

**HELPING LGBTQ TEENS NAVIGATE
ADOLESCENCE**

*Presented by: Janice Gabe, LCSW, LCAC
New Perspectives of Indiana, Inc.
6308-B Rucker Road
Indianapolis, IN 46220
(317) 465-9688
(317) 465-9689 (Facsimile)\nwww.newperspectives-indy.com
barb6308@earthlink.net*

Sexual Orientation Terms

Sexual Orientation:

Describes who someone is emotionally, romantically, and sexually attracted to. Some suggest this would be more accurately described as "emotional" or "affectional" orientation.

Gay:

This term is used to describe homosexual males and females, though it is more commonly used to describe homosexual males who are emotionally, romantically and sexually attracted to other men.

Lesbian:

A woman who is emotionally, romantically, and physically attracted to other women.

Bisexual:

A person who is emotionally, romantically, and sexually attracted to people of either sex.

Poly Sexual:

Emotionally, romantically and sexually attracted to more than one gender or sex.

PanSexual (Also referred to as Omnisexual):

Someone who displays sexuality in a variety of ways and is open to a variety of sexual activities with individuals of all sexual orientations and genders

ASexual:

Lack of sexual feelings towards men or women.

Questioning:

Adolescents who are unsure of their sexual or gender orientation.

Gender Terms:

Gender:

This word is often used to describe anatomy; however, it's really about a person's identity as feminine or masculine rather than physical characteristics. Gender is made up of behavior, cultural characteristics, psychological traits that are associated with a specific sex.

Gender Identity:

Internal sense of being male or female. Gender identity doesn't necessarily reflect one's biological sex.

Transgender:

Transgender people have a gender identity that is different from their biological sex or physical anatomy. Transgender does not reflect sexual orientation. It is a broad term that can include:

Transsexuals:

Individuals who don't identify with the sex they were born and may change their bodies through hormones and surgery. All transsexuals are transgender but not all transgender people are transsexuals.

Two Spirits:

Some native American cultures describe transgender people as having "two spirits." This refers to individuals born into one sex but took on gender roles of both sexes.

Androgyny:

Also referred to as gender blender or gender bender. People who merge what are stereotypically male and female characteristics in many different ways. They may not be obviously male or female at first glance. They might shave their heads and wear combat boots with makeup and skirts. This is not necessarily a reflection of sexual orientation or gender identity.

Gender Expression:

How one expresses gender through dress, hairstyles, body language, speech.

Gender queer, inter-gender, and gender-variant:

People whose gender identities exist outside the traditional male and female binary. They may identify as male and female, neither, or other.

Gender-dysphoria:

Pain, anxiety, and confusion that stems from disparity between a person's gender identity and biological sex.

Gender Identity Disorder (GID)

302.85 Gender Identity Disorder Diagnostic Criteria:

* *Strong cross-gender identification - not looking for perceived privileges or advantages*

- *Stated desire to be non-birth sex*
- *Frequent passing*
- *Desire to live/be treated as non-birth sex*
- *Conviction that one has typical non-birth sex feelings and reactions*

* Persistent discomfort with one's sex or assigned gender role

- *Preoccupation with ridding oneself of secondary sex characteristics - or - belief one was born in the wrong sex*

•

•

* No intersex condition present

* Causes clinically significant distress or impairment

* Proposed: GI - DSM-5 in May 2013 will change this criteria - Please see www.dsm5.org for more information

•

•

Gender Transitioning:

A complex multistep process of starting to live in a way that accurately reflects a transgender person's true gender identity. This involves behaviors such as changing ones name, dressing, altering, hair, makeup, mannerism, voice, movement. It may also include hormone therapy and surgery.

FTM (Female to male) or MTF (Male to Female) refers to the transitioning process of living in ones preferred gender.

•

•

Sexual Identity Is Not What

It Used To Be

According to research by Ritch C. Savin-Williams (*The New Gay Teenager*) today's teenagers are -

- * Redefining, reinterpreting, and renegotiating their sexuality.
- * Their sexual and gender identities are not clearly or easily categorized, described, described or understood.
- * Resist being defined by their sexuality "I just want to do me" mentality.
- * They may identify as LGBTQ, but they also might identify as "gayish."
- * Age at which teens identify as gay has decreased from age 21 to 16.

Sexually "Identifying" -

Some teens, especially questioning teens, report a sense of urgencies in trying to "figure out" their sexual identity. This urgency is fueled by several factors:

- * A sense that "I" should know
- * A sense that they don't fit into "traditional" gender or sex role
- * Over zealous parents who want their children to talk about it
- * Feedback from others who repeatedly call them "gay" or ridicule them
- * Obsessive fear that they might be gay

It Is Helpful For All Teens To Have Information On Adolescent and Childhood Sexual Behavior Patterns

- The term "Sexually active" defined by teens often range from "deep kissing" to "intercourse."
- In every major study to date, young people describe varying degrees of heterosexual and homosexual attractions.
- Only a minority of gay teenagers engage solely in same sex behavior.
- Many pre-adolescent children participate in same sex sexual behavior that has little bearing on their future sexual orientation.

- Many heterosexual teens experiment with some sex sexuality at some point in their lives.
- In a study conducted in Massachusetts and Minnesota public schools, half the students was reported same sex behavior identified as heterosexual.

Most research indicates a significant number of gay and straight males and females report some "sexual" physical contact with same sex peers during childhood (peaking around age 10) and adolescents.

- Not all same sex attracted teens are sexually active
- Some teens are gay virgins but have had heterosexual encounter and some heterosexually virgins but homosexually encounters
- Some teens regardless of sexual orientation, have only same sex or opposite sex encounters (*Williams*)
- Sexual experimentation may last several years in adolescence and young adulthood but typically do not last over a lifetime
- Sexual behavior does not equal sexual identity

Risk Factors
For
LGBTQ Teens

Bullying, Victimization, and School Safety
(According To The 2009 National School Climate Survey)

- * Nearly 60% of students felt unsafe at school because of their sexual orientation.
- * More than one-third felt unsafe because of their gender orientation or expression
- * 40% of the GLBTQ students reported physical harassment
- * 19% reported being physically assaulted
- * 36% students experienced harassment in past year

- * Derogatory remarks the most common form of harassment (89%)
- * 51% concealed their sexual orientation and gender to avoid intimidation
- * 71% felt that transgender youth were likely to suffer harassment
- * 3 times more likely to have skipped school n past month because they felt unsafe
- * 3 times more likely to have been taunted or injured with a weapon at school in past year
- * LGBTQ teens and non LGBTQ teens view being called "gay" as one of the most derogatory forms of verbal harassment

- * About two-thirds of LGBTQ reported having been sexually harassed in school in the last year - (PFLAG)
- * The average GPA for students who were frequently harassed because of sexual orientation was half a grade lower than that of other students (PFIAG)
- * Students hear anti-gay comments 25 times a day, and teacher's fail to report 97% of the time. (*Gay Lesbian Straight Educators Network*)
- * 58% of LGBT students have had property stolen or deliberately damaged at school
- * 28% dropout of high school due to verbal and physical abuse
- * Increased risk for school failure, lack of school involvement and low commitment to school

Suicide Risk For LGBTQ Teens

- LGBT teens are up to four to six times more likely to attempt suicide than their heterosexual peers.
- Suicide attempts among LGBT range from 20-42% compared with 8-13% among high school students in general
- 28 percent of gay and bisexual teenage boys and 20 percent of Lesbian and bisexual girls had attempted suicide (survey cited by American Academy of Pediatrics)
- 33 percent of transgender teens have attempted suicide (Journal of Homosexuality)

- Attempts occur more frequently among closet and teens during the period immediately after self-labeling as LGBTQ
- Studies of LGBT suicide attempts show they are more likely to have self identified as LGBT and come out to others at an earlier age
- LGBT teens most at risk for suicide attempts, have been ejected from their homes, have dropped out of school, and have a higher rate of LGBT related stressors
- Nearly half report family problems as the precipitating event
- One in three attempts were related to identity
- Three out of four followed self labeling
- Transgender youth and teens involved in drugs have a 3 time higher risk for suicide

Depression on LGBTQ Teens

- Research indicates LGBTQ teens in grades 9-12 score significantly higher on scales which measure depression
- LGBTQ teens often experience depression as a stress response
- Stress can be deeply ingrained in a every avenue of their life
 - * Isolation
 - * Fear of discovery
 - * Fear of ridicule, harassment, aggression
 - * Fear of living with stigma
 - * Confusion about what to do
 - * Fear of reaching out to others
 - * Stress about keeping things compartmentalized so the "wrong people" don't find out
 - * Fear of the future

- Depression related to sexual identity is a common reaction to “coming out” or preparing to come out and usually resolves as teens feel more positive about themselves
- Depression is linked to high risk sexual behavior, substance abuse, anxiety, self-harm, eating disorders
- LGBTQ teens face higher rates of depression which is connected to lack of support and aren't aware of positive options for living productive integrates lives

Alcohol and Substance Abuse

- Review of research from 1994 to 2008 indicates that
 - * LGBTQ teens are 190% more likely than heterosexual teens to use alcohol or drugs
 - * Bisexual teens 340% more likely
 - * Lesbian teens 400%
- Teens seeking higher risk environments as easier place to express sexual orientation
- Alcohol and drug use makes this expression easier

Engaging Families

Family Acceptance of LGBTQ Youth

Research conducted by The Family Acceptance Project provides valuable information regarding the impact of family support and acceptance of LGBTQ teens and physical health and emotional health

- * Relationships with parents are most often challenged when the teen initially comes out
- * Teens perception of negative reaction by parents (as well as coaches, teachers, neighbors and friends) area a prediction of substance use
- * Clear association between parental rejecting behavior and drug use, depression, attempted suicide, and risky sexual behavior

•

- * Parental affirmation and acceptance of LGBTQ adolescents is linked to positive adjustment and decreased mental health risk
 - * Higher self-esteem
 - * Improved social support
 - * Better general health
 - * Decreased substance abuse, sexually risky behaviors, suicide ideation
- Young adults who report low levels of family acceptance score significantly worse in the areas of depression, substance abuse, and suicidal ideation, (1/2 as many from highly accepting families report thoughts) and suicidal attempts (30.9 vs. 50.8)

•

- Research has shown that when parents become sensitized to the needs and well being of their children, many family relationships improve
- Accepting and rejecting behaviors co-occur as families adjust
- Families can and do react with acceptance
- Education and supporting families improves their degree of acceptance
 - * Assist families in understanding how crucial their acceptance is to this child's health and well being
 - * Provide connections, support and resources
 - * Provide education and information
 - * Understand that their acceptance is a process and help them figure out what they need to do next to keep moving forward

•

- * Find out where they would like to be and what are they willing to do now
- * What are they willing to not do
- * Assist them in applying their parenting skills to help their child deal with challenges they will encounter
- * Help them work through practical dilemma's like "sleepovers"
- * Assist them in "how" to show support for their teen

What Indicates Family Acceptance

- * Talk openly about sexual and gender orientation, foster their identity
- * LGBTQ friends are welcome at home and invited to join family activities
- * Bring teen or join teens in LGBTQ youth activities and organizations
- * Appreciate and accept clothing and hair styles
- * Find ways to express affection

- * Assist teen in finding appropriate safe, school environment
- * Require family members respect your child
- * Facilitate contact with healthy role models
- * Work with your faith community
- * Remember it's not about you

What Teens Say

Teens say they view supportive behavior as including:

- * Pictures around the house of teens with their partners
- * Becoming involved in advocacy for them
- * "Sticking up" for them
- * Not "assuming" the worse about their sexual behavior

- * Being willing to have problem solving communication around difficult issues like same sex sleepovers
- * Not being embarrassed around parents friends and neighbors
- * Express optimism about the future
- * Don't forget that we are just normal kids
- * Incorporate it into our lives, don't ignore it and don't over focus on it
- * Don't encourage us to hide because you are afraid
- * Understand that we want to spend time in places and with people where we feel safe

LGBTQ Teens
In
Therapy

Clinically:

- * Screen carefully for suicide, depression, substance abuse, anxiety, self-harm, eating disorders
- * Assist teen in clarifying what stressors contribute to this
- * Help teen identify which of these behaviors are related to "others" reacting or their fear of others reaction
- * As soon as possible connect them to support networks (see list)
- * Encourage them to discuss their story - their history
- * Talk to them about media stories or events that highlights LGBTQ issues

Relationships:

- * Discuss their relationship histories. Help them summarize what they learned from these relationships
- * Discuss and address any abuse or trauma from past relationships
- * Encourage them to talk about
 - * Who to date
 - * Where to find people to date
 - * How to approach people
 - * Crushes
- * Address Friendships
 - * How have their friendships been affected by being LGBTQ
 - * Assist them in how to respond as a target or a witness to all forms of bullying and harassment

* In one study 93% of gay adolescent males identified friendships as the most important source of support; however, 40% of gay and lesbian teens report losing friends when they come out

Self-Esteem:

- * Support teens in fully addressing how they feel about themselves and how they feel about their sexual orientation and or gender
- * Allow them to talk about fears and frustrations
- * Encourage teens in evaluating and challenging where the source of negative thoughts and feelings about themselves

- * What is the truth about themselves
- * Network them with older teens or young adults who have found healthy ways of dealing with challenges
- * Discuss healthy and unhealthy ways in which they have attempted to seek affirmation or explored their sexuality
- * Find a supportive appropriate educational environment and send them to visit LGBTQ friendly colleges

Families:

- * Respect their timeframe about coming out to families
- * Discuss possible short term and long term responses
- * Discuss their use of Facebook
- * Point out that just as they have been through a "process" of self awareness and acceptance, their families have their own process

Making Schools Kinder and Gentler Places for LGBTQ Teens:

- * Education for all building employees
 - * Extent of victimization, bullying, harassment
- * Risk factors that stem from this treatment
- * Identifying and recognizing bullying and harassment
- * Including this in anti bullying policy and student and student handbooks
- * Zero tolerance on part of students, teachers, coaches, support staff

- * Include information in health curriculum, psychology classes, assemblies, peer counseling education
- * Gender neutral bathrooms
- * Identify safe zones
- * Make sure LGBTQ teens know how to report bullying

What teens say will help:

- * If teachers and other adults would self identify or disclose that they have loving or close relationships with family and friends who are LGBTQ's, it would be very helpful
- * Verbalize zero tolerance

- * Include discussion of LGBTQ people who have impacted the world in a positive way during course work
- * Assignments that will increase awareness and tolerance
- * When teachers talk about "pet peeves" it would be nice for them to list hostile language intolerance, mistreatment of LGBTQ individuals
- * Don't make jokes or sarcastic comments about LGBTQ individuals ("Dah")
- * Always intervene when you hear people make jokes, use the term gay, or call people names, or harass us

* Be nice to us. Seek us out, offer support, follow up when you know we have been mistreated

* Realize that it is not helpful when you tell us that life would be easier if we would make an effort to fit in "try to dress more appropriately"

* Don't be afraid to comment about my boyfriend/girlfriend (do you have a picture, you guys make a cute couple)

* Don't be afraid to talk to us just because we might look different

Resources For LGBTQ Teens

- Trevor Hotline – 1-866-488-736
- Gay, Lesbian, and Straight Education Network (GLSEN) work to create safe schools for LGBTQ students (www.glsen.org)
- Parents, Families, and Friends of Lesbian and Gay (PFLAG) (202) 467-5177 (www.pflag.org)
- It Gets Better Project (www.itgetsbetter.org)
- LGBTQ Online High School (www.glbtcqonlinehighschool.org)
- Trevor Space (www.trevorspace.org) a social networking community for LGBTQ young people age 13 to 24
- Gender Spectrum (www.genderspectrum.org)

- Camp Aranutzq – week long tuition free, overnight summer camp in Southern New England for gender variant and transgender 8-15 year olds (www.campananutq.org)
- ACT For Youth (www.actforyouth.net) resource for those who work with transgender or youth
- US News and World Best Colleges guide list of the 100 best colleges for LGBTQ students
- LGBTQ Campus Directory (www.lgbtcampus.org/directory)
- TYPNA
- Two Teenagers in Twenty: writing by Gay and Lesbian Youth by Ann Heron, Ryson Publications, 1994
- GLBTQ – The Survival Guide For Gay, Lesbian, Bi-sexual, Transgender and Questioning Teens, Nelly Huegal Free Spirit Publications, 2011.
- I am J, Chris Bean, Little, Brown and Company, Boston, 2011

Transgender Teens

- Due to increased awareness many teens are identifying as transgender at younger ages
- We do need to be aware that gender confusion, gender questioning, and fluid gender identity is not unusual and can be fleeting and ever changing with teens. Therefore, it is important to understand the diagnostic criteria for Gender Identity Disorder

Gender Identity Disorder of Childhood
(64.2) DSMIV

Girls:

1. Shows persistent and intense distress about being a girl, and has stated desire to be a boy (not merely a desire for any perceived cultural advantages to being a boy) or insist she is a boy
2. Either of the following
 - a. Persistent marked aversion to normative feminine clothing and insistence on wearing stereo-typical masculine clothing

- b. Persistent repudiation of female anatomical structures as evidenced by at least one of the following:
 - * an assertion that she will grow a penis
 - * rejection of urination in a setting position
 - * assertion that she does not want to grow breast or menstruate
3. Girl has not reached puberty
4. Present for six months

Boys:

1. Persistent and intense distress about being a boy, and has a desire to be a girl, or more rarely, insist he is a girl
2. Either of the following:
 - a. Preoccupation with stereotypical female activities, shown by preference for cross dressing or simulating female attire, intense desire to participate in games and pastimes of girls and rejection of stereotypical male boys games, activities
 - b. Persistent repudiation of male anatomical structures as evidenced by at least one of the following repeated assertions
 - * that he will grow up to become a woman
 - * that his penis or testes is disgusting or will disappear
 - * that it would be better to not have a penis or testes

3. The boy has not reached puberty
4. The disorder has been present for 6 months

- Getting Started
 - * Identify and follow their language
 - * What name do you prefer
 - * When and where and with whom is it safe for me to use that name
 - * What pronouns do you prefer

- * Do you identify with any sexual orientation

- * Are you attracted to guys, girls, transgender guys, transgender girls, no one, more than one type of person

- Transgender teens are most at risk of all LGBTQ teens for suicide, depression, self-harm, bullying, victimization, isolation, physical assault, family rejection

- We have very little research in this country to guide us when treating transgender teens

Questioning - Helping Teens Figure It Out:

- 1) Have you ever felt a conflict between your body (gender you were born with) and your mind (gender you feel comfortable with)

- 2) Do you dislike or avoid things that are usually associated with your birth gender

- 3) Do you strongly identify with experience of people who are transgender

Working Through The Process:

- 1) Awareness of transgender - what it means and how they connect

- 2) Exploring transgender - reading, websites, talking with others

- 3) Reviewing their history

- 4) Transgender life story

Developmental History for Transgender Children

Parents Name: _____
Child's Name: (Assigned name _____)
(Preferred name) _____
Date of Birth: _____
Questionnaire Completed On: _____

In order to assist us in documenting the developmental process for your child, please provide the following information about your child's gender identity throughout his/her life. Please feel free to provide pictures along with this questionnaire

•

1) Please share any comments made by your child between the ages of 2-3 that indicated he/she sensed a difference between what gender they were told they were and what they felt about this gender.

•

2) Please share any expression of feeling about gender that your child made between the ages of 3-4. For example, "I want to be a boy/girl when I grow up." "I am a boy/girl." "I am half boy and half girl."

•

3) Please share any incidents between the ages of 4-6 when your child refused to wear gender specific clothes or voiced a preference for activities typically disassociated with the opposite gender.

4) In what ways did your child express gender preference between the ages of 5-7?

5) Please share examples of the following between the ages of 9-12:

- * Significant change in clothes or hairstyle
- * Strong negative reaction to physical changes of puberty
- * Increased depression or self destructive behavior

6) Please share any examples between the ages of 12 to 18 in which your child:

- * Expressed a strong sense of feeling that his/her physical body did not represent their true gender

- * Aversion to gym class

•

- * Express feelings of awkwardness about using gender specific restrooms

- * Began seeking information on gender identity

- * Indicate a sense of despair and dissatisfaction with gender specific physical traits

- * Express a desire to live as a gender different than their birth gender

•

7) Please indicate how your child has lived life in their preferred gender including timeframes.

8) Please provide a "photo" history which shows your child from birth to present.

•

Transitioning:

Transitioning is the process in which teens begin to live in their preferred gender:

- * Once teen self identifies they are eager and impatient to begin the process of transitioning
- * They usually think hormone treatment and surgery will be the magic solution to their problems
- * Teens need to understand what is required of them before they can begin this process

Therapist assist teens who want to begin their transition in real life experience by asking -

- * What does living in your gender mean to you?
- * What do you imagine will be different in your life if you live in your gender? Undergo hormone therapy? Have surgery?
- * How do you see your life as an adult?
- * What changes do you think you will need to make in your personality, temperament, communication to live successfully in your preferred gender?
- * What do you think of members of the opposite gender?
- * How many close friends do you have of the opposite gender?
- * What activities will you pursue?
- * Who will be your friends?
- * It is critical that teens understand that transitioning is a long, slow process and during this time it is their responsibility to develop healthy coping strategies for dealing with this process.

• Transitioning usually involves teens -

- * Selecting a gender appropriate name
- * Explore dressing in preferred gender
- * Altering hair style and clothes
- * Coming out to people
- * Discuss dressing and passing in public
- * When and if teen is ready, assist them in real life experience and discuss how they can do this at school, in all activities (band, sports, camps, school trips) at work and at home
- * Therapist plays an active role in facilitating this and communicating with schools, parents, coaches, etc.
- * Stress to teens that many transgender people are happy with this level of transitioning and do not feel the need to begin physical transition

Medical Transitioning:

Harry S. Benjamin Standards of Care for Gender Identity Disorders set forth guidelines for medical intervention

In order to be eligible for hormone therapy, teens must be living full time in preferred gender for 3 months. During this time teens work on consolidating gender identity, make progress in mastering mental health issues

Standards of care do not recommend surgery for those under 18

In order to be eligible for genital reconstruction surgery individuals must document 12 continuous months of living in gender - and - 12 months of hormone therapy

Standards of care do not recommend adolescents begin real life experience prior to age 16

There is much discussion and disagreement about teens medically transitioning

In order to provide puberty delaying hormones to someone younger than 18, the following criteria must be met:

- 1) Demonstrated an intense pattern of cross gender identity and an aversion to expected gender role behavior throughout childhood.
- 2) Gender discomfort significantly increased at onset of puberty.
- 3) Social, intellectual, physiological, interpersonal development are limited as consequence of GID.
- 4) Serious psychopathology except as consequence of GID is absent
- 5) Family consents

Transgender

Teens

Life

Story

Age 3 to 5:

- * What was your favorite piece of clothing?

- * How did you prefer to dress?

- What was your favorite toy?

•

Age 3 to 5:

- * What type of toys did you prefer to play with?

- What type of play did you participate in (what games did you enjoy)?

- Who were your best friends?

•

Age 3 to 8:

Same as above – and -

- * Who were your best friends at school – outside of school?

- What activities did you enjoy most at recess?

- What sports or organized activities did you participate in?

•

Age 3 to 8:

- * Did you prefer to participate in coed teams, male teams, female teams?

- Did people refer to you as a male or female?

- How did you feel when this happened?

•

Age 3 to 8:

- * Did you enjoy gym?

- Which of these activities did you enjoy?

- Did other people "label" you as a "sissy" or a "tomboy"?

•

Age 3 to 8:

- * How did you feel when people "labeled" you?

- Which parent were you closest to?

- Did you ever think you were a boy/girl?

•

Age 3 to 8:

- * Did you ever wish you could be a boy/girl?

- Did you protest about the clothes your parents wanted you to wear?

- Did you protest about the activities your parents wanted you to participate in?

•

Age 3 to 8:

- * What were your favorite movies, TV shows, books or stories?

- Whom do you remember having crushes or attractions to?

- Was it confusing or frustrating when you were asked to do things by gender (i.e., guys in one line, girls in another)?

•

Age 8 to 11:

- * What activities/sport did you participate in?

- Did you change activities or sports?

- Did other people mistake your gender?

•

Age 8 to 11:

- * Did other people ask about your gender?

- How did you feel when this happened?

- Did you correct people who were mistaken about your gender?

•

Age 8 to 11:

- * Did you ask people to call you by a name other than your own?

- What did you do at recess?

- Who was your best friend?

•

Age 8 to 11:

- * Did you feel uncomfortable at sleepovers or in restrooms?

- Who did you have "crushes" on?

- What memories do you have about feeling "different" than your peers?

•

Age 8 to 11:

* Were you ever bullied, picked on or made fun of because of your physical appearance?

• When you read books or watch movies do you relate more to male or female characters?

• When you write, do you write as a male or female or from a male or female perspective?

Age 12 Plus:

How did you respond to physical changes or puberty?

- Facial Hair _____
- Body Hair _____
- Facial Structure _____
- Developing Breasts _____
- Menstruation _____
- What did you do in response to these changes?

Age 12 Plus:

How did you attempt to change your appearance

- Hair Styles _____
- Clothing _____
- Makeup _____
- Jewelry _____
- Binding _____
- Going shirtless _____
- Wearing a bra _____

Did you make changes in your appearance in order to appear more in line with your biological gender? Were these changes uncomfortable for you?

- Did you feel you were emotionally more similar to males/females?

- Did you feel that you think more like a male or female?

- * Did you ever experience distress or anger about your breast/penis?

- * Did you mutilate or think about mutilating a sexual body part?

- Tell me about your journey in acknowledging you are transgender.

- How and when did you first become aware of the term "transgender?"

- * How long have you been thinking about this?

- * Were you uncomfortable in gym class while swimming, in dressing rooms, in the bathrooms at school?

How have others responded to your gender expression:

Parents _____

Sibling(s) _____

Extended Family _____

Friends _____

Significant adults _____

Please provide a history of suicide attempts or suicidal thoughts

How have you felt since deciding you are a transgender?

References

Lesbian & Gay Youth (Care and Counseling) *Caitlin Ryan and Donna Futterman, Columbia University Press, New York, 1998*

The New Gay Teenager, *Ritch C. Savin-Williams, Harvard University Press, Cambridge, Massachusetts, London, England, 2005*

GLBTO (The Survival Guide for Gay, Lesbian Bisexual, Transgender, and Questioning Teens) *Kelly Huegel, Free Spirit Publishing, 2011*

Camp Aranutqa - Week long, tuition free, overnight camp in Southern New England for gender variant youth 8-15 (www.camparanutiz.org)

Gender Spectrum - Great resource for teens and families (www.genderspectrum.org)

•

Journal of Youth and Adolescence, Vol. 38 - No7 1001-1004, *Doi: 10.1007/10904-009-9397-4*

Journal of Pediatric Nursing, 2005, Jan - March 10 (ij:11-9)

Gender-Nonconforming Lesbian, Gay, Bisexual, and Transgender Youth: School Victimization and Young Adult Psychosocial Adjustment, *Russell B. Toomey, University of Arizona, Caitlin Ryan and Rafael M. Diaz, San Francisco State University, Noel A. Card and Stephen T. Russell, University of Arizona, 2010*

Born in a bind: Treating Transgender Children, *By Celen Adams, News & Features Editor, 18-Oct-1007 in issue 1034*

Family Acceptance in Adolescence and the Health of LGBT Young Adults, *Caitlin Ryan, PhD, ACSW, Stephen T Russell, PhD, David Huebner, Ph, MPH, Rafael Diaz, PhD, MSW, and Jorge Sanchez, BA*

Suicidal Ideation and Attempt Among Adolescents Reporting "Unsure" Sexual Identity or Heterosexual Identity Plus Same-Sex Attraction or Behavior: Forgotten Groups? *Yue Zhao, BA, Richard Montoro, M.D.C.M., M.Sc., FRCPC, Karine Igartua, M.D.C.M. FRCPC, Brett D. Thombs, PhD*

New Guidelines for Teens with Gender Identity Disorder, *Kristin Cantu, 9/24/2009*

•
