

The Children of a Transgendered Parent

"Why didn't they ask me?"

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I am currently running a study of the children of a transgendered parent as part of an ongoing commitment to the users of the Helpline organisation, Women of the Beaumont Society which I have been running for ten years.

Why another study of children with a transgendered parent? After all, the Green study (Transsexual's Children, Richard Green, 1978, 1998) has stood for over twenty years and is currently being re-run at Charing Cross Gender Identity clinic, so is there a need for another one?

Well, why not? The Green study, although considered the definitive by many, particularly in the UK, is just one of several that have taken place in the last few years. Many of them have appeared in America and a book was recently published by the author of one such study; an American transsexual woman.

Most of the authors of these studies are clinicians and it is this perspective that many nontransgendered parents have questioned when enquiring of me whether it would be possible to run a study from a different perspective. Clinicians have undoubtedly the same aims as non-clinicians such as myself - to discover whether children are affected in any way by having a gender dysphoric parent. However, different approaches may garner new information into an understanding of the world in which these children live and it is from this perspective that my study is conducted. The more recent Green study included 18 children drawn from the transsexual parents who attend Charing Cross GIC and focused on two typically cited areas as being problematic for children with TS parents: their own gender identity and peer group stigma. He states in his conclusion that:

Available evidence does not support concerns that a parent's transsexualism directly impacts on the children. By contrast, there is extensive clinical experience showing the detriment to children in consequence of terminated contact with a parent after divorce. (Green, R. 1998)

He concluded by stating that the children are probably more affected by the hostility of divorce proceedings following the onset of transsexualism than the transsexualism itself.

However, divorce is not inevitable in all cases and many families are endeavouring to reach a new form of domesticity and family life that includes a transgendered father. More and more children are now living with an openly transgendered parent. What is life like for them? The

questionnaires ask for information about the social world that the family inhabits so that we can gauge which are the more hostile environments rather than make assumptions about 'sink estates' or backward rural communities, for instance. And what about cultural factors, religion and race? These too are examined in a general way. It is important that the study is not an intrusive or condescending tool - rather that it endeavours to measure the spread of experience in the lives of the children

Professor Green has the children of his clients at the Charing Cross clinic as his subjects but what about the children of non-CHX clients? In some cases the children and their non-transgendered parent may not even be aware that the transgendered parent has embarked upon a course of therapy until the results become noticeable or the parent chooses to inform the family of their intention to be transsexual. Then there are those who are self- medicating via services acquired through the Internet without recourse to actual medical supervision. In all these cases the family of the transgendered person is denied access to health professionals connected to the client - sometimes being deemed as non-existent. As it is very rare for the transgendered parent to be the mother I will talk in terms of the father being the transgendered parent. It is not surprising therefore that wives have been asking for an accessible study in which they can take part independently of their husband or partner's involvement with the private sector in particular, although access to the NHS study is denied some of them because of non-cooperation by the husband.

Once it was decided that a study would take place I had to decide how it would be conducted and after much thought I settled for the questionnaire method. In fact there are two questionnaires - one for each child and a separate one for the mother. The questionnaires contain both open-ended questions and closed/fixed choice questions with a 'none of these' option. The subject may then answer the question using their own words. Many of the questions are simple yes/no ones and there is a 'not applicable' option too, where appropriate. The concept behind the dual questionnaire method is one of internal validity whereby it will be possible to compare the mothers understanding of their child's position with the child's own version. Older children are able to complete the questionnaire on their own while younger ones can be aided by their mother, sibling or other significant other.

A major hurdle was how I would phrase the questions without leading the subject, often a criticism of the questionnaire method. Also I would have to pay particular attention to the sensitivities and comprehension of young subjects. I asked the experts . . . Mothers! All agreed that it was better to ask questions simply but directly and many offered suggestions on how and what I could ask the children. This was extremely helpful and I followed their advice throughout. Ultimately I asked them to vet the questionnaires before I published a Call for Subjects. I also requested a peer review and this was fulfilled by a group of fellow professionals in the field and overseen by Alice Purnell who gave the final seal of approval. The ethical and moral considerations were also discussed and agreed upon.

The response has been slow but selective with respondents from all over the UK contacting me plus others from Ireland and New Zealand. I had originally placed a time limit on responding but after due consideration it is felt that the Call for Subjects would continue for some time to come, in order that as large as possible amount of data can be collected. Currently we have about 15 mothers and 31 children in the pool, although not all have returned the completed forms. I would like to see these figures improve considerably.

I conducted a pseudo-pilot study by contacting families that I already knew, mainly by telephone, and tested out some of the questions on the mothers and some of the children. From this approach I gained some insights into the deeper issues that family members are facing. I also received some very interesting e-mails from adult children who had some curious facts that they wished to tell me about concerning their personal circumstances. I would like to share some of those stories with you today.

E-mailer 1 told me how, after the father had died, a clear-out of the family attic revealed a stash of female clothing and some private notes that the father had made concerning his feelings about his crossdressing. In the notes he wrote that he wished he was a woman but could see no way of achieving his ambition and felt compelled to continue his female expression in private and utmost secrecy. No-one in the family had a clue that father had these needs but the discovery cleared up a mystery that had emerged after father died but before the discovery was made. The son had declared his need to be transsexual and the family members, while overcoming their shock and adopting a fully supportive attitude, nevertheless were puzzled as to why this had occurred within the family. The son was, of course, the e-mailer who is now a transsexual woman.

Another e-mailer (number 2) attributed her lesbianism to her late father's crossdressing, even though she had no knowledge of his behaviour during his lifetime and in fact only 'came out' after he had died. She said she regretted now that she had not been able to share their differences with him while he was alive. It took her some time to realise that each had been trying to protect the other's feelings by keeping their secrets, without ever realising that each had a secret. Happily she was not at all bitter about her father's Gender Dysphoria and in fact said that she felt comforted by the fact that they both shared a common factor. I said nothing to detract her from this 'understanding'. After all no-one knows at this moment in time whether her instincts are truthfully without foundation.

A third very curious story was told to me by a friend who was preparing to marry her transsexual woman partner. We had already had deep discussions about the meaning of their love and its implications for society. We are particularly close as her own family rejected her out of hand when they learned of her relationship. A few weeks before the wedding her sister rejected her invitation to the wedding even though she had tacitly agreed to oppose the family and support her on the day. My friend was understandably extremely upset at this betrayal and begged for an explanation. They weren't a particularly close family: the father had a drink problem and had spent time in and out of mental institutions. His moods were legendary and he is now a subdued and somewhat belittled figure within the family. My friend had spent much of her life in fear of him and was confused by the opposing personalities that he presented - sometimes the tyrant and at other times a rather pathetic character - neither of whom she understood. But somewhere, deep down inside her there was an abiding love that struggled against the hurt that he had inflicted on the family over the decades. It was against this background that the sisters discussed the estrangement between the bride-to-be and her family.

The revelation, when it came, shook my friend to the core. Her mother had known of her father's Gender Dysphoria for most of their married life and had adopted an extremely hostile stance to it. He had been diagnosed as possibly transsexual thirty years ago, but had been controlled by the family's united opposition to such a proposal. Mother had taken on a particularly matriarchal role in order to protect her children, backed up it would seem by her in-laws who had no desire to see their son 'change sex'. If one considers the social climate of

thirty years ago, combined with the very limited understanding of GD at that time, then one must be sympathetic to all points of view. However, the truth created in my friend a maelstrom of confusion and doubt. Had her father's GD influenced her attraction to her partner? Was she unconsciously seeking a benign father from within the person whom she had fallen in love with? She hadn't known 'him', only 'her' and had not sought a same-sex relationship at any time. In fact, she believed that she was firmly heterosexual and rejects any suggestion that she and her now legal partner (having taken advantage of the birth certificate loophole that allows a biological female and a transsexual female to marry using the original birth certificate of the transsexual woman) are lesbians. They are, she believes, simply two people who love each other deeply and have committed themselves together for life. It is not difficult however to imagine the trauma that she experienced before she became calm again, having realised that it is possibly the gentle side of her father that she recognised in her partner that drew them together rather than the unknown gender factor. Sadly, her family have no wish to discuss the issues with her or even between family members and they will probably remain estranged forever.

So far I have illustrated what is probably the commonest factor in transgendered parentage - the secrecy. Past generations were far less likely to 'come out' either as crossdressers or as late-onset transsexuals and where the 'behaviour' was recognised within a relationship it was severely curtailed to the extent that mental institutions were employed to subdue any hint of cross-gendered expression. We've all heard the horror stories!

But, back to today, the beginning of a new millennium and hopefully, a new understanding of GD . . . Although I have not started to analyse the data returned so far, I have employed the traditional 'eye-ball' method of appraising some of the comments that the children and their mothers have recorded in the space made available for subjective reflections. The children seem concerned that their father, or indeed the whole family, may come under attack from unknown persons in their neighbourhood or beyond, while mothers are at pains to point out that they do not wish to have a lesbian relationship with their partners, married or not. This has the knock-on effect that they feel that their children are missing out on the traditional open affection that exists in many usual households where the children may witness loving gestures between their parents. Some mothers feel that this lack of mutual heterosexual loving could affect their children's approach to their own relationships when the time comes as the appropriate role models are not available to them. I have yet to find a comment from a child though who is astute enough, or concerned enough, to offer an opinion.

Not all the children and their mothers live with the transgendered parent. The study criteria asked that the transgendered state be visible so that the children were aware of it at least, and depending on whether the father (or father figure) has started the real-life experience, visible to outsiders. As expected the children's attitudes are somewhat influenced by their mothers' position: if she is hostile to the whole concept of transgenderism, then the children are more insecure and confused. This is not always the case though - some children would rather their parents stayed together regardless of the situation rather than the family split up.

As in the Green studies the question of the concreteness of the children's gender identity in the face of their fathers' GD is addressed. I have deliberately NOT 'eyeballed' that question and the answers as yet as I feel that it should be examined as a separate consideration - will the mothers express any fears about genetic factors and the chances of their children being affected this way? This particular issue arises regularly on the Helpline and while we can say fairly confidently that children do not consciously model on their TS parent and become

transgendered themselves, we have to keep in the back of our minds the very sensitivity of the concern as we have no evidence that there are no genetic factors. In other words, if an isolated case of crossdressing occurred (as has happened) we have no answers as to causation. I know personally of brothers who are similarly affected but who only share a mother and in fact have different fathers. I am also in contact with the family of three generations of men who crossdress and there are two more generations of boys now who are subject to certain anxieties by their mothers. I have been trying to persuade this family to present for study purposes but they are far too paranoid to co-operate and the subject is treated with great hostility by all the generations. Although there is an awareness by all the adults concerned, none of the children have been exposed to any crossgendered expression in any generation. The oldest member has now died. His son is now a great grandfather. There is also rumoured to have been another member of the family who exhibited the same behaviour. All share a common female ancestor.

Anecdotal evidence apart, there are considerations other than passing on the behaviour as already discussed. There are psychological and emotional factors. A 19 year-old daughter of a transgendered father who came out to the family when she was 13 and has struggled against his transsexualism ever since, blames her vaginismus on the shock she felt when she first saw her father crossdressed.

When I was conducting the pilot study I contacted a family who I have followed for several years. The parents are both professional people and very well-known in their community as are their six children. Sadly, father did not share his transgender issues with his wife and family and behaved in a very eccentric and egocentric manner for several years until the truth came out via the tabloid press. This had a devastating effect on the children, the youngest of whom is having ongoing therapy with a child psychologist. Now seven years old, he is exhibiting all the symptoms of bereavement and refuses to accept that the woman who comes to see him as his father is his father. He looks beyond 'her' (she is now postop) and cries out for his Dad. He has been classed as a special needs child. All the other children have suffered the typical bullying and some ostracism both at school and socially and the eldest, now 18, cannot bear to be around his transgendered parent and refuses to acknowledge 'her'. He would not come to the phone to speak to me but called out "Nobody asked me if I minded - why didn't they ask me."

This hostility is not due to an angry mother although she is undoubtedly hurt and bewildered by the turn of events, not least the estrangement of her family members and the inevitable, in this case, divorce. Mother tried very hard to help her children to come to an understanding of their father's condition and retained a great sense of dignity throughout the ordeal of the tabloid press camping out on her doorstep but, four years on, the five boys are inconsolable. Only the now-14-year-old daughter has any compassion for her father and tries to act as peacemaker. Mother feels that the whole episode has robbed the children of their childhood and their security. She herself has experienced some negative attention from her peer group and neighbours.

Another area that has concerned mothers is the lack of counselling available for them and their children and the failure to create a regional database of like families who could be put in touch with one another. There are several organisations such as WOBS who occupy the voluntary sector but operate with very limited resources. It is not possible for us to provide the kind of service that is required by mothers and children who feel that they are overlooked by the health professionals who, it has to be conceded are as constrained by lack of funding as

the voluntary sector is. However, co-operation between the two could conceivably provide a more holistic approach to the care of partnered transgendered people whereby their relationship needs and parenting commitments are held in greater esteem than they appear to be at the moment. Humanitas in The Netherlands appear to have addressed this very important issue far more competently than we have here in the UK, facilitated as they are by a far more sympathetic government! Perhaps Richard Branson's People's Lottery can help out - he was, after all, photographed once in female attire! I wonder what CHX would have made of his beard!

It will all be too late for many families - the damage is done. While we can do all we can to facilitate the needs of newly emerging transamilies and try to adopt best practice when introducing children to transgenderism in all its forms, we cannot fight the bigotry of a society that cannot accept transamilies. They and their children are participants in a brave new world. A world where we do not know all the answers but can only hope that we can operate within damage limitations based on the results of studies such as this one. The data may enable us all to be more enlightened and wiser to the needs of the children of transgendered parents than we are now. Consequently I am asking that everyone carries the message away with them and distributes the Call For Subjects wherever they can, posting to web sites and publishing in magazines and other similar journals. Overseas participants are very welcome as long as they speak English! Comparisons with other countries should glean valuable information and should we find the example that is deemed to be perfect, we can use it as the control to measure all the others against! Then we can create the Best of All!

Reference:

Green. R (1978, 1998) *Transsexuals Children*. International Journal of Transgenderism, Vol 2. 4, Dec 1998 (<http://www.symposium.com/ijt/ijtc0601.htm>)