

## 14

## Discussing Aspects of Medical Transition with the Parents of Young Transgender People: A Psychotherapist's Perspective

Damien W. Riggs, PhD, FAPS

### Introduction

The day before beginning this chapter, I met jointly with a mother and her transgender son. In previous appointments the mother had presented as highly supportive—a strong advocate for her child, willing to challenge those around her. During this appointment, I made some time to speak with her alone. Much of our previous joint discussions had centered on her son's desire to commence hormone therapy. Being under 18 years of age, he legally had to have his parents' consent, and at the time they in turn had to petition the Family Court of Australia for permission. Because the two psychiatrists who had evaluated him did not support treatment, the mother decided that maybe it would be best to wait until after her son's 18th birthday.

With the young person's desire for hormone therapy in mind, I suggested that a way to sort through the mother's ambivalence might be to have an open discussion about what *dysphoria* meant for her son, since he had expressed to me he felt his parents "didn't understand" the extent of the problem. Surprisingly, the mother rejected my idea, seemingly contradicting her stance as supportive and affirming. What became clearer as we spoke was that while she was fine with her child's being transgender, she wasn't satisfied with her own lack of understanding of his sense of dysphoria, repeatedly stating that she wanted to be more competent—to understand more and to do more. Thus, the problem was not the mother's degree of acceptance of her son; rather, the problem was that she felt inadequate as a parent.

I open with this example because it clearly illustrates the challenges mental health clinicians face in working with parents of transgender young people in regard to the medical aspects of transition. What we witness is, in many cases, their conflicting emotional responses: they want to support their child but are unsure about what's best, particularly when they are at odds with the "experts."

## REFERENCES

- Ansara, Y. G., & Hegarty, P. (2014). Methodologies of misgendering: Recommendations for reducing cisgenderism in psychological research. *Feminism and Psychology, 24*, 259–270.
- Bolin, A. (1988). *In search of Eve: Transsexual rites of passage*. London: Bergin & Garvey.
- Doorduyn, T., & Van Berlo, W. (2014). Trans people's experience of sexuality in the Netherlands: A pilot study. *Journal of Homosexuality, 61* (5), 654–672.
- Edelman, E. A., & Zimman, L. (2014). Boycunts and bonus holes: Trans men's bodies, neoliberalism, and the sexual productivity of genitals. *Journal of Homosexuality, 61* (5), 673–690.
- Koken, J. A., Bimbi, D. S., & Parsons, J. T. (2009). Experiences of familial acceptance-rejection among transwomen of color. *Journal of Family Psychology, 23* (6), 853.
- Lev, A. I. (2004). *Transgender emergence: Therapeutic guidelines for working with gender-variant people and their families*. Binghamton, N.Y.: Haworth Press.
- Schleifer, D. (2006). Make me feel mighty real: Gay female-to-male transgenderists negotiating sex, gender, and sexuality. *Sexualities, 9* (1), 57–75.
- Speer, S. A., & Parsons, C. (2006). Gatekeeping gender: Some features of the use of hypothetical questions in the psychiatric assessment of transsexual patients. *Discourse & Society, 17* (6), 785–812.