

A photograph of a family of three outdoors. On the left, a man with dark hair and a mustache is smiling. In the center, a young girl with long dark hair is smiling and holding a brown basketball. On the right, a woman with long brown hair is smiling. They are all wearing casual clothing. The background is slightly blurred, showing what appears to be a park or outdoor area.

Supporting Gender Expansive Youth

Creating Affirming Homes

Volume 3

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Figuring out who we are is a central focus of young personhood

As discussed in Volume Two of this series, the goal, or “endgame,” of adolescence is to be able to care for yourself and contribute to your community.

However, the journey to adult functioning takes us on a number of sidequests that slowly unfold the answer to the mystery, “Who am I?” Or, more pointedly, “Who am I relative to you?”

At times, the answer to that question closely matches everyone’s expectations of us. Often, our inner truth does not match those expectations as closely as we and the adults who care for us would like.

In this volume, we’ll zoom in on supporting gender-expansive young people as a subset of the LGBTQ+ community.

Often, gender-expansiveness looks like not speaking or dressing in ways others want us to. Sometimes, we don’t connect with the name given to us. Other times, we don’t want to embody the traditions of our parents or ancestors. And sometimes, we don’t feel accurately described by our assigned sex at birth.

Some young people express their gender in ways that fall outside of the commonly understood norms of male and female. This gender diversity is a normal part of human expression, documented across cultures, faith traditions, recorded history, and around the globe.

The caregivers' job is not to mold young people but to bear witness to their discovery process with unconditional love and consistent encouragement.



I've been wondering about my young person.....



You may have a hunch that someone you care for is not cisgender or heterosexual/straight. Keep that hunch to yourself. Rarely do people enjoy hearing us tell them we know them better than they know themselves.

But do go out of your way to let them know you love who they are and are excited for them to share themselves with you, whatever their truth.

Read books about gender together and have open conversations about your own experiences with gender. Normalize that your young person is on the path of gender and sexual discovery, just like everyone else. To the right are some conversation prompts for different stages of disclosure.

Don't pressure them into a transgender identity because you struggle to make sense of what it could mean to be neither male nor female.

Above all else, don't push someone to tell you something they are not ready to share. And remember, not all gender-expansive people are transgender. Some feel just fine with the sex assigned to them at birth.



If your young person has yet to share anything with you, open a dialogue about gender. Ask:

- What does your gender feel like to you?
- How do you want to express your gender identity?
- Sometimes, I've not felt like I fit into the expectations around my assigned sex. Have you ever felt that way?

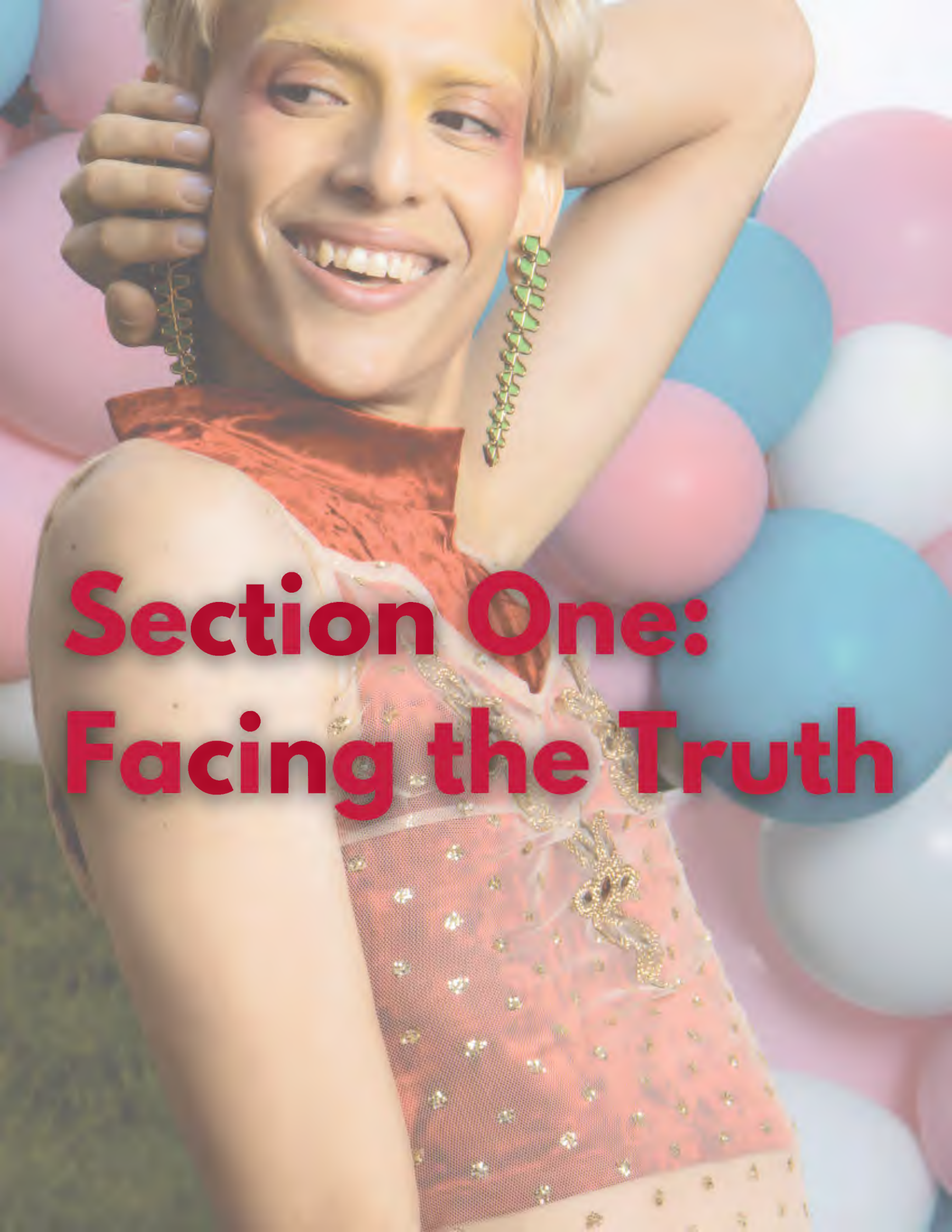
If your young person states they don't feel like a member of their assigned sex, ask:

- How would you describe your gender?
- What sorts of changes would help you to feel more at home in your body or identity?

If your young person talks about being TNG+, ask:

- What does that mean to you?
- How can I/we support this next step in your gender discovery? What can we do to help you grow in this way?
- Do you think you might want to talk to someone who specializes in having conversations about gender with young people?
- Can I help you find resources about gender expansiveness?

Jump to Appendix A (pg 56-58) if you need a refresher on vocabulary important to these conversations!



Section One: Facing the Truth



CONGRATULATIONS

So, you have a young person in your care who has shared that they are either gender-expansive and/or not heterosexual, or maybe both! CONGRATULATIONS! It's an honor to be trusted with this precious truth.

If, at first, you don't feel congratulations are in order, that's ok. That is a natural response in a world that tries to convince us that something is wrong with gender-expansiveness. Feeling wary is nothing to be ashamed of.

What matters is what you do with those feelings—will you struggle to make sure your young person knows they are lovable and loved exactly as they are? Or will you try to prevent them from affirming this part of themselves in an (ineffective) attempt to protect them?

Remember, the most powerful protective factor is the presence of adults who accept and enjoy us as we are. This means that even small increases in how much you accept or celebrate your young people help ensure your young person will remain safe.

In this volume, you will find a variety of resources to help you keep a gender-expansive young person safe, turn toward your own complicated feelings about this with tenderness and acceptance, and hopefully bring some relatives and faith community connections along for the ride.



I'm terrified that if I encourage them, they'll be harmed in this world or the world to come



While the most straightforward path may seem to be to encourage your LGBTQ+ or TNG young person to be more gender-conforming, doing so sends the message that the young person is somehow wrong.

Ample research from the Family Acceptance Project at San Francisco State University and elsewhere shows this approach causes much more harm than it prevents. Young people experience the encouragement to hide their true selves from the world not as an act of care but as an act of rejection. They feel that by rejecting their gay or transgender identity – a very core part of who they are– their caregivers are rejecting all of who they are.

Teens who received this response from their families said they felt their caregivers didn't love them, were ashamed of them, or even hated them.

Worse, for children who have been removed from their family of origin, this response from caregivers confirms the fear that there is something wrong with them, that they are unlovable, or inherently disposable.

Being valued by caregivers helps young people learn to value and care about themselves. But hearing that they are bad or sinful sends a deep message that they are not a good person, which negatively impacts their ability to love and care for themselves.

This, in turn, is associated with increased engagement in risky behaviors such as substance abuse, sex work, unprotected sex, and the likelihood of entanglement in abusive relationships. It also negatively affects their ability to plan for the future. Youth who are rejected or more likely to do poorly in school. And they are much less likely to want to have a family or to be parents themselves.


<https://youtu.be/brW-nJWDh48?si=KHL6FAQEcVlMY54u>



Click on the video (left) to learn how one family reconciled their faith with their love of their LGBTQ+ young person. & visit Appendix B (pg 59-60) for a list of resources for families looking for support in faith communities.

If you want to keep your young person safe in the long run, keep your heart open now

THE IMPACTS OF ACCEPTING MOVES




Child feels loved for who they really are and not who they think we want them to be

Child receives confirmation that all of who they are is lovable

Trust that you can be relied upon as a source of support is deepened

Current and future relationship preserved

Child more capable of managing a hateful world without hating themselves



Impacts of Discouraging Moves



Child feels rejected



Child receives confirmation of the fear they are inherently unwanted



Child no longer trusts you are a resource for support



Current and future parent/child relationship uncertain



Child more likely to act out, skip, or struggle in school



Child more likely to take risks, harm self, or end their life

Responses to coming out that keep kids as safe as possible

- “I am honored that you trust me enough to tell me about your identity.”
- “What can I do to support you at this moment?”
- “I will always support you.”
- Ask them about their friends and welcome their LGBTQNG+ friends into your home.
- Meet anyone they’re dating, ask them questions, and check in with your teen about the relationship over time.
- Talk with them about safer sex and birth control. (Yes, even lesbian and gay teens should know about how pregnancy happens and how to prevent it because many LGBTQNG+-identified youth have sex that can put them at risk of unplanned pregnancy at some point.)
- Make it known that homophobic or transphobic speech — including jokes — isn’t acceptable in your home.
- Let them read books, watch TV shows, and movies about LGBTQNG+ characters, and explore online LGBTQNG+ communities. (Be sure to talk about how to stay safe online.) You can also show them trustworthy digital LGBTQNG+ spaces, like [Q Chat Space](#)
- Let them wear the clothes they want to wear.
- Ask your teen about their experiences at school — whether they feel safe, if they’re ever bullied or harassed, if they know other trans or gender nonconforming students, and if the school has any LGBTQNG+ student groups.
- Look for signs of depression or self-harm, and if you notice any, ask your teen if they’re okay and if they want to speak with a therapist or counselor. Talk with the PTA and school administrators about the school’s policies on anti-LGBTQ bullying. If the school doesn’t have good policies, contact GSAFE (contact information is in Appendix C). The staff at GSAFE can help you advocate for new rules.

Some places aren’t safe for your teen if they’re out or dress in nonconforming ways. But making rules about where they can go and what they can wear can make them feel like you don’t accept or support them. Keep an open dialogue with your teen about their safety so you can help them navigate those spaces and figure out what’s best for them. Telling your teen, “I want you to be able to express yourself how you’re most comfortable, but I want us to figure out together how you can do that safely,” will show you love and respect them and that you’re there to help figure out challenges with them.

Responses to coming out that hurt kids and increase the likelihood they'll get hurt by others:

- “This is not what I would have chosen for you, but if it makes you happy...”
- “If you choose to do this, your life will be hard.”
- “Why would you choose to be like this?”
- “I feel like I am mourning the loss of who you were.”
- Refusing to listen to them when they try to tell you.
- Telling them that it is “just a phase.”
- Trying to change their identity through conversion therapy.
- Refusing to talk with them about it.
- Ignoring their request to use a different name and/or pronouns.
- Telling them God won’t love them or will punish them.
- Telling others (“outing”) your young person without their permission.
- Excluding LGBTQ+ youth from family events and activities.
- Blaming them when they are discriminated against.
- Pressuring them to be more (or less) masculine or feminine.
- Telling them you are ashamed of them or how they look or act will shame the family.
- Never asking about their safety at school or in their relationships.
- Never asking about their friends or significant others.
- Making them keep their identity a secret.
- Hitting, slapping, or physically hurting them.

When disclosing their gender-diverse identity or sexual orientation, some kids might expect immediate acceptance and understanding. However, many loved ones move through a process that begins with discomfort and ends with acceptance or even affirmation. This process may follow the stages of grief: shock, denial, anger, bargaining, and acceptance. **Just as gender-diverse young people do best when their feelings are explored and validated, some caregivers may need their own emotional support.**

It's ok to freak out inside.



Listening to a young person's experience can be hard regardless of religious or political affiliation

When a young person “comes out” the following feelings are common:

- Fear or guilt that something you did or may have “caused” this.
- Shame or embarrassment about how others will judge you or your young person.
- Concern that they will be put in physical danger.
- Sadness that they will not have the future you envisioned.

The disappointment that arises when our young people have interests, hopes, and dreams for themselves different than what we envisioned can be overwhelming.

Having mixed feelings about a young person's self-discoveries is a normal response to our young person showing us how they are different from us. It is also a developmental milestone—meaning every person surprises and alarms their caregivers in their assertions of being different as they grow up.

No matter what, each young person has strengths and interests that will serve them throughout their lives. Our work is to uplift these natural strengths, not force new ones on them.

This time may be difficult, but it can also be freeing if you can let go of the need to respond to the concerns of those around you and instead focus on your young person's needs.

Instead of pushing young people to conform to other people's expectations, you can model what it looks like to accept things we may not understand and advocate for the well-being of everyone.

Watch the video below to hear two Iowan parents tell their story of learning to accept their daughter had been born as their son. Each parent had different complicated feelings and approaches to making sense of this big shift in their understanding of their beloved young person.



.....and it came to me then,
that every plan
is a tiny prayer to father time....

-What Sarah Said, Postal Service



It's ok to grieve the future you had planned for your young person

At some point or another, most people imagine what their future will look like. Typically, that imagining follows what we've been told to expect and the order in which we should expect it: fall in love, marry, make a home, and have a child. When life doesn't proceed as first imagined it is common to feel upset. Many people wonder, "What is wrong with me?"

As caregivers, we often imagine our young people's futures and how they tie to our own. Will we be the parents at a wedding? Will we become grandparents?

For many caregivers, a young person revealing they are two-spirited, transgender, nonbinary, gender expansive, or queer brings the future they had envisioned into question. Some worry, *"Not only is my young person not going to get married and have a baby, but I won't get to walk my young person down the aisle or show pictures of a grandbaby."*

But it's not ok to expect our young people to help hold or manage our grief- turn to other adults for that.

At first, you may find yourself shocked, angry, or dismissive. These feelings may evolve into a sense of fear for your young person's well-being and concerns about your own identity as a parent, or fear for your standing in your community. Any time our young people assert themselves in ways we'd rather they didn't, it is human to feel some kind of way about it.

Families often find it difficult to let go of their original expectations for their young person's future. They may go through a grieving process around these original expectations — even as they celebrate the young person's affirmed identity.



I'm afraid I will lose my faith community

If your faith tradition has been an important source of comfort and guidance, take heart- it still can be!

With sensitive exploration, you may find people in your religious community who are more tolerant than others. Most religious and spiritual traditions include many loving, compassionate, and welcoming theologies, and more and more churches and religious groups are providing affirming spaces to LGBTQTN+ youth and their families.

When asking spiritual questions, the answers you find may be life-altering. After all, you might be challenging or rethinking religious and/or spiritual beliefs you've held for your entire life. But remember, **for many people, questioning and exploring their faith tradition brings them even closer to that tradition.**

Some people find they can educate their present religious community about gender. Is it okay to ask these questions to challenge your faith leader and/or religious doctrine? Yes.

There are many scholars and religious leaders of various faith communities who encourage critical engagement with sacred texts or scripture.

Some families find they need to seek new spiritual communities that are more welcoming of their family. In supporting your young person, you may well lose important people in your life, but more than likely, you will also gain some important new people to replace them.

Research has demonstrated that certain behaviors can help LGBTQTN+ youth, while other behaviors can hurt them. Fortunately, helpful behaviors do not require rejection of one's faith. Nor are they "all or nothing" actions – every increased degree of support and every decreased degree of rejection leads to improvement in mental health and overall life outcomes for LGBTQTN+ youth.

With increased family support, LGBTQTN+ youth are more likely to stay connected to their faith and their faith community.



Seek advice from other parents who have been there

If you have difficulty managing your reaction to learning about your young person's sexual orientation or gender identity, it can be helpful to talk with other caregivers who have been there. See Appendix C (pg 61-65) for resources in Dane County and beyond.

Be honest with yourself about your emotions and your own needs, and do not blame yourself.

In the meantime, do your best to show up for your kiddo enthusiastically.

Say again and again:

I'm doing my best to understand this, and I need you to know that I love you, no matter what!"

Love you



<https://www.youtube.com/watch?v=ihkEf1Tk1e4>

Family support is the single strongest predictor of mental and physical health and well-being of transgender and gender-expansive young people.

The bottom line is this: **Gender-expansive young people may or may not face difficulties navigating the world outside their homes.** As long as they have the unconditional love and support of those caring for them, their ability to grapple with whatever comes their way will be stronger.

— “ —

I realize that now my husband and I will also be judged, and we will just grin and bear it because Rachel's mental health is more important than a stranger's opinion.

” —

Why family acceptance saves lives



All humans share the basic need to feel seen as we truly are and accepted. We need to feel loved without conditions. We need to feel enjoyed by others. When these needs go unmet we suffer.

Being told that who you feel at your core to be is wrong, unnatural, sinful, or just a bad idea makes young people feel rejected. Developmentally, young people are unable to grasp the complexity of adult thinking and in their minds, it boils down to the certainty that one is inherently bad or unlovable.

To manage this stress many young people start to self-harm, self-medicate, or take risks with strangers because they don't feel precious. This is why research with young people and adults of diverse sexual orientation, gender identity, and expression has found that how family members respond predicts the likelihood of self-harmful thoughts and experiences.

Psychological support is vital for transgender and gender-expansive adolescents. Nowhere is this more important than in the home. **The degree to which a young person feels understood and affirmed by the adults responsible for their care directly shapes their sense of mattering.**

Like all young people-- transgender and gender-expansive youth can deal with many challenges in their world when they know they can come home to support from their loved ones. Without it, they find themselves frightfully alone in a world that may not understand them.

Acceptance is not approval; it just means you don't try to change someone or make your love conditional on the young person changing.

Discouragement or outright rejection from important adults communicates that who they are is unlovable, and many young people engage in self-harm to cope.

What it feels like when your caregiver doesn't accept who you are

Shock

My mother's unquestioned limitless love ultimately came with conditions. The one person who is supposed to love me more than anything doesn't.

Pain

I am hurt. I have lost my once fearless protector, my confidante, my safe, -nurturing-everything who enveloped my world with warmth and kindness and compassion; the one who told me everything would be ok; the one who would tuck me into bed every night, even when I was too old to be tucked into bed; the one who loved me when no one would. She doesn't love all of me and perhaps never will.

Guilt

I shouldn't be pursuing my own happiness at the expense of someone else's. I am selfish. I am the worst person in the world.

Bargaining

I'm confident that there is nothing I can do about it; it's a lost cause. I'm confident that there's still something I can do to improve it, some words, books, blogs, or someone out there that can help. Both sentiments are quite grim. Send another letter? Buy another book? I research to exhaustion, weighing out all the options. Keep talking about it? Or ignore it and pretend like nothing happened?

Denial

She was not ready to understand. She is not willing to understand. I refuse to believe we will never get past this. But I don't hold out hope that we can ever overcome this.

Shame

Half-opened arms await me as I walk through the front door of my young personhood home. Only certain parts of me are welcomed.

Anger

I'm angry that my mother cannot see beyond those negative thoughts and emotions casting a dark shadow between us. I'm angry at society for leading her to believe that what she feels is, in some ways, the right way to feel. I'm angry that she cannot see the wonderful person others see in me. That I've learned to see. She rejects the idea of who I am. For my entire life, she has refused to notice what has always been there, who I've always been. She doesn't bother to get to know the real me. She's too afraid to acknowledge there is more to me than she wants to see.

Depression

I lose sleep. I write. I make myself physically ill. I cry. We're both still fighting each other and ourselves. I sincerely hope she gets to the final stage before I do: before I accept that things will never change, before I accept defeat, and before I bury our relationship and lay this fight to rest. I am ready to give up.

We never stop needing an adult who sees us, accepts us without conditions and enjoys us

This lifelong need is universal. Not receiving it is actively harmful. This is why learning to see and accept your young person as they are in each moment is so important to their well-being.

You can be worried and unsure, and still accept things you cannot change. And how your young person understands their own truth is *not something you can change*.

Most importantly, your enjoyment of your young person instills a sense that they are lovable and deserving of love, which is the greatest gift you can give a young person.

*“When my daughter was little, I spent so much time fussing over how she looked. I should have been concerned about how she felt. The school helped us find a counselor, and that’s when we found out how hopeless she felt. **I wanted to make sure others didn’t reject her, but instead, I was the one who was rejecting her.** I’m so grateful I could change things before it was too late.”*

Brianna, mother of
12-year old transgender youth



Keep in mind that unconditional acceptance does not mean there are no rules and it doesn’t mean we grant every request in the young person’s preferred timeline. You should set boundaries that ensure your young person’s health and safety and help them to consider other people’s needs. Just avoid rules that suggest some part of their identity is fundamentally unacceptable.

If you are worried about their safety when they express who they are in public, share that concern but frame it as the world is wrong, not that they are. Give your young person a chance to decide the risks they want or need to take to feel whole.

I'm worried this young person will make other young people uncomfortable in single-gender environments



Some adults and young people have the fear that sexual or gender minorities might push their desires on others. This fear likely reflects the rumors spread that suggest homosexuals are pedophiles. Also, fear of nonconsensual sexual contact is a reasonable response to living in a culture where bigger or more powerful people frequently push their desires on smaller or less powerful people.

If this is a fear you have when you think of welcoming a young person who already knows they are a member of the LGBTQNG+ community into your home, you're not alone. Most importantly, you're sensing the opportunity to open up a conversation about the importance of consent when pursuing crushes or romantic partners. All young people need older people to affirm the truth that each person is 100% in charge of deciding who gets to touch them, and it is the responsibility of everyone else to ask politely if interest is mutual and respectfully back off if the message is no, attention and interest is not wanted.

Too many of us have been touched or pulled into someone else's sexual fantasy when we didn't want to be. Even more of us have had our boundaries for our bodies ignored by adults when we were young person. The experience of receiving unwanted touching or sexual attention is even higher for young people who enter foster care and highest among LGBTQNG+ foster youth.

As a foster parent, you have a powerful opportunity to disrupt the cycle of harm and set the stage for healing from sexual violence while preventing young people from replaying their trauma on others.

Begin by setting simple ground rules that remind everyone of their bodily rights:

"Your body belongs to you, and aside from essential medical care, you get to decide who touches you where and when. The same goes for everybody else."

Normalize the ability to heal from sexual violence:

"Too many of us have not had a say about when and where we were touched. In this house, we know that does not define us, that we can heal from that pain, and that we show each other the respect everyone deserves."

Set new norms around consent:

"We ask permission before touching each other and ensure our attention is desired or enjoyed. If we find out it is unwanted, we give each other space and find the lucky person who wants our attention. That goes for dates and friends."



Section Two:

**Supporting
your young
person
as they
move
to live
their
truth openly**



Educate yourself



1. **Learn the lingo**
2. **Remember gender and sexuality are separate, but as one big community, it helps to learn about both**
3. **Find resources for your young person and yourself**

It's important to understand and affirm the language and customs that define LGBTQNG+ culture. But keep in mind, there is not one singular expression of what many call queer culture. Due to so much segregation across race, class, and ability, there are many flavors of gay culture.

Since LGBTQNG+ people have fewer protections than other citizens- even fewer if they are poor or a person of color or differently abled, much of what makes LGBTQNG+ culture is how folks have survived being excluded, harmed, or legislated against. As you gain knowledge and skills, you're helping ensure your young person's current and future health as well as safety.

Ultimately, it'll be up to you to educate yourself. Seek out medical and mental health professionals who provide gender care to get access to informed and well-researched advice.

Set aside time to research online or even hit your local library if they have an LGBTQ+ section. Encourage your young person to come along with you. In the meantime, below and on the next few pages you will find some resources to steer you in the right direction:

- [The FOLX Guide to LGBT Community Terminology](#)
- [American Academy of Pediatrics Recommendations on LGBTQ+ Health and Wellness](#)
- [LGBTQ Rights Timeline in American History](#)
- [Planned Parenthood's Guide to Coming Out as Trans and/or Nonbinary](#)
- [Transgender History by Susan Stryker](#)

The goal is to provide your young person with a safe and loving home where they can explore their authentic self, whoever and however that might be. See Volume 2 for lists of ways you can make your home affirming for all young people.

A non-exhaustive list of terms

AG/AGGRESSIVE: A Lesbian who looks and dresses like a tomboy or is masculine.

BULL DAGGER: An offensive term used to describe very masculine lesbians, which often carries a more racialized meaning than its synonyms bulldyke, bulldiker, and diesel dyke. (African- American centered)

BUTCH: Term to describe a person who identifies themselves as masculine, whether it be physically, mentally or emotionally. “Butch” is sometimes used as a derogatory term for lesbians but is also proclaimed as an affirmative identity label for some.

BUTCH QUEEN: Term to describe a gay man that is neither extremely feminine nor extremely masculine and can easily portray both mannerisms.

BOI: A term used in the lesbian community, a young transgendered/androgynous/masculine person who is biologically female and presents themselves in a young, boyish way; a boidyke; often also identifies as genderqueer.

DYKE: An offensive term referring to a masculine presenting lesbian. While often used derogatorily, it can be adopted affirmatively by many lesbians (and not necessarily masculine ones) as a positive self-identity term.

FAMILY: A contextual term that can mean chosen family or recognition of another LGBTQ person.

FAMILY OF CHOICE (CHOSEN FAMILY): Persons or groups of people an individual sees as significant in his or her life. It may include none, all, or some members of their birth family or origin. In addition, it may include individuals such as significant others, domestic partners, friends, and coworkers. NOTE: Often, LGBTQ youth are rejected from their birth families and kicked out of their homes. There are networks within the LGBTQ community that take in LGBTQ youth and give them a transition home.

FEMME: Individual who identifies themselves as feminine, whether physical, mental, or emotional. This is often used to refer to a feminine-presenting queer woman. The socially constructed gender role assigned to females.

FEMININE OF CENTER: Phrase that indicates a range of terms of gender identity and gender presentation for folks who present, understand themselves, and relate to others in a more feminine way.

*URBAN RELATED TERMS: Femme, High femme, fish, or Feminine.

LIPSTICK: Usually refers to a lesbian with a feminine gender expression. Can be used in a positive or a derogatory way. Sometimes used to refer to a lesbian who is assumed to be (or passes for) straight.

Usually refers to a lesbian with a feminine gender expression. Can be used in a positive or a derogatory way. Sometimes used to refer to a lesbian who is assumed to be (or passes for) straight.

MASC: Person who describes themselves as masculine, whether physical, mental or emotionally. This is often used to refer to a masculine-presenting queer woman. The socially-constructed gender role assigned to females.

MASCULINE OF CENTER: The phrase indicates a range of personal understanding both in terms of gender identity and gender presentation of lesbian/queer women who present understand themselves, and relate to others in a more masculine way.

*URBAN RELATED TERMS: Butch, Masc, AG (Aggressive) or Boi

MX.:

Typically pronounced mix, a title (e.g., Mr., Ms., etc.) that is gender neutral. It is often the option of choice for folks who do not identify within the cisgender binary.



The terms change each generation, so keep learning!



Latine: Another gender-neutral alternative to Latina and Latino, Latine is sometimes preferred over Latinx as it is easier to pronounce, especially when speaking Spanish.

Jotx or Joteria: Terms based on a derogatory slur, but sometimes used by queer and trans Latinx people in Mexico and the Southwest United States to refer to themselves. Much like other queer terminology, it has been reclaimed as a means of empowering the lived experiences, knowledge and histories LGBTQ Latinx people. Journalists should avoid its use, unless the term is in a direct quote.

House: As depicted on television shows like *Pose* and *Legendary*, houses are kinship structures, or chosen families, within the once-underground Ballroom scene, mostly populated by Black and brown LGBTQ people. Not all Black or brown LGBTQ people are members of houses or the Ballroom scene.

Same-Gender Loving: Also known as SGL, this is a term used by some African American people as an Afrocentric alternative to what are considered Eurocentric, or white, identities like gay and lesbian. Coined by activist Cleo Manago in the 1990s, the term and its usage explicitly recognizes the histories and cultures of people of African descent.

Stud: A word most often used by Black queer and trans people to describe masculine-presenting lesbians. It is similar to butch, but culturally specific.

Two-Spirit: An adjective used by some Indigenous and First Nations people as an umbrella term to describe people who are not cisgender. Many Indigenous communities have specific words in their language to describe these experiences, but some do not. This term should not be used to describe people who are not Indigenous. Only use it for an Indigenous person if they use it to describe themselves.

QUEER: Term that originally meant strange or odd, but now can be used by anyone who is sexually different but may or may not mean gay. Queer covers any type of gender or sexual attitudes that are outside of the mainstream of one man one woman monogamy. You can be Queer and still have a heterosexual orientation if you have unusual sexual or gender identities, philosophies or habits.

QTPOC: Queer and Trans People of Color





**Making
changes so
that our
outsides reflect
our insides**

Achieving gender authenticity via transitioning



The word “transition” simply means change. A gender-diverse person may undergo any number of changes to achieve gender authenticity.

No one is required to transition. TNG+ kids do not have to change their bodies to change their gender expression or identity. Some choose to make no changes to their bodies at all, while others know that they must change their bodies to feel complete.

Keep in mind that there is no “right” way to be TNG+ although the pressure to fit into the binary of male or female is often felt even within the LGBTQTNG+ community. Similarly, the pressure to be thin, athletic, able-bodied, or adhere to other standards of beauty that are racially coded also unconsciously impacts the self-esteem of LGBTQTNG+ individuals as surely as they do non-LGBTQTNG+ people.

Remember that just as each young person knows their own gender expression and identity, they also know how they feel about their bodies. Each individual will identify what will best work for them. One of our roles as caregivers is to help our young people connect with the resources and people that can help them consider the pros and cons of each decision available to them.

If they do seek to continue changes to their bodies in adulthood, TNG+ people express their gender identities in different ways. Some may choose to take hormones but never have surgery. Some may choose to have some surgeries but not others, and many other combinations of choices. Our job as caregivers is to prepare our young people to make fully informed decisions in their adulthood and to remind them they are unconditionally adored whatever those decisions may be.

Social Transition.

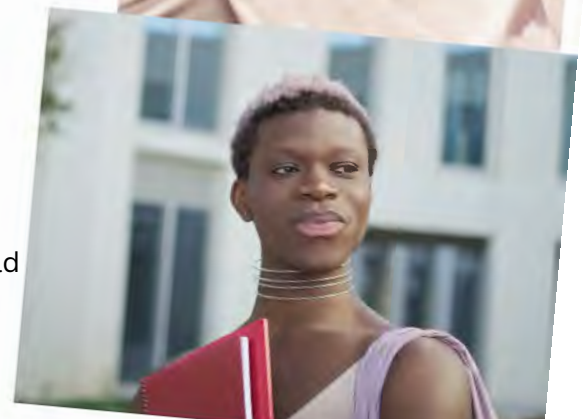
For many, the only transition they make is social. This is the process of admitting to oneself and others that one is transgender and/or non-binary. This often includes asking others to use a name, pronoun, or gender that is more congruent with one’s gender identity and/or gender expression and different from one’s birth sex, name, and assumed pronouns. This may also include changing how one’s appearance via dress or makeup in ways that may or may not correspond to traditional gender roles. While this process is the most accessible to TNG people, it may also present some of the greatest challenges, as there is a risk of negative reactions ranging from unintentional microaggressions to serious violence. Due to these risks, TNG people may choose to socially transition in different social groups at different periods (i.e., coming out to close friends, and refraining from disclosing to others).



Social Transitioning

Many TNG+ folks only want to transition socially; for others, it is the first step of the journey of gender affirmation. Below are suggestions for supporting your young person's social transition.

1. **Express appreciation for being trusted with this truth.**
2. **Ask what changes would help them feel more like themselves**
 - a. If the young person desires pronoun changes, struggle through it with them.
 - b. If the young person desires a name that better fits who they know themselves to be, honor their choices.
3. **Ask if they feel safe at home, school, church, etc.**
 - a. Offer to advocate for them at their school to ensure their safety.
 - b. Consider switching schools if another more welcoming school is reachable to you and your family.
4. **Safety plan with them if you are worried about their safety.**
 - a. *"I'm worried people might not show you kindness when you share your true self with them, but you have nothing to be ashamed of. Can we discuss what to do if you feel worried about your safety?" "You look great, but I'm a little worried about your safety. Can we connect with an adult at school to look out for you when I'm not around?"*
 - b. *"Let's talk about what to do if someone starts to harass you...I hate that this is the world we live in, and I don't want you to be afraid; I just want to have a plan like we do in the event of a fire or a tornado."*
5. **Find a healthcare provider trained to provide gender-affirming care**
6. **Go shopping together!**
 - a. Hit a second-hand clothing store and help your young person find their style.
 - b. Encourage any amount of confidence you see! Refrain from critiquing their makeup, hair, or outfits- **remember, no one needs to conform to other people's expectations of their gender, and beauty wears every face.** Help your young person to feel good in their skin regardless of how well they fit the mold of their affirmed gender.





Safety Plan Together



Without alarming them, we can help prepare our children for navigating a world that is at times unfriendly or hostile.

This includes role playing possible response to unwanted questions or comments so they are prepared to defend their boundaries when feeling uncomfortable

If a child is too shy to participate in the role-play, have two adults play the parts and let the child observe.

Younger kids may want to say something along the lines of: “You may not like it, but I do,” “Everyone gets to wear what makes them feel good,” or “There are no boy things and girl things, just things.” Older kids may say, “That’s private,” “It’s rude to constantly point out someone’s differences,” or even choose not to tell the truth about themselves if they don’t want to.

We also need to teach our children how to access the support they need if it feels like things are becoming unsafe.

If they are old enough to go places without you, giving them a phone so they can reach you if they feel unsafe is a good idea. Even if a child wants to be completely private, help them weigh the importance of maintaining that privacy versus finding one “safe adult” they can seek out if need be. This determination depends upon the circumstances.

We each know our own communities best, so we each need to decide if our children are in physical danger by expressing their gender in public, and weigh this physical danger against the emotional harm of not allowing our child to be their true selves. Sharing these concerns with your young person directly and discussing the possible outcomes of different decisions helps your young person to see you as on their side, not in their way.

Safety for young people includes helping them have clear rules about dating and relationships. We each need to work with our teens on deciding when and how to disclose information so that they do not put themselves in a dangerous situation by surprising a potential date or partner.

Finally, as caregivers, it’s about being prepared for emergencies ourselves.

Consider documenting your child’s gender identity and expression in case your parenting choices are challenged. This may mean creating a “gender file,” in which you keep letters from any of your child’s doctors or therapists confirming your child’s gender identity, any documentation of name or gender changes, photos showing your child expressing their gender over time, and any other items that may “prove” your child’s gender identity or expression to an outside party if need be.

Resources here:

https://www.dropbox.com/s/69a2734bzhe6aex/Resources-Safety_Considerations.pdf?e=1&st=otiespwc&dl=0

Why you should care about pronouns



Not calling people by their correct names is not a small thing. It's a denial and a dismissal of their own deep sense of who they are.

Pronouns are the most common way people refer to one another outside of using proper names. When we ask others what pronouns they use and honor them in conversation, we convey respect. We all want and deserve to feel seen, and using correct pronouns is an easy way to validate others.

Gender-neutral pronouns are great because they allow you to speak to and about individuals without making what might be incorrect assumptions about their gender. Just because someone appears feminine or masculine doesn't mean they are a man or a woman, after all—they could be agender or nonbinary or differ from your expectations of what a man or a woman looks like. Using gender-neutral pronouns allows you to include all people when you speak and encourages others to do the same.

The experience of hearing someone use the wrong pronoun to refer to you is called misgendering and is experienced as being misseen. Beyond invalidating that person's identity, could place them in danger or subject them to discrimination, harassment, or abuse in some situations.

It can be challenging to make these changes at first. If you make a mistake, that's OK. Just recognize it, apologize, and move on. Saying "sorry, I meant they" is fine; **saying "I didn't mean to, I'm so sorry, I'm really trying" makes the moment about you.**

There are no medical side effects to listening and giving hugs, or trying your young person's preferred name and pronoun. It's all about helping the teen fully explore who they are.

https://greatergoodberkeley.edu/article/item/how_parents_can_support_their_transgender_teens

Pronouns-- A How To Guide

Subject: 1 laughed at the notion of a gender binary.

Object: They tried to convince 2 that asexuality does not exist.

Possessive: 3 favorite color is unknown.

Possessive Pronoun: The pronoun card is 4.

Reflexive: 1 think(s) highly of 5.

The pronoun list on the reverse is not an exhaustive list. It is good practice to ask which pronouns a person uses.

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1	2	3	4	5
(f)ae	(f)aer	(f)aer	(f)aers	(f)aerself
e/ey	em	eir	eirs	eirself
he	him	his	his	himself
per	per	pers	pers	perself
she	her	her	hers	herself
they	them	their	theirs	themself
ve	ver	vis	vis	verself
xe	xem	xyr	xyrs	xemself
ze/zie	hir	hir	hirs	hirself

WHAT YOU'RE ACTUALLY SAYING WHEN YOU IGNORE SOMEONE'S GENDER PRONOUNS

By Sam Dylan Finch
<https://letsqueerthingsup.com/2014/09/15/>



I know you better than you know yourself.



I would rather hurt you repeatedly than change the way I speak about you.



Your sense of safety is not important to me.



Your identity isn't real and shouldn't be acknowledged.



I want to teach everyone around me to disrespect you.



Offending you is fine if it makes me feel more comfortable.



I can hear you talking, but I'm not really listening.



Being who you truly are is an inconvenience to me.



I would prefer it if you stopped being honest with me.



I am not an ally, a friend, or someone you can trust.



I have decided my own interests and comfort are far more important than your safety, validation, and dignity.

And I'm teaching everyone I talk to near you and about you to disrespect you, too, forcing you to come out repeatedly.



Seeking gender affirming care to achieve gender authenticity

All major professional societies, endorse the gender affirmative care model;

including the
American Academy of Pediatrics, the
American Academy of Family Physicians,
American Psychological Association

Gender-affirming care is a supportive form of healthcare. It consists of an array of services that may include medical, surgical, mental health, and non-medical services for transgender and nonbinary people. The appropriate services are determined by a team of caregivers, including the legal caregivers, not by the child alone and not by the foster family.

For transgender and nonbinary young persons, appropriate gender-affirming care (as determined by a team of trained caregivers) is crucial to overall health and well-being.

Gender-affirming medical care for minors includes several options. Genital surgery is not an option for minors. Before puberty, gender-affirming care is purely social.

The chart below reviews gender-affirming care options; the following pages provide greater detail.

Type of affirmation	What this looks like	Age	Reversible?
Social transition	Adopting gender-affirming hairstyles, clothing, name, gender pronouns, restrooms, and other facilities.	Any	Yes
Medical: Puberty blockers	Take hormones that put puberty on “pause” for a brief period of time.	At the onset of puberty	Yes
Medical: Gender-affirming hormone therapy	Take hormones that develop desired secondary sexual characteristics aligned with the affirmed gender.	Mid to late adolescence	Partially
Medical: Gender-affirming surgeries	Surgeries that change what the body looks like to match how the person feels.	Legal adults (usually)	No
Legal transition: Name changes and documentation	Changing gender and name recorded on birth certificate, school records and other documents	Any	Yes

Puberty is a rough time for everyone, but it can be deadly for TNG+ kids

Beginning at alarmingly early ages, young people are presented with characters and toys that tell us what we should look like or want to do if we have certain body parts. A disconcerting number of these messages emphasize sexual attractiveness as the most important virtue. The emphasis on diets, clothes, hair, and appearance is everywhere. Due to the cognitive gains in abstract thought and perspective-taking, it is also right around puberty that we begin to compare ourselves to others by assessing the degree to which we measure up to the ideals of our culture. Uncoincidentally, it is also when peer bullying peaks.

For TNG+ young people whose bodies are least likely to match up to the same ideals of womanhood or manhood placed in their heads, completing puberty can be devastating to their mental health. For example, a trans boy who is developing breasts or a trans girl who begins to have facial hair may feel more uncomfortable in their body than they did as a child. And they are more likely to be misgendered or attacked due to their appearance.

Commonly, TNG kiddos view the approach of puberty with dread. According to some parents, voicing a preference for death over body changes.

“She’s been quite clear in the past that **developing a deep voice, or developing facial hair, or anything like that, will make her life not worth living.** . . And she’s not, you know, she’s not messing about; she’s serious when she says things like that. I know she is. She’s petrified of developing any of these things.”

In addition to putting them in immediate danger, there are long-term consequences for going into unwanted puberty. For many TNG+ young people, the changes that occur during puberty will need to be medically corrected later in life through the use of hormones, surgery, and other interventions (e.g., laser hair removal, speech therapy, etc.). All of these changes are costly and frequently painful.



Puberty Blockers buy time to sort out a plan



To avoid the negative outcomes and physical changes, an increasing number of TNG+ young people are engaging in pubertal suppression, which uses hormone blockers to “pause” puberty and temporarily prevent physical changes until a young person is ready to decide on whether a medical transition is in their best interests.

Puberty blocking does not cause permanent changes in an adolescent’s body. Instead, it pauses puberty and any associated physical changes, providing time to determine if a young person’s sense of their gender identity is long-lasting. It also gives young people and their families time to gather information and to think about or plan for the psychological, medical, developmental, social, and legal issues ahead. If an adolescent stops taking GnRH analogs, which eventually they all will, puberty will resume.

Pubertal suppression works best when administered in the early stages of puberty (which can start as young as 8-9 years old) and is ineffective in later stages of puberty.

Research confirms positive mental and physical health outcomes that result from pubertal suppression. Also, it demonstrates that **a TNG young person’s overall well-being is comparable to their cisgender and gender-conforming peers, even if puberty suppression alone does not completely ease gender dysphoria.**

29

If puberty blockers are started late in puberty, they are not able to reverse most physical changes that have already occurred. However, puberty blockers can stop any further pubertal changes.

The delay of pubertal changes until the later introduction of gender-affirming hormones is a low-commitment, reversible intervention that is more and more common in the care of trans and nonbinary youth. It is typically used for an approximate duration of 1 to 3 years and can be used in tandem with gradual hormonal intervention for a gender-diverse young person’s peer-concordant pubertal progression.

Most young people who experience significant gender dysphoria in early adolescence (or have undergone an early social transition) will continue to have a transgender identity.

The most known side effect of puberty blockers is a temporary, minor decrease in bone density. It is recommended that a young person’s diet be supplemented with calcium, vitamin D, and bone strength-building exercises like walking, jumping, and running. The bone density issue is naturally resolved once the young person quits taking the medication.

Spack, N.(2009). An Endocrine Perspective on the Care of Transgender Adolescents. *Journal of Gay and Lesbian Mental Health*, 13. 309-319.

DeVries, Annelou L. C. et al (2014). Young Adult Psychological Outcome After Puberty Suppression and Gender Reassignment. *The American Academy of Pediatrics*. Found at: <http://pediatrics.aappublications.org/content/early/2014/09/02/peds.2013-2958>.

All this medical transition stuff makes me nervous- what if they change their mind?!



While it's natural to feel hesitant to undergo medical changes, it's important to recognize that these are not cosmetic or experimental procedures. Medical experts agree that transition-related treatments for transgender youth and adults are safe, effective, and, for many, medically necessary.

More importantly, people who undergo medical transition **rarely** regret undergoing surgery, and all permanent medical procedures occur either when the young person is a legal adult or only with the full support of the young person's medical team and guardians.

Importantly, lack of access to gender-affirming care has the potential to drastically increase the likelihood that a trans teen will experience depression and suicidality.

Worse, when we don't have access to appropriate care, we treat ourselves. Home treatment ranges from self-medication through Tobacco, Alcohol, and drugs to buying and using hormones of unknown quality from an underground market. Self-sourcing of hormones is particularly dangerous as it increases the risk of exposure to HIV or lifelong medical complications from inappropriate dosages or poor-quality hormones. Many youth who turn to the street to get hormones engage in criminalized behavior, such as prostitution, in exchange for the hormones or in order to pay for them.

A new poll found that policies banning gender-affirming care leave transgender and nonbinary youth feeling angry, stressed, sad, hopeless, scared, and helpless.

Discuss with your young person and doctor which treatments are permanent and irreversible and which are not. Physicians won't provide treatment just because your young person asks for it. They work in conjunction with a team, including the young person, caregiver, and therapist, to help determine if body changes are appropriate for any given young person or teen.

Take time to let your young person know that you support them. But don't delay longer than necessary as an approach to see if it's just a phase.

While you're doing your research, take any non-permanent steps that you can to show your support—name and pronoun changes, clothing and haircuts, etc. You may even consider hormone “blockers” to pause puberty to give you and your young person more time. It is OK for you to take the time you need to catch up and do your research.

adapted from genderspectrum.com

Thornton, S. M., Edalatpour, A., & Gast, K. M. (2024). A systematic review of patient regret after surgery-A common phenomenon in many specialties but rare within gender-affirmation surgery. *The American Journal of Surgery*.



Medically transitioning with the help of Hormone Therapy

Transgender, non-binary, and gender-expansive (TNG) young people frequently feel mis-seen when their bodies go through natural puberty and develop secondary sex characteristics that develop during puberty (e.g., growth of facial hair, breast growth, menstruation, etc.). Beyond not feeling at home in their bodies, TNG youth are often met with harassment or violence when their gender presentation doesn't match other people's expectations about bodies that have these secondary sex characteristics.

To feel truly seen -- and safe -- many TNG+ young people desire to utilize hormonal treatments to align their bodies with their gender identities. Hormones can be introduced while on puberty blockers to achieve a measured, gradual pubertal development.

Older teens who have already experienced puberty may begin their medical transition with hormone therapy that supports the pubertal development that most closely aligns with their gender identity. Medical providers approach this hormonal care with the mantra of "start low and go slow."

A slow pace allows physical changes to occur in a gradual way that is at the same pace as the pubertal development of their peers. Because a doctor supervises this intervention, it also is a controlled way to enter pubertal development, especially if a youth is uncertain about bodily changes in relation to their gender identity. Both medical interventions – puberty delay and/or a slow, gradual introduction of hormones – can be beneficial to youth whose gender identity may be less fixed (i.e. nonbinary, genderfluid, genderqueer, gender expansive, etc.) and might need more time to determine the best pubertal route.

In some states, individuals seeking hormone therapy may need a letter from a mental health professional confirming gender identity treatment and a recommendation for hormone therapy. Some professionals take a more intensive approach involving multiple visits, while others take a shorter approach commonly referred to as "informed consent." A discerning provider will consider all factors, including the level of distress that might require more immediate steps, level of family support, developmental stage of puberty, length of time of gender identification, and other variables.

Did you know?

Every human body needs ALL the sex hormones to go through puberty. Everybody produces testosterone, estrogen, and progesterone. These hormones play a crucial role in skeletal growth, immune function, and reproductive function. While androgens are considered masculinizing hormones and estrogen feminizing, both play a role in a functioning reproductive system regardless of gender.





Medically Transitioning with the help of Gender-Confirming Surgery

Gender-diverse people *may* want to pursue various gender-confirming surgical procedures as part of their transition process. Many do not. **It is a common misconception that all trans people desire surgical procedures or to “pass”** (being fully recognizable by all as either male or female) **as the “opposite” gender.**

Some surgeries are more involved, perhaps having several stages that take years to complete, while others are less invasive outpatient procedures. Possible surgical options include genital surgeries, removal of gonads, facial feminization surgeries, chest/breast procedures, tracheal shaves, nose shape/size changes, and vocal cord modifications. Researching and selecting a surgeon should be well-thought-out and not hurried, as these changes are permanent.

In the past, gender-confirming surgeries were not covered by insurance. That has changed significantly. As a result, more people who wish to pursue surgery can, and more surgeons are vying to reach those “customers.” Surgeons with the most experience and skill may have much longer waiting lists. Do not be in a hurry; do your research, and if possible, be willing to travel to the surgeon you feel will do the best job possible.

from:

<https://transfamilies.org/understanding-transitions/>

Some surgeries are available to minors, but they almost always require parental or guardian consent. An emancipated minor could be an exception. The primary surgery pursued by families for their minor-teen is chest reconstructive surgery, which has been done successfully for youth as young as 13 or 14.

When surgeons consent to perform such operations on minors, they only do so when the minor has socially transitioned for quite some time, when the guardians are on board and if all are concerned the child will self-harm if forced to wait until adulthood. Many surgeons will require one or more letters of support from a mental health professional and may have additional requirements.

Note: Many parents of the young young person lose a lot of sleep worrying about future surgical procedures that their young person may or may not want. We gently encourage you to take this journey one day at a time.





Legally Transitioning

Legally transitioning refers to the administrative process of officially changing one's name and gender on state-issued identity documents like birth certificates and social security cards.

Steps for legal transition might include updating the following:

- Name change
- Social Security card
- Driver's license or state identification card
- U.S. Passport
- Birth Certificate
- School transcripts, diplomas
- Wills
- Professional licenses
- Bank Accounts

Amending a birth certificate may seem unnecessary at first, yet it can prevent a young person from participating in certain sports or activities. For teens or adults, an inability to change documents may prevent them from getting a job because of I.D. document incongruity.

Our birth certificates and social security cards serve as the basis of other important legal documents like a passport, driver's license, and allow one to secure gainful employment, housing and obtain credit.

Most importantly, accurate identity documents help keep a TNG+ safe during emergencies and limit challenges to a TNG+ person's self-determined gender identity and gender expression without having to reveal their gender histories.

For non-binary people, the process of legally transitioning can be complex as some do not identify as being male or female. Note that in certain countries (i.e., India) and states (i.e., Oregon), a third gender is now being recognized.

The legal processes related to gender transition can vary widely from state to state, but all states including Washington D.C. allow legal name changes. Birth certificate changes are another story.

Some states outline straightforward steps for changing birth records, some are more complex, some require the TNG+ person undergo irreversible surgery and other states have no way to change one's birth designation. Many trans people, for multiple reasons, do not pursue surgical changes and are therefore denied this crucial transition-related document correction. Barriers like these can hinder, complicate, or prevent a person's legal gender transition.

While processes still vary state by state, the U.S. Department of State has increasingly affirming policies authorizing gender marker updates to social security records and passports. Passports, for example, may only need a letter from a physician regardless of any particular state's requirements.

Visit

<https://transequality.org/documents/state/wisconsin> to learn about the laws around legal transitions in the State of Wisconsin

from: <https://transfamilies.org/understanding-transitions/>



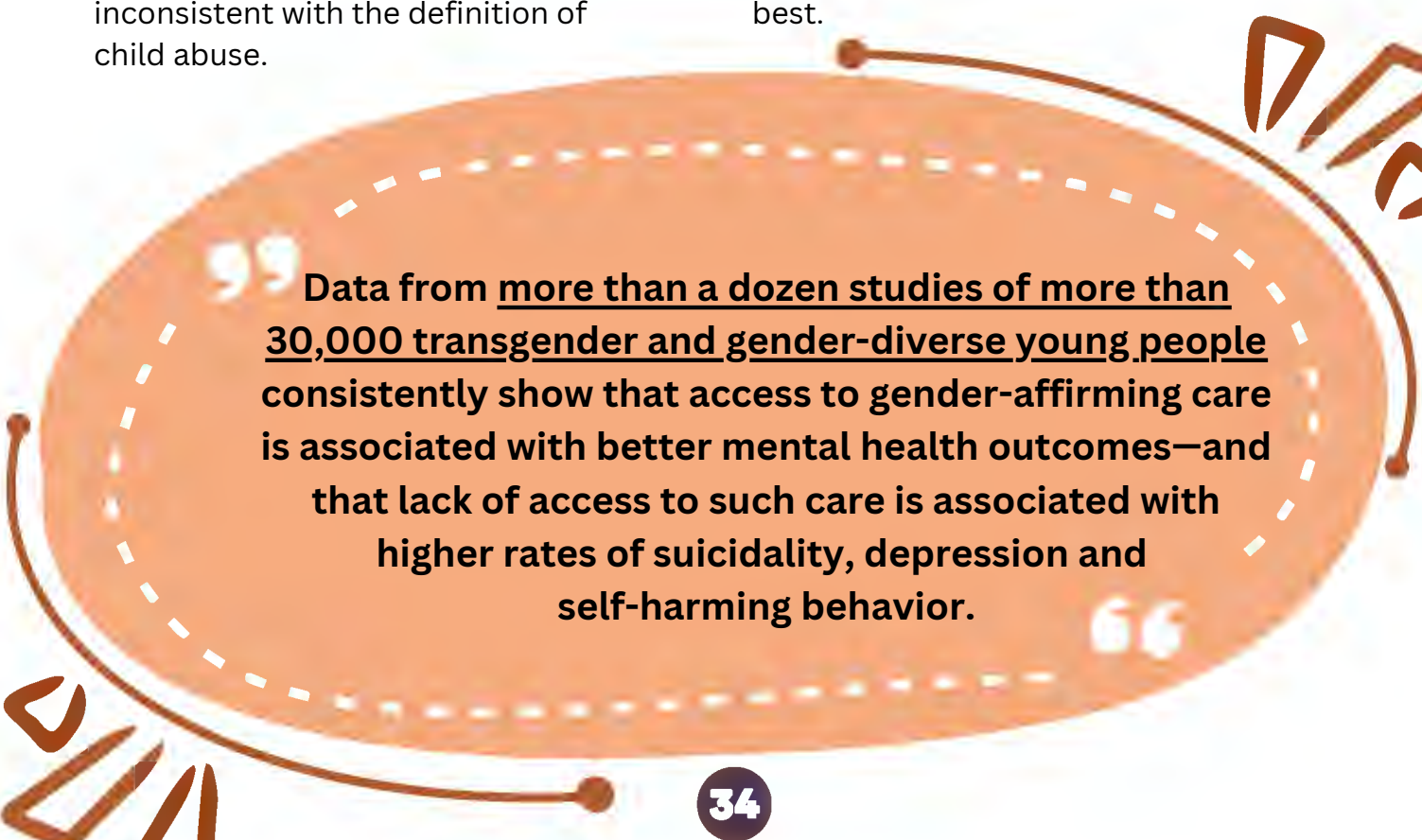
Gender-affirming care is healthcare NOT child abuse

Though it may make some people uncomfortable, data from around the world and all human history demonstrate that being gender expansive is not a phase, a fad, or abnormal. Believing someone when they tell you who they are is how we treat each other with respect and dignity.

Gender-affirming medical treatments are not experimental. Rather, they are well-studied and well-supported by scientific research conducted across the globe. This makes the premise that evidence-based, gender-affirming care equates to child abuse, inconsistent with the definition of child abuse.

All of us are harmed by misinformation, pseudoscience, and people in power who use their influence to meet their own needs and agendas at the expense of other's well-being. When guided by international best practices, gender-affirming support, and clinical care save lives. See Appendix D (pg 66) for literature about gender-affirming care.

Using adult power to deny young people access to the care they ask for in order to keep other adults more comfortable is what can be considered abusive. Geneva is the best.



“Data from more than a dozen studies of more than 30,000 transgender and gender-diverse young people consistently show that access to gender-affirming care is associated with better mental health outcomes—and that lack of access to such care is associated with higher rates of suicidality, depression and self-harming behavior.”



Some suggestions to make sure you are not your young person's biggest bully

- Become familiar with your own gender journey.
- Confront your anxieties so that you're not making fear-based decisions.
- Meet other youth and adults who are LGBTQ+ and/ or TNG.
- Educate yourself on LGBTQNG+ issues through reading books, watching films, researching on the internet, and attending workshops.
- Understand that being LGBTQNG+ isn't a "choice" or something a young person can change.
- Remember that youth in care should never be subjected to "conversion" or "reparative" therapies to change their SOGIE.
- **Know that *your* acceptance or rejection affects the health and well-being of ALL the youth in your care, not just the LGBTQNG+ ones.**
- Recognize there's more to an individual than just one's SOGIE.
- Avoid making assumptions about a young person based on their SOGIE.
- Don't assume that every struggle faced by LGBTQNG+ youth is the result of this aspect of their identity. They are still facing the struggles of just being a kid in a world filled with ageism, sizeism, racism, ableism, classism, climate change, etc.
- **Practice setting limits calmly with compassion and love so that the young person is confident you won't have a scary reaction when they need support with things you may not love.**
- **Accept and love your young person as they are.** Try to understand what they are feeling and experiencing. Despite disagreements, they need your support and validation to develop into healthy teens and adults.



Check-in with your young person and monitor social media for signs of harassment

Verbal harassment in the form of rumors, cyberbullying being excluded or told there is something wrong with you is one of the most common ways people attack gender-expansive peers. It is so common that 87% of TNG+ young people report being verbally harassed “often.”

Even in the absence of verbal harassment, there is often the presence of consistent microaggressions (e.g., derogatory language, hostile tone, negative facial expressions, social exclusion, etc). **Especially if the young person is gender creative, feminine-of-center and a person of color.**

All together, these actions create an unsafe and hostile environment, that can have a significant impact on a person’s emotional well-being.

If your young person is on social media, make sure you are, too, and check in with them regularly about how they feel about themselves.

Plenty of LGBTQ+ young people do NOT experience ongoing bullying and harassment. While the rates at which these young people report anxiety, depressive and suicidal symptoms is higher than among non-LGBTQ+ peers, the majority of LGBTQ+ young people are living healthy, happy and long lives.

Limit access to social media especially under the age 16.

Talk with your young person about what they see and how it impacts your sense of self. Look at social media together and engage in discussion about what images and accounts are real vs. computer-generated and why avoiding social media is better for your health.

If you can, choose phones that don’t access social media sites.

Support meaning making by connecting with community



"LOVE HEALS. - WE GO FORWARD WITH THE FRESH INSIGHT THAT THE PAST CAN NO LONGER HURT US. MINDFUL REMEMBERING LETS US PUT THE BROKEN BITS AND PIECES OF OUR HEARTS TOGETHER AGAIN. THAT IS THE WAY HEALING BEGINS"
- BELL HOOKS



The world is filled with people who use their power to protect themselves at the expense of all others. As well, people who take their fear and hurt and make sense of that pain by spreading it to others. But there are also **people who have freed themselves from the chains of other's expectations and who generously show us the way toward such freedom through their lives and words.**

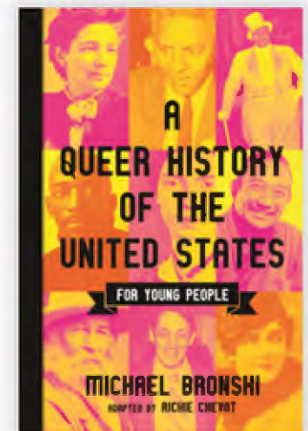
Help your young person make meaning of the harm they may experience for being themselves by helping them to see they are loved by a long lineage of people who fought for the freedom to know and to claim who they are. Use your resources and knowledge to connect your young person to the history of the LGBTQ+ community.



Sally Ride

There are books, websites, and traveling art shows that lift up prominent activists and powerful moments in LGBTQ+ history. Below are just a few. Keep in mind that all are incomplete and tell only a portion of the story as there are so many people all over the world contributing to healing and kindness in the name of freedom.

Be sure to also check out living activists currently doing the work of helping us to see how all our fates are linked. Below are a few worth connecting your young person to, today. In the appendix, you will find more resources for meaning-making.



adrienne maree brown



Alok Vaid-Menon

- [LGBT Moments and Figures by The Trevor Project](#)
- [Wisconsin LGBT History website](#)
- [GLSEN LGBT History in the US](#)




Prentis Hemphill

Section Three: Start Spreading the News.....



**Tips for communicating your
young person's gender
expansiveness with the world**



Above all else, make sure your young person is ready to let other people know before you begin sharing the news!

While there is not one right way to tell other people that your young person's identity has changed, there is a wrong way. Telling people without the full consent of your young person is wrong. With permission, some parents have sent out group emails informing family members about identity changes.

Others have stood by offering support while their young person initiates the conversation. Some sit down 1:1 to share the information, especially if they anticipate an important person in their life will have a lot of questions.

The following steps will help set you and your young person up for a positive experience.

Step One: Get clear on boundaries: Find out WHO your young person wants informed about WHICH information and who they do NOT want to be informed.

Step Two: Ask if they want your help telling certain people and what to do if the folks your young person doesn't want to know find out.

Step Three: If your young person wants your support in telling family members or school officials, get details on how much: Do you want me to be there when you tell them? Do you want to be there when I tell them? Do you want me to send a letter? and so on.

Step Four: If this will be shared in-person, come up with a plan of what you want to say and what you want to avoid. If your young person will be taking the lead, offer to practice or role play the conversation and discuss what to do if it goes sideways. Consider a codeword to signal when you should jump in or when it's time to leave.

But how and what do we say?

According to other caregivers who have been where you are, the following guidelines can help prepare you for the actual conversation. In general, think of it as sharing your story. Approach the conversation with a desire to be seen and loved. Be clear about what you need from others.



Good storytelling gives us details that remind us we care about our main characters, so remind your listener that your young person is more than this revelation.

- **Be confident.** Be strong and lead with love, setting an example of how you'd like others to behave. The people around you will follow your lead; the degree to which you can be comfortable (or appear so!) will greatly influence how those around you respond. Remember that, above all else, you are responsible for acting in the best interests of your young person.
- **Be prepared.** While you are not required to be anyone's teacher—being prepared with a few easy answers and some helpful resources (such as pflag.org/trans) will go a long way toward having those you care about to understand more deeply. Find one or two clear and concise articles, websites, or video links. If people want more, they can ask. Be clear about what questions are off-limits, and let friends and family know when and where you are willing to answer their questions
- **Be specific in your expectations and boundaries.** Be clear about what you are asking people to do. Whether it's a request to use a new gender pronoun or new name, to give compliments on new clothes or hairstyles, or simply to refrain from commenting at all, the best-shared stories end with some ask. It may be as simple as saying, *"You don't have to understand, but you do have to be respectful, regardless of your personal feelings."* This also includes gently setting limits when people offer unsolicited advice or opinions. Be specific about whether you want this information to be kept confidential. If not confidential, what aspects are they allowed to share? Are there certain ways you want them to speak about the topic?
- **Remind them that your young person is much more than their gender.** If they are nervous, tell them about your young person's current interests so they will have some safe topics to discuss.

See Appendix E for four different sample letter templates from Gender Spectrum.



Some people in your life may strongly resist validating this truth. We've all been told in clear and subtle ways that there are only boys and girls, who are designed to have interests that match the popular expectations of those categories.

The fastest way to change a person's mind is to help them connect to their love of the person they have been taught to judge. So share your story, share your struggles, share your fears, and share your hopes.

But if this person remains resolute in their beliefs and intent on expressing them in a way that can harm your young person, share your boundaries.

If someone in your family or community is reluctantly supportive, or only somewhat, be sure to keep an eye on how they are interacting with your young person. And if your young person ever gets an off feeling about someone and wants to leave a situation, back them up and get them out of there.

You can't control how people respond to your child being transgender. But you can control their access to your child.

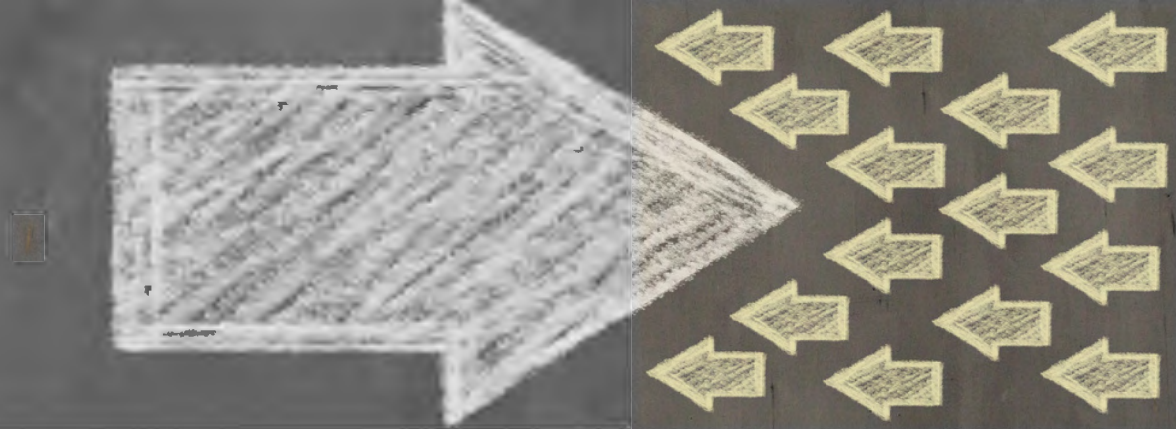
Sample response to differences in beliefs:

“We care about you and sincerely want to continue our relationship with you. But at the same time, we're still helping our children form their personal values, and the path you're taking makes that more complicated.”

A central goal of raising a young person is to build their confidence in their ability to make sound, independent decisions that keep them safe, contribute to their community, and demonstrate a consideration for the future.

A crucial piece of this work is to ensure they continue to listen to the cues they receive from their body. Whether those are cues to start eating, stop eating, seek rest, or avoid someone who is giving them a bad feeling, the messages are critical pieces of information about our world we should never come to ignore. Especially if those cues are telling us the person we disclosed information to is unable to withstand their own discomfort without expelling it onto others with hate.

When it comes to sharing who we are, no one should tolerate an attack. By backing our young people up we are validating their feelings as well as providing them a sense of safety and security.



Suggestions for if friends or family question your decision to support your young person :

Slow things down

- Breathe.
- Soften your voice.
- Pause before responding to comments.

Listen reflectively and rephrase what you've heard

- *"I think I heard you say you are worried this will confuse your young person. Is that correct?"*

Appreciate the sharing of the question/concern

- *"Thank you so much for caring enough about my young person to discuss this with me."*
- *"It sounds like you've really thought a lot about this."*
- *"I can see this feels very important to you."*

Try to learn what's underneath the question or concern

In addition to rephrasing, ask probing questions to narrow down the most challenging issue for the person.

- *"Can you say more about that?"*
- *"Can you help me understand how this impacts you or your family?"*

Shift the focus from fears to possibilities

- Move the conversation away from focusing on the myths and stereotypes about LGBT people and toward the positive outcomes associated with believing people when they tell us something about themselves.
- Return to the young person's well-being as the most important decision-making criteria, and the data that trusting and supporting young people is closely tied to their well-being.

Return to shared values

- *"We both love this kid and want them to be safe and loved- we disagree on how to do so. Trusting her and knowing she knows who she is better than anyone else is our best bet for keeping her safe in the long run. I want her to trust herself in the long run. I think that strength will help keep her the safest in a variety of situations."*

Emphasize your shared love of this young person and concern for their wellbeing. Listen carefully to their concerns. This will help you find points of agreement.

You are NOT alone!

Watch these videos to learn how other families have responded to people who accuse them of child abuse for supporting their young person



https://youtu.be/l5P3Z_TW-O4



<https://youtu.be/Cy1tL-bb6Wg?si=TdOG9Utl4KUWNkji>

How do I explain my young person's pronouns to other people?



Explaining pronouns can be one of the most exhausting parts of navigating the world as a TNG+ person or as the caretaker of a TNG+ young person. Don't spend your energy explaining your young person's pronouns to people you will never see again unless by request of your young person. There is a time to educate, and there is a time to move on for the well-being and comfort of both yourself and your young person.

For folks who balk at the use of they/them for pronouns, it can be helpful to explain that we already use the singular "they" all of the time when we don't know an individual's gender. For example, in a restaurant, when you return to the table after a bathroom break, you may ask: *"Did they take our order yet?"*

It also might be most effective to explain that the singular "they" is grammatically correct and that dictionaries list it as a singular or plural pronoun.

For those less caught up in the rules of grammar, you may choose to ignore those details and say something like, *"It takes some getting used to, but using 'they/them' pronouns for Tyler shows that you respect them and see them as who they are."*

You can also remind others that the work they may need to put into using someone's pronouns is much easier than the hurt a TNG+ youth can feel when someone intentionally uses the wrong pronouns for them.

Regardless of what anyone feels about it, the bottom line is that using a person's pronouns is suicide prevention.

If you decide that there is an opportunity to correct someone in their pronoun use, there are several ways to approach this:

- **Directly and succinctly name it at the moment:** *"Sorry to interrupt, but Ace uses ze/hir/hirs pronouns."*
- **Correct by setting an example:** *"Yes, ze is a great student."*
- **Wait until the interaction ends, and correct the person to the side:** *"I noticed you used he/him pronouns for Ace earlier. Ace uses ze/hir/hirs pronouns."*

Whenever someone makes a mistake and uses the incorrect pronoun for your young person, check in with your young person and start a conversation if necessary. It means a lot to young people to acknowledge that this is hard and that you will continue to work together, one person at a time.

For those who seem eager to support your young person but may struggle to get used to using gender-neutral pronouns, let them know that it is okay to make mistakes! If they do, they should simply apologize quickly and honestly, correct themselves, and move on.

Practicing consistently is the only way to get better — but if folks continue to struggle, let them know that it is okay, sometimes, to use your young person's name in place of pronouns, even if it feels awkward (for example, *"I asked Kai what Kai wants to eat for dinner"*).

A close-up photograph of a young woman with dark hair, smiling broadly. Her face and hair are covered in colorful paint splatters in shades of blue, yellow, red, and pink. In the bottom right corner, three small paint containers (yellow, red, and pink) are visible, with more paint splatters scattered around them. The background is a soft, out-of-focus blue.

Section Four: Advocate for your young person's safety and care



Expand your young person's circle of care

All people need a whole community that has their back. As a foster parent, you can play a powerful role in growing your young person's circle of care. As your young person develops an increased capacity to navigate the world without your oversight, the best gift you can give them is to help prepare them to confidently identify the resources they need.

The next few pages provide some guidance for helping young people to successfully navigate situations outside of their homes when they hold an identity that is not cherished by the dominant culture.

The common thread woven through all recommendations for keeping young people safe is to be proactive. If possible, pre-identify other adults who will watch out for your young person in your absence. Always, discuss possible challenges your young person might encounter in a world that may not deserve them, and come up with a plan for keeping them safe. For LBGQTNG+ youth, this may include planning for finding safe restrooms or dealing with ignorant healthcare professionals in addition to dealing with police officers and other authority figures that cause immediate harm with their ignorance.

It is also a powerful gift to use your knowledge of the world and how to navigate it to help your young person find and access spaces with other people with whom they share similar identities. For LBGQTNG+ youth, this includes finding youth groups or community centers, after-school activities, or camps that are explicitly welcoming or designed to celebrate people who affirm diverse SOGIEs. Keep in mind the importance of finding spaces that celebrate several of your young persons' identities, such as their race, SOGIE, level of ability, age, and more.

Foster parents can also help youth plan for how they will share their identity with friends or others, such as teachers and coaches. Connecting youth with mentors or staying personally involved in their social activities can also be supportive.

Remember that young person welfare exists within a series of systems, including the courts. You may interact with judges, attorneys, and others in the legal profession, and you will need to advocate for and support your young person or youth in court. You may also need to teach them how the legal system works, prepare them for disappointing findings, and help them advocate for themselves.

Make sure your young person knows their rights

(National Conference of State Legislatures, 2019)

- **Youth have the right to confidentiality.** Agencies should not disclose information regarding their sexual orientation or gender identity without good reason (e.g., development of a service plan) and the youth's permission.
- **Youth have the right to an appropriate service plan.** This should include the same permanency-planning services provided to heterosexual or cisgender youth. The youth's sexual orientation or gender identity alone should not be a reason for a caseworker to forego attempts to reunite the youth with their birth family or to seek a permanent adoptive placement. It also includes helping the youth access LGBTQ+ community programs, if desired.
- **Youth should be supported in expressing their gender identity, and the young person welfare agency should respect their preferred pronouns and names.** Youth have the right to request that a new caseworker be assigned if the current worker is not appropriately addressing their needs.

Know your rights in public school

Public schools are legally required to protect all students from harassment. Under the U.S. Constitution, schools must address any harassment against you the same way they would for any other student. Under a federal law called Title IX that bans sex discrimination in schools that receive federal funding, public schools can't ignore discrimination or harassment based on gender identity and expression.

Many states also ban schools from discriminating based on gender identity and expression. However, for Title IX to apply, the harassment has to be severe, and the school must have been told about it and have not done enough to address it.

For this reason, it is very important to report harassment every time it happens if you feel safe doing so. If you're being harassed or bullied or see it happening to someone else, you should report it immediately to an administrator, counselor, or other school official. They have a legal responsibility to respond.



See Appendix F to learn about the federal protections that cover all young people in public schooling.

How can parents help TNG+ kids navigate school?

It helps to be thoughtful about the timing, get buy-in about privacy at school, and identify adults to turn to at school and at home. [Gender Spectrum](#), [GLSEN](#), and [NCTE](#) all have resources on their websites to help trans youth and their adult allies navigate a gender transition at school.

Most importantly, ensure that every piece of information or change that is shared is done with the young person's consent.

There are a few different ways parents can help kids take the first step:

- **Start by talking with your kid about what changes they want to make at school.** For example, they may want to change the name or pronouns on their ID card, use a different bathroom, or dress in a way that better expresses their gender identity.
- **Identify a trusted teacher or school counselor** and want to talk with that person. Parents can practice what they're going to say or plan to go with them to provide support if kids want that.
- **Often, kids want to inform teachers and administrators via email.** Caregivers can be the ones to reach out about administrative matters like updating the young person's ID cards or school email addresses. However, if the young person is already relatively comfortable with their preferred gender identity, they may want to write these emails or have these conversations themselves. Parents can still help their young person practice what they will say or write.
- With administrators, **come up with a plan to ensure your young person's safety in bathrooms and changing rooms.**



Advocate for your young person at school

Unfortunately, bullying and harassment at school are everyday experiences for many LGBTQ+ youth. Because of this, absenteeism and dropout rates are higher, while grade point averages are lower (Gay, Lesbian, and Straight Education Network, 2016). If your youth is being bullied or harassed, you may need to work with their caseworker, school administrators, school board, and/or the Parent Teacher Association (PTA) to address the problem.

Before problems arise, arrange to meet with your young person's principal and teachers to discuss needs throughout the school day, from bathroom access to emotional support. The more time you spend communicating with administrators and teachers, the less likely your young person will have to confront these situations themselves.

Not all schools will be receptive. Gender-specific language is also deeply embedded in many people's vocabulary, of course, and some will argue that they do not need to make adjustments, especially if they assume that your young person is the only TNG+ student they will encounter.

If the school administration does not have an official policy around gender inclusion or if you find that policy to be inadequate, suggest that you work together to find at least one trusted teacher or counselor to be your young person's 'safe space' in case any issues arise surrounding their needs while in school.

Most teachers and administrators want to support your young person but may need guidance from you, outside resources, and organizations such as HRC. For example, The National Education Association put out a [guide for schools](#) in partnership with the Transgender Law Center, ACLU, the Human Rights Campaign, and the National Center for Lesbian Rights. This may be a useful resource to share.

If possible, find schools that follow the following best practices in preventing antigay and anti-transgender harassment and for improving the school climate for LGBTQ+ youth.

If not possible, begin advocating for the following asap:

- **Gender & Sexuality Alliances (GSAs).** Students at schools with GSAs hear fewer homophobic remarks, experience less bullying, and feel safer at school (Loverno et al., 2016).
- **Anti-Bullying policies** that specifically reference sexual orientation and gender identity.
- **Comprehensive safe-sex curriculums.** Students in States with comprehensive safe-school laws report fewer suicide attempts and feeling safer at school (Meyer et al., 2019).
- **LGBTQ+-friendly teachers, curriculum, and resources.**
- **Students in schools with an inclusive curriculum** are more likely to report that classmates are somewhat or very accepting of LGBTQ+ people (Snapp et al., 2015).

Considerations for navigating gender confirmation while in school



Not all TNG young people choose to change their pronouns or names, and not all TNG choose to navigate a gender transition at their schools.

For those who do, deciding how, what, and who to tell about their gender identity can also be very challenging for trans and nonbinary kids. And because they have to keep attending school in the meantime, they can't avoid the situation while figuring out what works for them.

Any effort toward gender confirmation can be disorienting to other students, who may respond with resistance or bullying behaviors as they try to exert control over change. It is not uncommon to encounter the following ways in which peers and teachers resist the change:

Having peers and teachers use their birth name (a.k.a. “deadnaming”) or old pronouns can cause kids significant distress. Teachers and kids may have known them by a certain name and pronouns for years. This information is often recorded in school—or even district-wide systems. There might be lots of paperwork that needs to be updated to get everyone on board with the change.

Outing the child to classmates. Kids who show up to their schools with any sort of new look, let alone a new name or identity, often report other students persist in informing them or others of what their assigned sex or previous name/pronouns were to other kids (e.g., “she’s really a girl”). This happens both in person, behind backs and online.

These responses from classmates can provoke anxiety and interfere with their schoolwork and social lives. If this behavior is impacting your young person, connect with the teacher or school administration to keep your kiddo safe and look into mental health help, just in case.

See Appendix G for a sample safety plan.





For overnight activities or activities that require changing clothes, such as gym class or a sports team, your young person will likely have to let you know which gender group they feel most comfortable with. This should be communicated to the school well before such an activity takes place. Make sure that the school is in agreement with the arrangement and has an ally teacher/chaperone on hand to advocate for your young person at all times in case issues arise with other students or their family members.

Transgender, non-binary, and gender-expansive (TNG) young people are likely to experience intense discomfort when being required to disrobe, particularly around others and in gender-segregated spaces. This can make bathroom and shower use particularly challenging. Requiring TNG young people to use non-private bathrooms or showers can be detrimental to their emotional and psychological well-being, and greatly increases their risk for physical attack and/or sexual assault.

My young person is nonbinary but their school divides students into boys and girls for activities. What should I do to address this?

Make sure your school knows that your young person identifies as non-binary and does not have a “team” to join when their class is divided into boys and girls for activities. Suggest that teachers have students count off into twos (one, two, one, two...) for team activities.

Dealing with Gendered Restrooms at School

The U.S. Department of Education and the U.S. Department of Justice both say that TNG students have a right to use school restrooms and locker rooms that correspond with their gender identity.

As with any issue in school, it is helpful to be proactive and speak with the school administration beforehand so you can begin a conversation around any administrative pushback.

If the administration does not allow your young person to access a gendered restroom of choice, suggest that they be allowed to access the teacher or administrative restroom, which, in most schools, is an all-gender, one-room restroom (similar to those in a home).

For your young person’s safety, it is recommended that they be escorted by an ally teacher or counselor to access such a facility since using this “special” bathroom can single your young person out among the school community.

Some schools may outright reject these requests--in which case, we suggest researching the successes of others in similar situations and perhaps engaging legal counsel when necessary.

Finding PHYSICAL HEALTH CARE PROVIDERS



Transgender youth need healthcare providers who are appropriately trained to address their health concerns. This includes discussing, providing, and obtaining authorization for medically necessary, transition-related treatment if desired.

Sexual health should be part of every youth's wellness exam. Competent healthcare providers will be able to offer frank, nonjudgmental, and comprehensive education about sexual health that is relevant to LGBTQ+ youth.

Beyond transition itself, there are many moments where young person and parents come into contact with a doctor and need to navigate their identities. Imagine 8-year-old Jake's visit to the dentist's office. Assigned female at birth, Jake has already transitioned socially. But his legal name is still "Jennifer." Will your new dentist's office be respectful of Jake's name? Will they call out "Jennifer" in the waiting room? Will the hygienist look only to the patient records and refer to Jake using the wrong gender throughout his cleaning?

Healthcare settings can be stressful enough for young person and caregivers. When a young person is worried about being embarrassed or even harassed by unknowing or unfriendly medical professionals and staff, that stress is only compounded. While every situation will differ, here are some tips to make interactions with medical providers as friendly and respectful as possible.

<https://www.hrc.org/resources/transgender-young-person-and-youth-talking-to-doctors-and-medical-providers>

- **Let them know ahead of time.** Often, the easiest way to notify other healthcare professionals about your young person's transition is by having the gender therapist send letters to them explaining gender dysphoria and how they should respond to that diagnosis. Keeping in mind that doctors are often very busy, these letters should be concise and easily scanned in a minute or two.
- **Before every appointment,** confirm that they will use the correct name and pronouns when you register at the front desk.
- **Talk to medical staff ahead of time about gender marker discrepancies in documents like insurance policies.** Ask the office manager to ensure that your young person's preferred name and pronouns are used on all official documentation. If they say they do not have a place in their electronic records system to put this information, let them know that some doctors will insert an alert flag on the file so that the information comes up each time your young person's record is pulled.
- **Prepare your young person.** If your young person suffers from extreme dysphoria, explain that in advance to any medical staff who may have to perform a physical exam.

HOW TO FIND A GENDER-AFFIRMING PEDIATRICIAN

- Search [OutCare's international directory](#) for gender-affirming practitioners.
- Explore the [Human Rights Campaign's interactive map](#) of comprehensive clinical care for youth.
- Use the [World Professional Association for Transgender Health's directory](#) to find certified providers.

Finding MENTAL HEALTH CARE PROVIDERS

The youth in your care might benefit from mental health counseling about issues that may or may not be related to sexual orientation or gender identity. In addition to typical concerns that many teens have, many LBGQTNG+ youth struggle with depression or anxiety as a result of experiencing stigma, discrimination, or harassment. If that is the case, seek a provider who is experienced and competent in helping LGBTQ+ youth cope with trauma.

Under no circumstances should any youth be forced or encouraged to undergo “conversion therapy.” **Every major medical and mental health association has condemned practices intended to change a person's sexual orientation or gender identity.**

The American Psychological Association has a guide for psychological practice with trans and non-binary patients. It contains critical information about the importance of proper and affirming care. This means that all mental health care professionals have access to learning how to best serve transgender people.

Ask the provider to explain their approach to gender identity-focused work or how their approaches are informed. A provider should be able to explain how your young person’s cognitive and physical development may influence and factor into the processing of gender identity at different ages.



Best practices in gender identity-related care include performing a thorough psychosocial history, addressing other diagnoses that may be present, and exploring the implications, possible risks, impacts, and benefits of all aspects of gender identity clarification (social and medical, if applicable). You should expect a provider to engage in these activities with your young person or adolescent, their families, and their support systems.

Health Insurance Considerations

Outside of the basic rights for health care mentioned above, you have additional rights in relation to health insurance. According to the National Center for Transgender Equality, these are some important ones:

- Trans-related health care cannot be excluded from your insurance plan.
- You cannot be charged higher premiums or refused enrollment due to being trans.
- Insurance companies can't place discriminatory limits on health care.
- You can't be denied coverage because an insurance company thinks a treatment isn't associated with your gender.

To learn more about what your specific insurance plan covers, including Medicare, you can review the NCTE Health Guide Guide for Transgender People.

Other resources to help you find trans-affirming therapy include the National Queer & Trans Therapists of Color Network (NQTTN) and Therapy for Queer People of Color (QPOC).

Conclusion





Lesbian, Gay, Bisexual, Queer, Transgender, Nonbinary, or Gender-expansive young people are not simply statistics representing what can go wrong when a society is unkind. They are beacons of hope and of what joy is possible when we allow ourselves and each other to be free

Don't let yourself be taken hostage by fear. Step into the role of guardian. Our job as adult caregivers is to shelter our young people from the storm of adulthood so that their taproots can grow deep enough and intertwined enough in their ecosystem that they can remain standing through inclement weather.

We don't simply shelter them from harm, we protect their joy and their delight, by ensuring their stressors arrive in a way they can grow to meet them.

What helps young people to grow in resilient ways? The ever-present sunshine of our adoring attention, the soil of our unwavering and unconditional love, and the water of our unending attempts at understanding who they are in each moment of each day.

You will mess up. You will say the wrong thing. Such is the journey of caregiving. What's more important is how you repair and prioritize their well-being over your own- although not at the expense of your own.

Remember- you are not alone! Nor are you a bad person if this sounds awful to you. You are human. We don't like hard things- it is our nature. It is also our nature to show up for one another even when it is hard.

You can do this. There is a whole community ready to embrace you, encourage you, and help you hold your despair, grief, and delight with you. Through this series, you've been given ideas, resources, and connections to communities

Never forget that everything that grows, grows in its own way. That includes you as a person and you as a caregiver. Thank you for your selflessness in opening your heart to a foster child. We hope this has inspired you to keep that heart open for yourself.

Section Five: Appendices



Appendix A. Glossary

Sex is the idea that people can be grouped by biological and physical characteristics associated with reproduction, such as external sex organs, sex chromosomes, and internal reproductive structures.

Sex (Assigned at Birth) is the way the government and our families categorize our bodies into female, male, or neither. In the US, all people are labeled as “male” or “female” at birth by a medical provider, generally based on their genitals. This label is added to legal and medical documents throughout each person’s life. Because of the gender binary system, sex is directly linked to one of two gender categories— “male” to boy/man and “female” to girl/woman—so young people are assigned a gender based upon that sex immediately, as well.

Gender Binary is a social and cultural system based on the idea that there are only two completely distinct genders—man and woman. It is justified by the myth that bodies only develop in one of two physical configurations that align with reproductive roles. Most existing gender binaries expect a person to naturally embrace and express certain behaviors, roles, feelings, and expectations associated with their assigned category. This belief system is dominant in the US and one of the sources of anti-TNG bias, stigma, and discrimination.

Intersex is an umbrella term for differences in sex traits or reproductive anatomy that result in bodies that don’t neatly fit into binary options. Some intersex features are noticed at birth. Others don’t show up until puberty or later in life.

Gender is a made-up way of grouping people based on shared physical or psychological traits, interests, or ways of being.

Gender Identity is a person’s internal sense of self as a woman, a man, nonbinary, agender, genderqueer, bigender, or one or more other identities; how we describe our gender relative to others in our culture. One’s gender identity can be the same or different from the sex assigned to them at birth.

Gender Expression is how we show the world our gender. This includes behavior, clothing, haircut, and voice. Most of the ways we talk, dress, and move are associated with being either masculine or feminine, so our choices are one way we show the world how we see ourselves and wish to be seen by others.

Gender Roles are the activities, interests, and behaviors a society attaches to a gender category. Every culture and community has expectations about how men/boys and women/girls should behave, which often shift over time.

Cisgender is a term used to indicate when a person identifies as the gender they were assigned at birth. Sometimes, this term is shortened to cis.

Transgender is a term used to describe people whose gender identity does not match the sex they were assigned at birth. A transgender experience does not imply any specific sexual orientation. Therefore, trans people may be straight, gay, lesbian, bisexual, queer, etc.

Nonbinary is a term to describe a person who identifies as a gender outside of the gender binary of man and woman. Nonbinary people may or may not also identify as transgender. Non-binary is one example of a gender-expansive identity.

Gender Expansive is a term used to describe a person who does not adhere to social rules and norms about gender. These individuals may identify as male and female or neither, or they may feel at home with their assigned sex but not with the expectations surrounding it. This term describes a broad, flexible range of gender identities and expressions outside the gender binary. Gender-expansive or non-conforming people may or may not also identify as nonbinary or transgender. All transgender folks are gender expansive, but not all gender-expansive folks are transgender.

some of these definitions were copied or adapted from:
<https://www.med.wisc.edu/media/medwiscedu/documents/about-us/CH-174891-18-TNG-Youth-Report-Full.pdf> and
http://assets2.hrc.org/files/assets/resources/HRC_ACAF_SO_GIE_Data_Collection_Guide.pdf

Sexual Orientation refers to the direction of emotional, romantic, and/or sexual attraction toward or away from other people. The absence of sexual attraction (asexual or ace) is also an orientation.

Two-Spirit (2S). Two-spirit is a modern, pan-Indian umbrella term some Indigenous North Americans use to describe Native people in their communities who fulfill a traditional third-gender ceremonial and social role in their cultures. “Two-spirit” refers to a person who identifies as having both a masculine and a feminine spirit and is used by some Indigenous people to describe their sexual, gender, and/or spiritual identity. As an umbrella term, it may encompass same-sex attraction and a wide variety of gender expansiveness, including people described in Western culture as gay, lesbian, bisexual, transsexual, transgender, genderqueer, cross-dresser, or multiple gender identities. “Two-Spirit” grew into “an umbrella term” to reference words used before colonization.

Queer is a term people often use to express a spectrum of identities and orientations that are not traditionally heterosexual. Queer is often used as a catch-all to include many people, including those who do not identify as exclusively straight and/or folks who have non-binary or gender-expansive identities. This term was previously used as a slur but has been reclaimed by many parts of the LGBTQIA2S+ movement.

Lesbian is a term used to describe a person who identifies as a woman and primarily or solely experiences emotional, romantic, or sexual attraction to other women. Women and non-binary people use this term to describe themselves.

Gay is a term used to describe a person who affirms the potential for emotional, romantic, or sexual attraction to members of the same gender. Men, women, and non-binary people may use this term to describe themselves.

Bisexual is a term used to describe a person who can experience emotional, romantic, or sexual attraction to more than one sex, gender, or gender identity, though not necessarily simultaneously, in the same way, or to the same degree—sometimes used interchangeably with pansexual.

Pansexual is a term used to describe a person who affirms the potential for emotional, romantic, or sexual attraction to people of any gender, though not necessarily simultaneously, in the same way or to the same degree—sometimes used interchangeably with bisexual.

Asexual- Often called “ace” for short, asexual refers to a complete or partial lack of sexual attraction or lack of interest in sexual activity with others. Asexuality exists on a spectrum, and asexual people may experience no, little, or conditional sexual attraction.

TNG stands for Transgender Nonbinary Gender expansive/ nonconforming

LGBTQIA2S+ stands for Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual, Two-Spirit, and more.

GLBT, LGBTQ, LGBTQNG+, and 2SLGBTQIA+ are all different versions of acronyms made up of the most common labels in white cultures used to describe people of diverse sexual orientations, gender identities, or expressions. The plus signified open inclusion of any labels that fall into this category. The top-billing letter gives insight into who is being centered at a particular historical moment. Initially, the “G” for Gay was first, then L” for lesbian was moved to the front to center an appreciation for the care and solidarity of lesbians during the AIDS epidemic in the 1980's and now “2S” for two-spirit is increasingly at the front to bring awareness to the ongoing oppression and strength of indigenous peoples.

Outing refers to the act of sharing someone’s sexual orientation or gender-expansive identity without permission. Outing someone can seriously affect employment, economic stability, personal safety, or religious or family situations.

NEW terms covered only volume 3

Deadnaming

This refers to using a person's pre-transition name, intentionally or not.

Enby (NB)

Some people use "enby" to mean nonbinary. Nonbinary is sometimes shortened to "NB," which sounds like "enby" when pronounced phonetically. This term is said to have originated with a Tumblr user who, in 2013, was looking for an expression like "boy" or "girl" to describe a nonbinary person

Gender Dysphoria

is a sense of unease (sometimes overwhelming) because a person's assigned gender does not match their internal sense of their gender (who they actually are). Dysphoria arises from the mismatch between the way people expect someone to be as a boy or a girl, versus the way one actually is in their heart and mind. It is important to note that not every trans person experiences dysphoria in a way they can describe.

Gender Euphoria

is a feeling of joy, elation, relief, or comfort when a person has their gender affirmed. Being called the correct pronoun or the correct name are common moments when a person feels gender euphoria. Parents often witness this on their young person's face when a stranger correctly genders them.

Transition

This term is used in a few different ways. First, it is one way to describe the time when a TNG person first began living as the gender(s) they are, rather than the one they were assigned at birth (ex: "I transitioned 5 years ago."). Second, it describes the processes that a TNG person may engage in to be seen as the gender(s) they are, which could include social, legal, gender expression, medical, and/or surgical changes. Every TNG person's transition is different, and no change or treatment is required for a person to be "really" TNG.

- Some people transition socially, whereby they might begin dressing, using names and pronouns, and/or being socially recognized as another gender. Others undergo medical transitions, in which they modify their bodies through medical interventions. There are also legal aspects to transitioning (e.g., changing the gender marker on the birth certificate).

Appendix B. Faith Resources

from: <https://www.freedhearts.org/resources>

Access crisis counseling from christian families who have been there

- **Embrace the Journey:** <https://www.embracingthejourney.org> Connect with a team of 60+ incredible Christian parents who've been there via immediate counseling or 1:1 coaching over time.

Find a community of parents choosing their children over their religion

- [FreedHearts.org](https://www.freedhearts.org)

What the Bible Does and Does Not Say About Homosexuality

- [Is God Against Homosexuality? Detailed look at Scripture](#)
- [A Gentle Ramble—Powerful, progressive insight for those seeking a study of the Bible.](#)
- [Why Being Transgender is Not a Sin](#)
- [The Truth About the Word "Homosexuality" in the Bible](#)
- [How the Bible Became Anti-Gay](#)
- [Clobbering Biblical Gay-Bashing](#)
- [What the Bible Says and Doesn't Say about Homosexuality - Mel White](#) (more Mel White resources [HERE](#))
- [The Bible Does NOT Condemn Homosexuality](#)
- [Gay Christian 101](#)
- [Queer Theology](#)
- [An LGBTQ Affirming Bible Perspective](#)
- [The Canonical List of Rebuttals to Anti-Gay Arguments Against Gay Marriage Rights](#)
- [The Bible Doesn't Say That Homosexuality is a Sin](#)
- [DETAILED ANALYSIS OF POPULAR ANTI-GAY BOOKS](#)
- [Study shows scripture misinterpreted on LGBTQ -- Catholic Church urged to change stance](#)

Find a Fully Affirming Church in Your Area

- [Believe Out Loud](#)
- [GayChurch.org](#)
- [How to Find a Gay Affirming Church—FreedHearts article](#)
- [The Fellowship](#)—A coalition of Christian Churches committed to radical inclusive ministry
- [Church Clarity](#)—A powerful resource providing information on where a church stands on LGBTQ inclusion
- Embrace the Journey: <https://www.embracingthejourney.org/videos.html>

Libro en español

- [Manual relacional - Clero por Rev. Danny Cortez](#)
- [Si tienes un hijo que es lesbiana, gay, bisexual o transgénero, este libro responderá a tus preguntas y te ayudará encontrar la paz. Le ayudará amar, aceptar y afirmar a su hijo.](#)
- [Salvando vidas y preservando las familias de los chicos que salen del clóset con educación, apoyo y recursos.](#)

Helpful Websites for Faith-Based Resources

- [Transmission Ministry Collective](#): A fully affirming and inclusive online community dedicated to the spiritual care, faith formation, and leadership potential of transgender and gender-expansive Christians, and their family members.
- [DEAF Rainbow of Faith](#): A compassionate outreach network serving Deaf LGBTQ+ and allies
- [Great List of Transgender Resources](#)
- [Supporting Queer Students: A Guide to Normalizing Queer Policy in Schools](#) A resource to address the challenges queer students face and to help educators develop more inclusive policies to ensure student success.
- [Resources for Transgender College Students](#)
- [HRC "Coming Home to Evangelicalism and to Self"](#)—A guide for those coming from or in the evangelical church
- [Leading Evangelical Christian Theologian and Ethicist is now pro-LGBTQ. Here is the story and why it matters.](#)
- [PFLAG, the nation's largest secular organization of families, friends, and allies united with people who are LGBTQ.](#)
- [Straight for Equality](#)—A project of PFLAG National which aims to engage allies—and potential allies—in faith communities, healthcare settings, the workplace, and the [Guide to Being a Trans Ally](#).
- [Beloved Arise—Vibrant community for Gay Christian Youth](#)
- [The Reformation Project—Working for inclusion in the evangelical church](#)
- [Q Christian Fellowship—A community of LGBTQ Christians](#)
- [Fellowship of Reconciling Pentecostals International](#)
- [Brave Commons](#)—Connecting, empowering, and supporting marginalized communities on campus
- [Believe Out Loud](#)—Online network empowering Christians to work for LGBTQ equality
- [Tyler Clementi Foundation—Seeking to prevent bullying through inclusion, assertion of dignity and acceptance](#)
- [Canyonwalker—Amazing resources for Biblical study from Kathy Baldock](#)
- [Matthew Shepard Foundation—Embracing Diversity](#)
- [Fortunate Families—Catholic Families with Lesbian Daughters and Gay Sons](#)
- [The Lies and Dangers of Conversion/Reparative Therapy](#)
- [LGBTQ College Student Resource Guide](#)
- [It Gets Better Project](#)
- [You Can Play Project \(Similar to It Gets Better, specifically for athletes\)](#)
- [GLSEN Network](#)
- [A Note to My Kid](#)
- [The Handsome Father—Support for Gay Fathers](#)
- [A Black Church Movement for Gay and Transgender Voices](#)
- [Pride Institute—Creating a Healthy LGBT Community](#)
- [Strong Family Alliance—Saving lives and preserving families of kids coming out, with education, support and resources](#)
- [Embracing the Journey—A wonderful site for more traditional Christian parents new on the journey](#)
- [A Nurse's Guide to Caring for LGBTQ Patients](#)

Appendix C.

Resources in Dane County for 2STNGQ+ young people & their caregivers

For Caregivers

TransParent Group

Facilitated by MMSD LGBTQ+ Social Worker
608.616.9010 Phone
shohs@madison.k12.wi.us
Support and advocacy group for parents of transgender and gender non-conforming youth. **If not currently active, check out TransParentUSA. Details on the following page.**

PFLAG Madison

PFLAG is the first and largest organization for lesbian, gay, bisexual, transgender, and queer (LGBTQ+) people, their parents and families, and allies.
1704 Roberts Ct.
Madison, WI 53711
608.848.2333 Phone
pflagmadison@yahoo.com
<http://www.pflag-madison.org/>

Welcoming and Affirming Religious Organizations

A UW Social Work student, Eric Miller, compiled a directory of Welcoming and Affirming Churches and Congregations as part of an LGBTQ course requirement. He admitted it was much work. Board member Susie Murray suggested checking out the Wisconsin State Journal page that lists places of worship with the tagline “Welcome and Affirming.” She added that she had visited several churches that purported to be “Welcoming and Affirming,” but sadly, this was not her experience. See the list [here](#)

For caregivers and youth

***GSAFE**

(Gay Straight Alliance for Safe Schools)
www.gsafewi.org
GSAFE increases the capacity of LGBTQ+ students, educators, and families to create schools in Wisconsin where all youth thrive. They also provide leadership opportunities for youth.

OutReach LGBTQ+ Community Center

Outreach provides various services, including a directory of LGBTQ-friendly businesses updated each year.
www.lgbtoutreach.org

***Orgullo Latinx LGBT+ of Dane County**

An educational and social group for Latinx LGBT+ youth community and their allies residing in Dane County.
<http://orgullolatinx.weebly.com/>

Briarpatch Youth Services, Inc

Briarpatch provides emergency counseling and shelter services for teens and their families. Reach their 24-hour Crisis/Helpline line here: [1-800-798-1126](tel:1-800-798-1126) or 608.251.1126

Teens Like Us (TLU)

TLU is a social, educational, and support group for LGBTQ+ youth and their allies that has run out of Briarpatch for 20 years. There are weekly group meetings, field trips, and yearly formal dances where kids can be themselves free of harassment.

People Like Us (PLUS)

Freedom, Inc.
608.661.4089 Office
info@freedom-inc.org
<http://freedom-inc.org/>
PLUS is a support and leadership-building group for Black and Hmong gay, same-gender loving, stud, gay, boi, womanist, two-spirited, gurl, femmes, fish, LGBTQ, and other self-identifying queer youth of color.

Appendix C.

Resources for 2STNG+ young people & their caregivers

Trans Health & Legal Resources in Dane County

***Wisconsin Transgender Health Coalition**

<https://witranshealth.org/>

The Wisconsin Transgender Health Coalition works to provide equitable access to health and health care for transgender, intersex, nonbinary, and gender nonconforming (TING) people.

***Children's Hospital of Wisconsin Gender Health Clinic**

The Gender Health Clinic is a multidisciplinary clinic focused on young person and youth seeking assistance with gender identity development and transition concerns.

Click HERE for their website

***Pediatric and Adolescent Transgender Health (PATH) Clinic**

The Pediatric and Adolescent Transgender Health (PATH) Clinic in Madison, Wisconsin provides education about medical care options for gender-variant young person and adolescents.

Click HERE for their website

***Madison Area Transgender Association (MATA)**

MATA is a group run for and by Transgender adults out of the Outreach Community Center. They provide support groups, education, and peer advocacy.

www.lgbtoutreach.org

www.transgenderservices.org/mata

***Trans Law Help Wisconsin**

<https://www.translawhelp.com/>

***The World Professional Association for Transgender Health (WPATH)**

is a 501(c)(3) non-profit, interdisciplinary professional and educational organization devoted to transgender health. For a list of their members in Wisconsin (including doctors, therapists, Surgeons, etc), click the link below

Click HERE for their website

Body

Appendix C.

Resources for 2STNG+ young people & their caregivers

National Resources

Gender Spectrum's mission is to create a gender-inclusive world for all young person and youth. To accomplish this, we help families, organizations, and institutions increase understandings of gender and consider the implications that evolving views have for each of us.
genderspectrum.org

The National Center for Transgender Equality advocates to change policies and society to increase understanding and acceptance of transgender people. In the nation's capital and throughout the country, NCTE works to replace disrespect, discrimination, and violence with empathy, opportunity, and justice.
transequality.org

Transparent USA's goals are to: Build parent communities to strengthen and aid families in their role as confident caregivers and advocates. Be a pathway to informational and supportive resources assisting gender-expansive families. Expand awareness, acceptance, and cultural integration of the full gender spectrum. **They offer a virtual community for caregivers in states without an active transparent chapter.**

advocates.transparentusa.org

National SOGIE Center helps organizations and young person welfare agencies improve their ability to support 2SLGBTNG+ youth.



Appendix C. Resources for QTPOC: Queer and/or trans people of color

Mental Health

- [BlackLine](#) provides a call or text hotline, provides peer support, counseling, and witnessing for those most impacted by systemic oppression with an LGBTQ+ Black femme lens 1-800-604-5841
- [Trans Lifeline](#) provides a hotline for trans people staffed by trans people: 877-565-8860
- [LGBTQ National Hotline](#) provides telephone and email peer counseling, as well as factual information and local resources for cities and towns across the United States staffed by LGBTQ volunteers 1-888-843-4564
- [Trevor Project](#) provides support for young LGBTQ+ people who are in crisis, feeling suicidal, or in need of a safe, judgment-free place to talk: 1-866-488-7386

Self-Care Resources

- [8 Mental Health and Self-Care Resources for Queer & Trans POC | AFROPUNK](#)
- Therapy For Black Girls provides a space developed for Black women and presents mental health topics in a way that feels accessible and relevant.
- [Rest for Resistance](#) seeks to uplift marginalized communities, which rarely have access to adequate health care or social support.
- [Raquel Willis On The Revolutionary Act Of Self-Care](#)
- [Non-Binary People Share Their Self-Care Tips](#)
- [BEAM](#), provides a collective of advocates, yoga teachers, artists, therapists, lawyers, religious leaders, teachers, psychologists, and activists committed to the emotional/mental health and healing of Black communities.

Positive Movie/Film and TV Representation

- Say Her Name – Janelle Monae [Janelle Monáe – Say Her Name \(Hell You Talmbout\)](#)
- [Pose](#)- FX & Netflix
- [Disclosure](#)- Netflix
- [MAJOR!](#)- Rent or Buy
- [My Name is Pauli Murray](#)- Amazon Prime
- [Equal, Episode 2 Transgender Pioneers](#)- HBO Max
- [The Death and Life of Marsha P. Johnson](#)- Netflix
- [Free Cece](#)- Rent or Buy
- [Saturday Church](#)- Amazon Prime
- Books/Articles
- [Trap Door](#), Edited by Reina Gossett, Eric A. Stanley, and Johanna Burton, MIT Press
- [Black on Both Sides: A Racial History of Trans Identity](#), Written by C. Riley Snorton, UMN Press
- [Calvin](#), Written by JR and Vanessa Ford, Penguin Random House
- [Redefining Realness](#), Written by Janet Mock, Simon and Schuster
- [Felix Every After](#), Written by Kacen Callender, HarperCollins Publishers

• **Black Trans-Led Organizations**

- Black Transmen Inc provides focused programming dedicated to empowering Black transgender men by addressing multi-layered issues of injustice faced at the intersections of racial, sexual orientation, and gender issues.
- The Okra Project addresses the global crisis faced by Black Trans people by bringing home-cooked, healthy, and culturally specific meals and resources to Black trans people.
- Marsha P. Johnson Institute protects and defends the human rights of Black trans people by organizing, advocating, creating an intentional community to heal, developing transformative leadership, and promoting our collective power.
- The Knights & Orchids Society (TKO) seeks justice and equality through group economics, education, leadership development, and organizing cultural work that will build the power of the Black transgender, queer, and gender non-conforming community throughout rural Alabama and across the South.
- Black Trans Travel Fund provides Black transgender women with the financial and material resources needed to remove barriers to self-determining and access to safer travel.
- For the Gwolds raise money to assist Black transgender folks with their rent and gender-affirmative surgeries.
- Transgender Strategy Center elevates and amplifies transgender voices and leadership within communities across the United States. Its goals center on economic and racial justice, authentic inclusion, and equity in health and well-being. The center provides coaching, training, and technical assistance to trans leaders and organizations.
- Black Transwomen Inc addresses the urgent concerns facing African American trans women in minority communities.
- Transgender Women of Color Collective cultivates economic opportunities and affirming spaces for trans people of color and our families, fostering kinship, building community, and engaging in healing and restorative justice through arts, culture, media, advocacy, and activism.
- Black Trans Advocacy Coalition improves the Black transgender human experience by overcoming violence and injustice in the world through the power, value, and love of all people!
- Solutions Not Punishment Collaborative (SNaPCo) builds safety within the Greater Atlanta community, investing in their collective embodied leadership and building political power.
- Reuniting of African Descendants (ROAR) invests in equity, collective growth, and healing for LGBTQIA+/SGL people of African Descendants. ROAD's work is rooted in ending genocide against Trans and Queer people of African Descendants.
- Black and Pink National works to abolish the criminal punishment system and liberate LGBTQIA2S+ people and people living with HIV/AIDS who are affected by that system through advocacy, support, and organizing.

Appendix D. Literature documenting the safety of gender-affirming care

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De Vries, A. L., Steensma, T. D., Doreleijers, T. A., & Cohen-Kettenis, P. T. (2011). Puberty suppression in adolescents with gender identity disorder: A prospective follow-up study. *The Journal of Sexual Medicine*, 8(8), 2276-2283.

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Kuper, L. E., Stewart, S., Preston, S., Lau, M., & Lopez, X. (2020). Body dissatisfaction and mental health outcomes of youth on gender-affirming hormone therapy. *Pediatrics*, 145(4).

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Tordoff, D. M., Wanta, J. W., Collin, A., Stephney, C., Inwards-Breland, D. J., Ahrens, K. (2022) Mental Health Outcomes in Transgender and Nonbinary Youths Receiving Gender-Affirming Care. *JAMA Network Open*, 5(2), e220978.

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Appendix E. Sample letters informing family and friends

Family & Friends Sample Letters

PLEASE NOTE: These are sample letters only that have been shared with Gender Spectrum by families. They are not intended to serve as templates that we suggest any family use, but instead to give a sense of the various issues that some parents have addressed in similar situations. You may choose to take some ideas from these letters or not, depending upon whether they speak to your family's situation.

SAMPLE LETTER 1

Dear Family and Friends, We have had some recent changes in our lives that we would like to share with you. Our four year, 10 month-old son, _____, who, from an early age, has shown signs of being gender-nonconforming, has been verbalizing to us for over a year such statements as "I am a girl inside and out," "I don't want to be a girl, I am a girl," "I am a girl forever," "Please don't call me _____ anymore, call me _____ because that is a girl's name," "I am your sister, not your brother," "I am a big girl, not a big boy", "Can't you just say I have a girl's voice every day?", "I feel dead in boy's clothes. Please give all my boy clothes away," "Can't I just be a girl and not tell people I have a boy pee pee?" His gender comments continued daily and increased in both frequency and intensity to the point where we sought out professional therapy, consultation, and an evaluation for him with a prominent Psychiatrist, Licensed Clinical Social Worker, and one of the leading national gender experts, _____, a Developmental and Clinical Psychologist.

Through much study, exploration, and consultation with these mental health professionals on gender non-conforming children and extensive reading on recent gender research, we have determined that _____ is a transgender child. We are sure that this may be confusing for some of you. It certainly was for us at the beginning and caused us many tears and sleepless nights, but what we have learned is that most children realize their "true gender" between 3 to 5 years of age, as has been the case with many families we have met who have had similar journeys with their children. We have also learned that our child's transgender identity is not a result of our parenting style, family structure, or environmental factors and that there is nothing anyone can do to change a child's gender identity. This is not just a phase for _____ or something that he will outgrow.

_____ and I are now allowing _____ to live full-time as a girl named _____, a name she selected. We request that you welcome _____ fully as part of our family. Please only refer to her by a female pronoun and by her name _____. Despite any personal feelings or religious ideation you may have about our decision, we expect that you will be fully respectful of ____.

Our goals for ____ are the same as when we brought her home at 3 weeks old: to be happy, feel good about herself, to find what she is good at, and to know that she is loved unconditionally. These goals have not changed. We are aware of the uphill journey ahead for our daughter and our entire family but the alternative of denying who she is, puts her at a high risk of depression, anxiety, suicide, sexual acting out, and substance abuse, which are not options for us. ____ has such a positive, loving, and caring spirit and since she has been allowed to be who she was born to be, we have seen a much happier child. Our

love and support for ____ is complete. We hope yours will be too since family and friends are so important to us and it will be to ____ as she goes through this transition. She needs to know, without a shadow of a doubt, that she is loved as ____, just as she was as ____.

If you would like to learn more about gender non-conforming or transgendered children some recommended books are “The Transgendered Child” by Stephanie Brill and Rachel Pepper and “Gender Born, Gender Made – Raising Healthy Gender-Nonconforming Children” by Dr. Diane Ehrensaft, or national gender educational websites such as genderspectrum.org.

SAMPLE LETTER 2

Hi everyone,

We have some changes we want to share with our friends.

The biggest news is that ____ has decided to start living as a boy and has changed her name to _____. The pronouns, he, him, and his now apply. How did this come about? Many of you who have watched ____ grow up may have noticed her change from a girly-girl in preschool to an uber tomboy. Since the beginning of third grade she has been wearing only boy's clothes and haircuts. She often would say she wanted to be a boy, and being good feminists, we'd say “Girls can do anything that boys can!” but that wasn't what she was talking about. We started letting her be a boy on vacations and in situations where she didn't know anyone, and she always passed. She was at her happiest when she was taken for a boy. By the beginning of fourth grade, we decided this wasn't a phase and that it was time for her to meet with a feelings doctor who knew a lot about gender nonconforming kids.

The turning point came this past March. When ____ realized that she would be going to a new school where she wouldn't know anyone, she revealed her deepest wish: to start middle school as boy. While I knew this choice was a possibility, I was still shocked. And, suddenly there were lots of decisions to be made quickly. One was about middle school: in a few weeks, ____ will be starting a private school where there are several other transgender kids.

Signs of approaching puberty led us to a pediatric endocrinologist who has started ____ on Lupron Depot. This shot, given monthly, is commonly called a “puberty blocker” and has been used since the '70s to halt precocious puberty in really young children. For ____ this means his body will stay in its child stage until he goes off the medication. He'll continue to grow, but while he's on the drug, he won't have a growth spurt or “develop.” ____ IS NOT taking male hormones; Lupron is a drug that will buy him many years while we try to figure out the next steps. If he decides to remain a girl, he can go off the drug, and puberty will pick up where it left off.

_____ is fine, confident, and calm. He says he has a boy's soul in a girl's body. On the other hand, I'm living with a lot of uncertainty. _____ is just 11, and this seems way too young to be making decisions that will affect him forever. I love him so much, and it's really hard to know if I'm making the right choices. I've done a lot of reading, met with therapists, friends and family, and have gone to support groups.

I'm learning a lot and am facing my own internal prejudices. What is certain is that _____ is already so much happier being able to live as a boy. Spending a few years at an awesome and accepting middle school and taking medication where the effects are completely reversible seem like reasonable choices for now.

I decided that I needed to send a mass mailing just to catch everyone up. You are families from my three baby groups, people who attended my baby showers, preschool friends, neighbors, current and former coworkers, teachers, and of course, family. You have or will ask me about my child, and it's difficult to start a long conversation about a heavy subject when I bump into you all at Whole Foods, middle school information sessions, or the copy machine. I have _____'s permission to share this information with you, but it is private and should not be passed on to people who never knew _____. He also does not want his former or future school friends to know, so please don't share this information with his school friends or their families. If you have any questions or concerns, you're welcome to email or call me.

I'm hoping you will talk to your partners and kids, and that you will be allies we can count on during this journey. And, the next time we run into you, please be sure to say hi to ____!
Ah... parenthood.

SAMPLE LETTER 3

To those of you who have spent anytime around us and know _____, I am sure it is obvious that he, like all kids, has his own set of unique and wonderful - as well as obnoxious - qualities. For those of you who are new to our "extended" family, consider this an introduction!

_____ is basically a typical 7 year old; he is fascinated with learning, yearning to read, can repeat all the trivia on the latest animal he has seen, loves coloring and drawing, recess is his favorite subject in school and is generally just a happy cheerful kid. He can be wild and unruly, loves to rough house, can be squirrely, always in motion and at times, overly aggressive. He also is super sweet and sometimes overly affectionate. He is quite emotional, although working on being more even keel and patient.

_____ is also all about "typical" girl things: Playing Mermaids, Barbies, Fairies and every iteration of Disney Princess are his favorite pastimes. Pink ("light"!) and purple have been his favorite colors until recently when he adopted "sea blue". He prefers to play with girls rather than boys, and identifies with everything feminine. He can create quite artistic outfits complete with boas and high heels and is fond of modeling and performing for whoever will watch. He prefers to wear a nightgown or his satin pajamas to bed, chose two bikinis for this summer's swim season, and chooses girls capris, skirts, leggings and tunics or his sparkly butterfly shirts to wear to school and

out to play. He also enjoys some more “typical” boy things - to climb and get dirty, look for bugs and worms, ride his scooter, play monsters, lego batman and boss his little brother around. Since ____ has shown all of these behaviors consistently since he was two, ____ and I have done our best to support him just as he is, to talk to him about his feelings, make sure he is comfortable in his own skin, and to educate ourselves. We have done a lot of research and participate in a local support group as well as a national organization that links families like ours together.

Right now ____ is figuring out what feels right – she has expressed a desire for her teacher and kids at school to use a feminine pronoun. ____ has said that it doesn’t matter what we use at home (?) although ____ often corrects me when I use ‘he’. He or she - describes himself and a girl-boy and when asked may say, “I am a boy who likes girl things” – or “I a girl in my heart” - or he may answer ‘boy’ as he sometimes sees that as the “correct” answer. When he was three he would often assert or ask, “I am a girl, right mommy?” While ____ seems resigned to his biologic gender – she feels and acts like a girl ninety-five percent of the time.

____’s 5 year old brother (who worships the ground ____ walks on) insists on saying “my brother” - and ____ is fine with that. People who have known us forever love and respect ____ but almost always use “he” and ____ has no problem. People who don’t know us always assume ____ is a girl and use she and ____ is absolutely in lock-step with that too. There is a lot of information about our situation and a LOT of kids, boys (and girls) like ____ who have traits of the opposite gender. The “scientific” terms for how ____ acts are gender variant, gender fluid or gender non-conforming. We know from our outreach that many kids like ____ have considerably more stress about the dichotomy between their anatomy and their internal gender. And there are many kids, unlike ____, who are gender different but only slightly so (ie feel no need to dress or wear hair as the opposite gender). We feel very fortunate that, at least right now, he seems a happy and well adjusted child without a lot of angst or worries, who gets to express himself in play and life just as it feels right to him (like all of us gender-typical people do all the time!). He wears whatever he wants to school, play or family events and his play choices are his play choices. We know/expect that things may change as he ages – and is more concerned with the acceptance of his peers – but our hope is that he will never have to hide who he is in order to be safe and feel loved.

Here are some of the facts:

1. Research indicates that gender identity and behavior is hard wired in the brain before or soon after birth and that biologic factors (hormone levels etc) cement gender identity during the first 6-12 months of life. ____’s attraction to girl things, her need to dress like a girl in order to express how she feels inside and to play with girl things - are as normal to her & as much a part of her inner being as being left-handed or having perfect pitch is to some people. All of ____’s behaviors –boyish ones and girlish ones, come from within. They are not choices he or she is making. They are part of her just like his beautiful eyelashes and her sensitive soul.
2. This is not something that as parents, we can “fix”. Some might argue that we “encourage” it, so it continues. Some might say that if we didn’t “indulge” his desires then he would forget about them (out of sight out of mind). They would be totally wrong. ____ chooses to wear a dress/skirt or sparkly tight leggings when, inside she feels like she wants to be himself – he doesn’t wear a dress to get attention – he does it because he wants to be seen as the “real” him. When we have a dress up affair – his immediate desire is for a dressy outfit and high heels - because that’s what dressy means to her. If this is not intuitive to you – those of you that have boys, are married to boys or are a typical boy – ask yourself if that boy would ever put on a dress or heels just to be silly or get attention? I assume the answer is no. ____ does sometimes seek attention when she

is in an outfit she thinks is especially pretty - but it is because she wants to show off her true self, not because she can't get it other ways.

3. This is not something ____ is going to grow out of. None of us know what kind of adult he will be, but this is not a "phase". She may become more "boyish" or more "girlish" or go back and forth between the two his whole life. And even though he is only 5+ it already creates some stress for him. She is well aware that other boys don't play like he does - for the most part, so far, she doesn't care what anyone thinks, she just revels in the joy she feels when she can be the girl part of himself.

But we know from other parents, that things get decidedly more difficult as the kids get

4. older. Boys like ____ learn quickly to "hide" their true feelings so as to fit in - and they often struggle and find it very stressful to have to suppress who they really are all day long at school which can result in behavior problems, etc. We are working with her to get comfortable talking about feelings and reading a lot about bullying and how to deal with bullies and other stories about individuality- we talk and read a lot about tolerance of differences and about how it is not a person's "fault" that they are different but the fault of others when they are judgmental. Nonetheless, we know the road ahead will likely not be easy.

No matter how open-minded a person you think you are or how much you love someone - seeing a boy act and dress like a girl is awkward at best and basically a hard thing to accept easily, at

5. first. I can tell you though, that awkwardness disappears with time - he is just ____, regardless of what he is wearing. We are all so "norm" socialized that it makes even the best of us feel "funny" to see him in a dress with Snow White underwear. [BTW- there are plenty of girls who are gender fluid also, and experience discrimination, bullying etc - however, at this young age our society and socialization make those girls who act and dress like boys blend in better and they are way easier to accept than boys who act like girls.]

Seven-eight year olds are not sexual beings. Plain and simple. So this issue for us - from now to puberty at least - is not about what ____'s life will be like as an adult but just about what it is like to be different. Somehow people just can't help themselves - stereotypical homophobic

6. feelings (even with the best intentions) just seem to come up when presented with a gender variant kid. From what limited research there is out there, we know that a small percentage of these kids are truly transgender and will go on to physically change genders as teens or adults. A percentage (higher than in a control group) will be gay and some will be heterosexual. But the point I am making is that who ____ becomes in 10 years, gender-wise or sexual preference-wise, is SO not the issue. The issue is that she needs support and encouragement to love himself as she is now - a boy that feels like - and wishes he were - a girl, most of the time.

To ____, ____ and I - it is just ____ . But we will be the first to admit that we struggle with it sometimes- not because we are ashamed of him in any way but because it makes us worry for his safety: we stick out, people stare and comment - even for someone like me, the natural instinct is to blend in, no one likes to be the one everyone is whispering about! We are constantly having to weigh the importance of validating his feelings about who he is {that is, not stifling his need to do girl things} and doing everything possible to make sure that he doesn't begin to think there is something "wrong" with him - while protecting his self esteem from the world at large.

We are providing this letter because, if it were you having issues in your family that were as important as this, we would want to understand what those issues were and be able to be informed and supportive. Along those lines, there is a lot more information out there about gender variance

than I have summarized here and if you are interested we are happy to share. Below there are a couple articles that you might find of interest and we can share other resources if you want as well. We know for a fact that if we had said nothing at all, you would accept and love ____ just as he is. Now that we have said something, I also know that you will support our decisions to let him express himself freely and decide for himself what to wear and how to present himself: that you will love, play, discipline and enjoy him in every way possible and encourage him to be the happiest and best person he is capable of being. He should not get any extra slack for being different – he needs to learn from each of you how to behave like a good person and that is what we hope you will teach him.

These are the things we try to do to support ____ and to help him build a strong character and sense of self: We hope you, our family and friends, will help us in doing everything possible to see that he aspires to great things. For now we just want our home and our friends' and families' homes to be his "safe" places where he can be himself, whoever that is at the moment.

- Love him for who she is
- Validate him – whenever it comes up or there is conversation, let him know that you know it to be true that there is more than one way to be a boy or a girl, that you imagine it is hard that some kids don't get how you feel, etc.
- Encourage his individuality (you look beautiful in that dress!) and avoid stereotypical comments (boys don't skip!)
- Acknowledge and celebrate difference – he is different and knows it and there is nothing to be ashamed of – when he wants to talk about it, talk about it; give examples of how you are different or how being different can be great!
- Try and deal with your own demons – recognize your own internal issues about gender and how they play in to your feelings about ____.
- Be ____'s advocate – if you are with him in a situation where something is awkward – someone is teasing or judgmental – speak up for him, and help him speak up for himself ("I am a boy who likes mermaids – what's wrong with that?") (Lots of boys like pink!) (I am a girl and I love blue!)
- No victim blaming -- ____ is not responsible for other people's intolerance – neither he nor we, his family/friends, have to 'accept' that people are going to be judgmental nor does he/we have to constantly be hiding who he is in order to fit in - when people tease or bully or are unaccepting, they are at fault.
- Think about tolerance in other things that you do – making the world OK for ____ means we all have to work on squashing eons of ingrained stereotypes; think of ways to line up or sort people other than "boys in one line, girls in another", advocate for others who are different and struggling, examine the world around you and step up/speak out when someone is treated unfairly or unjustly because they are not like you and don't blend in.

In spite of this horribly lengthy missive, in the grand scheme of things, ____'s gender variance is just an attribute of him for us to celebrate and learn from. We are so lucky to have two healthy and happy kids – relative to the horrific things that other people have to endure with their kids all over the world, this is nothing.

And lastly, being our family and friends, I have no doubt that everyone will have an opinion to share – I hope so! And I encourage you to ask me or ____ anything you want and to offer whatever suggestions you have. This parenting thing is a conundrum at best and we can use a lot of help! The one thing that we ask is that you all respect our decision to support ____ unequivocally and if you have an issue with that decision or you don't agree with it, you take that up with us – not him.

Currently we are approaching the world without asking or directing ____ to just “blend in”. While there are many ‘pro’ arguments for the ‘blend in’ strategy, (the biggest being to protect him from teasing) it goes against two basic things we believe: First, asking ____ to dress like a boy – to cover up who she is inside – gives her the message that she needs to hide who she is (regardless of how we explain it). In essence that who she is inside is something to be embarrassed about.

Second, while the path may be more rocky if she is overt about it, at the end of the day he expresses himself differently than other boys regardless of what she is wearing. So he will stand out no matter what. While I would not begin to compare racial discrimination with the intolerance people seem to have for a boy in a dress, I still believe that by standing up for what we believe (society should be tolerant of all differences) and encouraging ____ to be proud of herself just as he is, she will grow up to be a stronger and more self confident person, and we might even help make things better for the kids coming behind us.

____ and I have different levels of comfort with it, but for right now he is growing his hair and chooses his clothes (at school and everywhere we go) and is very often mistaken for a girl (which he loves). So as long as he is behaving as any nice child should, we don’t expect him to take grief in any form, from anyone in our inner circle.

Lots of Love, PARENTS

SAMPLE LETTER 4

____ and I are writing this letter in advocacy for our family. We have thought/struggled long and hard as to how to broach the subject of our family, but feel that an honest, heartfelt letter is best. As you know, ____ was born biologically male, with a penis. At the age of two, ____ began to verbalize conflict in the way he identified. At first it was subtle gestures. There was a gravitation or preference for stereotypical female toys and clothes. As ____ grew, so did the feelings of “being born in the wrong body”. Imagine your little boy lying in bed at night praying to God to please let him wake up the next day a girl and to correct the mistake HE had made at birth. With every coin thrown into a wishing pond ____ would “Wish to be a girl”. As a parent, it has been so painful to watch your child cry about “not being able to be themselves”.

We decided it was time to seek professional help. I had no idea why ____ was convinced it was better to be a girl. Surely someone could tell us/me what I/we were doing wrong. And it must be something I was doing, or failing to do, maybe it was because of ____’s early childhood trauma. My first call for help was to my therapist. When I described ____ and our situation, the therapist said, “Don’t worry about a thing. Your child has a great imagination. Lots of bright, creative kids try out different roles at this age he’ll grow out of it.”

With caution, I took that advice, and waited for ____ to grow out of it. For the next couple of years, I supported my child’s wish to play with girl toys and have gender neutral or girl clothing. I no longer made ____ unhappy by insisting, “You’re a Boy.” Instead I said, “You have a boy’s body, though Mommy and Daddy know you feel like a girl.”

By age five, ____ was more expressive about “being born in the wrong body.” School brought even more challenges. ____ would come home crying because the teacher made ____ be the male pilgrim in a class project as opposed to being the female. ____ did not understand why everyone kept on

insisting she is a boy. The possibility that our child might be transgender crossed my mind, but seemed so rare as to be extremely unlikely. The most difficult thing for me at that time was trying to keep all the options open--the ambiguity of not knowing for sure where ____ belonged on the gender spectrum. As a mother, I hoped my child would learn that he was unique and that ____ had the right to define the kind of person ____ would become. As a mother, my greatest concern was that my child feel wholly accepted and loved.

____ and I searched for information about how and why a child's sense of gender can contradict his or her biological sex. We consulted our pediatrician, therapists, psychiatrists and specialists in the field of Gender Identity. I was often accused of "encouraging" ____'s feminine behavior, but I couldn't have stopped it if I tried. To me, it didn't seem right to force a child to like things he didn't like, or dress in a way that made him uncomfortable, or play in a way that wasn't fun, just to please everyone else. To me, ____ had a little girl trapped inside, and letting her out made him happy, and seeing him happy made me happy, no matter what it took. Doesn't every child deserve this? I always believed that each child is born with a spirit, a reason to be. It was my greatest responsibility as a parent to nurture that spirit and help him become who he was meant to be, not who I/society wanted him to be. But how do you, as a mom, allow your child to express behaviors that are appalling to society. My dilemma was clear, and so was my mission. I needed to create an environment where ____ could be happy and others could accept him. But how?

As you know, regardless of my efforts with the schools, support groups and community, people can be mean, even cruel and hurtful to a child. In October, ____ was suicidal. ____ threatened, on a regular basis, end his life. I spent my days crying, heartbroken that my child was so miserable and sad that he would choose death over life. After an assessment with the pediatric psychiatric specialist, ____ was hospitalized. We discovered that ____ was so overly anguished about the huge rejection he experienced at school, home, the community etc. that he would rather die than to not be able live as "____"

At that point, ____ and I made the commitment to support our children fully. To allow them to express their true identities and to be loved and accepted unconditionally. We committed to being the best parents for ____ and ____ by showing them we love them, regardless. We have learned, from our specialists and doctors that ____ has non-conforming gender identity; he is Transgendered. Putting it into laymen's terms, we have been told that while not much is known about this condition, it is believed to be caused when the child's brain develops like that of the opposite gender, in this case female. This development takes place in utero; a signal from the fetus, depending on the biologic gender, tells the mother's body to produce estrogen or to masculinize that estrogen into a form of testosterone. The hormones produced then wash the brain causing a part of the hypothalamus to develop differently in men than in women. It is believed that something in the hormonal wash happens where the brain develops resembling that of the opposite sex as opposed to that of the biologic sex. That is why ____ felt like a girl inside, because, chances are, that his/her brain was developed as such. The good news was there was an explanation. The hard news was that the only "options" for such a condition was to allow an individual to express as the identified gender or deny that and allow for the child to suffer.

So, here we are. ____ is "expressing" herself in her identified gender. ____ is a "girl" with a penis. We have begun using the female pronouns and ____ is enrolled in school as "She". And my goodness what a change. We have watched our child's spirit come to life. It was like witnessing the metamorphosis a caterpillar makes to become a beautiful butterfly. The piercing of ____'s ears was part of the walk into our new acceptance. As her outward appearance started to resemble who "she" felt like inside, her academics and social skills have improved as well.



We understand that this will take you some time getting used to, and we will be happy to talk over with you any questions or thoughts you may have about any of this. Yes, we are facing a difficult situation, but the alternative would be worse. We also understand that you may question the resolution that we have chosen for our family, but in our many hours and hours of research, meetings with professionals and consulting families who face similar challenges, we are doing the best for ____.

So, what we are asking from you is compassion and understanding of something you may never understand. I'm asking you to look into the eyes of your own children and see their innocent desire to just be loved, accepted, adored, and happy; just like ____.

Please don't treat us like heathens or lepers, and we will do the same with you. We are available to provide you with information and resources on Gender Identity Disorder, Transgender and gender variance. I have purchased books that you can borrow for parents and young children. Our beautiful children do not embarrass us and we hope you can feel the same way. We ask that you support ____; to accept her wholeheartedly as she is. We will not ask ____ to become someone she is not, we will not force her to wear boys clothing any more. She is free to be herself.

I ask that if you feel that you cannot accept ____ as herself, to please respect our desires to keep her healthy and safe. Although you may not agree with us or how we are raising our children, please respect our decisions as parents. We must stand behind our children 100%. If that means not taking part in certain events, we understand, but we will not force ____ to feel unaccepted.

Our children have taught us more in nine years than I learned in the entire 26 years before ____ was born. ____ has taught us the true meaning of tolerance, perseverance and patience. She has taught me to take nothing for granted and not to be scared of the "What If's" in life. These are life's challenges and adventures which, when celebrated rather than feared, make our life experience whole.

With much love,
Parents

Appendix F. The rights of students



Fact Sheet on U.S. Department of Education Policy Letter on Transgender Students

WHAT THE POLICY LETTER DOES

The policy letter explains how schools are required to treat transgender students under Title IX, the federal law prohibiting sex discrimination in education. It lays out the principles that the Department of Education will follow when it enforces Title IX, which should be given great weight by courts in interpreting the law.

Under this policy, schools are required to treat transgender students according to their gender identity, including by making sure that transgender students have access to restrooms and locker rooms that match their gender identity, using the right names and pronouns for transgender students, and letting them dress in accordance with their gender.

SCHOOLS COVERED BY THE POLICY

The guidance applies to all K-12 schools, preschools, colleges and universities that get federal funding. A school receives federal funding if it gets any federal grants, contracts or loans, or if any of its students get financial aid from the federal government. That includes every public school across the country—including public charter schools—and most private colleges.

RESTROOMS AND LOCKER ROOMS

The guidance makes clear that students have a right to use the restrooms and locker rooms that match their gender identity. Schools can't force a transgender student to use facilities that don't match their gender identity or segregate them into separate facilities, like a single-user restroom or an isolated area of locker room. Transgender and non-transgender students who want additional privacy in a restroom or locker room for any reason can ask their school an alternative. For example, a school can let a student who requests it use a single-user restroom or add curtains or stalls in locker rooms to give everyone more private options.

NAMES, PRONOUNS, AND STUDENT RECORDS

Students have the right to be addressed by the names and pronouns that they use. That's true even if they haven't legally changed their name or gender. If teachers and school officials refuse to use the right name and pronouns, they may be breaking the law. Schools also must take reasonable steps to protect transgender students' privacy, including regarding their birth name. For example, the Department of Education points to state and local policies that allow students to list a chosen name other than their legal name in school records and use this name for most school purposes, while keeping a legal name the student does not use in a segregated, confidential file.

DRESS CODES

Schools can require students to follow a dress code. However, students have the right to dress in a way that matches their gender identity. So, for example, if a transgender girl wears a dress to school, and the school code permits other girls to wear dresses just like hers, the school can't claim that she's not following the dress code just because they believe she should be wearing boys' clothes. In addition, the Department of Education's letter is clear that a student's appearance should not have to "conform to stereotypical notions of masculinity or femininity."

It is also important to understand that a school also can't enforce the dress code more strictly against a transgender or gender-nonconforming student than they do against other students. For example, if the school dress code officially doesn't allow students to wear bracelets, but girls wear bracelets to school all the time without getting in trouble, a school can't single out a transgender girl who comes to school wearing a bracelet and discipline her but not other girls.

RESPECTING STUDENTS' GENDER IDENTITIES

The Department of Education's policy recognizes that students should be treated according to their gender identity. Schools should not require transgender students to change the gender marker on IDs or show evidence of medical treatment in order to be treated respectfully.

NON-BINARY OR GENDERQUEER STUDENTS

Title IX protects not only transgender boys and girls, but also students whose genders aren't entirely male or female, sometimes called non-binary or genderqueer students. While the Department of Education guidance does not specifically state how it applies to these students, other federal, state, and local policies recognize that these student should determine which locker rooms and restrooms, pronouns, and dress code standards are most appropriate for them in accordance with their gender identity.

CONFIDENTIALITY OF PERSONAL INFORMATION

Students' right to privacy about their personal information is protected by federal law. Revealing a student's transgender status, birth name, sex assigned at birth, or medical history to classmates, parents, teachers and others may violate the federal educational privacy law, known as FERPA. While it's not always possible to prevent other people from finding out about a student's transgender status, schools must make every effort to keep that information private unless the student has given them permission to share it. Transgender students have a right to decide who finds out about their transgender status, unless there is a legitimate educational reason for sharing the information. This reason cannot simply be based on others' potential discomfort. Even if a student discloses information about their transgender status to some people or in some settings, this does not authorize the school to disclose it to others.

While many transgender students have the support of their families, some do not have supportive families, and inadvertent disclosures could even put the student in danger. Parents have a right to request information in a student's official school records. Absent such a request, the Department of Education provides examples of state and local policies that call for staff to work together with transgender students on a case-by-case basis to determine how the school should communicate with parents, teachers and peers, and how much information the student is comfortable sharing with those people.

STUDENT HEALTH PLANS

The policy letter does not discuss insurance coverage offered by schools, colleges, or universities. However, Affordable Care Act prohibits discrimination based on transgender status in many student health plans. This section prohibits most insurance companies from discriminating against transgender students—including by having policies that exclude transition-related care from coverage.

ANTI-TRANS STATE LAWS

Title IX overrides state laws that conflict with it. That means that laws like North Carolina's HB 2, which tries to force trans students into restrooms that don't match their gender, are not enforceable. Schools that refuse to follow Title IX can face serious consequences from the federal government, even if they are relying on a contrary state law. HB 2 is currently being challenged in court, including in a lawsuit by the Department of Justice.

ENFORCING TRANSGENDER STUDENTS' RIGHTS

If schools don't follow the Title IX requirements in this policy, the Department of Education can enforce it in several ways. The Department's Office for Civil Rights, the office that is responsible for making sure that schools follow nondiscrimination requirements, investigates complaints made by students and parents. The Department of Education can also sue schools that discriminate against transgender students and seek to deny them federal funding.

If your school is not following the Department of Education's policy, make sure that your principal or school district staff are aware of it, and explain why it's important that they follow it. If your school still refuses to follow what the Department of Education says, or does something else that discriminates against a trans or gender non-conforming student, you can file a complaint with the Department of Education's Office of Civil Rights. To learn how you can file a complaint, check out NCTE's guide, [Transgender and Gender Non-Conforming Students: Your Rights at School](#). You don't need a lawyer to file a complaint, but you might find it useful to reach out to an LGBT-friendly lawyer for help.

Does the guidance make exceptions for any schools?

Some religious schools can ask for an exemption under Title IX if there is something the law requires them to do something that conflicts with their religious beliefs. If they get an

exemption, it is only for the specific action that conflicts with their religious beliefs—not for other aspects of Title IX. Also, if a school gets an exemption under Title IX, that doesn't mean that they have an exemption under any other federal law that may protect transgender students, including laws protecting student privacy and prohibiting discrimination in health plans, employment, or housing.

Single-sex schools also get a limited exception. A small number of elementary and secondary schools and private undergraduate colleges may choose who to admit, and they are allowed but not required to admit students according to their gender identity. Once a person is admitted, though, single-sex schools are not allowed to discriminate against them, no matter what gender they identify with.

Appendix G. Gender support plan for school

– Confidential – Gender Support Plan

The purpose of this document is to create shared understandings of how the student's authentic gender will be accounted for and supported at school. School staff, caregivers (if appropriate) and the student should work together to develop the document. Ideally, each will spend time completing the sections and then come together to review them and confirm shared agreements. Use the action planning section at the end of the document to track items requiring any follow-up. Please note that there is a separate document to plan for a student formally communicating a change in their gender status at school.

School/District _____ Today's Date _____
 Name Student Uses: _____ Pronouns Student Uses: _____
 Name on Birth Certificate: _____ Sex Assigned at Birth _____
 Date of Birth _____ Student's Grade Level _____
 Sibling(s)/Grade(s) _____ / _____ / _____
 Parent(s), Guardian(s), or Caregiver(s) /relation to student
 _____ / _____ / _____
 _____ / _____ / _____
 Meeting participants: _____

PARENT/GUARDIAN INVOLVEMENT

Guardian(s) aware of student's gender status? Yes/No Support Level: (none) 0 1 2 3 4 5 6 7 8 9 10 (High)

If support level is low what considerations must be accounted for in implementing this plan? _____

PRIVACY: CONFIDENTIALITY AND DISCLOSURE

How public or private will information about this student's gender be (check all that apply)?

____ District staff will be aware (Superintendent, Student Support Services, District Psychologist, etc.)

Specify the adult staff members:

____ Site level leadership/administration will know (Principal, head of school, counselor, etc.)

Specify the adult staff members:

____ Teachers and/or other school staff will know

Specify the adult staff members:

____ Student will not be openly "out," but some students are aware of the student's gender

Specify the students:

____ Student is open with others (adults and peers) about gender

____ Other – describe: _____

If the student has asserted a degree of privacy, what steps will be taken if that privacy is compromised, or is believed to have been compromised? _____

How will a teacher/staff member respond to any questions about the student's gender from:

Other students? _____

Staff members? _____

Parents/community? _____

What are some ways that the student will respond to questions from any of the above (i.e., "Why is David using a new name?", "Why is David using the girls' bathroom now?", etc.)

STUDENT SAFETY

Who will be the student's "go to adults" on campus? _____

If these people aren't available, what should student do? _____

What, if any, will be the process for periodically checking in with the student and/or family? _____

What are expectations in the event the student is feeling unsafe and how will student signal their need for help:

During class _____

On the yard _____

In the halls _____

Other _____

What should the student's parents do if they are concerned about how others are treating their young person at school? _____

Other safety concerns/questions: _____

PRIVACY: NAMES, PRONOUNS AND STUDENT RECORDS

Name to be used when referring to the student Name/gender marker as listed on Pronouns _____

student's identity documents Name/gender marker entered into the Student Information _____

System If needed, is there a process/form for changing the student's name/gender marker in _____

the SIS? _____

How is it accessed/used? _____

Name/gender marker entered into the student's Health Record _____

If needed, is there a process/form for changing the student's name/gender marker in the Health Record? _____

If not, how will confidentiality be kept? _____

Who will be responsible for ensuring these adjustments to the student's records are made? _____

If the student's name cannot be modified in the above systems, how will the student's privacy be accounted for and maintained in the following situations or contexts:

Reporting data to the state/other entities _____

During registration/enrollment _____

Student cumulative file _____

IEPs/Other Services _____

Seating charts/Taking attendance _____

With substitute teachers _____

Teacher grade book(s) _____

Standardized tests _____

School photos _____

Student ID/library cards _____

Lunch lines/Free Lunch Card _____

Yearbook _____

Assignment of IT accounts/email address _____

Distribution of texts or other school supplies _____

After-school programs _____

Official school-home communication _____

Unofficial school-home communication (PTA/other) _____

Outside district personnel or providers _____

Summons to office _____

PA announcements _____

Posted lists _____

How will instances be handled in which the incorrect name or pronoun are used by staff members? _____

By students? _____

If the student's guardians are not aware and/or supportive of the student's gender status, how will school-home communications be handled, including when individual staff members need to contact guardians?

What are some other ways the school needs to anticipate the student's privacy being compromised? How will these be handled?

USE OF FACILITIES

Student will use the following bathroom(s) on campus _____

Student will change clothes in the following place(s) _____

If student/parent have questions/concerns about facilities, who should they contact? _____

What are the expectations regarding the use of facilities for any class trips? _____

What are the expectations regarding rooming for any overnight trips? _____

Are there any questions or concerns about the student's access to facilities? _____

EXTRA CURRICULAR ACTIVITIES

In what extra-curricular programs or activities will the student be participating (sports, theater, clubs, etc.)? _____

What steps will be necessary for supporting the student in these spaces? _____

Does the student participate in an after-school program? _____

What steps will be necessary for supporting the student in these spaces? _____

Are there any other questions or concerns about extra-curricular activities? _____

OTHER CONSIDERATIONS

Does the student have any sibling(s) at school? _____ Factors to be considered regarding sibling's needs? _____

Does the school have a dress code? _____ How will this be handled? _____

Are there lessons, content, traditions or other activities coming up this year to consider (growth and development, swim unit, social justice units, name projects, dance instruction, Pride events, school dances, etc.)? _____

Are there any specific social dynamics with other students, families or staff members that need to be discussed or accounted for? _____

Does the student use school- or district-provided transportation services? If so, how will the student's gender be accounted for? _____

If required to be searched by school security staff, what needs to be considered regarding the sex/gender of the staff conducting the search? _____

Are there any other questions, concerns or issues to discuss? _____

NEXT STEPS: FILING, SUPPORT PLAN COMMUNICATION, REVIEW AND REVISION

Who will be the point(s) of contact on campus for anything related to updating or concerns about this GSP? _____

Where is this form going to be filed? _____

Is this student going to be transitioning to a new school the end of the school year? ____ Yes ____ No

If "Yes" who will be responsible for connecting with the new institution? _____

Based on the adjustments detailed above, who are all of the individuals that need to be informed about any changes (use of a different name, access to facilities, changes in student records, etc.) _____

Who will be responsible for making sure these individuals are informed? _____

What are specific follow-ups or action items emerging from this meeting and who is responsible for them?

Action Item	Who?	When?

How will this plan be monitored over time? _____

What will be the process should the student, family, or school wish to revisit any aspects of the plan (or seek additions to the plan)? _____

Date/Time of next meeting or check-in _____ Location _____

Student Support Plan

This page to be filled out and given to the student

Know your Rights!

You have the right to:

- Be referred to by your authentic name and pronoun
- Use the locker room and restroom that corresponds to your gender identity
- Attend a safe school without harassment, bullying and intimidation
- Expect a reasonable level of privacy

My go-to People for Support at my School and District

School Safe Person and Contact Info _____

Additional School Safe Person and Contact Info _____

District Support Person:

Additional District Support Persons:

Trevor Hotline: Need help? Call 1-866-488-7386 or text

To report bullying: _____

Additional school support: You have many other adults on this campus who are here to support you. Individuals who can help you include:

Name	Role	Location	Contact info	Notes

Trevor Project: thetrevorproject.org Information and support to LGBTQ young people 24 hours a day, 7 days a week all year. Text 'START' to 678-678 (Standard text messaging rates may apply). Or call to speak with someone at 1-866-488-7386.

Gender Spectrum Support Groups:

- Teen Support Group (17 – 18 years old): <https://www.tfaforms.com/4950662>
- Teen Support Group (13 – 16 years old): <https://www.tfaforms.com/4873538>
- Pre-teen Group:
<https://docs.google.com/forms/d/e/1FAIpQLSdDuVrhMuDADIVnG9oCoF9xICIGdmcznBA-DeoNPEHUTgPR5w/viewform>

Transgender Law Center: www.transgenderlawcenter.org For information about legal support and advocacy.

Your school's Gender-Sexuality Alliance Club: Many secondary schools have student led clubs that can provide peer support. Check out meeting times/dates wherever other clubs are listed or ask your counselor for more information.

Resources used to create this booklet

Some of the information contained in this guide has been adapted from the following websites and publications:

- [Achieving Permanency for LGBTQ+ youth \(Kinnect\)](#)
- [Affirm.Me resources](#)
- [DCF's LGBTQIA2S+ Resource Hub](#)
- [Healthy Children.org](#)
- [HRC All Children All Families](#)
- [Gender Spectrum](#)
- [Learning for Justice](#)
- [National SOGIE Center](#)
- [Trevor Project](#)
- [Youth Acceptance Project](#)
- [PFLAG International](#)
- [Planned Parenthood](#)
- [TrevorSpace—An affirming international community for LGBTQ young people ages 13-24](#)
- [from:
https://transfamilies.org/understanding-transitions/](#)

Barz, E., & Owen, L. (2019). ***Our Trans Loved Ones: Questions and Answers for Parents, Families, and Friends of People Who Are Transgender and Gender Expansive.*** PFLAG National. Retrieved from [**PFLAG.org**](#)

Child Welfare Information Gateway. (2021). **Supporting LGBTQ+ youth: A guide for foster parents.** U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau. <https://www.youthpersonwelfare.gov/pubs/LGBTQyouth/>

Nonbinary, Gender-Fluid & Gender Expansive Youth FAQ for Parents and Guardians. Washington, D.C.: The Human Rights Campaign Foundation.

Perry, J.R. & Green, E.R. (2017). **Safe & Respected: Policy, Best Practices & Guidance for Serving Transgender, Gender Expansive, and Non-Binary Children and Youth Involved in the Child Welfare, Detention, and Juvenile Justice Systems.** New York City, NY: New York City's Administration for Children's Services. Retrieved from: <https://www.nyc.gov/assets/acs/pdf/lgbtq/SAFEAndRespectedUpdate061417.pdf>

Ryan, C. (2009). **Helping Families Support Their Lesbian, Gay, Bisexual, and Transgender (LGBT) Children.** Washington, DC: National Center for Cultural Competence, Georgetown University Center for Child and Human Development.

Ryan, C. **Supportive families, healthy young person: Helping families with lesbian, gay, bisexual & transgender young person.** San Francisco, CA: Family Acceptance Project, Marian Wright Edelman Institute, San Francisco State University, 2009.

Substance Abuse and Mental Health Services Administration, **A Practitioner's Resource Guide: Helping Families to Support Their LGBT Children.** HHS Publication No. PEP14-LGBTKIDS. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014.

Horton, C. (2023). **"I Didn't Want Him to Disappear" Parental Decision-Making on Access to Puberty Blockers for Trans Early Adolescents.** *The Journal of Early Adolescence*, 43(4), 490-515.

Horton, C. (2024). **Experiences of puberty and puberty blockers: Insights from trans young person, trans adolescents, and their parents.** *Journal of Adolescent Research*, 39(1), 77-103.

Turban, J. L., King, D., Carswell, J. M., & Keuroghlian, A. S. (2020). **Pubertal suppression for transgender youth and risk of suicidal ideation.** *Pediatrics*, 145(2).