2004). Examples of protective factors are feelings of self worth, positive relationships with family members, and living in a safe environment. Risk factors are the vulnerabilities in a person’s ability to function, and can be biological and/or environmental. Risk factors become increasingly difficult to cope
with as they grow in number and accumulate over time (Davis, 2004). Examples of risk factors are family transitions, dropping out of school, and substance abuse.

As mentioned previously, there has been research exploring the risks that LGB adolescents experience. Among these risk factors are isolation, low self-esteem, homelessness, and suicide (Rosenberg, 2003; Rew, Whittaker, Taylor-Seehafer & Smith, 2005; Eisenberg & Resnick, 2006). Transgender adolescents have been shown to be more vulnerable to these risks than LGB youth (Ryan & Futterman, 1997). The current study used mixed methods to retroactively explore reported adolescent experiences of 22 transgender adults. The primary research question is: What are the perceived effects of parental acceptance/non-acceptance of transgender individuals during adolescence? Transgender identified adults will be asked to complete an online survey, sharing their retrospective experiences during adolescence related to their relationship with their parents, and the acceptance or non-acceptance they perceive to have received during adolescence.

The following four chapters will present (1) relevant literature informing this research (2) the methodology used to conduct the study (3) important findings from participant responses and (4) a discussion of the implications of the finding for practice, policy and research.
CHAPTER II
LITERATURE REVIEW

This chapter provides an overview of the literature on the effects of discrimination towards transgender adolescents and adults. There is limited literature available to illustrate the challenges transgender adolescents face in life, and the factors that serve to protect their emotional wellbeing and support development. Literature will be reviewed about the development of adolescents in general, and literature that explores some of the vulnerabilities of sexual minority youth in a heterosexist and gender dichotomized society. There will be a focus on the risks that transgender adolescents’ experience, and the gaps in research that this study aims to fill.

Adolescent Development

Adolescence is a developmental stage that is marked by increasing independence from parents and caregivers, desire for increased connection with peers, and development of sexual identity (Christianson, Eisenberg, Hall-Lande & Neumark-Sztainer, 2007). Much emphasis is placed on developing positive peer relationships during adolescence. During the transition from childhood to adolescence, these relationships transform from a more activity based connection in childhood to a connection based on increased intimacy and mutual support. Because of the importance placed on friends during this time, the friendships formed with peers are vital to emotional wellbeing (Brown, Dolcini, & Leventhal, 1997).
Although peer relationships are essential for positive mental health development in adolescence, the reliance on friends is also related to negative health outcomes. There are several hypotheses for this relationship. One possibility is that some adolescents may be relying more heavily on their peer supports when their family members are unavailable or inadequate. Also, peer supports may be more likely to encourage less healthy behaviors than adults would (Brown, Dolcini, & Leventhal, 1997). It could be concluded from this information that while peer relationships are imperative for adolescent development, these relationships are more healthy when influenced and supported by healthy relationships with one’s family members, particularly adult members such as parents or other caregivers.

Most adolescents develop positive self-definitions, while others accumulate more negative mental health issues. Among these issues are low self-esteem, depression, difficulty protecting self, and other mental health concerns. The most effective way to intervene in a potentially negative cycle is to change the environmental factors in an adolescent’s life, so that they have opportunities to receive positive feedback in order to develop more positive self-definitions (Nurmi, 1997).

Protective factors can also reduce risk behavior in adolescence. A feeling of closeness with parents is an important contributor to adolescent psychological health and is one of the most important protective influences during this developmental stage (Christianson, Eisenberg, Hall-Lande & Neumark-Sztainer, 2007).
Risk Factors for Lesbian, Gay and Bisexual Adolescents

A fair amount of research has been done to examine the lives of lesbian, gay and bisexual adolescents (Rosenberg, 2003; Rew, Whittaker, Taylor-Seehafer & Smith, 2005; Eisenberg & Resnick, 2006). Much of the existing literature on LGB youth points towards several factors that put these adolescents at even higher risk than their heterosexual peers. Among the factors putting lesbian, gay and bisexual youth at risk is lack of social support. As mentioned previously, peer relationships are important to adolescent wellbeing. Sexual minority youth often feel isolated from their peers and many feel as though they have to keep a large piece of their identity a secret from those around them (Rosenberg, 2003). The developing individual has difficulty feeling good about him or herself when such important parts of the self are not talked about (Rosenberg, 2003).

Homelessness

Homelessness of LGB youth is often a result of conflict in the home over sexual orientation. Seventy three percent of gay and lesbian homeless youth reported having left home because of conflict with their parents about their sexual orientation (Rew, Whittaker, Taylor-Seehafer & Smith, 2005). Many homeless youth were kicked out of their homes because of their sexual minority status (Rosenberg, 2003). As one can imagine, being homeless, particularly during adolescence, can lead to many more problems that increases the vulnerability of LGB youth. Among these problems are prostitution, which can lead to HIV/AIDS and other sexually transmitted diseases and substance abuse (Rosenberg, 2003).
Rew, Whittaker, Taylor-Seehafer & Smith found in a study done with homeless youth that gay and lesbian adolescents left home as a result of sexual abuse more often than heterosexual adolescents. This supports previous research findings that rates of sexual abuse are higher for LGB youth than they are for heterosexual youth. It was also found that heterosexual youth measure higher for assertive communication than did gay and lesbian youth (Rew, Whittaker, Taylor-Seehafer & Smith, 2005). This finding seems appropriate, as gay and lesbian adolescents are so often disempowered by families, peers, school systems, the media and by society at large.

Suicidal Ideation and Attempts

In a recent study 2,255 lesbian, gay, and bisexual high school students were asked about suicidal ideation and attempts (Eisenberg & Resnick, 2006). Over half of the respondents reported that they had thought about suicide, and over a third had attempted suicide (Eisenberg & Resnick, 2006). LGB youth are 50% more likely to have suicidal intent than heterosexual youth. While sexual minority youth are at higher risk of suicide, it has also been shown through research that protective factors in the lives of adolescents greatly reduce this risk. Family connectedness is one of the most salient factors that serves to protect LGB adolescents from the risk of suicide (Eisenberg & Resnick, 2006).

Family Relationships

When parents are informed of their adolescent children’s sexual orientation, they undergo a ‘coming out’ process similar to the one their child experiences (Goldfried & Goldfried, 2001). They may experience shock, denial, isolation, anger and depression (Savin-Williams & Dube, 1998). During this process, parental reactions to this information are often perceived by adolescents to be negative and disapproving. As a
result, adolescents tend to report more often than their parents that their relationship has not improved since coming out (Savin-Williams & Dube, 1998). This parental non-acceptance of their child’s sexual orientation can have adverse effects on the lives of adolescents.

Protective Factors for Lesbian, Gay and Bisexual Adolescents

Just as for their heterosexual peers, family connectedness has been shown to serve as a protective factor in the lives of LGB youth, even when faced with considerable obstacles in adolescent development. A positive correlation exists between a positive relationship with family members and positive psychological wellbeing (Brookmeyer, Fanti, Kupermine, & Henrich, 2008).

Transgender Development

In 2004, Lev came out with the book Transgender Emergence: Therapeutic Guidelines for Working with Gender-Variant People and their Families, within which she describes her theory for the developmental process by which transgender individuals ‘come out.’ Coming out, as she describes, is a concept that exists because of normative assumptions, that everyone is heterosexual unless proven otherwise, or that boys are one way and girls are another. These normative assumptions isolate people who are different. Lev offers six stages of development, which include (1) awareness (2) seeking information/reaching out (3) disclosure to significant others (4) exploring identity and transition (5) exploring transition and possible body modification and (6) integration and pride. Although most transgender individuals experience these stages to some extent, it
is important to remember that the time that each person spends in each stage is entirely individual.

The most relevant stages to the current research are stages 1-3, as this study is focused on the effects of parental acceptance/non-acceptance. In order for a parental figure to be accepting or not, they must first be aware of their child’s gender identity. Lev believes that during the stage of awareness, transgender people feel a sense of gender dysphoria, or discomfort with their birth sex and the meaning attached to it. Factors such as intensity of repression, length of time of awareness, depth of feelings of shame, and social/religious/cultural background will affect how a person experiences the awareness stage.

During the stage of seeking information/reaching out, the transgendered person begins to say their identity out loud, coming out not only to themselves, but to others as well. Information and community are increasingly found online, as the internet is becoming widely accessible and contains vast amounts of information. The access to this information is an important part of the development of an integrated identity.

The third stage involves disclosure to significant others. This stage is often a scary process and many people cope with their fear by avoiding disclosure. The fear experienced in this stage is usually about the possibility they see that family members or other people they are close to could reject or abandon them. Transgender parents fear losing custody of their children, and transgender children or adolescents fear losing the support and love of their parents. The family’s reactions can be dependent on their previous awareness of the gender variance. For some, it helps families put together the
missing pieces or clear up confusion. However, sometimes disclosure causes a transgender person’s fears to be actualized.

Risk Factors for Transgender Adolescents and Adults

While research on transgender adolescents is extremely limited, what has been shown is that transgender adolescents are even more vulnerable and stigmatized in society than lesbian, gay and bisexual youth (Ryan & Futterman, 1997). Along with all other adolescents, sexual identity must be developed. But transgender adolescents also have the task of reconciling their gender identity with the cultural gender expectations that come along with their biological sex. Most transgender-identified individuals have felt conflict over the expectations for their gender presentation and the gender expression that feels most natural to them.

Gagne, Tweksbury and McGaughey conducted interviews with 65 transgender individuals who identified as masculine to feminine spectrum. They found from their study that for some transgender individuals, awareness of not fitting into their culture’s gender norms began during childhood, although most felt the desire to be the other gender or identified more as the other gender during adolescence and adulthood. Many transgender children grow up not knowing that anyone else who is like them exists, and aren’t able to make sense of their identity until they find out there are names for the feelings they experience. These young people are often taught, whether directly or subliminally, that their feelings are ‘wrong’ (Gagne, Tweksbury & McGaughey, 1997).

According to a study conducted by Wharton in 2007, 25% of transgender individuals have experienced traumatic events in their lifetime and meet the criteria for a Post Traumatic Stress Disorder diagnosis. Wharton surveyed 300 individuals using an
online survey and found that these traumatic events are often hate crimes committed against individuals for being transgender. In the study, participants were asked if they had ever received news of a person within their community who had been involved in a hate crime. Of those responding affirmatively, 82.7% were said to have been victimized because of gender (Wharton, 2007).

**Peer Relationships**

The majority of the reactions transgender individuals get to non-conforming gender presentation is negative. This is reported to apply particularly to the reactions transgender adolescents get from their peers. These reactions range from verbal harassment and assault to propositions for sex (Grossman & D'Augelli, 2006). As peer relationships are known to be critical in adolescent development (Christianson, Eisenberg, Hall-Lande & Neumark-Sztainer, 2007), the lack of peer acceptance transgender youth tend to face can be a very damaging experience.

Wilson, Griffen, and Wren conducted a study in 2005 exploring peer relationships among transgender adolescents. In the study, eight youth between the ages of 14 and 17 were interviewed, 6 Male to Female participants and 2 Female to Male. The interviews focused on research questions exploring disclosure of identity to peers, factors influencing decision to disclose identity to peers, peer reactions to disclosure, and impact of disclosure on relationship with peers.

Participants were recruited from an agency specializing on work with children and adolescents with what the author refers to as ‘gender identity problems.’ Parental consent was required for all adolescents to participate. From the interviews, three themes were found to be relevant to participants. These themes were ‘bullying and homophobic
abuse,’ ‘peer support’ and ‘disclosure.’ Most participants reported choosing not to disclose their gender identity to peers, as they reported abuse to be common and friendships were difficult to find. It was also discovered that when these adolescents were ready to disclose such information to their peers, disclosure to a trusted adult had already occurred. The researchers suggest that the relationship with an understanding adult helped the youth to make sense of their identity, thus hastening identity development.

It was a strength of this study that the researchers had access to youth who were able to share openly about very distressing experiences. As peer relationships are an important part of adolescent development, this study is useful in understanding the challenges transgender adolescents face in relationship building with peers, and the protective factors, such as a relationship with a supportive adult, that foster identity development amongst these challenges.

The sample for this study only included adolescents receiving therapeutic support, and whose parents were consenting to their receiving this support. As many transgender adolescents are unsupported by family members and mental health professionals, this sample is not representative of gender non-conforming youth in general. As the current study is using online methods for recruitment and data collection, transgender individuals with a variety of experiences will be able to participate. And while, this study is useful in understanding disclosure to peers, the current study will ideally fill a gap in past research by exploring the responses of parents to disclosure of gender identity (Wilson, Griffin & Wren, 2005).
Barriers to Education

In educational settings, gender variant children are rarely affirmed and supported. These children are often targeted by school officials, and seen as individuals who need to be monitored closely (Mallon & DeCrescenzo, 2006). In adolescence, many of these individuals experience severe academic difficulties, due to the stigmatization they receive at school and the lack of support they receive at home. As a result, many transgender youth drop out of school, although a few are fortunate enough to have access to alternative high schools for LGBT students (Grossman & D'Augelli, 2006).

Wyss conducted a qualitative study in 2004 interviewing seven gender non-conforming individuals who attended U.S. high schools during adolescence. Wyss aimed to explore the school based experiences of gender variant youth. Participants were born no earlier than 1965, and were “out” as transgender or genderqueer to at least one person while in high school. Five of the participants were White, which the researcher believes is due to recruitment being primarily on the internet. Individual interviews and email questionnaires were used to collect data.

In this study, Wyss found that 6 out of the 7 participants were recipients of abuse by their peers at school. Abuse ranged from physical, which included being shoved, pushed, smacked, kicked and/or punched, to sexual, which included being grabbed inappropriately and even raped. One student said,

“I was grabbed a lot. Usually while it was happening they would say something along the lines of ‘see you have tits … not a dick.’ Yeah fun fun…. Fuckers […. A] lot of the guys had a thing with trying to poke me with pens and such in between my legs. [My uniform] skirt [was] often lifted up.”

Among the effects of the violence were difficulties with academics and low self-
esteem. Many participants became depressed along with the decrease in self-esteem. Each youth interviewed shared the strategies for survival they learned in order to cope with the violence directed towards them. These strategies sometimes involved predicting and/or preventing attacks, and sometimes involved fighting back when assaulted. Some participants became closeted as a result of the assaults, trying to present themselves in the traditional role assigned to their biological sex. Although the severity of the abuse received from peers ranged for the adolescents, finding ways to protect themselves was a profound need for each participant (Wyss, 2004).

Obstacles to Employment

Transgender individuals are often the recipients of employment discrimination. This is due to their non-conforming appearance, which many employers believe make them unemployable (Ryan & Futterman, 1997). Gagne, Tweksbury and McGaughey found from their individual interviews with 65 transgender individuals that most of the participants they interviewed had been fired, demoted, pressured to quit and harassed by co-workers when they had begun to transition. As a result, many of these individuals had to find employment in low wage jobs that required less skills, such as working for temp agencies, in fast food restaurants, and in labor positions, such as janitorial work (Gagne, Tweksbury & McGaughey, 1997).

It is even more challenging for homeless transgender adolescents to become employed, as they are generally lacking in job skills, which puts them at a greater disadvantage, considering the other employment discrimination they already receive. This leaves many transgender adolescents with limited means of survival, and some turn to prostitution.
(Grossman & D’Augelli, 2006), which puts the health and physical safety of these youth at high risk.

**Access to Health Care Services**

These youth are largely misunderstood by health professionals, and can even be recipients of discrimination by doctors and mental health workers (Grossman & D’Augelli, 2006). Cohen, de Ruiter, Ringelberg & Cohen-Kettenis conducted a study in 1997 to explore the idea that many mental health professionals hold, which is that transsexualism is something that emerges from psychiatric disturbances. Twenty-nine transgender adolescents were compared with two groups: (1) 24 gender conforming adolescents who were seen in an outpatient psychiatric clinic and (2) 25 female university students. In the results of this study it was found that adolescent transsexuals showed less psychopathology than the adolescents seen at the psychiatric clinic (Cohen, de Ruiter, Ringelberg & Cohen-Kettenis, 1997). However, Gender Identity Disorder remains a diagnosis in the Diagnostic and Statistical Manual of Mental Disorders (American Psychiatric Association, 2000), and transgender individuals continue to be pathologized for not adhering to cultural gender norms (Grossman & D’Augelli, 2006).

**HIV Risks**

Little, if any, research has been done to determine the risks of HIV infection specifically for transgender adolescents. A study was conducted in 1998 by W.O. Bockting to assess HIV infection risk for transgender adults. Focus groups were used to interview 19 transgender individuals. Several specific risk factors were found to affect these individuals. Among these risk factors were increased feelings of shame, isolation, and fear (Bockting, 1998). It could be concluded that because of the higher frequency of
feelings of shame and isolation among transgender individuals, they are at higher risk of being infected with HIV than the general population. Also, as transgender youth experience feelings of isolation more often than other sexual minority youth and other peers, their risk for HIV infection is likely extremely high.

It was also reported by transgender individuals that they are at higher risk for HIV infection due to the difficulty they have talking about sex because of their unique physical identities. Many transgender people experience negative feelings and perceptions of their body parts. When their anatomy does not match their gender identity, these individuals could have feelings of shame and fear of rejection that can prevent open conversation about practicing safer sex. Other factors that increase risk for HIV infection are prostitution (often resulting from job discrimination or need for additional funds to cover medical costs involved for transitioning), sexual assault and sharing needles while injecting hormones (Bockting, 1998).

*Life Threatening Behaviors*

Similar to their gay, lesbian and bisexual peers, transgender adolescents are at high risk for life threatening behaviors. In a recent study, Grossman and D’Augelli interviewed 55 transgender youth between the ages of 15 and 21. About half of these youth reported seriously thinking about taking their lives. Of the youth reporting suicidal ideation, one-half of them expressed that their thoughts were related to being transgender. Of the transgender youth interviewed, 26% reported having attempted suicide at least once. All of those who had attempted suicide reported that at least one of their attempts was related to being transgender (Grossman & D’Augelli, 2007). These results are similar to those of the prior mentioned study by Eisenberg and Resnick done with
lesbian, gay and bisexual youth. However, unlike Eisenberg and Resnick’s study, the effect of parental acceptance was not explored (Grossman & D’Augelli, 2007).

Grossman and D’Augelli did a study a year later (2007) with 31 transgender youth exploring life-threatening behaviors in this population. Individual interviews were conducted with the participants of this study, with four research questions relating to the effects of parental reactions and body image and self-esteem on these youth, as well as the history of life-threatening behaviors and differences between those you engage in such behaviors and those who do not. Several scales were used to measure suicidality, childhood gender nonconformity, parental abuse, and body esteem. A convenience sample was recruited, as the population being studied tends to be hidden. Parental consent was waived so as not to put the participants at risk of harm or unwanted disclosure. The youth were offered an incentive of $30 for participation.

Many of the participants reported being the recipients of abuse from their parents. Up to 76% reported having been verbally abused by their parents, and 50% had been “insulted, made to feel guilty, and embarrassed in front of others.” More than 25% said they had been slapped, beaten, or hit really hard, and up to 20% had been punched or kicked by their parents. Those reporting abuse from their parents were significantly more likely to have attempted suicide and to have practiced life-threatening behaviors than those participants who had not been abused by their parents.

The researchers recognized the limitations of in generalizing findings from this study due to the techniques used for recruiting participants, as they were unable to recruit a random sample, and offered an incentive for participation to those youth who were recruited from specialized agencies. However, considering the difficulty recruiting
research participants for this type of study, the results show that, regardless of
generalizability, transgender youth face significantly high risk of harm, and even death.

Family Relationships

Transgender youth experience considerable rejection and inconsistent caring from
those around them, including their family members. The result of this is often feelings of
shame and low self-esteem. Transgender youth will sometimes distance themselves from
their families, and even be forced from their homes (Grossman & D'Augelli, 2006).

Past research has been done with families of youth diagnosed with Gender
Identity Disorder, with the focus of the study being on the etiology of the disorder.
Parents have often been blamed, with the family’s dysfunction placed as the root of the
problem (Wren, 2002). Little has been done to explore parental acceptance and support
of transgender youth, and the likely positive effects this would have on the youth’s well
being. Wren’s research with parents of transgender children highlights the difficulty
parents have in understanding their child’s experience. Parents are not only grasping to
understand their children, but also struggling to find ways of explaining to others, who
may perceive their child’s behavior as shameful or perverse. Parent’s inability to
understand what their child is experiencing can result in the increased vulnerability of
transgender youth (Wren, 2002).

In Wren’s qualitative study, she explores parent’s perspectives of their children’s
nonconforming gender identities. In this study, members of 11 families were
interviewed. There were three parents interviewed whose children refused to participate
in the study, and one teenager interviewed who was estranged from family. In each of
the other families, at least one parent was interviewed, as well as an adolescent between
the ages of 14 and 19 with a diagnosis of Gender Identity Disorder. The interviews took place at an agency that specializes in work with people who have what Wren describes as “gender identity problems.”

Wren found the theme of ‘acceptance’ to be significant to participants, with many sub-themes falling under this category, such as reasons for acceptance, levels of acceptance, and emotional impact of acceptance or not. Although Wren found the theme of acceptance to have been important to participants, she only focuses on the feelings and reactions parents have to their gender nonconforming adolescents, and does not provide a summary of the responses she received from the adolescents themselves. Her conclusions about the theme of acceptance are centered on the parents making sense of and coping with their gender atypical children. Wren interviewed the children of these families, but does not report on the youth’s perceptions of their parents’ attitudes towards their gender identities and its perceived impact on them. While the reports of the parents are helpful in understanding the process they go through in order to accept their children, it is also important to understand the unique experiences and needs of the adolescents. It seems evident that parental acceptance is a key component to the emotional health of these adolescents. The current study aims to explore transgender adolescent’s experiences and perceptions of their parent’s reactions to their non-conforming gender identity.

Grossman and D’Augelli’s study conducted in 2000, focuses on the vulnerabilities that transgender youth face. They explored the feelings and experiences of the 24 youth participating in the study qualitatively by holding focus groups. The participants were between the ages of 15 and 20 and resided in the New York City
metropolitan area. The participants were broken into three groups, and were asked questions relating to their experiences in childhood and adolescence, discovering their gender identities and their views of their own vulnerabilities in a non-accepting society. Themes that were discovered from what the youth shared included gender identity/presentation, sexual orientation, and vulnerability and health issues.

When talking about vulnerabilities they face, these youth reported lack of continuity of caregiving by their families as a result of their gender variance. One participant interviewed reported, “Throughout my whole life, I was abused physically and mentally by relatives in my family. I have marks on my body. I have things that I remember happened to me.” Because of the lack of support from families, these youth reported being at risk of prostitution, social isolation, and substance abuse.

The method used in this study was selected to provide a non-threatening environment to the participants where being in a group of people who could identify with one another could potentially empower participants to share their viewpoints. This likely provided a more comfortable atmosphere and enabled participants to share their experiences more openly than if they had been interviewed individually, as the power differential between the participant and interviewer could contribute to the youth’s feelings of disempowerment.

An interesting aspect of this study is that 95% of the participants were youth of color. This is a strength of the study as people of color are often underrepresented in research. Similar research which includes the experiences of White youth would be useful in gaining a broader perspective, and would be helpful in comparing the
experiences of different racial/ethnic groups and the specific vulnerabilities they each face.

However, there are limitations to this method. One of these limitations is the restricted research sample geographically, as all of the participants were from the New York City metropolitan area. While the experiences they shared are valuable research findings, they may not represent the experiences of transgender youth in other locations.

In this current study, participants were recruited from many geographical areas, and ideally from various racial/ethnic groups. Unfortunately, racial and ethnic diversity was limited as all participant identified as White. In the current study different methods were used to collect data. Although focus groups were an effective way of empowering youth to share their stories, this study sought to maintain anonymity in order to allow participants to share openly without fear of being identified. This also made it easier to share experiences that are difficult to talk about.

In 2005 Grossman, D'Augelli, Howell, & Hubbard conducted a study to assess the perceptions transgender youth have of their parents’ reactions to their gender identity and expression. In this study, 55 transgender youth between the ages of 15 and 21 were interviewed using focus groups and were also asked to complete a questionnaire. Information was gathered relating to initial and current parental reactions, as well as participant gender development and expression. The questionnaire was used to measure adjustment and mental health as well as physical and emotional abuse of parents towards their transgender children.

Participants were recruited by using a snowball sample technique at two recreational and social services agencies in New York City. They were offered monetary
compensation of $30 for participation. Parental consent was waived so as not to put participants at risk of exposure or harm. This current study recruited participants from more geographically diverse locations.

Forty-two participants in Grossman, D’Augelli, Howell, and Hubbard’s 2005 study reported that they always wished that they had been born the sex other than their birth sex. Seven reported sometimes wishing this, and only 5 have never wished to have been born the other sex. The mean age of feeling different from others was 7.5. Two thirds of participants had been told during childhood that they were different than other children. More than half of participants were brought to therapy by their parents because they believed they needed counseling regarding sexual orientation or gender identity.

More than half of the participants in this study reported that their parents reacted negatively when they first told them about their gender identity. Of participants whose parents were not aware of their gender identity, all of them predicted that their parents would react negatively. It was also found from this study that the more gender non-conforming the participant was, the more likely they were to be verbally and physically abused by parents.

The focus of this current research is similar to Grossman, D'Augelli, Howell, and Hubbard’s study, as it also sought to explore the perceptions of transgender individuals relating to parental reactions to gender identity and expression during adolescence. However, this current study is not only interested in the reactions of parents, but also on the effects of these parental reactions as perceived by participants. Also, a wider age range of participants will be recruited as participants will be reporting in retrospect about their adolescence.
Protective Factors for Transgender Adolescents

Little is known from research about the factors that serve to protect transgender adolescents. There is some debate over whether parental acceptance of their transgender children has a positive affect on their identity development. Some researchers view parent’s tolerance and support of their children’s desires to live as the other sex a risk factor, in that they could inhibit the chance for the child to make meaning and understand the implications of such a decision (Wren, 2002). This idea is contrary to research on adolescents in general, which demonstrates clearly that parental acceptance promotes psychological health (Christianson, Eisenberg, Hall-Lande & Neumark-Sztainer, 2007). Until there is more research exploring the risk and protective factors influencing the lives of transgender adolescents, services will not be available to promote the health and development of this vulnerable group of people.

Conclusion

Existing literature makes it evident that transgender youth face more discrimination and are in greater risk than gay, lesbian, bisexual, and heterosexual adolescents (Ryan & Futterman, 1997). As parental support has been shown to be effective as a protective factor in the lives of adolescents in general, and specifically LGB youth, more research on parental acceptance of transgender youth is warranted in order to determine protective factors specific to this population. This study aimed to explore the relationships transgender youth have with their parents, and the perceived effects that parental acceptance and/or non-acceptance have on these individuals.
CHAPTER III
METHODOLOGY

The purpose of this study was to survey transgendered adults looking retrospectively at the perceived effects of parental acceptance/non-acceptance on these individuals as adolescents. The research design was approved by the Human Subjects Review Committee at Smith College School for Social Work (See Appendix D). This study used an online survey (Appendix C), with both quantitative and qualitative questions.

Research Design

An online survey was used in this study, as it allows for anonymity of participants. Due to the sensitive nature of the data collected, anonymity would allow for participants to openly share about their feelings and experiences without fear of identification. The use of an online survey allowed participants to complete the survey at a time and place that was convenient. Although the online survey used quantitative and qualitative questions to collect data from participants, most of the survey consisted of open-ended questions. These 12 questions on the survey were intended to gather narratives from participants about their adolescent relationships with parents, and were open-ended so that participants would share what they believed to be most relevant about their experiences. Use of the internet was the only method of recruitment. As internet use within the home is more common among White, middle class persons, this could have potentially limited
access to the online survey to people of color. It was intended that recruitment also occur at San Francisco based agencies serving transgender individuals, but as data collection happened so rapidly by internet promotion, agencies were not contacted.

Participants were asked to answer questions that were divided into three sections. First, questions were asked to identify demographics of participants, requesting information about age, race/ethnicity, and gender identification. In addition, the age of awareness of non-conforming gender was explored. Participants were also asked questions about relationships with parents, the family’s cultural beliefs about gender, and gender expression during adolescence. Likert scale items were used, ranging from strongly disagree to strongly agree, asking participants to rate six different statements about their relationship with their parents and how much acceptance they felt they received. An example of these statements is as follows: *I experienced difficulties in my relationship with my parents because of my gender identity/expression.*

Next participants were asked to complete one of the following two sections, depending on whether or not they had talked to their parents about their gender identity during adolescence. The first section was designated for participants who had not talked with their parents about their gender identity during adolescence. Questions were asked exploring circumstances that kept participants from such conversations, parental awareness of gender identity without participant disclosure and the perceived effects of not having such conversations.

The second section was designated for participants who had disclosed their gender identity to their parents, and included questions that explored parental responses to the disclosure. Questions were asked to explore age of first disclosure, parental
reactions and changes in their reactions over time, and what participants perceived would be different in their lives had their parents responded differently.

The Characteristics of Participants

All participants were required to be 18 years of age or older to complete the online survey, as consent was not gained for individuals to participate who were under the age of 18. This also provided a different perspective, as participants were reflecting on their complete adolescence, rather than reporting on their immediate circumstances. Participants were also required to identify as transgender, which for the purpose of this study was defined as individuals who express gender nonconforming identities or behaviors. This could include people who have undergone surgery and/or hormone treatment to alter their physical appearance and those who have not done so, or anyone who is gender atypical in their presentation, behavior or identification. The sample for this study included 22 self-identified transgender adults. The demographics of the sample, including gender identification, age, and race/ethnicity are specified on Table 1.

The demographics displayed in Table 1 demonstrate the lack of diversity in the sample of this study. All participants identified as White, with only 5 of these participants identifying as Biracial. A possible explanation for the lack of racial diversity represented in the sample is the recruitment methods. There was also an over representation of M to F (male to female) identified participants (55 percent). It is unclear why gender identities reported in the sample were so unbalanced. Both the lack of racial diversity and gender diversity limit the generalizability of the results. It is also important to note that the ages of the sample also limit generalizability, as none of the
participants were currently in adolescence at the time of the study. The age of participants in the sample reduces the relevance of the findings to today’s adolescents.

<table>
<thead>
<tr>
<th>Table 1: Demographics of Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender*</td>
</tr>
<tr>
<td>Male to Female (M to F)</td>
</tr>
<tr>
<td>Female to Male (F to M)</td>
</tr>
<tr>
<td>Genderqueer</td>
</tr>
<tr>
<td>Other</td>
</tr>
<tr>
<td>*participants were allowed to choose more than one option</td>
</tr>
</tbody>
</table>

| Race*                          |
| White                         | 22 | 100% |
| Black or African American      |  0 |  0% |
| Native Hawaiian               |  0 |  0% |
| American Indian or Alaskan Native|  0 |  0% |
| Vietnamese                    |  0 |  0% |
| Chinese                       |  1 |  5% |
| Japanese                      |  0 |  0% |
| Filipino                      |  0 |  0% |
| Japanese                      |  0 |  0% |
| Korean                        |  0 |  0% |
| Guamanian or Chamorro         |  1 |  5% |
| Other                         |  3 | 14% |
| *participants were allowed to choose more than one option |

| Age                            |
| (18-30)                       |  7 | 32% |
| (31-40)                       |  7 | 32% |
| (41-50)                       |  3 | 14% |
| (51-60)                       |  4 | 18% |
| (61+)                         |  1 |  5% |

The Recruitment Process

An online promotion of the study was done using the internet in order to reach a geographically diverse sample. Recruitment involved a snowball sample by emailing contacts requesting them to forward the survey to persons who qualified for the study. The survey was also posted on websites specifically for transgender individuals.
Although it was intended that recruitment would also happen at agencies in San Francisco serving transgender individuals, this method of recruitment was not used, due to the rapid response of participants through internet promotion.

*The Nature of Participation*

Participation in this study entailed taking an online survey. After the link to the online survey was posted on the internet and emailed to my contacts, interested candidates accessed the survey through a link to Survey Monkey, an online survey tool. Participants were first presented with the informed consent letter (See Appendix B), and were required to agree to its terms before beginning the survey. By participating in the study, participants were confirming that they were over the age of 18 and identified as transgender. Because the survey could be accessed online, participants were able to complete the survey at a time that was convenient for them. This also allowed for anonymity in participation, which is important for a community that is often the recipient of discrimination and abuse. Participants were informed that they would not be able to withdraw information once they submitted it as I would be unable to distinguish their responses from other participants.

*Risks of Participation*

Risks involved in participating in this study may have included emotional distress from remembering difficult experiences. Participants were advised in the informed consent letter to discontinue the survey should participation become emotionally distressing. A list of resources was provided to each participant where they can seek emotional support. As participation in this study was completely anonymous, there was no risk of broken confidentiality.
Benefits of Participation

Potential benefits involved in participating in this study included contributing to research on transgender individuals that may lead to better services in the future. Participants also may have experienced feelings of empowerment from sharing about surviving difficult experiences. No financial compensation was provided for participating in this study.

Informed Consent Procedures

An informed consent letter (See Appendix B) was displayed online before participants began the online survey. Participants were notified via this informed consent letter that participation indicates their consent. They were informed that their participation was voluntary, and were notified of the afore mentioned risks and benefits of participation. All participants were provided with my email address to contact me with any questions about their participation in the research. They were asked to print a copy of the informed consent letter for their records. The informed consent letter included a list of agencies where mental health services could be obtained should emotional distress arise from participation in this study.

Data Analysis

The data in this study was analyzed by the researcher with the assistance of their research advisor. The qualitative data in this study was analyzed by using theme content analysis. Categories of the data were created according to themes in the responses of participants. Quantitative data in this study is presented within basic descriptive statistics. Both the quantitative and qualitative data analysis will be displayed in more detail in the following chapter.
CHAPTER IV
FINDINGS

This chapter contains findings from an online survey that was completed by 22 individuals that self-identify as transgender. The researcher for this study collected qualitative and quantitative data in an online survey to gather information from transgender individuals. The online survey (See Appendix C) included questions that were open-ended in order to obtain a narrative response from participants. The survey also included closed-ended questions that will be described in this chapter. The closed ended questions were used to gather demographic information and other information relating to participant relationships with parents.

Quantitative Data

Information was collected at the beginning of the survey and requested participants to report on the following (1) age of awareness of gender non-conformity, and (2) age of disclosure of gender non-conformity to parents. Likert scale responses were used where participants gave ratings (ranging from strongly agree to strongly disagree) to various statements that pertained to their relationship with parents during adolescence.

Age Participant Became Aware of Gender Variance

Participants were asked to report the age at which they became aware that their gender did not match the traditional role assigned to their biological sex. More than half
(n=13) of the participants reported that they were less than 10 years of age when they first became aware of their gender variance.

**Table 2. Age Participant Became Aware of Gender Variance**

<table>
<thead>
<tr>
<th>Age</th>
<th>n</th>
<th>% of Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>(6 and under)</td>
<td>9</td>
<td>41%</td>
</tr>
<tr>
<td>(7-10)</td>
<td>4</td>
<td>18%</td>
</tr>
<tr>
<td>(11-15)</td>
<td>4</td>
<td>18%</td>
</tr>
<tr>
<td>(16-20)</td>
<td>2</td>
<td>9%</td>
</tr>
<tr>
<td>(21-30)</td>
<td>1</td>
<td>5%</td>
</tr>
<tr>
<td>(31 and older)</td>
<td>1</td>
<td>5%</td>
</tr>
</tbody>
</table>

**Age of Disclosure to Parents of Gender Variance**

Participants were asked to report the age at which they first talked to their parents about their gender identity. Less than half (n=9) of participants were age 30 or younger when they first talked to their parents about their gender identity. Three participants (14 percent) were in adolescence when they first talked to their parents about their gender identity. Seven participants (32 percent) have never talked to their parents about their gender identity.

**Table 3. Age Participant Disclosed Gender Identity to Parents**

<table>
<thead>
<tr>
<th>Age</th>
<th>n</th>
<th>% of Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>(6 and under)</td>
<td>2</td>
<td>11%</td>
</tr>
<tr>
<td>(7-10)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(11-20)</td>
<td>3</td>
<td>17%</td>
</tr>
<tr>
<td>(21-30)</td>
<td>4</td>
<td>22%</td>
</tr>
<tr>
<td>(31 and older)</td>
<td>2</td>
<td>11%</td>
</tr>
<tr>
<td>Never spoken to parents</td>
<td>7</td>
<td>39%</td>
</tr>
</tbody>
</table>
Likert Scale

Participants were asked to rate six statements on a Likert scale with the options ‘strongly agree,’ ‘somewhat agree,’ ‘strongly disagree,’ ‘somewhat disagree,’ and ‘not applicable.’ In this discussion, the options of ‘strongly agree’ and ‘somewhat agree’ were collapsed into one category called ‘agree.’ Likewise, the disagree options were collapsed into one category as well. The chart below shows the responses to three of the statements participants were asked to rate.

According to the ratings participants gave to the statements on the scale, 73% of participants (n=16) did not find support from other adults. In addition, over half of the participants (n=14) disagreed with the statement ‘My parents were accepting of my gender identity.’ Sixty-four percent of participants (n=14) also disagreed with the statement ‘My parents response to my gender identity/expression did not affect me.’
Figure 2. Likert Scale Responses
Narrative Findings

A majority of the online survey consisted of open-ended questions in order to gather narratives from each participant on their retrospective adolescent experiences relating to their relationships with parents. These findings are a report of the content analysis conducted by the researcher of this study. Among the themes discovered in the narrative responses were (1) levels of outness (2) feelings of shame and fear (3) lack of understanding/language and (4) acceptance. The theme of acceptance had several sub-themes, such as (1) desire for more acceptance (2) levels of acceptance and (3) what participants believed would be different had they received more acceptance.

Levels of Outness

Participants were asked questions about how they expressed their gender identity during adolescence. Out of all 22 participant responses, only three reported consistently dressing as the gender they identified with. One responded that they did not know how they expressed their gender during adolescence. Eighteen participants talked about the challenges in expressing their gender while living in an unaccepting environment. Most participants talked about expressing themselves differently in different environments, according to where they felt comfortable being ‘out’ and where they felt it was unsafe.

At school I was able to be more fluid, ie get in trouble over small infractions, which once that was made known to my parents it was a lashing with a belt or grounded for no less than 2 weeks. At home by myself I could be me ad not have to look over my shoulder making sure to act manly and not screw up.

There were others who were of the mind to do things like slam my head into the lockers, or wait for me outside school to beat me up, so I learned to be what they called "teacher's pet," staying after late to help correct papers, or whatever else she needed, because I *HAD* to wait til the playground cleared enough to get home safely. It was scary as anything. Once in awhile I got a ride home with a teacher or counselor. When I got home I changed to my female clothes, made
dinner for my siblings, cleaned the house, and could be myself for a little while, until the situation of my mom coming home at 10pm was about to happen, and by then I had the dishes down, the kids to bed, sandwiches made for my older brothers' lunches and their lunches in bags for the next day, some dinner for my mother, and was up in my room, to not have to see her. She basically knew what I was about and didn't want to deal with seeing me either. I'd be in my nightgown under the covers and go to sleep.

The following MF participant describes the decisions she made on how to express her gender while still participating in activities that would ‘pass’ as the gender assigned to her biological sex.

On one hand, I enrolled in ballet and would try to ‘sneak’ certain more feminine articles of clothing to wear like socks, etc. On the other, I attempted to hypermasculinize myself by taking karate etc which didn’t work because I was so small framed.

One of the participants, whose parents were reported to be accepting, talks about negotiating expressed gender roles when around extended family members.

Both my parents are really liberal. My grandparents were quite the opposite and rigidly enforced gender roles, so visiting them always felt like putting on a play (one that grew increasingly awkward as my day-to-day gender expression grew less conforming).

As is evident from participant responses, negotiation of gender expression seems to be a method of surviving non-accepting environments. Even some participants whose parents were accepting of their gender identity/expressions reported having to act in a way that they considered gender conforming in certain environments, such as at school or around extended family. Although most participants described different levels of ‘outness’ they felt comfortable expressing in various environments, those whose parents were non-accepting expressed more struggle in their attempt to negotiate their gender expressions.
Feelings of Shame and Fear

As many participants felt repressed in their gender expression during adolescence, many also reported feelings of shame that motivated the need to hide their identity. Several participants reported that they did not talk to their parents about their gender identity during adolescence. When asked what circumstances kept them from such conversations, participants expressed feelings of shame, which were often coupled with reported feelings of fear.

One participant responded, “Any hint that they suspected was a source of embarrassment and fear.” Other responses that demonstrated feelings of shame from participants included, “I would hide it better. Have more anxiety that I was a freak. Validate the feelings of being a freak,” and, “the way my father always had something to say about the way I dressed really messed with my emotions and made me uncomfortable with my appearance” and, “I clamed up and could not discuss it.. I was embarrassed.”

Lack of understanding and language

Another reason participants expressed difficulty talking to their parents about their gender during adolescence was the lack of understanding they had of themselves, and the lack of language they had to explain their experiences. Older participants reported feeling even more confusion over their identity, as they had no idea such identities even existed. One participant said, “Gender identity as such never came up with my parents because I wasn’t really aware of the existence of trans identities.”

Other participants expressed their confusion over their identity with statements such as, “I hadn’t really figured it all out myself so I wasn’t quite sure how to express it. They knew I was a tomboy but thought it ended there and wasn’t sure what to say” and “I
didn’t know anything about it, could never have even thought about it rationally. I don’t think I knew what transgender even meant.” The following participant had a similar response to the question as to what prevented conversations about gender by saying, “they were aware of it (gender identity) as much as I was in adolescence, which is not to say much.”

Acceptance

As parental acceptance was the focus of this study, it was talked about by all participants, with several sub-themes falling under the theme of acceptance. Among these sub-themes were desire for acceptance, levels of acceptance and what participants believed would be different had they received more acceptance.

Many participants expressed the desire for more acceptance from their parents. The following quote is from a MF participant:

I just wanted her (mother) to accept me and support me and be the way any mother would be with her daughter, help teach me how to successfully grow up as a girl and live as a female, learn the normal things normal mothers teach their daughters, help her with grooming and how to be in the world.

Just as many participants expressed levels of ‘outness’ they felt comfortable with in various environments, there were also levels of acceptance they felt from parents. As one participant puts it, “I never felt fully accepted.”

While both (parents) maintained that they were unconditionally accepting, my mother was quite upset by the process. It was particularly difficult for her to hear that I was starting testosterone; she was afraid I think that I would become a different person or lose some part of myself.

My mother was surprised, but not shocked. She says (in word) that she accepts and supports me …but her actions show that her acceptance is conditional (on my hiding it from public view) My father (the one I was most worried about) Barely batted an eye. He said, “What, you crossdress …so what.”
My immediate family was very open and accepting. Though both my White and Asian family members had certain perceptions of gender performance that was acceptable. Toleration of crossing those boundaries was to a certain point acceptable.

At the end of the survey, participants were asked what they believe the effects would have been had their parents responded differently to their gender identity or expression. Thirteen participants answered the question, and almost all of them talked about the positive effects they believe acceptance during adolescence would have had on their lives. The following is an example of the kinds of responses participants had to this question.

Acceptance might have allowed me to realize or at least experience open expression and possible resolution. Today I remain a bit confused and have lead a hidden life.

Much like this response, many participants expressed feeling as though non-acceptance caused them to feel delayed in their identity development. The disapproval they experienced from those around them, particularly from parents, created more internal confusion and deficits in self-confidence. Many participants responded similarly in the following statements:

If I had felt totally supported to dress and act how I wanted I think I would have just started to be myself more quickly. I didn’t really figure out my identity until I was fully out of my realm of my family. I think I would have been butch and trans much earlier.

It would have allowed me to grow as a person sooner. Instead of going through a good portion of life not really being on the same page as everyone else I can’t help but feel like if they accepted me early on then I would not of had to wander through life so much in order to reach to same conclusions I have today.

I would be much happier, healthier, and complete. I spent most of my life dreaming of walking down any street as a girl and being accepted as a girl with no funny looks or whispering. I would have loved to have worked as a woman, gotten married to a man, adopted children, be a mom, have ‘girlfriends’, shopping
for clothes, doing traditional lady things, and of course the pleasures of being with a man.

The following response illustrates this further, as the participant describes the emotional experiences that followed disapproval in adolescence.

I would have been MUCH more successful and MUCH more happy MUCH earlier on, rather than having to go through SO MUCH therapy and try to struggle with my low self-esteem and choosing partners who validated my weak self-worth that I learned growing up, as I was continually told that I was not ok and could never do enough to merit approval, and that sunk in, and it’s taken years in adult life to try to undo, heal, grow more whole again, etc….What if I had been supported and nurtured and accepted for who I am, as a kid growing up, and taught to make good choices for me, taught self-esteem, etc.? Wow. What a head start that would have been. But my mom only did what she was able, did the best she knew how, within her limited framework and belief system, which was her security structure she clung to like an addict for her own sense of order in the world. I didn't fit that, so she rejected me. I felt all the way through emotionally abandoned. I suppose that's why I was drawn to my first husband who was an alcoholic. Similar, just not a religion-holic, same addictive dynamic, different substance.

Along with the emotional effects of non-acceptance, participants described the life decisions they would have made differently or would have felt more equipped to make. Some described the challenges in making positive life-decisions as a result of low self-esteem or lack of direction from parents. The following quotes are examples of such responses.

I would never have gone to war. Today I would not have P.T.S.D. and a 100% service connection disability from my Navy service.

My first husband and various other experiences taught me things, but they weren't always in my best interests, because I was never taught about how to pick the right kinds of men who are good for me. A good mom would have taught and helped me know about those things, but I didn't understand that, plus with the low self-esteem, I picked abusive men. Probably mirrored what I've been given as messages growing up, that I'm not good enough to merit love or being treated well.
Although the findings in this study are varied depending on levels of acceptance participants perceived to have received during adolescence, it is clear from responses that parental non-acceptance has detrimental effects on transgender adolescents. As will be discussed further in the next chapter, these effects not only last during adolescence, but also affect self-esteem throughout adulthood.
CHAPTER V
DISCUSSION

The purpose of this study was to explore the perceived retrospective effects of parental acceptance or non-acceptance on transgender adolescents. Most participants expressed experiencing difficulties in their relationships with parents during adolescence, although the levels of acceptance participants perceived to have received from their parents varied. Likewise, the effects of acceptance or non-acceptance varied for participants.

Long-Term Effects of Non-Acceptance

This study was intended to explore the effects of parental acceptance or non-acceptance during adolescence, however a significant finding of this study was that many participants also shared about the long-term effects of their parents reactions to their gender identity/expression while adolescents. The perceived effects were not only relevant to adolescent development, but affected major life decisions participants made throughout adulthood. Among the life decisions participants believed were affected were career choices and future relationships. One participant reported joining the military as a response to negative parental reactions, and eventually was diagnosed with PTSD after going to war. This participant expressed serious regret for the decisions made, and anger towards the experiences that led to such a decision. Several participants reported low
self-esteem into adulthood, and some reported the effects this had on the choosing of romantic partners.

The findings from this study were consistent with current research that demonstrates parental acceptance as a major protective influence on adolescents (Christianson, Eisenberg, Hall-Lande & Neumark-Sztainer, 2007; Brookmeyer, Fanti, Kupermine, & Henrich, 2008). As research on the effects of parental acceptance or non-acceptance on transgender adolescents is limited, this finding adds important information to this under-researched topic. The long-term effects reported in this study speak to the need for further research with transgender adolescents, particularly in the exploration of protective factors, as many of these youth do not receive acceptance from family members.

Delayed Identity Development

Participants who reported difficulties in their relationships with parents during adolescence also reported experiencing other challenges. Among these challenges was a delay in identity development. These participants reported feelings of confusion about their identity during adolescence, and some explicitly stated that feeling unaccepted caused them to be delayed in the understanding of their own identity. The following quote illustrates this.

If I had felt totally supported to dress and act how I wanted I think I would have just started to be myself more quickly. I didn’t really figure out my identity until I was fully out of my realm of my family. I think I would have been butch and trans much earlier.

Gagne, Tweksbury & McGaughey’s study in 1997 found similar results, as participants of their study reported that they grew up without an understanding of their
identity, and did not know that anyone else like them exists (Gagne, Tweksbury & McGaughey, 1997). While participants who did not feel accepted by their parents consistently experienced uncertainty about their identity, those who did feel accepted reported a range of responses. Most of these participants experienced less confusion about their gender, but some still reported a delay in their understanding of their identity.

One participant who felt approval from parents stated the following:

Because I didn't have any language or knowledge that included the possibility of a trans identity, I was very resistant to the idea of growing up (because I couldn't see a way to do that without eventually taking on a female identity) and kept myself at a developmental position that was somewhat delayed in comparison to where I was mentally/intellectually.

Gagne, Tweksbury & McGaughey also reported this finding of their study, stating that most participants reported engaging in a lengthy identity exploration process. However, they did not report on the amount of time most participants took before feeling resolved and established in their identity. Future research should explore identity development for transgender children and adolescents, and the factors that serve to protect them in this process.

More research is warranted in order to understand the connection between acceptance and adolescent development further, but it could be hypothesized from this study, as well as from past research, that transgender adolescents who perceive their parents to be unaccepting are more likely to be delayed in their identity development than adolescents who perceive their parents to be accepting.

*Age of awareness versus age of disclosure to parents*

Results from this study found that the more than half of participants were under the age of 10 when they first became aware of their gender variance. Grossman,
D’Augelli, Howell, and Hubbard’s found similar results in their 2005 study, where the mean age of awareness of gender variance was 7.5. Although family support in adolescence is important, this demonstrates the need for support to begin much earlier in a transgender person’s life. This is made strikingly clear by the responses participants gave when asked about their first disclosure to parents of their gender identity. There is a significant difference between the age of awareness of gender identity and the age of disclosure of this information to parents. Thirty-two percent (n=7) participants had never talked to their parents about their gender identity. Although most participants were aware of their gender identity in childhood, only two participants told their parents while children. Seventeen percent of participants (n=3) told their parents during adolescence. The remaining eighty-two percent of participants (n=17) either waited until adulthood to talk to their parents about this major piece of their identity, or never told them at all.

**Strengths**

Transgender individuals are an under researched population, and the research specifically related to transgender adolescents and family relationships is even more limited. This study provides an introductory glimpse into the retrospective experiences that transgender adults had during adolescence, and into their perceptions of the effects of parent reactions to their identities and expressions. It is also of significance that past research relating to parents of transgender adolescents and children have focused primarily on the experiences of the parents (Wren, 2002). This study was focused on exploring the retrospective experiences of transgender individuals during adolescence.

While the study allowed for adults to retrospectively share their experiences in adolescence, it was unexpected that participants would also share the perceived long
lasting effects that these experiences had on their well being as adults. The long-term effects reported in this study are an important finding, as this demonstrates the seriousness of non-acceptance of transgender adolescents, and the need for other protective influences in their lives throughout adolescence and adulthood.

Limitations

A convenience sample was used for the recruitment in this study. The researcher recruited participants by emailing the link to an online survey to contacts for distribution, as well as by posting an advertisement on online forums in major cities. The use of the internet to promote and conduct the study could have prevented participation of those without internet access. The sample size for this study was 22 participants, which limits the generalizability of the findings.

There was limited racial diversity among participants of this study. All participants identified as White, with five of these participants identifying also as Bi-racial. The reasons for this are unclear, as most recruitment was done using the internet, primarily in major cities in the U.S. It is possible that the difficulty in finding self-identified transgender people of color is a result of the increased oppression they experience, causing them to be an invisible population. Future research should explore the experiences of transgender adolescents of varied racial and ethnic backgrounds.

Participant ages in this study ranged greatly, as 68% (n=15) of participants were over the age of 30. This was helpful in identifying the long-term effects of non-acceptance during adolescence. However, due to the distance in age that most participants were from adolescence, this study does not provide much information on the
current situations of transgender adolescents. All participants were over the age of 18, as the researcher did not obtain permission to study transgender adolescents.

Implications for Practice

Only 14 percent (n=3) of the participants reported having support from an adult other than their parents. Considering this, as well as the struggles most participants reported and the frequency of non-acceptance from parents, more services should be available to support transgender adolescents. These youth would likely benefit from services such as youth drop-in centers where peer support and mental health services can be accessed. High schools such as Harvey Milk High School in New York exist to serve Lesbian, Gay, Bisexual, and Transgender teens. High school administrators in other areas are becoming more aware and supportive of transgender students. Youth drop-in centers can be found in most metropolitan areas. More services, including promoting awareness among educators, would benefit these youth.

As well as providing more supportive services for transgender youth, similar services should be provided for the parents and family members of these adolescents. Many participants reported that they lacked an understanding of their identity and the language with which to talk about it. They also reported that their parents had difficulty understanding their experiences. Support groups and education about transgender identities would provide families with an opportunity to also find peer support and learn more about the identities of their children. In 2002, the program PFLAG (Parents, Families & Friends of Lesbians and Gays) began providing peer support to relatives and friends of transgender youth under the program TNET (Transgender Network).
Expansion of this program of PFLAG would provide more families and friends education and support.

A major implication of this research is on policy at both federal and state levels. According to the HRC (Human Rights Campaign) transgender individuals have a one in 12 chance of being murdered, compared to the average person living in the United States, who has a one in 18,000 chance of being murdered. One way of promoting awareness of this atrocity is to increase research on the hate crimes taking place towards transgender individuals. When real numbers are presented demonstrating the terror these people face, the public will be more likely to vote in favor of increased protection. Current legislation in Congress is the Local Law Enforcement Hate Crimes Prevention Act of 2009, which would include protection for transgender individuals. As research shows the risks threatening transgender people of all ages, the value of the passage of this bill is immeasurable.
References


Appendix A

Recruitment Flyer

Don’t fit society’s gender binary?
Do you identify as transgender, genderqueer, cross dresser, gender bender, transvestite, androgynous, and/or transsexual?

Your voice is important.

Seeking transgender individuals age 18 or older for a study exploring relationships with parents during adolescence. The online survey will take 20-30 minutes of your time.

photo by Scott Jungling
Appendix B

Informed Consent Form

Dear Participant,

I am a student at Smith College School for Social Work doing a research project for the purpose of my master’s thesis. This project may also be used for publication and/or presentation. The purpose of this project is to learn more about the effects that parental acceptance/non-acceptance have on transgender youth. For the purpose of this survey, transgender is defined as an individual who expresses his, her, or per gender in a way that is not conforming to the traditional definition of his, her, or per biological sex.

Your involvement in the study is voluntary and if you choose to participate you will be asked to complete an online survey, which will take about 20-30 minutes of your time. You will not be asked to share any information that will identify who you are, and I ask that you do not include any information that could identify you. I will ask your age and race/ethnicity. To participate in the survey you must identify as transgender, be 18 or older, read and write in English, and be willing to share your thoughts and experiences related to your parents reactions and attitudes towards your gender identity. All participants must be 18 years of age or older.

The information you are sharing in the study may be sensitive in nature and feelings of emotional discomfort may come up for you. If you are taking the survey and find it to be too upsetting, please stop and exit the survey immediately. At the end of the survey you will find a list of referrals where you can seek mental health or emotional support.

Benefits involved in your participation in this study could involve contributing to research on transgender individuals that will possibly lead to better services in the future. You might also find that you feel empowered by sharing your story of making it through a difficult experience. You will not receive any compensation for participating in the study.

You will remain completely anonymous in this study, as you will not be asked for any information that could identify who you are. The information you share will be seen only by me and by my research advisor. All data collected will be presented as a group and when I use quotes, they will be carefully disguised. Data will be stored in a secure location for a period of three years as required by Federal guidelines. Data that is stored electronically will be password protected. If data collected is needed for more than three years, it will continue to be kept in a secure location and will be destroyed when no longer needed.

Participation in the study is voluntary. Once you submit the survey, the information you have shared will have been recorded, and you will not be able to withdraw this
information, as I will not be able to know the difference between what you shared from what other participants shared. Before you submit the survey you can choose not to answer particular questions or not to submit the survey at all. If you have any questions about your rights or about any aspect of the study, you may email me, or contact the Chair of the Smith College School for Social Work Human Rights Subjects Review Committee at (413) 585-7974.

BY SUBMITTING THIS SURVEY, YOU ARE INDICATING THAT YOU HAVE READ AND UNDERSTAND THE INFORMATION ABOVE AND THAT YOU HAVE HAD AN OPPORTUNITY TO ASK QUESTIONS ABOUT THE STUDY, YOUR PARTICIPATION, AND YOUR RIGHTS AND THAT YOU AGREE TO PARTICIPATE IN THE STUDY.

Please print a copy of this form for your records. Thank you for your participation in this study.

Sincerely,

Tara Ryan
tryan@email.smith.edu
Appendix C

Online Survey

1. Informed Consent Letter

Dear Participant,

I am a student at Smith College School for Social Work doing a research project for the purpose of my master’s thesis. This project may also be used for publication and/or presentation. The purpose of this project is to learn more about the effects that parental acceptance/non-acceptance have on a transgender youth. For the purpose of this survey, transgender is defined as an individual who expresses his, her, or per gender in a way that is not conforming to the traditional definition of his, her, or per biological sex.

Your involvement in the study is voluntary and if you choose to participate you will be asked to complete an online survey, which will take about 20-30 minutes of your time. You will not be asked to share any information that will identify who you are, and I ask that you do not include any information that could identify you. I will ask your age and race/ethnicity. To participate in the survey you must identify as transgender, be 18 or older, read and write in English, and be willing to share your thoughts and experiences related to your parents reactions and attitudes towards your gender identity. All participants must be 18 years of age or older.

The information you are sharing in the study may be sensitive in nature and feelings of emotional discomfort may come up for you. If you are taking the survey and find it to be too upsetting, please stop and exit the survey immediately. At the end of the survey you will find a list of referrals where you can seek mental health or emotional support.

Benefits involved in your participation in this study could involve contributing to research on transgender individuals that will possibly lead to better services in the future. You might also find that you feel empowered by sharing your story of making it through a difficult experience. You will not receive any compensation for participating in the study.

You will remain completely anonymous in this study, as you will not be asked for any information that could identify you. The information you share will be seen only by me and by my research advisor. All data collected will be presented as a group and when I use quotes, they will be carefully disguised. Data will be stored in a secure location for a period of three years as required by Federal guidelines. Data that is stored electronically will be password protected. If data collected is needed for more than three years, it will continue to be kept in a secure location and will be destroyed when no longer needed.

Participation in the study is voluntary. Once you submit the survey, the information you have shared will have been recorded, and you will not be able to withdraw this information, as I will not be able to know the difference between what you shared from what other participants shared. Before you submit the survey you can choose not to answer particular questions or not to submit the survey at all. If you have any questions about your rights or about any aspect of the study, you may email me, or contact the Chair of the Smith College School for Social Work Human Rights Subjects Review Committee at (413) 585-7974.

BY SUBMITTING THIS SURVEY, YOU ARE INDICATING THAT YOU HAVE READ AND UNDERSTAND THE INFORMATION ABOVE AND THAT YOU HAVE HAD AN OPPORTUNITY TO ASK QUESTIONS ABOUT THE STUDY, YOUR PARTICIPATION, AND YOUR RIGHTS AND THAT YOU AGREE TO PARTICIPATE IN THE STUDY.

Please print a copy of this form for your records. Thank you for your participation in this study.

Sincerely,

Tara Ryan
trryan@email.smco.edu
Referral Sources

National Resources:

GLBT National Help Center
Gay, lesbian, bisexual and transgender national hotline
1-888-THE-GHIN (1-888-843-4564)
http://ghin.org

GLBT National Youth Talkline
Peer counseling for youth through age 25
1-805-246-PD0E (1-805-246-7743)

San Francisco Resources:

New Leaf: Services for Our Community
163 Hayes Street
San Francisco, CA 94114
(415) 626-7000
www.newleafservices.org/

The Pacific Center
2712 Telegraph Avenue
Berkeley, CA 94705
(510) 548-6283

LGBT Community Center
1800 Market St
San Francisco, CA 94102
(415) 865-5555
www.sfcen.org

Dimensions Clinic
3850 17th St. (at Ponce)
San Francisco, CA 94114
(415) 934-7769
http://www.dimensionsclinic.org

1. By clicking 'I AGREE' I am confirming that I am 18 years or older, and that I have read the above informed consent letter and agree to its terms.

☐ I AGREE
2. Default Section

1. What is your current age?

2. How do you and your family identify racially/ethnically? Closed ended question. Select all that apply.
- White
- Black or African American
- American Indian or Alaska Native
- Asian Indian
- Chinese
- Filipino
- Japanese
- Other (please specify)
- Korean
- Vietnamese
- Native Hawaiian
- Guamanian or Chamorro
- Samoan
- Other Pacific Islander

3. How do you identify? Select all that apply.
- Male to Female
- Female to Male
- Genderqueer
- Other (please specify)

4. At what age did you become aware that your gender identity did not match the traditional gender role assigned to your biological sex?

5. Describe the nature of your relationship with your parents during adolescence.

6. During adolescence, how did your family’s cultural beliefs and values affect their attitudes towards gender?

7. During adolescence, how did you express your gender (i.e. appearance, behaviors, activities, etc), and did you express it differently in different circumstances, (such as at school vs. at home)?
6. Please rate the amount you agree to each statement, as according to your experience during adolescence.

<table>
<thead>
<tr>
<th>Statement</th>
<th>4 Strongly Agree</th>
<th>3 Somewhat Agree</th>
<th>2 Somewhat Disagree</th>
<th>1 Strongly Disagree</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>I experienced difficulties in my relationship with my parents because of my gender identity/expression.</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>My parents were accepting of my gender identity.</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>My parents were accepting of the ways I expressed my gender.</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>I found support from other adults besides my parents (i.e., teachers, mentors, family, friends, other relatives).</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>My parents' reactions to my gender identity/expression did not affect me.</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>I felt close to my parents.</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>
If you DID NOT talk to your parents about your gender identity during adolescence, please answer the following questions. Please skip to the next page if these questions don’t apply to you.

1. If you didn’t talk to your parents about your gender identity during adolescence, what were the circumstances that kept you from such conversations?

2. Were your parents aware that you did not identify with the traditional role assigned to your biological sex? Please explain.

3. If your parents are not aware of your gender identity, what prevented their awareness of this (i.e. dressing according to traditional gender roles)?

4. If your parents were unaware of your gender identity, how did this affect you?
4.

If you DID talk to your parents about your gender identity during adolescence, please answer the following questions. Please skip these questions if they don’t apply to you.

1. When did you first talk about your gender identity to your parents?

2. Can you provide some details about what occurred when you did talk to your parents about your gender identity?

3. What was the initial reaction your parents had when they first became aware of your gender identity?

4. Did your parents’ reaction to your gender identity change over time? Please explain.

5. During adolescence, how did you respond to the reactions that your parents had to your gender identity or expression?

6. If your parents had responded differently to your gender identity or gender expression, what effect do you expect this would have had on you?
Appendix D

Human Subjects Approval Letter

April 7, 2009

Tara Ryan

Dear Tara,

Your revised materials have been reviewed. You have done a good job in the revision and your questionnaire is much easier to follow.

There is just one small error. You say in the Consent that the referral list is at the end of the survey. It is, as it should be, at the end of the Informed Consent. Please make this one change. We are glad to give final approval to your interesting study.

Please note the following requirements:

Consent Forms: All subjects should be given a copy of the consent form.

Maintaining Data: You must retain all data and other documents for at least three (3) years past completion of the research activity.

In addition, these requirements may also be applicable:

Amendments: If you wish to change any aspect of the study (such as design, procedures, consent forms or subject population), please submit these changes to the Committee.

Renewal: You are required to apply for renewal of approval every year for as long as the study is active.

Completion: You are required to notify the Chair of the Human Subjects Review Committee when your study is completed (data collection finished). This requirement is met by completion of the thesis project during the Third Summer.

Good luck with your project.

Sincerely,

Ann Hartman, D.S.W.
Chair, Human Subjects Review Committee

CC: Pearl Soloff, Research Advisor