

GRIEVING THE TRANSGENDER (ASSUMED-CISGENDER) CHILD:  
GENDERED MOURNING, THE HARMS OF CISNORMATIVITY, AND  
THE POSSIBILITIES OF CREATING LIVABLE TRANS FUTURES

A Dissertation presented to  
The Faculty of the Graduate School  
at the University of Missouri

---

In Partial Fulfillment  
Of the Requirements for the Degree  
Doctor of Philosophy

---

By  
MEL CONSTANTINE MISEO  
Rebecca Scott, Dissertation Co-Chair  
Julie Passanante Elman, Dissertation Co-Chair

May 2022

© Copyright by Mel Constantine Miseo 2022

All Rights Reserved

The undersigned, appointed by the dean of the Graduate School, have examined the  
dissertation entitled

GRIEVING THE TRANSGENDER (ASSUMED-CISGENDER) CHILD: GENDERED  
MOURNING, THE HARMS OF CISNORMATIVITY, AND THE POSSIBILITIES OF  
CREATING LIVABLE TRANS FUTURES

Presented by Mel Constantine Miseo, candidate for the degree of Doctor of  
Philosophy, and hereby certify that, in their opinion, it is worthy of acceptance.

---

Professor Rebecca Scott

---

Professor Julie Passanante Elman

---

Professor Joan Hermsen

---

Professor Robert Petrone

## **DEDICATION**

I dedicate this dissertation to all the trans, non-binary, genderqueer, genderfluid, gender-expansive, gender nonconforming youth—and those who have yet to find words which capture their complexity—who are persisting amongst cisnormative social worlds, family systems, and oppressive political regimes.

## ACKNOWLEDGEMENTS

I would like to thank everyone who has supported me throughout this entire 7-year process, provided encouragement when I felt burnt-out, guidance when I did not know what step to take next, and feedback to push me to be a better researcher, writer, friend, and community member. I thank my co-advisors, Becky Scott and Julie Elman, for providing essential feedback on each chapter and inspiring me to critically think in new ways. I thank my dissertation committee members; Joan Hermsen for being a constant source of knowledge in terms of navigating graduate school, and Robert Petrone for reminding me to center trans youth. I thank William Force, my undergraduate advisor, for introducing me to the sociological study of gender and laying the groundwork for who I am as an anti-racist and feminist sociologist today.

I thank my dear friends and chosen family: Jennifer Casper for being by my side every step of the way in our graduate schooling and being the best friend I could ask for; Zóra Serfőző for being a grounding force in my life and for being my unofficial editor; Kerri Schafer for the unwavering support and excitement which reminded me to be excited for myself; India Luxton for being my sociology-sibling from undergrad throughout both our graduate programs and teaching me how to use coding software; and the many more friends and cohort members for whom I wouldn't have made it through grad school without.

I thank my sister, Ariana, for making me laugh harder than anyone else can and always supporting me in all my endeavors. I thank my dad for all the pep talks even

though he doesn't understand what I'm doing half the time. I thank my cat, Bagel, for laying in my arms while I wrote this dissertation and quieting my racing heart.

Lastly, I thank the participants of my research for allowing me into their lives. Their vulnerable sharing is the only reason this dissertation exists. I am so proud of the work they have done in their families and in our community. I also thank the queer and trans youth—brave, resilient, weird, quirky, funny, bright, beautiful, and so gay in all their forms—who have brought so much joy into my life. They have taught me how to advocate for myself and how to love my queerness and transness.

## TABLE OF CONTENTS

Acknowledgements.....	ii
Abstract.....	vi
Introduction.....	1
Cisnormative Futures.....	11
Trans Disruptions.....	13
(Un)Grievable Trans Life.....	16
Trans Youth Histories.....	20
Grieving the Imagined-Cisgender Child.....	24
Chapter Outline.....	28
Methodology.....	29
Chapter 1: Dimensions of Gendered Mourning.....	40
Types of Mourning: Cisgender Privilege Loss.....	41
Types of Mourning: Family as a Gendered System.....	52
Types of Mourning: Body Loss.....	71
No Loss.....	84
Memorialization of the Assumed-Cisgender Child.....	91
Conclusion.....	93
Chapter 2: Trans Futurity.....	95
Death of Dreams and Deferred Trans Futures.....	99
Recalibration of the Future.....	107
Ambiguous Non-Binary Futures.....	111
Afraid of Losing a Future.....	114
Comparing Losses and Cisnormative Potentiality.....	121
Conclusion.....	125
Chapter 3: Trans Livability.....	129
Community and Parental Connections.....	135
Intentional Learning about Gender Diversity.....	139
Decentering Hetero/Cisnormativity through Feminist Parenting.....	147
Assisting with Gender Transition.....	152
Creating Institutional Space for Transness through Activism.....	158
Surrogate Parenting.....	166
Barriers to Livability: Parental Gender, Geographic Location, Socioeconomic Status and Racism .....	171
Battling over Trans Livability with Unsupportive Co-Parents.....	183

Conclusion.....	186
Chapter 4: Parental Transformations of Gender.....	188
From Genderblind to Gender Kaleidoscope.....	189
Not as Straight and Cis as it Seems.....	193
Who is Allowed to Embrace the Kaleidoscope? .....	202
More Comfortable and Confident in their Gender.....	204
Conclusion.....	207
Conclusion: The Undoing of Cisnormativity.....	210
Appendices.....	216
Interviewee Demographics.....	216
Resources for Fostering Trans Livability.....	217
References.....	219
Vita.....	237



GRIEVING THE TRANSGENDER (ASSUMED-CISGENDER) CHILD: GENDERED  
MOURNING, THE HARMS OF CISNORMATIVITY, AND THE POSSIBILITIES OF  
CREATING LIVABLE TRANS FUTURES

Mel Constantine Miseo

Rebecca Scott, Dissertation Co-Chair

Julie Passanante Elman, Dissertation Co-Chair

**ABSTRACT**

This dissertation unpacks how feelings of loss and grief commonly experienced by parents of transgender and non-binary youth, which I call gendered mourning, give insight into the inner-workings of family gender systems. Diverging from the oversimplification that grieving a transgender child is transphobic, this research examines from where gendered mourning derives and illuminates the ways in which cisnormativity frames ideas of familial past, present, and future—setting parents up for feelings of loss. Observation at a support group for parents of transgender youth and in-depth interviews with attendees of the support group reveal that gendered mourning primarily involves feelings about a child’s changing name and body, the trans child existing in a hostile world, and fears of losing a child through suicide. Additionally, this research explores how gendered mourning informs efforts to produce more livable social worlds for transgender youth. Through this, parents learn about gender diversity and simultaneously interrogate how hetero/cisnormativity impact their own lives, identities, and self-expressions. This research positions cisnormativity, acting as a collective harm to us all, as the producer of loss instead of the transgender child.

## INTRODUCTION

“The trans movement isn’t about trans people moving forward,  
it’s about cis people catching up with us.”

– Alok Vaid-Menon (they/them)

*I’ve been mentoring Sarah, a 17-year-old transgender girl, for a few months about how to talk to her mom about using her correct name and pronouns, and medical transition—hormone replacement therapy (HRT). She gets so nervous every time she tries to have these conversations and her mom won’t listen. Tonight, Sarah asked if I would talk to her mom because she felt her mother would take this information more seriously if it came from an adult. After Spectrum, I walked over to her mother’s car. I said to her, “Sarah said you might want some more information about how to use her name and pronouns.” The mother seemed scared at first to talk to me. Kind of looking at me sideways. I quickly commended her for bringing Sarah to Spectrum each week. She started to relax a bit but she was angry that she was “the last to know” about Sarah’s gender identity and hesitant that she was “going to go back to being a boy.” I explained that a lot of teens have trouble discussing personal things with their parents but that Sarah knows who she is. “Just like you know you’re a woman, you can feel you’re a woman, well Sarah knows she’s a girl.” Sarah stood close by and listened intently as I explained the difference between biological sex and gender identity. “Yes, that was amazing. That was better than I could ever explain it,” Sarah said as she breathed a sigh of relief. Later in the conversation, Sarah quietly brought up HRT. Her mother gasped, lightly slapped her*

*arm, and said it will ruin her body. I discussed the safety and benefits of HRT both for mental and physical health. The mother's fear tried to dominate the conversation, but I was able to use my knowledge to debunk her misconceptions. Towards the end of the conversation, she entertained the idea of talking to a doctor. I provided her with a resource document I made of books, films, local and online support groups for parents of transgender kids as well as reports about the benefits of social and medical transition and parental acceptance. Even though the conversation ended on a good note, with the mother intending to come to PTK in the future and access these other resources, I still am doubtful the mother will make progress on her journey in time that would be beneficial for Sarah. I have seen countless teens suffer great psychological distress while waiting for unsupportive parents to come around or waiting until they turn 18 and can access medical transition on their own. As I watched them drive away, I was thinking how this would be a long, hard road for Sarah. Acting as the mediator or translator in this interaction reminded me of the immense power imbalance between teen and parent. Sarah was quiet, shy, hunched over, unable to access the medical care she knows she needs. Her mother was loud, direct, and dominated the space both physically and verbally. As the conversation went on, as I educated, as I corrected the misuse of pronouns, as I debunked common myths, and also as I explained that many parents of transgender youth go through the same thing she is going through, the dynamics subtly shifted. Her mother began to listen more than talk. Sarah began to stand up taller and look her mother directly in the eye when speaking.*

– Field Notes; February 14, 2019

The very next week after this conversation, Sarah shared that she was beginning testosterone blockers; a step in her process of gender-affirming hormone replacement therapy. I was shocked and happily surprised given that Sarah's mother was mostly unreceptive during our conversation. My experience of seeing transgender youth struggle for years to gain access to gender affirming medical care due to parental hesitations and non-acceptance led me to believe that she would be yet another trans teen who suffers greatly while their parent "catches up." A few months after the above interaction, Sarah stopped attending Spectrum, the LGBTQ+ youth group I volunteered with—which is common given changes in after-school activities, awkward friendship break ups, or not having supportive transportation—so I never had the opportunity to follow-up about her process of medical transition and her relationship with her mother. Nonetheless, the interaction between Sarah and her mother stood out to me because it was a rare moment; parent and child in the same space talking about gender transition. I wore two hats during my community-engaged ethnographic data collection—observer of parents' support group and mentor of youth group—and those two hats almost never overlapped for the privacy of the respective group members. My role that evening as a "mediator or translator," as described in my field notes, highlighted the tension that exists between cisgender parent and transgender child when competing gender discourses are at play. Parents' reactions to their child coming out as transgender, and their social or medical transition, are arguably just as complex and non-linear as their child's process of coming to understand their own gender identity.

I initially became interested in parents' responses to their LGBTQ+ children coming out when I was first coming out as gay as a very anxious 14-year-old. I would

hide in the corner of my hometown bookstore with magazines on the outside of books about parenting gay children so no one could see what I was reading. I tried to memorize the process parents go through and common questions they have so I could be as prepared as possible for what was about to unfold. Several years later in 2013, as I was beginning to struggle with my gender identity, a counselor at my New England university recommended that I and two other trans students attend a support group for parents of transgender kids as a way to gain exposure to accepting parents, whose approach to their children contrasted starkly with our own parental relationships. These parents spoke about how proud they were of their transgender children, which was comforting to me, but I was also confused that in the same breath they talked about how they felt they had lost their child.

I observed this language of loss and death a second time, not necessarily thinking it would come up again, when I began my dissertation fieldwork in 2016 at a community support group for parents of transgender children in Mid-Missouri, called Parents of Trans Kids (PTK). It surprised me that they were using the very same language to describe their child that was being used in the parents' support group halfway across the country. The third time I encountered this was when my mother refused to acknowledge or accept my identity as a non-binary transgender person, which contributed to the deterioration of this relationship. When I came out to my mother as non-binary in 2017, I approached the conversation with care and caution because my previous coming out as gay when I was a teenager did not go over so smoothly. Additionally, I had all this information of the reactions, emotional pain, and questions parents have when their child first comes out due to my fieldwork at PTK. Even though I was "prepared," the

subsequent deterioration of the relationship and mourning, for both of us, caught me off guard. What happened? And why?

Further understandings of cisgender parents' reactions to their transgender and non-binary (TGNB) children coming out and socially or medically transitioning are crucial in creating safer worlds for trans young people to live in. Transgender youth's access to vital resources such as gender-affirming physical and mental health care, as well as gender-affirming social practices such as correct name and pronoun usage across settings, depend on parental consent and support. Due to the increased mental health concerns when TGNB youth do not have family support (Austin 2016; Capous-Desyllas and Barron 2017; Grossman and D'Augelli 2006; McDermott et al. 2021; Pyne 2014), parents' degree of acceptance and understanding of their child's gender play a significant role in the child's well-being and navigation of their social worlds. The first two sociological books about parents of trans youth both make central this important role parents play in the lives of their children; being either gatekeepers or facilitators of gender-affirming supports. Meadow's (2018) research details how parents use their experiences with their transgender children to build a parent movement, founding organizations such as TransYouthFamilyAllies and Gender Spectrum, and attending conferences to build community among other parents and educate about best practices for supporting transgender youth, particularly within educational and medical settings. Travers (2018) looks at how trans youth are resisting the gender binary and normative conceptions of doing gender, which can create conflict within families, schools, and healthcare settings, and argues that parents can help reduce the precarity of trans youth in gendered environments. Although, neither of these primary sociological texts about

parents of transgender youth analyze the complexity of parents' feelings throughout transition.

This dissertation seeks to investigate the gender frameworks parents draw upon to understand their transgender child and the impact those frameworks have on their emotional reactions to their child's gender identity. Examination of parental reactions of fear, shock, anger, doubt, confusion—as seen in the above interaction with Sarah's mother—as well as feelings of sadness, loss, and grief is important in understanding how cisnormative and binary gender frameworks impact parents of TGNB youth. While studies have previously found that parents of TGNB youth often experience these feelings of sadness, loss, and grief when their child first comes out (Barron and Capous-Desyllas 2017; Coolhart, Ritenour, and Grodzinski 2018; Gregor, Hingley-Jones, and Davidson 2015; McGuire, Catalpa, et al. 2016; Menvielle and Tuerk 2002; Norwood 2012, 2013; Wahlig 2015), investigation into what these feelings tell us about the larger gender frameworks within the family is greatly lacking. Examination of these reactions and feelings give insight into how shifting conceptualizations of gender are unfolding in our social world and the impact that process has on those most directly impacted.

Exploring the complexity of cisgender peoples' perspectives on gender diversity can illuminate the societal mindsets which foster physical violence and microaggressions, as well as safety and affirmation. These mindsets are not mutually exclusive, and their consequences are not equally experienced by varying segments of the TGNB population. For example, visibility for middle/upper-class white trans men may bring about celebration and acceptance of white, masculine, passable representations of transness, while that same visibility brings about increased violence towards low-income Black

trans women (Lee 2020; Lenning, Brightman, and Buist 2020). Similarly, transgender youth are often met with more scrutiny, disbelief, and invalidation as compared to transgender adults. These non-mutually exclusive mindsets and reactions to transness can be examined within the parent-child relationship due to the proximity and unavoidability of transness in the family.

The seemingly contradictory reactions of celebration and violence brings me back to the confusion I felt at that New England parents' support group; how can parents be supportive and proud of their child's transness while also grieving their child? When attendees of PTK began saying things such as "I feel like I'm grieving" or "I can't *see* my daughter," I was under the impression this was due to transphobic beliefs held by the parent, and that being transgender was viewed as a loss and a death in and of itself. Transgender author, Meredith Talusan, reflects this perspective in her New York Times article, "Celebrate Your Kid's Transition. Don't Grieve It" (Talusan 2019). Talusan's writing echoes the feelings of many in the transgender community that parental mourning is transphobic and "reduces a person's very being to their gender, and reveals that a loved one cares more about a phantom image than for the trans person they supposedly love" (Talusan 2019:1). Yet, as I engaged further with the parental feelings of grief and loss, I started to realize it was much more complicated than that. While trans people's interpretations and lived experiences of their loved one's grief surrounding their identity are very real, this research examines the invisible structures which lead to grief of the "phantom image," or the assumed-cisgender child, in the first place. To analytically engage with feelings of grief and mourning of parents of transgender youth, I—as a trans researcher—must suspend my community's prevalent perspective of mourning being



solely linked to the hatred of transness. When the cause of mourning is merely reduced to transphobic beliefs, we are unable to identify other familial and gendered systems that inform the interpretation of a child being transgender as a loss. We also miss the opportunity to examine the broader implications of viewing mourning the loss of a previous or imagined state as solely negative. The social pressure to embrace pride and poise as a reaction to a life transition—whether that is regarding gender, disability, marital status, or even an actual death—ignores very real feelings and reactions to a significant shift in navigating the world.

Instead of sadness being reflective of parents' transphobic beliefs, the stories behind these feelings reveal shifts in parents' gendered expectations of future personhood, the realization of their child having to navigate a binary transphobic world, and ultimately the ways in which parents are misguided by the false assumptions of cisnormativity. The feelings of loss associated with the disruption of gendered expectations which are incited by the cisnormative frameworks instilled in the family are what I call gendered mourning. Gendered mourning is not only experienced by “transphobic parents” (Ehrensaft 2011), but also by accepting parents who do in fact celebrate their kid's transition, yet still have feelings of sadness or loss surrounding this shift in understanding their child. Even though a child coming out as transgender is not an actual death, it can still bring about feelings that the “before times” are not coming back. As I write this, we are in the middle of the COVID-19 pandemic. I have been calling life before the pandemic the “before times,” and I say it jokingly with a sense of heaviness in my heart, knowing that we may never go back to “normal.” I am trying to accept that and find happiness in our new ways of creative connection during physical distancing and

social isolation. It may seem strange to compare trans kids to a pandemic, but the mourning of pre-pandemic life is an opportunity to reflect upon the complexity of grieving the taken-for-granted and the assumption that life will always be a certain way.

I have felt this death-that-is-not-an-actual-death with the loss of the relationship with my mother. Even though she is still alive, it feels like she is a different person existing out there without me, and sometimes not even existing at all. I have felt this death-that-is-not-an-actual-death with my father who has Parkinson's disease and Parkinsonian dementia. These relationship shifts are painful because I was not prepared for the fact that my parents might not always be a part of my life, or that people's brains change and may not always be coherent. I did not know how to approach these situations or how to cope, even though these experiences are more common than we think. This is the result of a society which privileges nuclear, "intact" families and the fairytale gender-normative idea that mothers are a child's nurturing best friend. It is the result of an ableist society that likes to pretend bodies and minds will always be capable of capitalist production, and that it is shameful when a body or mind "fails." Gendered mourning is reflective of a similar fairytale of gender normativity; it is the result of a cisnormative society that does not tell you that gender diversity is even a potential. According to Serano (2007), who details the cultural devaluation of femininity and subsequent oppression of transfeminine folks, if it were not for our current binary system of gender and rigid gender socialization, there would be more room for various gender possibilities. Gendered mourning does not necessarily mean that parents feel their child has literally died, but upon further investigation we see that it has more to do with the realization that the "before times" aren't coming back and the "sinking in" of these gender possibilities.

While these “before times” are often an illusion or a yearning for something that was not positive for the child, it nevertheless incites complex feelings for parents.

Exploring the affective experiences of parents of transgender youth throughout a child’s coming out and transition offers an intimate view of what happens when cisgender people must confront both societal and internalized cisnormativity and/or transphobia. Analyzing ambivalence and seemingly contradictory emotions of parents of transgender children is vital in mapping the consequences of institutional cisnormativity within the family. This dissertation interrogates the cisnormative aspects of American family systems which often position gender non-conformity as a “problem” to be handled. It also acts as a record of the vitalness of spaces for parents of transgender youth to process their internalized transphobia and deep-seated cisnormative ideas of personhood in an effort to support their child.

Through four years of ethnographic fieldwork primarily at a community support group for parents of transgender youth in Missouri, as well as interviews with 22 parent attendees of that support group, this dissertation explores how the dimensions of gendered mourning can illuminate the ways in which cisnormativity is engrained in the American family system and ultimately how cisnormativity is a collective harm to us all. Through the investigation of how institutional space is created to foster livability of transness within the family in the face of gendered mourning, we see how transgender youth are instrumental in the process of re-making and ungendering the institution of the family.

This dissertation seeks to explore the following questions: (1) Why do parents grasp so tightly onto cisnormative views of their child even in light of contradictory

gender information? (2) How does cisnormativity produce gendered mourning experienced by many parents of trans youth? (3) How can the examination of gendered mourning give insight into the collective dangers of cisnormativity? (4) In what ways can the tensions between cisgender parent and transgender child give us insight into larger gender discourses in the 21<sup>st</sup> century? (5) How does the interrogation of cisnormativity within the family generate livability of trans futures?

### **Cisnormative Futures**

The institution of the family is the primary source of gender normativity and gender binary socialization (Berkowitz and Ryan 2011; Bernstein and Reimann 2001; Kane 2006; Murray 2010). Gender dictates parents' dreams for a child's future, ideas of what child-parent relationships will look like, and even how family history is carried into the future. Gender is not only something that shapes individual identity and experiences, but it is also a structure and an institution that shapes our larger social worlds. Risman positions gender as a "social structure with social processes that occur at the individual, interactional, and macro levels" (2018:28), noting the interconnectedness of the various levels. Lorber (2001) theorizes that gender is a social institution which organizes our lives, legitimates those in authority, and creates a stratification system of rights and responsibilities. The gender binary system not only creates a hierarchy of men above women, but it also creates a hierarchy of cisgender people above transgender people. This hierarchy places transgender children in even more of a subordinated position in relation to their parents, in regard to age and gender, and therefore privileges the parental understanding of gender as the dominant operating system within the family.

I argue that the operation of gender as a system—organizing roles, dictating responsibilities, and creating expected future paths for family members—is most accurate for understanding how gendered mourning operates within the family. When one part of the system changes, all the other parts must recalibrate to find equilibrium again. Transfamily theory states that most families expect and anticipate their family members to be cisgender, and the presence of a trans family member “brings attention to the tension between essentialist versus social constructionist views on gender” (McGuire, Kuvalanka, et al. 2016:61). Cisnormativity—“a system that forces everyone to identify and be easily recognizable as either a man or a woman” (Serano 2007:161) and erases trans possibilities which results in transness being treated as a “social emergency of sorts” (Bauer et al. 2009; Enke 2012)—is embedded into familial gender systems, covertly informing expectations of family operations. Cisnormativity frames how the future is envisioned for both parent and child resulting in the transgender child being viewed as a family “problem” to be dealt with.

Queer phenomenology (Ahmed 2006) provides the tools to look at how orientations, such as cisnormative gender ideologies and expected gendered paths, point us towards the future. These orientations, like landmarks or familiar signs, let us know where we are going, which direction we are headed, and what to expect. Normative orientations direct people in the path of heteronormativity, cisnormativity, and able-bodiedness, which is done through constant sexuality, gender, and body-norm socialization. These forms of socialization are necessary to obscure the “disorder” of transness; imposing an order of things admits that there is in fact a disorder (Foucault 1994). Normative orientations provide us with the fantasy of “the good life” (Berlant

2011) that American family systems aspire for and enlist children in the reproduction of these fantasies and desires. Yet, these fantasies of a normative future can become a “cruel optimism” (Berlant 2011); a desired path that actually becomes an obstacle. When a child does not follow the directed path a parent imagines for them, the parent often experiences anxiety and loss of an imagined future.

### **Trans Disruptions**

This dissertation examines how conflicting gender ideologies between parent and child disrupt the assumed mundaneness of gender and complicate the family’s gender system. Transness is a form of “wildness”; it is “the spirit of the unknown and the disorderly” (Halberstam 2020:46) and the “refusal to submit to social regulation” (Halberstam 2020:3). Trans beings and bodies are considered wild and disordered—requiring regulation—in a social world dominated by cisnormativity. When trans youth come out, this bewilders the parents acting as “evidence of absence, loss, and death” (Halberstam 2020:50). Parents are becoming lost or disoriented in the wildness of transness, losing the assumed guarantee of the gendered order of cisness with a clear, paved path.

Changes, or anticipated changes, in the trans child’s identity and body often bring about parental feelings of loss, disorientation, and bewilderment. Gender binary ideologies about “good” or “correct” bodies, minds, and identities can contribute to what we know about the harms of ableism and neuronormativity. Queerly gendered bodies cannot be discussed without considering compulsory able-bodiedness—defined as the “natural order of things” (McRuer 2006:1) where the “cultural presumption of able-bodiedness” masks “the pervasiveness of disability” (Kafer 2003:80)—because

cisnormative body ideals are often constructed through the lens of able-bodiedness. I am not likening transness and disability to imply that transgender is a mental disorder or that transgender identity can be used as a metaphor to understand mental illnesses such as body dysmorphia or body integrity identity disorder (Ostgathe, Schnell, and Kasten 2014). Transgender identity and gender dysphoria have often been labeled as mental disorders (Lawrence 2011; Meyer-Bahlburg 2010) further adding to this framing of the transgender child as a “problem.” Rather, I am using disability studies to understand the ways in which non-normative bodies are pathologized and mourned in relation to imagined cisnormative and able-bodied futures.

Disability and transness are both situated within this binary of “normative” and “non-normative” bodies, even though this binary is false and non-natural (McRuer 2006). Disabled bodies fall into this category of queer bodies in the way that they subvert ideas of normative or acceptable bodies (Clare 1999) and give a “failed (or queer)” gender performance (Elman 2014:2), just as the bodies of trans people subvert normative ideas of sex and gender. Elman discusses how disability narratives of “overcoming” are based in the idea that disability is undesirable and must be rehabilitated or eliminated in order to “achieve a coherent and stable (read: able-bodied and heterosexual) adulthood” (2014:6). Bodies which cannot overcome this queer failure signify unfulfilled potential of desired normativity and predictability. This linkage helps to understand why bodily changes, such as appearance transformations due to hormone replacement therapy or gender affirming surgery, are sometimes the onset or exacerbation of feelings of loss.

Since disability is viewed as the state of having no future, or an undesirable future (Kafer 2013:33), this leads to the idea that disabled, or queer, bodies and people will be

unable to lead a normative future and contribute to society in the ways once imagined for them. Parents of children with disabilities express similar feelings of loss and fears for the future as parents of transgender children. Parents of children with disabilities report having to come to terms with an altered outlook for the child's future (O'Brien 2007) and having to contend with the societal mindset that their child "disrupts a sense of order" (Blum 2015:4) in the community. Furthermore, mothers of transgender children with autism express that their child's autism coupled with gender non-conformity causes the child to "stick out" even more (Kovalanka, Mahan, et al. 2018). Anything which positions a child outside of the normative mold of childhood makes the child more at risk for societal stigma and contributes to parental feelings of loss.

Transgender children are unsettling normative orientations of compulsory able-bodiedness and conceptualizations of a "normal" childhood due to the idea that childhood gender transition disrupts "healthy" or "typical" development. The child is seen as an unfinished entity (Castañeda 2014) in the process of becoming a representation of the idealized future, which is why youth queerness is particularly problematic to futurity. Due to children and teenagers embodying this unfinished project, they hold the ability to be potentially normative or potentially pathological (Elman 2014). Trans youth disrupt their parents anticipated and desired normative paths through their expressions of gender non-conformity and queerness, adding to the parental anxiety surrounding adolescence. This incites parents to desperately grasp on to any notion of normativity, particularly holding on to present understandings of the child as cisgender which does not incorporate information about the child's articulation of a trans identity. Queerness is viewed as a "death threat" (Ahmed 2006), killing the image of normative life dictated by



heteronormativity and cisnormativity. More specifically, queerness is viewed as bringing childhood to an end (Edelman 2004) since anything that strays from normativity is regarded as a loss of innocence associated with normative childhood.

### **(Un)Grievable Trans Life**

This research is informed by the status of sociopolitical (un)grievability of queer and transgender people. According to the U.S. Transgender Survey, which is the largest survey of transgender people in the United States, transgender populations are facing high rates of homelessness, unemployment, experiences of physical and sexual assault, being denied access to public accommodations, rejection from family, and poor access to proper health care (James et al. 2016). These dire social conditions stem from a history of neglect and dismissal of trans communities. Looking at queerness and transness in a historical and global context, it can be examined how bodies and beings are held to Western and European standards of able-bodiedness, cisnormativity, and whiteness. Transgender populations experience “slow death”—“the physical wearing out of a population and the deterioration of people in that population” (Berlant 2007:754)—due to institutional neglect relegating trans people to the status of living dead which then informs understandings of transness as “ungrievable” in comparison to grievable cisgender populations.

I utilize Butler’s concept of “ungrievable life” (Butler 2004) to explore why the imagined-cisgender life is grieved when someone comes out as transgender. Butler explains that “certain lives will be highly protected” while others “will not even qualify as ‘grievable’” (Butler 2004:24). When transness is positioned as something that is deficient and disposable, as informed by cultural views stemming from colonial violence

against gender diverse populations, the trans child's assumed and desired cisness is mourned. Cisgender life is "highly protected" and therefore grieved in relation to transgender lives which are "not considered lives at all, they cannot be humanized" (Butler 2004:25). The enduring impacts, or "ghostly matters" (Gordon 2008), of historical colonial violence is why there is high rates of violence against transgender populations—colonialist powers still enacting harm on ungrievable populations today. This violence against trans bodies is "in the name of a normative notion of human morphology" (Butler 2004:24); the enforcement of a cisnormative, dyadic<sup>1</sup>, and ableist understanding of human life.

Indigenous transgender populations not only lost social status due to degradation and implementation of mindsets which harmed transgender people, but they also faced systematic isolation and murder. In North America, Two-Spirit people held positions of power and respect such as healers and keepers of tradition (Robinson 2017). This challenged the boundaries of white European masculinity and gender systems, which led to the attempt of genocide of Two-Spirit and other gender diverse people (Gilley 2006; Morgensen 2011). The impacts of colonization on transgender populations are seen globally; for example, poor social and economic conditions of Māhū in Hawai'i as well as Hijra in India (Dutta and Roy 2014). Hijra faced persecution under British colonization, making non-cisgender expressions of gender a criminal offense (Hinchy 2019). Similarly, anti-sodomy laws were introduced to Hawai'i in the 1850's as a result of "Christianisation" efforts from Christian missionaries (Zanghellini 2013), which were

---

<sup>1</sup> Dyadic refers to bodies which are not intersex.

meant to socially and politically harm gender and sexual diversity through the embedment of white cisheteropatriarchy. These losses of both social status and political protections continue to impact the lived experience of gender diverse groups.

The transcending violence of colonial oppression of LGBTQ+ populations is also seen through the apathetic response to the AIDS epidemic during the 1980s and 1990s when the deaths of predominantly queer and trans people of color was not considered an urgent matter. Due to the pathologization of LGBTQ+ people and treatment of queer and trans communities of color as deficient, non-human, and disposable, this led to purposeful neglect by the government and medical institutions. This is also seen today with institutional neglect of communities impacted most by the COVID-19 pandemic; people with disabilities and people of color, specifically Black/African American, Hispanic/Latino, American Indian, and Alaska Native (Boyle et al. 2020; CDC 2021; Shakespeare, Ndagire, and Seketi 2021). These populations are outside of the public imagination of the idealized normative future and therefore considered disposable.

Grassroots activist efforts, such as the AIDS Coalition to Unleash Power (ACT UP), were established in response to the devastating effects AIDS had on LGBTQ+ communities (Cvetkovich 2003). ACT UP held demonstrations against pharmaceutical companies making excessive profits from AIDS-related drugs while focusing on legislation, medical research, treatment, and policies that would improve the lives of those living with AIDS. Through brochures, speeches, and demonstrations, ACT UP and other AIDS activists encouraged LGBTQ+ communities to transform feelings of grief into anger and political action. This emotion work of the AIDS movement set the parameters for what Gould calls the “emotional habitus,” or the group’s collective

emotional disposition (Gould 2009:32). These activist organizations re-defined the emotional habitus from a type of grief that kept people silent to a type of grief that made people angry enough to fight back; mourning made militant (Crimp 2004; Gould 2009). Because queer and trans lives are seen as “ungrievable” to many, queer chosen families were tasked with shifting this status of “ungrievable” to “grievable” to save lives and the future of queer communities. As parents in my research learn more about the ungrievable sociopolitical status of their transgender child, their mourning for the imagined-cisgender child shifts to familial, community, and political action to expose this unjust ungrievability. Through parents’ journey of processing the loss of the imagined-cisgender child and their efforts to support their trans child, they utilize trans-affirming frameworks to decenter cisnormativity in their family and position transness as worthy of life and protection.

I argue that these micro-level interactions within families of trans youth cannot be examined without the context of forms of transphobic violence, since non-affirmative microaggressions and acts of denial of personhood contribute to the larger societal ungrievability of transgender populations. The historical roots of death impacting transgender communities informs my understanding of the current context of how the normative, idealized cisgender future is grieved. These feelings of loss, albeit initial and not long-lasting for some parents, are very real consequences of the long-term impacts of gender ideologies which have led to this connection between death and transgender identity.

## Trans Youth Histories

This research diverges from positioning the trans child as the taken-for-granted source of parental distress by instead interrogating the cisnormative aspects of American family systems which often position gender non-conformity and transness as a “problem” to be corrected. Cisnormative gender ideologies which are engrained in the institution of the family set up family systems for distressing feelings. I utilize a disability justice framework to understand the difference between *gender transition* causing feelings of loss, and *transphobia and cisnormativity* causing feelings of loss. Eli Clare (1999) writes about the difference between “impairment”—the physical difference in the body—and “disability”—the social exclusion and difficulties encountered due to barriers constructed through an ableist society. I argue that being transgender is normal variation in human existence that does not equate to a death, yet when societal roadblocks or familial signs are put up to create stigmatization and disparities for trans folks, it can indeed become the site of loss. I use this framework to map out the parental journey of identifying cisnormativity as the problem as opposed to viewing the trans child as the problem.

This positioning of gender non-conformity as a “problem” can be seen in dominant constructions of gender in the United States throughout history and today. As previously discussed, dominant constructions or systems of gender that exist in the United States are rooted in the gender frameworks enforced by racist, colonialist projects to destroy trans communities. Trans activist and author Leslie Feinberg (1996) as well as Two-Spirit feminist scholar Qwo-Li Driskill (2010) argue that *patriarchy* is a tool of colonization and can be analyzed to understand the current ways in which colonialism persists today in the United States. In extension, this dissertation seeks to examine how

the tool of *cisnormativity*—with the purpose of reifying American normative futurity through endorsement of binary gender systems—intervenes in the everyday lives and relationships of transgender youth and their parents today. It is particularly important to investigate the role that whiteness plays in this research when trying to understand how cisnormativity emerges in cis parent-trans child relationships since all of the parent participants are white. I explore what these complex feelings of loss and mourning tell us about conceptualizations of gender, particularly how societal investments in whiteness and cisnormative assumptions about the child, contribute to these affective experiences.

As an effect of the historical harm done to transgender populations, childhood transness is treated as an unprecedented phenomenon because trans histories, cultures, and languages have been erased from dominant knowledge. Early research about trans youth did not even use the term “transgender”—a term that has historically only been used for adults—but instead the term “gender variant” (Granucci Lesser 1999; Menvielle and Tuerk 2002) has been used to describe youth whose “gender non-conforming behaviors of presentation is observable and causes a level of consternation in those that care for them” (Riley et al. 2013:644). The term “gender variant” focuses on the presumed abnormality of youth transness and the “problem” of trans identity within the family—a point of tension and anxiety for the parents as well as larger society.

The framing of transness as a “problem” has roots in early reparative approaches to “treating” childhood gender non-conformity. Queerness and transness were seen as pathological, as noted by the Diagnostic and Statistical Manual of Mental Disorders (DSM) classification of “homosexuality” as a mental illness until 1973 as well as “gender identity disorder” as a mental illness until 2013 which resulted in “treatment” to reduce

these “inappropriate gender-related behaviors” (Drescher 2015; Zucker and Spitzer 2005). These DSM classifications caused long-lasting institutional harm in regard to LGBTQ+ people accessing healthcare and the broader societal views surrounding queerness and transness. In the 1970s, therapists suggested that children’s gender non-conformity was due to the parents being confused about gender roles due to feminist movements and it subsequently impacting the identity and behaviors of the child (Hill and Menvielle 2009). Since children are viewed as non-autonomous beings who cannot be trusted to make “adult decisions,” parents felt a sense of blame from society for “allowing” their child to practice agency with their gender expression (Barron and Capous-Desyllas 2017). Parents of intersex children also express feelings of guilt for making decisions about their child’s body (Davis 2015), therefore even when children do not have agency over their body, parental guilt and blame is still associated with any non-normative body. The terms “gender creative,” “gender expansive,” or “gender independent” (Pyne 2014) have more recently been used in regards to transgender and gender nonconforming youth in an effort to move away from often pathologizing terminology surrounding non-normative or non-cisgender gender expressions and identities. While the terminology used to capture the different doings of gender that these youth engage in is varied, the research largely positions the youth’s gender as the “problem” being managed or navigated.

Young trans people today are often framed as the “first generation” challenging gender norms in this way. Since trans people have always existed, this false claim that they are the “first generation” erases the history of how young trans people have persisted among cisnormative societies and the inaccurate definitions placed upon them. These

unrecognized histories contribute to the erasure of childhood transness as a viable future—precisely the desired outcome of the colonialist projects to destroy trans communities. Being called the “first generation” contributes to hesitation and fear among parents due to the presumed uncharted territory of childhood and teenage transness. This dissertation involves reclaiming the histories of trans people and documenting present-day experiences of trans youth and their parents in an effort to contribute to the groundwork of dismantling this idea that childhood transness is something new or pathological.

Along with childhood transness in general being erased from history, only particular representations of childhood transness are viewed as acceptable. There is recent recognition and visibility of white trans children, framed as innocent and highly medicalized, but there is still invisibility of trans children of color, erasing Black and Brown survival from the future of transness and queerness. Since the hegemonic view of the hypothetical child is white, straight, cisgender, and able-bodied (Edelman 2004; Elman 2014), trans youth of color fall outside of the imagination of the child seen as worthy of protection. Trans youth of color face more difficulties and less protections because they fall even further away from the imagined and assumed normative future than their white trans peers. While low-income and racial minorities make up the vast majority of the demographic of trans children (Gill-Peterson 2018), there has only been a focus on the people who have access to the medical establishment due to framing of the transgender child as a medical issue needing treatment as well as medical racism preventing people of color from accessing and benefiting from proper health care. Families who have this access to the medical establishment are largely middle to upper



class white families, yet there is absence of interrogation into how these social privileges impact the legibility, safety, and grievability of their child.

### **Grieving the Imagined-Cisgender Child**

In research about parents of TGNB youth, feelings of loss are noted among the reactions of parents surrounding their child's coming out and transition (Barron and Capous-Desyllas 2017; Coolhart et al. 2018; Gregor et al. 2015; McGuire, Catalpa, et al. 2016; Menvielle and Tuerk 2002; Norwood 2012, 2013; Wahlig 2015). Scholars such as Coolhart et al. (2018), McGuire et al. (2016), Norwood (2013) and Wahlig (2015) use ambiguous loss theory (Boss 1999) to unpack the ambiguity and complexity of this particular "death." Ambiguous loss, a theory used to understand experiences of grief by families of missing persons or family members with Alzheimer's disease, is described as a "situation of unclear loss that remains unverified and thus without resolution" (Boss 2016:270). This theory is used to unpack the complex feelings of one's child being gone when the child is still physically alive although physically different. Parents articulate seemingly incongruent yet concurrent feelings of physical absence and presence of the child as well as psychological absence and presence (McGuire, Catalpa, et al. 2016). Norwood (2013) details four ways of coping with this ambiguous loss; feeling that the child has been completely replaced by a new person, is undergoing revisions and changes, has evolved into an "updated version" of themselves, or parents work to remove gender constraints they once put on their child. Coolhart et al. (2018) explains the ways in which this loss experienced by parents of transgender children falls under the category of Type 2 ambiguous loss—physical presence and psychological absence—while Wahlig (2015) briefly proposes that parents experience "dual ambiguous loss"; a combination of

Type 1 and Type 2 due to both physical and psychological losses. This concept of “dual ambiguous loss” captures the complexity of losing the normative envisioned future of the imagined-cisgender child as well as the physical loss of no longer being able to “see” the assumed-cisgender child they thought they once had. Throughout this dissertation, I use the terms “imagined-cisgender” and “assumed-cisgender” mostly interchangeably, but “imagined-cisgender” primarily captures envisioned normative futures while “assumed-cisgender” captures the present-day assumptions impacting understandings of the child.

Parents of TGNB youth report experiencing the loss of the gendered identity of “son” or “daughter” (Norwood 2012), as well as “daughter-loss” (Barron and Capous-Desyllas 2017) which involves the loss of dreams of the mother-daughter relationship such as being the mother of the bride or being in the delivery room while a daughter gives birth (Coolhart et al. 2018). Norwood notes that this is a “living death” (2012) since the child is still alive yet, in the eyes of the parents, some aspect of their personhood has died. Some parents even engage in symbolic rituals to mourn the “dead” child, exemplified by a mother who had a funeral at her church group (Norwood 2013). These findings point to the integral nature of gender in parent-child relationships, suggesting that normative gender expectations are at the crux of feelings of loss. While it has been theorized that *gender transition* provokes fears and worries for the parents that their child will not be able to live a normative future in terms of getting a job or having a romantic partner (Katz-Wise et al. 2017), others critique the focus on the transgender person instead of focusing on the social systems which result in social inequalities—a similar perspective-shifting approach as a disability justice framework. Riggs and Bartholomeaus (2018) contest of the focus on loss stating that scholars such as Norwood (2013), Wahlig

(2015), and Brill and Pepper (Brill and Pepper 2016) normalize and naturalize the idea of loss because it positions the child as the source of emotional distress rather than gender normativity. Riggs and Bartholomeaus find that cisgenderism—“the idea that there are only two genders, [and] that gender is determined on the basis of assigned sex” (Riggs and Bartholomeaus 2018:69)—produces an aspect of certainty of what parents can expect of a child’s schooling experiences, and that this certitude is lost as parents struggle to ensure inclusion of their trans children in gender-normative school systems. This is an important divergence in the literature, offering a distinction between viewing the child’s gender identity as the “problem” and instead viewing societal structures as the issue. It should be noted that not all parents of transgender children express feelings of grief due to their conceptualization of loss as the physical cessation of a human being, and they instead view their child as undergoing a gender “transformation” (Coolhart et al. 2018).

If parents resolve their grief, they are better able to develop parenting skills to help them raise a well-adjusted child with high self-esteem (Menvielle and Tuerk 2002). Some parents are able to transform feelings of isolation and frustration into experiences of advocacy, from which they derive meaning and pride (Gray et al. 2016). Wahlig (2015) notes how the mourning process which parents of transgender youth go through extends the typical death and dying process (Kübler-Ross 1969) by incorporating pride as a sixth stage (Ellis and Eriksen 2002). Normalizing ambivalence in terms of simultaneously mourning the “old” while accepting the “new” (Norwood 2012) as well as accepting ambiguity of non-binary gender identities assists parents during this mourning process. Building community relationships with other parents of trans and gender nonconforming youth aids in recognizing people, lives, narratives, and ways of existing

in the world that occur outside of the gender binary. Even if the parents still struggle with gendered language or recognizing the ways in which they perpetuate the gender binary in their own lives and relationships, they are aware of possibilities outside of the binary system of gender. These parents engage in a process of continuously unlearning oppressive systems of gender which they have been socialized into, with no end to this life-long process.

Despite feelings of loss being present in literature about parents of transgender youth, this field is largely missing a queer-affective analysis of *why* feelings of loss occur when their child is still in fact alive, *how* this mourning impacts parent-child relationship, and *what* this mourning process can tell us about larger gender discourses. While theories of ambiguous loss and the stages of grief are helpful in identifying feelings of loss, these frameworks lack broader investigation into what these feelings of loss tell us about institutional investments in cisnormativity, which are particularly present in the family.

Conversely, transfamily theory (McGuire, Kovalanka, et al. 2016) helps to understand how cisnormativity shapes the family and the repercussions that has for transgender family members. This theory states that the institution of the family operates from understandings of sex and gender as dimorphic and binary, that gender is biologically constructed, and that gender identity development is binary and unchanging. When put in the context of grief experienced by parents of transgender youth, transfamily theory can be useful in addressing how parents' cisnormative gender frameworks prompt their experience of mourning. However, there still lacks specific analysis of how cisnormativity shapes the institution of the family which results in gendered mourning.

## **Chapter Outline**

In Chapter 1, “Dimensions of Gendered Mourning,” I explore the intricacies of gendered mourning experienced by parents of transgender youth. This chapter considers how the loss of cisgender privilege and subsequent attempted rehabilitation of perceived cisgender privilege through “passing” stems from the positioning of trans identities and trans bodies as sites of danger. I also explore how gender-normative expectations of parent-child relationships are disrupted when the child comes out as transgender and how that disruption troubles the stability of the highly gendered family system. Chapter 2, “Trans Futurity,” centers conceptions of futurity in relation to gendered mourning. This chapter focuses on the death of future dreams parents had for their children, fears of losing a future through suicide, and how parents compared this “death” to other deaths they experienced which resulted in the same loss of future potential.

In Chapter 3, “Trans Livability,” I investigate how livability is fostered in the face of gendered mourning; both within families of origin and chosen families. I examine how institutional space for transness is created through intentional learning about gender diversity, community connections and activism, assisting with gender transition, and the decentering of hetero/cisnormativity in parenting practices. This chapter also examines the barriers, limits, and hostility that some parents experience in terms of fostering livability for their transgender child. Chapter 4, “Parental Transformations of Gender,” considers how having a transgender child shifted parents’ own understandings of gender. This chapter explores how trans kids are loosening gender constraints for their parents and the (in)ability for parents to express their gender and sexuality in more authentic ways. “The Undoing of Cisnormativity” concludes the dissertation by imagining what it

would mean to truly create a trans-affirming society. I argue that before we do that, we need to destroy cisnormative structures both within and outside of the family.

## **Methodology**

My research methodology takes an ethnographic and discursive approach, utilizing participant observation primarily at a community support group for parents of transgender youth as well as interviews with attendees of the support group to promote deep understanding of gendered mourning. The ethnographic data collection began in September of 2016 and lasted until March of 2020. Interviews with 22 parents and primary caretakers occurred from February 2020 to November 2020. The first two interviews were in-person, taking place at a coffee shop and a public library, and the remaining 20 interviews were over the phone due to COVID-19. Over the four years of ethnographic participant observation, I was able to witness parents at the beginning of their journey towards understanding their TGNB child and see how their perspectives about transness and involvement in fostering trans livability evolved over time.

Conducting interviews after being “in the field” for four years informed my interview protocol and allowed me to ask questions about events or experiences in their child’s transition that the parents discussed in the support group. Similarly, interviews allowed for the unpacking of feelings that were briefly mentioned at the support group but often brushed over due to specific group dynamics or the general belief that expressing grief is a sign of non-support, which I believe prevented parents from admitting to these feelings amongst the group. Most importantly, many of the parents saw me as another group member due to my long-time involvement in PTK and The Center which made the parents more comfortable with sharing openly and honestly about

feelings that they labeled as the “wrong way to feel.” As a researcher, I believe participants should directly benefit from the research being produced about their lives, therefore my participant observation involved producing resources for parents and acting as a non-judgmental source of information about queer and transgender identities which built trust and rapport that facilitated the vulnerable sharing of feelings during the interviews.

### ***The Setting***

My fieldwork mainly took place at PTK which meets twice a month at The Center, a local non-profit organization and LGBTQ+ community center. The Center hosts a variety of social support groups for LGBTQ+ people as well as cisgender and straight people wanting to learn how to support their LGBTQ+ loved ones. It is located in a Missouri college town surrounded by more rural towns, and it is the only LGBTQ+ community center in the region. The city in which The Center is located is about 70% white which is reflected in the people who utilize The Center’s programming. In fact, according to a survey I conducted to assist The Center in strategic planning, about 93% of program participants are white. This points to even further racial segregation within the LGBTQ+ community in this region and is a large contributing factor as to why my sample consists of all white parents except one white-passing Hispanic parent.

The city in which my fieldwork took place has aspects of a small-town environment, where you will likely see someone you know while walking downtown or grocery shopping. This smaller / closer community increases the need for parental vigilance and information control because there is no hiding or leaving the past behind. This increases the proximity to misgendering in the social world because almost

everywhere parents went, they interacted with someone who knew their child as their birth name. It is a constant reminder of the past and a constant challenge to not use the wrong name in the wrong setting. This acts as a pressure-cooker for mistakes; the constant reminders of the past and having to navigate who the child is out to eventually leads to slip-ups. This contrasts with larger cities where gender nonconformity is more commonplace and therefore does not stick out as much. In larger cities, there is also less of a chance of running into acquaintances who knew your child when they were an infant. While the small-town environment poses more stressors for parents navigating their child's degree of outness, there are also benefits in terms of how fast positive change can happen. Parents at PTK were often personally or professionally connected to the people in charge of implementing change at the doctor's office, school, place of worship, etc. Because of the personalized nature of implementing change in this setting, there was more accountability for "getting it right." The parents' ability to affect change particularly in the school systems—such as creating a "gender plan" similar to an individualized educational plan (IEP) for students with disabilities—also speaks to the parents' whiteness and socioeconomic status.

### ***Ethnographic Fieldwork***

I was deeply involved in many aspects of The Center's programming and operations—such as staffing open hours at The Center and helping plan community events—which facilitated my unobtrusiveness as a researcher since I was already an insider as a community member and volunteer of the organization. Although, while I was an insider of the community center and the population it serves as a trans person, I was an outsider to the parent perspective. During my observation at PTK meetings, I positioned



myself as a student (Spradley 1980) wanting to learn from the parents about their experiences raising a TGNB child. I obtained permission from the Board of Directors to observe PTK meetings, but I felt it even more important to obtain permission from the parent who led the group meetings. Before I began observation, this parent—who I did not interview because her transgender child was above the age limit for my research—and I met at a local coffee shop to get to know each other. I explained my research objectives, my personal motivation behind this research, and my commitment to the local LGBTQ+ community and privacy of the parents. Acting as a gatekeeper for the protection of the group members, this parent vouched for me to other group members given our conversation and her observation of my work with the local LGBTQ+ community prior to the start of this research. Other parents trusted her introduction of me into the group’s space, and I was very much welcomed as a researcher since the parents wanted there to be more resources for parents of transgender children and hoped that would be the outcome of my research.

In addition to attending PTK meetings which occurred twice a month for two hours and a variety of community events that the parents attended or led (gender-inclusive children’s book readings, suicide prevention walks, city council meetings, state legislative hearing sessions, etc.), I also served as a program coordinator of The Center’s LGBTQ+ youth group, Spectrum, for ages 11-18 years old during the entirety of my data collection. In this role, I mentored LGBTQ+ youth through coming out, tense family relationships, social and medical transition, non-acceptance at school, as well as housing and food instability, suicidal ideation, self-injury, and other difficult life events. As a Spectrum coordinator, I interacted with many of the PTK parents’ children. While the

parents were aware I knew their children and the Spectrum youth were aware I observed PTK meetings for my research, they both knew that I was very committed to maintaining the confidentiality of each group—conversations at PTK were never relayed to their children and conversations at Spectrum were never shared with PTK parents. This meant I often knew the inner grapplings of parents that children were not aware of, and I saw struggles the youth were going through that their parents were not privy to or did not understand.

Although, my involvement at Spectrum ultimately did not end up being a central part of this research for three reasons; (1) I found it very important to be totally present for the youth which made it difficult to take field notes during meetings, (2) Spectrum meetings were physically and emotionally exhausting and so I rarely wanted to type up field notes when I got home, and (3) my intention to interview Spectrum youth—since I did not document many field notes during actual meetings—was derailed because of COVID-19 due to the youth not being able to speak freely in their home while under lockdown and parental surveillance. However, I did utilize my involvement as a Spectrum coordinator as a sensitizing lens through which I interpreted what the parents shared. For example, some parents said they were supportive of their child’s medical transition, yet their children would share with me at Spectrum that they did not feel supported in their desire to medically transition. This unique insight into both sides of the parent-child relationship illuminated miscommunications and differing perspectives of what it means to be supportive. It also provided me with first-hand insight—aside from my own personal experience as a trans person—of the detriment of delaying social or medical transition for a young transgender person (Ashley 2019b). Additionally, the

sometimes-contrasting pictures I was painted of the parent-child relationship allowed me to tune into how my presence as a trans person potentially impacted how parents framed what they shared both at PTK and in the interviews in terms of putting a positive spin on things as to not be judged by me or by other parents who were further along in their journey of understanding.

Ethnographic fieldwork at PTK, as well as community events and activist actions parents participated in, allowed me to “get the feel” (Spradley 1980:51) of what having a transgender child is like which is particularly important when investigating the gendered mourning process. Observation at meetings allowed me to witness the real-time unpacking of their feelings and struggles—the parents saved these conversations just for these meetings since they often had no one else to talk to about their child’s transition or their own feelings surrounding their child’s transition. Detailed field notes were taken during observation of PTK meetings; making note of attendance numbers, makeup of the attendees (mothers/fathers/grandparents/stepparents), family struggles of parents and child (ex: coming out to extended family members, navigating incorrect name/pronoun usage, adjustment of siblings, mental health crises, etc.), repeated phrases (ex: “I’d rather have a living son than a dead daughter”), resources shared amongst parents (ex: affirming health care providers, legal name change advice), plans for local and state-wide activist efforts, and more.

### ***Interviews***

Following the observation period, open-ended interviews were conducted with 22 parents from PTK which allowed for further depth and development (Weiss 1995) of the gendered mourning process. Solicitation for interviews occurred at PTK meetings and the

online forum that parents use to share resources and get advice from each other in between meetings. The interviews ranged from 55 minutes to 123 minutes, and each was recorded and transcribed. Interview transcripts were coded in NVivo using open coding, and I then collapsed codes into analytical themes which framed each chapter.

I use discourse analysis to explore how the social reality (Phillips and Hardy 2002) of gendered mourning is made real and produced through cisnormative frameworks held by the parents. Discourse analysis is useful in exploring the relationship between cisnormativity and the feelings of grief experienced by parents because one's social reality "cannot be fully understood without reference to the discourses that give them meaning" (Phillips and Hardy 2002:3). Analyzing the intricacies of the social production of gendered mourning is central to this research, and discourse analysis is key to understanding how gendered mourning is created in the first place and also how the frameworks which produce gendered mourning are "maintained and held in place over time" (Phillips and Hardy 2002:6). Analyzing *why* parents felt loss helped to illuminate that the sadness is not about the child being trans, but instead about failures of cisnormative familial expectations.

Interviews were essential in diving into the specifics of gendered mourning because parents worried about expressing sentiments that would be deemed unpopular or controversial by the group, since the group is centered around supporting and affirming the child. Many PTK moms often give advice to new parents that this is "not about you," and that the sole focus should be on supporting the child. While I would agree that the privileging of the needs of the trans child is important, especially when dealing with mental health concerns, it is also important to process one's feelings in a safe and honest

space even if those feelings are not the “right” or popular way to feel. I return to my earlier mention of being aware of how my presence as a trans person impacted my data collection. In the interviews, parents apologized for using “incorrect terminology” and noted that they were “embarrassed to confess” certain reactions or feelings that are not “the right way to feel.” Some parents also shared that they felt awkward expressing certain opinions or beliefs and worried about offending me because I am trans. Just like at PTK meetings where I made sure to visibly nod and exchange empathetic smiles while parents were talking so they did not feel judged by me, I also gave a lot of non-visual feedback during the phone interviews, such as “mhm” and “right,” to assure parents I was listening in a non-judgmental manner. Many parents thanked me at the end of the interviews for providing them this safe space to talk about feelings which are not “how I should feel” and that they dismissed for the benefit of their child.

My reflexivity of how my presence as a trans person might have impacted my observation and interview with parents of transgender youth is informed by what Meadow’s calls “embodied ethnography” (Meadow 2018:13); she is both an analyst and being analyzed by the subjects of her research. As parents read my gender presentation during PTK meetings, they might have implemented a filter into how they talk about their child’s gender identity both at meetings and during the interviews. My identity as a trans person caused hesitation and awkwardness surrounding being completely honest about how they felt about their child’s social and medical transition. Therefore, even though parents were fairly candid with me in the interviews, I believe that if I was cisgender and gender-conforming, they might have been even more unfiltered in their responses.

## *Participants*

There were about 60 parents who attended PTK meetings during my ethnographic data collection; some parents attended for the entirety of my data collection and some only attended a few meetings. There are a few participants—Lisa, Steve, Stacey—who are mentioned as part of my ethnographic fieldwork but did not interview and therefore are not captured in the demographic information. The sample of interviewees consisted of 22 parents and primary caretakers—16 mothers, 3 fathers, 2 grandmothers, and 1 stepfather. These 22 parents represent 19 TGNB youth, as there were 3 sets of parents who were either married or separated co-parents representing the same child. Sampling criteria involved living in the Mid-Missouri region and being the parent or primary caretaker of a transgender or non-binary child 18 years old or younger at the time of joining PTK. Out of 19 youth represented, 5 of them were over the age of 18 at the time of the interview with their parent(s), but the parent(s) had been attending PTK meetings for several years prior to the interview and therefore the child was under the age of 18 when their parents “enrolled” in my study.

Participants ranged in ages from 28 to 75 years old, and all reside in Mid-Missouri. Four participants completed high school, 9 held bachelor’s degrees, and 9 held graduate degrees. Twenty-one parents were white, and 1 was Hispanic. Their transgender children ranged in ages from 5 to 21 years old at the time of the interview, and 2 to 17 years old at the time they came out as transgender. Ten children were trans girls, 6 were trans boys, and 3 were non-binary. Sixteen youth were white, and 3 youth were multiracial: (1) African, Latino, Native American, and white, (2) Hispanic and white, and

(3) Black and white. See Appendix A for demographic information on each parent and child.

The demographic information was captured at the time of the interview with each parent, so it is important to note that the parents are reporting the gender identity of their children based on their current understanding of their child's gender identity. From my experience with Spectrum, I suspect that youth have a much more fluid or non-binary understanding of themselves internally but present a binary identity to their parents for simplicity or fear of their parents not understanding. Therefore, while only 3 parents reported having non-binary children, I believe there is more non-binaryness amongst the youth represented in this research. Additionally, as children get older and further understand themselves, these gender identities are subject to change.

I utilized a convenience sample (Weiss 1995) since I only had access to the parents who attended PTK meetings. This unfortunately eliminated completely unsupportive and hostile parents from my sample because those parents did not attend PTK meetings. Based on my interpretation, there were two or three very unsupportive parents who attended PTK meetings throughout the time of my data collection, but they did not return after their first meeting, and they did not respond to my solicitation for participation in an interview. While my sample size was small and limited to who attended group meetings, this small sample size allowed for in-depth analysis of a "hard-to-reach category of families" (Rahilly 2015:344) and also points to the need for future research and resources focused on hostile and blatantly transphobic parents of TGNB youth.

### *Methodological Limitations*

There are limitations to my sample and the scope of my research. Since I was unable to interview transgender and non-binary youth, this research does not capture the child's perspective on gendered mourning. Meadow intentionally does not interview youth because she does not want youth to be "subject to the analytic gaze" (Meadow 2018:237), yet Travers (2018) finds it problematic to only rely on parents to report the experiences of their trans children and therefore interviews both youth and parents. I believe it is important to ethically capture the experiences of trans youth, by building genuine relationships with them and producing resources for them in order to avoid exploitation of this at-risk and marginalized population.

As previously discussed, my sample was limited to parents who attended PTK and therefore I did not capture all perspectives of parents of transgender youth. My sample was predominantly supportive white mothers who are middle to upper class. My sample lacks significant numbers of fathers, parents of color, and blatantly unsupportive or transphobic parents. Also, the majority of parents in my research lived directly in the relatively progressive college town where PTK meetings were held. My sample consists of 3 parents from more rural and conservative towns. As mentioned above, these segments of the population are a hard-to-reach population likely to hold more fears about participating in this research and talking to a trans person.



## CHAPTER 1: DIMENSIONS OF GENDERED MOURNING

Parents sit in a circle of squeaky couches, passing tissues, and sharing words of comfort as they discuss their children. Andrea weeps as she says that she will never be able to see her daughter again. Lisa expresses frustration that her friends stopped asking about her child because they just don't know how to approach the situation. Martha says she keeps a shrine of pictures in her bedroom from when her child was little, while other parents struggle over whether to even display pictures of their child. Barbara asks the group, "when does this feeling go away?"

The community support group Parents of Trans Kids (PTK) provides space for the processing of parents' reactions and feelings when a child comes out as transgender. Observation at these meetings and interviews with attendees allowed for the mapping of the various dimensions of gendered mourning. Feelings of grief associated with the child coming out as transgender and processing the loss of the imagined-cisgender child appear in several different forms illuminating the complexity of gender transition within the family. Challenging gender ideologies which are deeply engrained throughout a family's history can disrupt many familial processes and conceptions of relationships.

This chapter will unpack what happens when transness destabilizes the taken-for-granted nature of cisnormativity in the family system and how transgender youth become relegated to the status of "living dead" within family systems. I categorize these various forms of gendered mourning as (1) fears of their child existing in a transphobic culture, (2) feelings of melancholy and nostalgia surrounding how things *used to be* as a family system, and (3) feelings of conflict surrounding the child's changing or anticipated

changing body. Gendered mourning is informed by the invisible forces of cisnormativity within the family and by the realities of discrimination, violence, and societal othering towards transgender populations in America today. Even the most accepting parents, parents who have a more nuanced and accurate understanding of gender than most cisgender people, still experienced these pangs of sadness when reflecting on their child's past, present, or future. The investigation of gendered mourning is a vital analytical and interpersonal opportunity to identify *what* is being mourned rather than *who*.

Through unpacking the dimensions of gendered mourning, we see how the realities of complex gendered mourning within the family is actually much larger than transgender youth themselves. Sociopolitical systems which harm and ostracize transgender youth, as well as familial systems which are structured through the gender binary, create the conditions under which transness is deemed a loss.

### **Types of Mourning: Cisgender Privilege Loss**

Privilege, especially gender and racial privilege, have been prevalent conversations in academia and public discourse. These conversations are often about who has privilege, who doesn't, recognizing one's privilege, using one's privilege for good, etc. Yet, the loss of privilege is rarely discussed because someone usually either has it or they do not. Some people with disabilities will experience this loss of able-bodied privilege if they become disabled from a previously non-disabled position. The loss of non-disabled privilege is due to the various barriers disabled people experience in a society that was designed for neurotypical and able-bodied people, as well as the cultural idea that disability is an undesirable state that is always coupled with a longing for a past time of able-bodiedness (Kafer 2013).

The loss of gender privilege is uniquely experienced by transgender people. When transgender people socially and/or medically transition, we often lose the privileges that accompany being perceived as cisgender. Transgender women especially deal with this loss of gender privilege because they are going from a perceived gender category of more gender privilege (man, specifically cisgender man) to a category of less gender privilege (woman). Due to femininity being seen as inferior to masculinity, transfeminine people “will drastically lose status and respect in our society, much more than those women who act boyish or butch” (Serano 2007:285). Transgender youth experience this loss of privilege early in life, sometimes so early that they do not even realize it; life will always be lived without cisgender privilege. Yet, the hopes and dreams parents have for their children often are wrapped in a clear coat of cisgender privilege. The parents cannot see this clear coat and do not know it’s there, until it is ripped away. Cisgender people are unaware of cisgender privilege because compulsory gendering, cisnormativity, and cisgender assumption are invisible social forces (Serano 2007). The ripping away of this clear coat of cisgender privilege is often more shocking to the parents than it is to the children.

“I was alarmed. I was sad, very sad, still feel sad because of the issues it was going to cause her with life. She already had a lot of issues with life. This was just, like, um, putting a lid on any chance for her to have a happy life.” –Barbara (75 years old), grandmother of 21-year-old transgender girl \*Came out at 17 years old

Parents of transgender youth express fears of their child entering a world that is not made for them. Typical fears that a parent might have of their child entering into the world are

exacerbated by this loss of gender privilege and the recognition that transgender communities are often demeaned and dehumanized. When transgender youth come out and start to socially or medically transition, they lose their once perceived cisgender privilege, which refers to the social privileges afforded to a person when they are interpreted or “misrecognized” (Pfeffer 2014) as cisgender.

“The idea that my kid is going to live somewhere on their own, you know, that’s all parents are terrified of that, right? That’s a normal thing that any parent whose kid’s going to grow up and move out and try to start living on their own. But then I have this extra layer of, what if the people they live around are, you know, transphobic, homophobic? And their roommates are all going to be in that same boat, so they don’t even have an ally to back them up.” –Martha (52 years old), mother of 18-year-old non-binary child \*Came out at 14 years old

“The statistics are insane; the statistics for homelessness, for sexual abuse, for suicide, it’s staggering, and that terrifies me. That at some point we will do or say something that will make them not want to live under our roof anymore, and I mean, as a parent of a 16–17-year-old child it’s terrifying to think of them leaving the nest and being on their own, as it is, but you couple that with the risk factors for transgender teens and it’s terrifying.” –Patricia (55 years old), mother of 17-year-old transgender girl \*Came out at 15 years old

As Martha and Patricia allude to, all parents can understand worries about a child’s future, but parents of non-normative youth (not white, not straight, not able-bodied, etc.) have fears and worries of a child having to navigate hostile social institutions and environments. Cisgender parents often are not aware of the depth of discrimination and

risk that comes along with being transgender. It's an eye-opening experience for parents which often comes along with feelings of sadness and helplessness that they cannot improve the reality of these disparities. Cisgender people who are not knowledgeable about the diversity of gender identity and gender expression are sometimes not even aware that cisgender privilege is a thing that can be lost. The introduction to gender identities and understandings of gender which are new to them exists simultaneously with the ripping away of cisgender privilege. Learning itself can be a type of loss, a loss of a less informed former standpoint. This coupled with the feeling of a child not being safe sends some parents into a whirlwind of confusion and fear.

Even parents who celebrated their child's gender identity still felt sad and scared when they thought about their child's future and potential adversities they may face. Cisgender privilege allows youth to attend school, go to the doctor, use the bathroom, have a job, access housing, etc. (Johnson 2013) without the fear of harassment, misgendering, microaggressions, physical assault, or being denied resources.

“We live in a shitty, shitty society that's not going to be kind to my kid, and this is one more struggle that my kid's going to have to go through. It's not that I don't want my kid to be trans, it's that I don't want society to be shitty to trans people because this shouldn't be a thing, like, it shouldn't be a hard process.” –Ash (35 years old), mother<sup>2</sup> of 14-year-old transgender boy \*Came out at 11 years old

“I was sad, not because my child was coming out as non-binary, but I was sad because I was like, ‘oh shit, everything I have done, as a mama bear to protect my

---

<sup>2</sup> Ash is non-binary but uses the term “mom” / “mother.”

child from this shitty world is now going to be really hard.’ Not because I’m ashamed or because of religion, but because I was scared for my kid’s life... And I was stuck because I knew if my kid doesn’t come out, I’m still going to be scared for my kid’s life.” –Martha (52 years old), mother of 18-year-old non-binary child \*Came out at 14 years old

“She’s exactly who she’s supposed to be and how she’s supposed to be, and I truly believe that 100%. But I also know that, statistically, she’s in a much higher risk of violence. Transgender women are one of the highest categories of people to have violence against them. And so, as a parent getting ready to send my child off to college, I have a lot of fear with that.” –Kim (47 years old), mother of 17-year-old transgender girl \*Came out at 13 years old

“I do feel pain knowing that I can’t protect, like, having to constantly let go of this idea that, like, I could protect her.” –Jennifer (35 years old), mother of 8-year-old transgender girl \*Came out at 2 years old

Cisgender parents, like Kim, Martha, and Jennifer, who have engaged in intentional learning about transgender experiences to better support their child, hold intense fears about their child’s future because they know the reality of the struggles their child will likely face. Ash, who is a non-binary parent, also holds these fears as they have witnessed transphobia firsthand as well as through transgender friends. This fear is worsened by the sociopolitical climate of the United States during the time of my data collection (2016-2020) and especially because my data collection took place in the Midwest. Nationally, the years during my data collection were the deadliest years in terms of violence against

transgender people, particularly transfeminine people of color, according to reports from the Human Rights Campaign (Lee 2020). There were multiple anti-trans legislative bills specifically targeted at transgender minors in Missouri, where my ethnographic fieldwork took place. These bills sought to ban gender-affirming healthcare for transgender minors while criminalizing the doctors and parents who provide gender-affirming care, and ban transgender athletes from participating in sports. This proposed legislation acted as an orchestrated attack on transgender youth that reinforces the cisnormative idea that transgender people are not real members of their gender category, and contribute to the “slow death” (Berlant 2007) of transgender people. These bills, which were proposed in 29 states according to Freedom for All American’s legislative tracker (2021), are steeped in the stereotype that trans people are dangerous individuals from whom other students, particularly cisgender girl students, need protection. These myths, misconceptions, and blatant discrimination deepened the parental pain of the transgender child not being valued or protected by institutions of power, which will make the child’s life much harder.

Cultural fear surrounding healthcare for transgender youth is based on misconceptions about the reality of gender-affirming care for minors. Even adults, such as their parents and medical professionals, are subject to this sociopolitical infantilization—distrusting their ability to assess the need of this life-saving healthcare and work in the best interest of the child. Similarly, cultural panic surrounding transgender youth playing on the gendered sports team they identify with stems from transphobic and cisnormative ideas of personhood, as well as misogynistic ideas of strength and athletic talent. The idea that transgender girls would have an advantage over

cisgender girls simply because they were assigned male at birth contributes to the idea that transgender girls are “actually boys,” and that boys are naturally better at sports. These bills reflect the systemic transphobia embedded in our American society and political systems. This proposed legislation not only denies transgender people access to basic rights and inclusion, but it speaks to larger ideas about which youth are worthy of protection in this country. Laws banning gender-affirming care for transgender youth also meant that parents worried this lack of access would lead to more mental health concerns for their children (Kidd et al. 2020), bringing their child closer to the harm, and potentially death, that gender-affirming care prevents.

“Just the other day, they reversed access to healthcare, or, like, the nondiscrimination in healthcare. I mean, that’s just total panic. I’m counting down the years of if Trump gets elected again, how old will she be? That was devastating.” –Phoebe (28 years old), mother of 8-year-old transgender girl  
\*Came out at 6 years old

In many marginalized communities, there existed a constant anxiety and looming sense of darkness during the four years that Donald Trump was the President of the United States (Gonzalez, Ramirez, and Galupo 2018). This fear is intensified by location and geographics; for example, living in some cities in the Midwest means their child will stand out more in comparison to some coastal cities like New York City or Los Angeles where visibility of gender non-conformity is more commonplace. Like Phoebe, many parents view their pre-pubescent transgender children’s puberty as a ticking time bomb. If transgender children do not have access to hormone blockers to delay puberty before they can begin hormone replacement therapy, they will go through their endogenous



puberty, bringing about development of secondary sex characteristics which will worsen gender dysphoria. The American Academy of Pediatrics advises that puberty blockers and supporting any social or medical transition is deemed best healthcare practices for transgender youth (Rafferty et al. 2018). Puberty is never fun, even for cisgender kids, but for transgender kids this can mean experiencing extremely distressing changes to their body that will make it harder for them to “pass” later in life.

Parental realizations and experiences of their child’s loss of cisgender privilege speaks to the taken-for-granted nature of social and political protections afforded to cisgender people. Since the majority of the parents in my research are white parents raising white children, this is likely the first time they encountered their children being at-risk for state violence and greater health disparities as compared to their peers and siblings. When the clear coat of cisgender privilege is ripped away, parents begin to understand the vulnerable position their children are in just by existing, stirring up feelings of loss and grief. The invisible yet far-reaching social forces of cisnormativity and transphobia often go unnoticed until one has intimate experience with transgender populations. These parents jarringly realize that cisgender privilege is an assumption coupled with the other expectations held by parents based on the child’s assigned sex at birth.

### ***Attempted Maintenance of Perceived Cisgender Privilege***

Parents attempt to rehabilitate their child’s safety and protections through the desire of their child “passing” as cisgender. The concept of “passing” is debated in the transgender community about if this should be or even is a desirable goal. Some transgender people do not have the economic resources to gain access to gender affirming

healthcare which would make “passing” a reality. According to the 2015 U.S. Transgender Survey, transgender people are four times more likely to have a household income of less than \$10,000 a year as compared to the general population and experience unemployment at twice the rate for white transgender people and four times the rate for transgender people of color as compared to the general population (James et al. 2016). Therefore, there is an inherent privilege in passing. Some transgender people see the goal of “passing” as adherence to cisgender standards of beauty and the hierarchy of cisnormative ideas of gender (Billard 2019). This perspective instead urges transgender people to be visible in their transness and reject cisnormative ideals, which are thought to be the “outward manifestation of shame” (Bornstein 1995:125). On the other hand, some transgender people and their loved ones see passing as a survival tool and the key to many doors that are shut on transgender people in our society. Passing can be “simultaneously affirming and compliant” (Vivienne 2017:138); allowing one to be seen as who they are, yet also adhering to systems which harm the community.

While passing is a validation of identity for some transgender people, the process still results in assimilating into cisnormative society to avoid harassment and rejection (Puar 2017). Parents struggle with this tension of wanting to affirm their child as they are, yet recognizing the need for compliance to cisgender beauty standards in order for their child to be safe and accepted.

“I thought about the bigger problems later, like violence or safety, you know, like wearing swimming suits, or growing facial hair later, or getting too tall, or having huge feet. You have to kinda pass as female if you’re...you know, we don’t just celebrate trans people. If you saw someone who’s obviously trans, we’re not like,

“oh, cool, that person’s trans, that’s awesome!” I feel like it’s dangerous, or people are scared of them, and it’s...I don’t know, I worry about everyone else.”

–Phoebe (28 years old), mother of 8-year-old transgender girl \*Came out at 6 years old

“Selfishly because of safety issues, I hope that she, to me it seems like you’d be safer to be more feminine. To try to look as much like a w-, you know, biological woman as you can, so that people don’t know. And that’s not, maybe, fair, but in my head as a mom, just who’s scared, and worried about discrimination and, you know, even the possibility of being physically attacked or something because of who they are and how they look, it concerns me. Um, I don’t tell her those things, but as a mom, I worry.” –Mary (44 years old), mother of 18-year-old transgender girl \*Came out at 16 years old

Parents of transgender youth believe that being perceived as cisgender is safer and therefore they strive for this for their children. Gaining access to puberty blockers allows for the potential for a passable, potentially safer future. Though, this is not attainable for many. Puberty blockers are expensive, costing thousands of dollars per month without insurance (Stevens, Gomez-Lobo, and Pine-Twaddell 2015). In a study about the denial of insurance coverage for puberty blockers and gender-affirming hormone therapy for transgender adolescents, it was found that less than a third received insurance coverage (Nahata et al. 2017). These economic barriers, and other systemic issues such as lack of service availability and lack of medical provider awareness (Puckett et al. 2018), nearly eliminates this as an option for low-income families and families living in rural areas. It is important to note that low-income and racial minorities make up the vast majority of

the demographic of transgender children (Gill-Peterson 2018), but these populations generally have less access to this lifesaving healthcare which will set them up for increased disparities as compared to their middle/upper-class and white transgender peers.

Cisgender standards of beauty, and the applause and celebration of only passable transgender people, privileges those who have the economic resources to achieve that. Although, even for parents with the economic means to provide gender affirming puberty blockers to their children, like Kim, it still may not be an option because the child came out “too late.”

“I think it’s just kind of a sadness. Sometimes I’ll look at her and think, you know, well if we got you on hormone blockers, would you have struggled less? Whenever anybody misgenders her, you know, I struggle. Like, when we go to a restaurant, I will make sure to refer to her as Christina in front of the waitstaff. It’s just my anxiety. It’s that parent wanting to make things as good as possible, but I think also some of it is that guilt that, you know, if she had been on hormone blockers earlier, maybe it would’ve made the transition easier, you know.” –Kim (47 years old), mother of 17-year-old transgender girl \*Came out at 13 years old

Parents in the community support group encourage other parents to access puberty blockers if the child is young enough because it will make the child’s life easier and spare them the trauma of a puberty that goes against how they envision themselves.

Nevertheless, this guilt and anxiety surrounding not accessing puberty blockers alludes to this idea that there is an ideal transition and an ideal transition timeline to achieve passability. The illusion of a cisnormative future, either through being cisgender or

through achieving cisgender passability, leads parents to feelings of sadness. The loss of cisgender privilege is taken as a hard hit by parents of transgender youth, but the benefit of the recognition of cisgender privilege loss is that this often propels parents into activism and community engagement to make transgender children's lives better, which will be explored in later chapters.

### **Types of Mourning: Family as a Gendered System**

The institution of the family is the primary source of early gender normativity and gender binary socialization (Berkowitz and Ryan 2011; Bernstein and Reimann 2001; Gray 2009; Kane 2006; Murray 2010). Gender dictates dreams for a child's future, ideas of what child-parent relationships will look like, ideas of how siblings relate to one another, and even how family history is carried into the present. Gender is not only something that shapes individual identity and experiences, but it is also a structure (Risman 2004; Risman and Davis 2013) and institution (Lorber 2001) that shapes our larger social worlds. Lorber (2001) theorizes that gender is a social institution which organizes our lives, legitimates those in authority, and creates a stratification system of rights and responsibilities. The gender binary system not only creates a hierarchy of men above women, but it also creates a hierarchy of cisgender people above transgender people. This hierarchy places transgender children in even more of a subordinated position in relation to their parents, in regard to age and gender, and therefore privileges the parental understanding of gender as the dominant operating system within the family. Risman positions gender as a "social structure with social processes that occur at the individual, interactional, and macro levels" (2018:28). Each part of the structure impacts the other parts, meaning that if a change in gender occurs at the individual level,

this can set off changes in the ways that individual interacts with other individuals and larger institutions they exist in. Gender can also be viewed as an institutionalized system of social practices that categorize and organize social relations and inequalities based on binary gender differences. The system of gender impacts the distribution of resources at the macro level, patterns of behavior at the interactional level, and understandings of selves and identities at the individual level (Ridgeway and Correll 2004). I argue that the operation of gender as a system, infiltrating multiple levels of experience, is most helpful for understanding how gendered mourning operates within the family.

Gender acts as a system within the family, organizing roles, dictating responsibilities, and creating expected future paths for family members. When one part of the system changes, all the other parts must adjust to find equilibrium again. When a child comes out as transgender, there is a domino effect; all the other parts of the system must recalibrate. Transfamily theory states that most families expect and anticipate, unknowingly, their family members to be cisgender, and the presence of a trans family member “brings attention to the tension between essentialist versus social constructionist views on gender” (McGuire, Kivalanka, et al. 2016:61). Sara Ahmed uses a queer phenomenological lens (2006) to look at how orientations, such as these cisnormative gender ideologies and expected gendered paths, point us towards the future. These orientations, like landmarks or familiar signs, let us know where we are going, which direction we are headed, and what to expect. Normative orientations direct people in the path of heteronormativity, cisnormativity, and able-bodiedness, which is done through constant sexuality, gender, and body-norm socialization. This normative orientation provides us with the fantasy of “the good life” (Berlant 2011). American family systems

aspire for this good life and enlist children in the reproduction of these fantasies and desires, attempting to secure a lineage that represents privilege. Yet, these fantasies of a normative future can become a “cruel optimism” (Berlant 2011); when something you desire is actually an obstacle to your flourishing. When a child does not follow the directed path a parent imagines for them, the parent may experience anxiety and loss of an imagined future; an obstacle in the journey to acceptance. This tension that exists when there are conflicting gender ideologies disrupts the assumed mundaneness of gender and complicates the family’s gender system.

Recalibration and letting go of parts that no longer fit into the system is a much-needed part of the journey towards acceptance. Although recalibration is not always a happy and positive experience for both child and parent, I would argue that trans people ourselves go through a recalibration process which is not always happy and positive either. This doesn’t mean we hate who we are as trans people, although this could definitely be influenced by internalized transphobia. Rather, adjusting to the new ways the world interacts with us and the new ways we must assert ourselves and make space for our communities is difficult and takes some getting used to. Family members also experience a recalibration process of what this change means for the family’s gender system. When one becomes disoriented or when something/someone disorients us in the process of reorientation, this generates a new direction of a life path. The transgender child attempts to reorient the parent towards a gender ideology which affirms and supports their gender identity, but parents struggle with the conflicting gender ideologies. This dis/reorientation process is accompanied by loss of what was expected for the family’s gender system, particularly the parent-child relationship and the symbol of the

child within the larger family structure. Dis/reorientation is only necessary due to parents operating from a baseline of cisgender assumption and the subsequent failures of that assumption.

### ***Name Loss as the Perceived Disruption of Family Lineage***

Gender is passed down in the family like my great-grandmothers crocheted doilies and my grandfather's floral oil paintings. We display these quirky items to remember our family members and honor those who have passed away. They are only alive through our memory, storytelling, and sentimental items connected to their lives. Gender is passed down throughout the family not in a biological way, because gender is not biological, but in a cultural way that connects a child to a family lineage and gendered traditions. The expected gender inheritance in the family system occurs through naming practices, and these naming practices are important in the maintenance and management of gender categories (Pilcher 2017). Throughout history, gendered names have decided a child's "economic, symbolic and affective positions within the family and its social future" (Vernier 2017:217). It is also argued that first names denote individuality while last names signal family connection (Elias and Schröter 1991). Parents are often intentional about picking first and middle names that honor family members and traditions. This can become problematic for transgender people when the first name does not in fact signal individuality, but instead a representation of a gendered embodiment that brings discomfort and psychic alienation. Yet parents are tied to these gendered names chosen at birth because they have family meaning.

"He's Blake Thomas, so he kept a family name which I thought was really, really cool, because Lilly is short for Lillian, which was my mom. And then Ann was



the middle name and that was my grandmother's middle name. So, he stuck with Thomas which is my brother's middle name, and it's his dad's grandpa's name, so, I felt like, okay, so he still stuck with a family name, at least on the Thomas part, for his middle name." –Patti (43 years old), mother of 17-year-old transgender boy \*Came out at 13 years old

"There was an emotional investment with the middle name because Andrea's middle name is the same, her mother's middle name is the same, and I think the grandmother's middle name was the same, so it was this family tradition to have the middle name, Iris. But, when Joshua chose his new names, he picked Henry, which is his grandfather. So, that was pretty cool, he replaced a family name with a family name." –Adam (50 years old), stepfather of 20-year-old transgender boy \*Came out at 15 years old

Names chosen for children often have some sentimental meaning to parents.

Naming practices in families are a way to show respect for family history and honor family lineage (Pilcher 2017; Vernier 2017). When the child chooses a different name, this can bring about feelings of loss of connections to that family lineage for the parent. The recalibration process of adjusting to a new gendered being was deeply felt in relation to the child's name change. The most profound feelings of sadness are from what I call "name loss." Parents expressed sadness, many crying during PTK meetings and my interviews, because they had sentimental attachment to the child's birth name. Naming a child after a family member, mainly family members who have now passed away, is a way to keep that family member present and "alive." As showcased in the above quotes, parents were pleased with the name change when the new names were still representative

of the family in some way. Patti and Adam's children both picked names that would honor the family, from a feminine name to a masculine name. When there is a pre-established family connection in the original naming process, transgender youth may feel desire or obligation to replicate the family connection through a member of their corresponding gender. Even though transgender children are disrupting the cisnormative gender binary, there is still some adherence to the gender binary when picking new names due to the highly gendered composition of the family system.

Some parents felt that choosing a different name was a rejection of that family connection and history, and a dishonoring of the family. As previously discussed, this sadness subsided when children chose a first or middle name that still honored the family in some way. Even for non-binary youth who chose gender neutral names, they still opted for gendered middle names to honor family members. There is no escaping the gender binary and its embeddedness in the family even when one is intentionally non-gendered or gender neutral.

“It’s just hard because it was a family name, and they were just very important people to me. I just feel like, you know, this is going to sound crazy, but it’s how I kept them alive. And it’s really hard because it’s like, that is gone, and it’s stupid and silly but, that’s just how I felt.” –Martha (52 years old), mother of 18-year-old non-binary child \*Came out at 14 years old

“We had this whole plan that we’d made to honor people, and then, when we can’t use that it’s kind of like, you know, dishonoring the family almost? It was almost a little hurtful to me to have the name discarded. Although, you know, the logical part of my brain can understand it, the emotional part of my brain had

difficulty with that.” –Tessa (55 years old), mother of 19-year-old non-binary child \*Came out at 14 years old

When a trans child chooses a different name, their birth name is commonly referred to as a “deadname”; it acts as a separation from a gendered self and a gendered name that does not fit who they are. The parents experience this change of “birth name” into “deadname” as a loss of those family connections. The loss of the idea of a child as the gender associated with their assigned sex at birth coupled with the loss of that family connection can bring about feelings of sadness and disorientation. Some parents and grandparents felt attachment to the name, not because the name had family meaning, but because they were going through an emotionally difficult time when the child was born. The name signified something important to them; for example, a teen mom picks a name to signify transformation.

“I was kind of in a hard place in my life whenever I got pregnant, you know, at 17. Trying to turn everything around, you know. The significance of the name, meaning change and stuff like that. So there is some, you know, it’s sort of a loss.” –Nicole (33 years old), mother of 15-year-old transgender boy \*Came out at 9 years old

A mother labors over picking a name for the child who survived after a miscarriage.

“That’s a hard one to let go of. I mean, you carry a baby for 9 months, and we had that miscarriage, and we felt really strongly about not using that name a second time for a second child. That didn’t feel right, so we really labored over what to name this child, so, yeah, that was a big deal...Wow, I’m getting teary...So it felt like it was my name, because I had chosen it specifically for them, before they

were even born, and it felt, it really was part of his birth story, and really, a birth story is less about them and it's more about me, because I'm the one giving birth after 9 months. Wow, I've got some feelings here that I didn't realize I had."

–Patricia (55 years old), mother of 17-year-old transgender girl \*Came out at 15 years old

A grandmother daydreams about a romanticized city abroad that the child is named after while she goes through cancer treatments.

"When Spencer was born, I was going through cancer treatments, really heavy cancer treatments at the time. My solace was in holding Spencer and playing with Spencer while I was sick. He was my strength, you know, as Florence, was my strength to get through what I was going through." –Virginia (59 years old), grandmother of 18-year-old transgender boy \*Came out at 14 years old

These mothers and grandmothers felt a personal connection to the name, a significance that went beyond that child in a way; it meant something about their own life. When their child changed their name, their relationship to that time in their own life and their own memories changed as well. Those memories are changed because that name is no longer a connection to the meaning of those memories. This makes it difficult to discuss birth stories or other significant times in a parental caregiver's life that revolve around the name they chose for their child. Names are immensely meaningful, tied to memories and visceral feeling, which is the same reason trans youth must choose a different name. Parents have to navigate how to hold both of these truths at the same time and honor both experiences.

“I had to understand that it wasn’t that it was a rejection of the name, um, but that it was that the name didn’t fit, and that’s not my fault, that’s not my kid’s fault.

We did the best with the information we had at the time.” –Martha (52 years old), mother of 18-year-old non-binary child \*Came out at 14 years old

“When I hear Miles’s deadname, it still gets me in the gut just a little bit. Like, if I’m at work and somebody has that name or they talk about somebody with that name, I still feel that in my stomach a little bit, even 5 years out.” –Tessa (55 years old), mother of 19-year-old non-binary child \*Came out at 14 years old

Parents contend with the aftermath of the name change, navigating feelings of rejection and lingering loss. There are many names given to *that name* such as old name, birth name, deadname; but they all represent a past that is no longer being carried into the future.

### ***Reflections on the Parent-Child Past and Failures of Cisnormativity***

Parents felt senses of grief when engaging with past memories of the child, particularly when thinking about their child as a baby. These memories are mentally coded as the gender associated with the child’s assigned sex at birth and it is difficult to re-code past memories with the present understanding of the child’s gender. Mourning related to past versions of the child can be understood through the perception of gender as a linear and stable concept. These essentialist and biological-determinant views of gender are excessively present throughout the United States’ cultural history, even including some feminist movements (Green 2016; Stryker 2008). It is notable that these binary notions of gender are present in feminist communities and movements because it gives insight into how feminist or progressive parents can still hold these binary understandings

of gender. The gender binary assumes unchanging gender presentation and gender identity, and does not consider the shifting and fluid experiences of gender that resonate with transgender, gender nonconforming, and non-binary youth. The two opposing systems, “a rigid gender binary imported from familial, social, and cultural experiences” and “a fluid gender spectrum articulated by their child” (Malpas 2011:468), can create internal and external conflicts within the parent-child relationship. The gender binary not only harms transgender individuals, but it also affects the cisgender people who invest in the gender binary, even in subtle ways, because it creates a falsehood of stable gender progression.

“The only time I really struggle with it is, like, when I look back to when Rose was a baby, um, and I understood her to be a boy.” –Phoebe (28 years old), mother of 8-year-old transgender girl \*Came out at 6 years old

“There’s sadness when I’m looking at a baby picture of her and I see this beautiful, happy, little baby, and she sees it as someone who was misidentified at birth.” –Charlotte (60 years old), mother of 18-year-old transgender girl \*Came out at 14 years old

Phoebe and Charlotte represent parents who support their child’s current gender identity, which I have witnessed in my ethnographic data collection through the way they advocate for their children politically or with unsupportive co-parents, yet they still had feelings of sadness when looking at pictures from the past. Parental understanding of the child at that time was one of happiness, but current information about the child’s gender (hidden struggles the child was having and disconnection from the child’s past self) taints those happy memories. Along with the realization that parental experiences of the past

are so divergent from their child's experience, pictures are also reminders of a gendered baby's future that are no longer a reality. Even for parents with children who are more comfortable with "pre-coming out" mementos being displayed, the new interpretation of that memory is changed, and the item holds a different meaning.

"When we do the Christmas tree, we have like baby's first Christmas ornaments and stuff that had her [old] name on them. Um, that broke my heart a little bit because I was like, 'I don't want to put those on the tree.' And she put it on the tree, she was like, 'no mom, these are your favorites.' But it's still, I don't know, it just changes everything." –Mary (44 years old), mother of 18-year-old transgender girl \*Came out at 16 years old

Parents often look back and feel shame or guilt that they interpreted their child wrong. These feelings of shame and guilt are woven into the mourning process.

"I grieve for the fact that I didn't pick up on this because looking back there were so many signs. We're just so trained in our, you know, binary world that we're told, 'here is your boy child,' that anytime something went against that perception, we just found a way to fit that into our perception of what was reality. Knowing what I know now, I should have questioned that [binary world], and I should have been able to help her and guide her. So, for me that's more what I grieved, is that she had to struggle so much. Especially seeing some of these people with these younger kids that get it at such a young age, and the parents get it, I'm like, I wish we'd had that." –Kim (47 years old), mother of 17-year-old transgender girl \*Came out at 13 years old

Kim, a parent who has educated herself a lot about transgender youth experiences, now can articulate that her former understanding of her child was one through a binary lens. It is like a pair of goggles that you have on; the goggles feel so natural that you do not even realize they are there. Everything is interpreted through the binary lens to a point where you actively ignore or justify anything outside of the gender binary. Once Kim took off those binary goggles, or in fact once her child took them off for her, she could see the past differently. Kim looks back with a sense of guilt that she should have been able to see it sooner. This guilt is common for parents of non-normative children, experienced by mothers of children with disabilities (Blum 2015) and mothers of children with intersex characteristics (Davis 2015). Since the family is organized by a binary, cisnormative, and patriarchal view of gender, this puts the burden of care on the mother, as mothers are perceived to be either the source or expected solution of a child's struggles. It is the mother's responsibility to anticipate needs of the child and respond to them urgently. The collective harm of the gender binary and cisnormativity is that it sets parents and children up for failure.

Trans and gender nonconforming musicians Rae Spoon and Ivan Coyote discuss being gender failures (2014); failing to conform to the societal standards and expectations surrounding gender and doing "girl" (West and Zimmerman 1987) wrong at every level of life. Transgender children are "failures" at cisnormativity—who wants to be good at that anyway? —but they are not inherent failures at life *because* they are transgender. Parents also experience this through being let down by the falsehoods told to them by the gender binary. Spoon finally "retired from gender" (Spoon and Coyote 2014:17) when they realized *it* had been the thing failing them all along. Parents are failed by the stories



of gender they have been told, and it takes time for them to also retire those conceptions of gender. It is important to note that cisnormativity is the source of parental distress, not the child. Riggs and Bartholomeaus (2018) contest of the focus on loss stating that scholars such as Norwood (2013), Wahlig (2015), and Brill and Pepper (Brill and Pepper 2016) normalize and naturalize the idea of loss. This naturalization of loss positions the child as the source of emotional distress or the inherent failure, rather than cisnormativity being the subject of loss and the thing that is failing them. This is an important distinction between viewing the child's gender identity as the problem and instead viewing societal structures as the issue. While parents struggle with past understandings of their child due to the failures of cisnormativity, others, like Eleanor, are able to fully integrate their child's past and present, and see past memories of their child through the correct gender goggles.

“For a while, it was hard for me to think about the past. I always had to say ‘old name.’ Or refer to her old gender, and now I don’t see a difference. She’s the same kid, she’s Grace when she was born. You know what I’m saying? So that’s kinda come full circle that, you know, she’s Grace. She’s always been Grace.”

–Eleanor (43 years old), mother of 16-year-old transgender girl \*Came out at 14 years old

This integration of the child's past and present helps to reduce feelings of grief because past memories are no longer being seen as something lost or something the parent cannot engage with without disrespecting their child's present identity. This takes time, practice of names and pronouns, and education about the fluidity of gender identity.

Past bonding activities and relationships that are coded through a binary understanding of gender pose a problem for parents of transgender youth. Greg describes the “emptiness syndrome” he feels in relation to the past bonding activities he and his daughter used to do together.

“I think that was kind of personally a little bit of loss on my end, because of that relationship I built up with her in the Boy Scouts. You could almost say, like, emptiness syndrome. Because the stuff that we did for years, we’re no longer doing. I don’t think I’m mourning her gender expression changing, I think it more is, you know, the Boy Scouts that we used to do, the other activities.” –Greg (45 years old), father of 18-year-old transgender girl \*Came out at 16 years old

Greg does not express being particularly upset about his child’s changing gender expression, but he does feel loss that they no longer participate in the Boy Scouts together. Greg describes that their close relationship was built from camping together at Boy Scouts events, which is why his daughter felt comfortable telling him first that she was transgender. This is notable because usually children tell the mother first and fear the father’s reaction due to mothers often taking the empathetic and nurturing role while fathers take the protective role (Malpas 2011), as well as normative ideas of masculinity which feed into general discomfort with topics around gender, sexuality, or emotionality (Connell 1995; Kane 2006). Fathers have been noted to experience more difficulty in accepting their transgender children (Gregor et al. 2015; Kane 2006; Malpas 2011; Riggs and Due 2015; Wren 2002), although the close bond developed through the Boy Scouts, despite it being a highly gendered organization, aided in Greg’s daughter’s comfort in sharing about her gender identity. Greg is not mourning his daughter’s gender per say,

but he is mourning the gendered activities they did together. Their relationship was built on the assumption of a father-son relationship, and partaking in activities that were unique to them as a father-son relationship. This is another failure of cisnormativity; if parent-child bonding activities were not so commonly based in the gender binary, parents of transgender children could continue those activities. Steve, an attendee of PTK, started a gender-inclusive scouting troop which encourages participation from LGBTQ+ youth; his children are too old to participate in this group, but he wanted this to exist for his grandchildren who are currently involved. Gender-inclusive alternatives illuminate the limits and failures of systems of cisnormativity which do not account for the possibilities of queer gender identities and expressions.

The family system is organized around gender, creating teams in a family; father-son and mother-daughter. When these gendered teams are fractured through the illumination of the falsehood of the gender binary, it disrupts the system. This speaks to larger issues in our society about how non-familial systems are also organized surrounding gender. Cisnormative and binary gender systems create oppositional categories of women and men, segregating people due to the assumed difference in interests, skills, and assumed (and sometimes real) incapability of interacting in mixed-gender spaces in a safe and age-appropriate way. The loss of family bonds such as “son” and “daughter” (Norwood 2012) speaks to just how integral gender is to identity and familial relationships. “Gender teams” are also seen in assumed features of a “mother-daughter” relationship. Mothers with assigned-female-at-birth children often struggle with the loss of assumed features of what their relationship would look like. It has been theorized that mothers of assigned-female-at-birth children specifically experience

“daughter-loss” (Barron and Capous-Desyllas 2017) and grieve the loss of the dreams they had in relation to the mother-daughter relationship such as being in the delivery room when a daughter gives birth or being mother-of-the-bride (Coolhart et al. 2018).

Patti, mother of a transgender boy, celebrates Blake as a boy but yearns for the closeness of their past relationship. At the time of the interview, Patti and Blake had a rocky relationship. As Blake was starting to come into his own as a boy, he was developing a closer relationship with his father, to whom Patti is no longer married. Patti decided to move back to where Blake lives for one year to dedicate time to reconnecting and re-establishing a close bond with Blake. Patti felt like time was running out in her year of anticipated re-connection and expressed a lot of fear and anxiety surrounding their relationship. She did not want to “lose her child again.” There is a sense of resentment about her son having a closer relationship with his father; Patti felt like Blake was expressing patriarchal and toxic masculinity that he was learning from his father.

“I’m definitely mourning the loss of Lilly; this creature, this person who I knew, as I knew them, does no longer exist. There’s a German word, it’s called ‘sehnsucht,’ which means you’re longing for something. Just longing for that sweet girl who would climb into my lap sometimes, or who was more affectionate... Blake and I used to bond over things because we were the girls in the house. And I could potentially lose Blake if I do things wrong in the next year, so I’m even more hypervigilant to do things right. You know, because losing that child once was sad, I don’t want to lose him forever.” –Patti (43 years old), mother of 17-year-old transgender boy \*Came out at 13 years old

Patti's mention of "losing that child once" is in reference to her "losing her daughter" when Blake came out as a transgender boy. Patti illustrates how the simultaneous presence and absence, or impending threat of absence, of ambiguous loss theory impacts parents' attempts to grasp onto and maintain a resemblance of the pre-coming out relationship. Patti is stuck in this liminal state of "here, but not here" and "gone, but not for sure" (Boss 2016) by having a child in her life that she once lost, but feeling uncertain if she will lose that child again. Feelings of loss are also connected to binary gender performances; if affection was encouraged in all youth regardless of gender, parents of transgender boys would not feel like they are losing the affectionate mother-daughter relationship.

Tessa is another example of a mother who felt loss surrounding her ideas of the mother-daughter relationship she expected to have. Tessa, a self-identified feminist, felt a sociopolitical loss that her child would not be the badass woman feminist she imagined.

"I was raised in the 70s by what I saw as really frontline feminists. My mom and her friends, they were really out there doing things that I respected so much then and now, as far as breaking gender roles and being feminists. And I, um, I think this is a little bit tongue-in-cheek, but I feel like female is the superior gender, and I hate to say that, but I just think these badass women that raised me can do it all. They can have a baby, they can breastfeed a baby, they have a nurturing side, they have an aggressive business side. I guess I felt like Miles as a kid was such an awesome little feminist, and to decide to express that they are male was almost like abandoning feminism to me. It was like going to the enemy's side. You know, I felt hurt by that a little bit to be honest. I felt like, 'god, who would want

to be a man? I mean, ugh, I feel like the future is female!’ I mean, I’m friends with lots of men, I think they have some great qualities, I’m married to a man, I’m attracted to men, but it was hard for me to understand. I had a bit of a hard time with that, losing my feminist.” –Tessa (55 years old), mother of 19-year-old non-binary child \*Came out at 14 years old

This somewhat joking belief of female superiority speaks to the ideas Tessa holds about gender and feminism. Tessa felt like she was losing her feminist, as if her child could not be a “true feminist” without being a girl/woman. Her child, who is a masculine non-binary person, could indeed still be a feminist, have a baby, breastfeed a baby, have a nurturing side, and have an aggressive business side if they wanted. The feeling of gender team abandonment and the “loss of her feminist” is due to her conceptualization at that time of who belongs to “feminist.” Although a narrow view of feminism, this sentiment and conceptualization of “feminist” as woman/girl has been seen throughout certain feminist and women’s movements. Trans-exclusionary views of feminism have long existed within feminist communities; for example, the biological determinist “womyn-born-womyn” policy at Womyn’s Michigan Festival (Serano 2007) and the ousting of trans women from the feminist lesbian group Daughters of Bilitis (Stryker 2008). Trans-exclusionary views also extended to the marginalization of transgender men and transmasculine people within feminist communities due to being seen as “traitors” to the women’s movement who have “become the enemy” (Halberstam 1998:287). Some within the lesbian community feel like the lesbian community is disappearing (Forstie 2020) often due to the emerging visibility of transmasculine people. As people gain better understanding of the spectrum of gender and find diverse identity labels with which they

resonate, it is presumed that less people are identifying as lesbian. But this is not just a historical problem existing in the past; the “borderlands” between lesbian and transmasculine communities still exist (Weiss 2007). When Elliot Page came out as a transgender man in 2020<sup>3</sup>, countless people were posting comments on his Instagram saying things like “this is a tragedy for gender non-conforming girls everywhere,” “so I guess a lesbian masculine woman can’t be just that...lesbians are being erased...this queer homophobic and misogynist dogma is killing lesbians,” and “damn, we lost another great woman. I’m tired of losing incredible females to this!” While trans-exclusionary interpretations of feminism often frame transgender people as a loss, less than, not real, taking something away from others, trans-affirming feminism acts as a tool in parents’ lives for making space for transness within the family, which will be later explored in Chapter 3.

Gendered mourning as it pertains to expectations of family lineage and relationships based on assigned sex at birth speaks to the heaviness of the assumptions placed on children before they can articulate who they are. These assumptions do not only impact the child; parents must also shift their visions of the past and future of the family. Familial naming practices act as a method of carrying the past into the future yet because this practice is constructed through the lens of gender normativity and linearity, it does not account for the possibility of transness. Similarly, parental reflections on their past parent-child bonding activities and understandings of their child reveal how

---

<sup>3</sup> Page, Elliot. Instagram, December 1, 2020. <https://www.instagram.com/p/CIQ1QFBhNFg/>

cisnormativity, acting as a framework and guide for the parent-child relationship, fails parents of transgender youth.

### **Types of Mourning: Body Loss**

Another prominent form of loss experienced by parents of transgender youth is what I call “body loss.” This aspect of mourning pertains to the ways in which trans bodies are pathologized and mourned in relation to imagined-cisnormative bodies, which speaks to the embeddedness of normative body ideals, especially for the child. We cannot discuss queerly gendered bodies without discussing compulsory able-bodiedness—defined as the “natural order of things” (McRuer 2006:1) where the “cultural presumption of able-bodiedness” masks “the pervasiveness of disability” (Kafer 2003:80)—because cisnormative body ideals are often constructed through the lens of able-bodiedness. Disability and transness are both situated within this binary of “normative” and “non-normative” bodies, even though this binary is false and non-natural (McRuer 2006). Disabled bodies fall into this category of queer bodies in the way that they subvert ideas of normative or acceptable bodies (Clare 1999) and give a “failed (or queer)” gender performance (Elman 2014:2), just as the bodies of trans people subvert normative ideas of sex and gender. Elman discusses how disability narratives of “overcoming” center the idea that disability is undesirable, and that disability must be overcome or eliminated in order to “achieve a coherent and stable (read: able-bodied and heterosexual) adulthood” (2014:6). This linkage can help to understand why bodily changes, such as appearance changes due to hormone replacement therapy or gender affirming surgery, are sometimes the onset or exacerbation of parental feelings of loss. Transgender children are seen as disrupting normative orientations of compulsory able-bodiedness and conceptualizations



of a “normal” childhood due to the idea that childhood gender transition disrupts “healthy” or “typical” development.

### ***Differing Interpretations of AMAB vs. AFAB Trans Bodies***

Parental ideals of body cishnormativity, and through extension able-bodiedness, are often due to parents wanting their child to have safety and societal acceptance. Parents see their child’s body, which does not conform to cishnormative understandings of the body, as a potential safety hazard. Transgender people who are visibly gender nonconforming experience more harassment and discrimination than transgender people who “pass” (Miller and Grollman 2015). There is recognition by some parents that cishnormativity should not be the avenue to safety and acceptance, but that is the reality of living in a transphobic culture, especially in the Midwest. Body loss connects to the first form of loss, cisgender privilege loss, but in specific relation to fears surrounding the trans body.

“I hate that I, it’s like I, I feel pressure to be afraid of not passing. I just wish it was just normal, and everybody was just, like, ‘oh, okay, that person’s trans, cool.’ I wish it was a perfect world and you didn’t have to pass as one gender or the other. But I do have a fear of violence or discrimination or being a target if she doesn’t pass as the gender that she identifies with.” –Phoebe (28 years old), mother of 8-year-old transgender girl \*Came out at 6 years old

“How the world is going to treat him, and how much more horrible the universe can be to people who don’t conform. Oh my god, am I really advocating for conformity? That’s terrifying.... I mean, all you have to do is think about, well,

which bathroom are you going to use, and who's going to beat me up if I pick the wrong one today?" –Patricia (55 years old), mother of 17-year-old transgender girl \*Came out at 15 years old

“Honestly, [passing] brings me a great deal of comfort. The HHS ruled that shelters can do, kind of, a visual inspection of people, of women to make sure they're female enough.” –Charlotte (60 years old), mother of 18-year-old transgender girl \*Came out at 14 years old

“She is harassed a lot, because the receipt, once she makes her delivery, says Scarlet, and she doesn't really, you know, they can tell by her height and her big frame, you know, that she's... it's, it's obvious to them.” –Barbara (75 years old), grandmother of 21-year-old transgender girl \*Came out at 17 years old

The above quotes are all from parental caregivers of assigned-male-at-birth (AMAB) transfeminine people. Fear surrounding the body is overwhelmingly, almost exclusively, expressed by parents of trans girls and non-binary / gender nonconforming transfeminine youth. This is not surprising given the reality of transgender women around the world; transfeminine people are facing an epidemic of violence due to transmisogynist cultures and belief systems. Even when parents do not hold negative views about their child's trans body, the loss of safety contributes to gendered mourning.

On the contrary, parents of transmasculine youth expressed relief surrounding their child's trans body. Parents who once worried about their “daughter's” safety do not hold those same fears now that their child is presenting in a masculine way. Ideas about gender are also tied into sex and sexuality; Andrea felt relief that her child's “comfort

style,” or masculine gender presentation, meant he was not going to be promiscuous. Patti similarly felt relief that she did not have to worry about her son needing an abortion.

“He liked the comfort style. I was actually kind of relieved because then I didn’t have to worry about, you know, like, you’re showing too much. So, I was actually pretty good with it. I liked it. I didn’t have to worry as a lot of parents do, you know, that maybe they’re being a little bit more promiscuous.” –Andrea (49 years old), mother of 20-year-old transgender boy \*Came out at 15 years old

“My mom had mentioned to me that the last abortion clinic closed in Missouri, and I said, ‘yeah, that really sucks, and I’m sad to hear that. But now, I don’t have to worry about it though.’ I mean, I worry about it for women in Missouri, but I don’t have to worry about it directly as far as Blake goes because Blake’s not sexually active in a way that’s going to end him up in an abortion clinic. I’m less scared about the female stuff that most parents of a teenage daughter have to worry about.” –Patti (43 years old), mother of 17-year-old transgender boy

\*Came out at 13 years old

There is the assumption that transmasculinity means more safety as compared to cisgender daughters. This is true on some level; trans men have discussed the privilege they experience in terms of feeling safer walking alone at night and being listened to more at their place of work (Abelson 2016; Serano 2007). Although, this is an illusion of safety, because at any moment this passing privilege can be stripped away if someone “finds out” they are transgender. Abelson discusses transgender men’s concern for safety, particularly the threat of violence from other men; transgender men are not immune to violence but are now subjected to other men’s violence in a new way (Abelson 2014).

The fantasy that raising a trans son is easier than raising a cisgender daughter in reference to sex and pregnancy eclipses the disparities in access to trans-competent sexual healthcare. Transmasculine people can still become pregnant, yet there is a lack of awareness and knowledge about contraceptive care for transgender men (Light et al. 2014) due to this healthcare being coded as feminine and targeted towards cisgender women.

Relief expressed by mothers of transgender boys also speaks to internalized misogyny that is present in cisgender women. There is the view that being a woman is inferior, and therefore their children are gaining social status and protection through masculinity. I want to be clear that these mothers do not think that their children are trans *in order to* gain the social status of manhood. Although, internalized misogynistic views impact how cisgender mothers view their assigned-female-at birth (AFAB) child's gender dysphoria.

“If Scout were male-to-female, I think that that would be a different case because I know that there's going to be a lot of bullying and stuff. From talking to some people who have transitioned, the males always wish that they would've done it sooner than later, because of the testosterone being so damaging to their body. Maybe it would've been different if we had different circumstances. But as far as like, 'oh, you're just unhappy with your body,' I think that that's something that needs to be addressed more on like a therapy level. If Scout was a little bit heavier, like, more full in the chest and it was a bigger issue, I think that we could possibly talk about something like a small breast augmentation, but not a full, you

know, mastectomy.” –Nicole (33 years old), mother of 15-year-old transgender boy \*Came out at 11 years old

For the four years I have known Scout through Spectrum, he consistently expressed feelings of gender dysphoria and wanting to medically transition to alleviate his gender dysphoria. However, Nicole viewed Scout’s discomfort not as gender dysphoria but instead as body dysmorphia. Scout is a thin, white, AFAB teenager which contributes to why his mother does not take his gender dysphoria seriously. Nicole once referenced that she “wants a tummy tuck, but we can’t all get what we want.” It is almost expected that AFAB children will just have body insecurities and that being “just unhappy with your body” does not need urgent attention. While being unhappy with one’s body can potentially be a universal experience, gender dysphoria requires addressing when it is causing distress due to the increased risk for self-harm and suicide the longer it is ignored (Aitken et al. 2016). Nicole notes that if this was an AMAB child, it would be different because something must really be wrong if a “boy” is expressing discomfort with their body. Expressing discomfort with one’s body is seen as a sign of weakness, coded as feminine. Men are not supposed to care about their bodies, which contributes to why AMAB trans children are sometimes taken more seriously as compared to AFAB trans children. I theorize this is why I have more research participants who are parents of AMAB children and that all children under 10 represented in my research are exclusively transfeminine. When AMAB children express discomfort with their bodies, it often stands out because society dictates that “boys” are not supposed to pay attention to their bodies or succumb to beauty standards. Meanwhile, “little girls” can regularly express unhappiness and rejection of their bodies; that is a normal part of

our male dominated and misogynistic culture. It can even be understood and empathized if “little girls” want to grow up to be boys because boys have it better! Mothers, particularly liberal mothers, know this because they experience this misogynistic culture themselves. Wanting to be a boy is understandable, but the desire to be a girl *must* be pathological; hence why I suspect AMAB trans children are more likely to be diagnosed with gender dysphoria at an earlier age than AFAB trans children.

While there is not research about average age of gender dysphoria diagnosis broken down by gender identity, there is research that misunderstands queerness and transness due to the pathologization of femininity in AMAB children, leading to more attention and seriousness about the experience of gender nonconforming AMAB children. An unfortunately well-known study about gender dysphoria in children and adolescents claims youth classified as “desisters” no longer experienced gender dysphoria (Steensma et al. 2011). If these findings are interpreted through a lens of nuanced understandings of gender identity and gender presentation, internalized transphobia, and binary gender norm socialization, one can understand that the conclusions drawn are drenched in cisnormativity. Many AMAB children were labeled “desisters” because they were content with their penises and they no longer cross-dressed, but that conclusion does not leave room for transgender girls and women who are happy with their genitals or people who stopped cross-dressing in adolescence due to pressure to conform. AFAB children who dress more masculinely were not viewed as “cross-dressing,” because AFAB children are given more flexibility in their gender performance than AMAB children. All of this leads cisgender researchers to make false and harmful claims about transgender identity. To further support this claim that the stigmatization of femininity

leads to more attentiveness and possibly anxiety surrounding AMAB trans children, Meadows notes that parents of “feminine boys” experience higher levels of social disapproval and confrontation by adults outside their immediate family due to the child’s femininity (Meadow 2018). Incorrect gender presentation on “feminine boys” stands out more than “masculine girls,” resulting in parents of “masculine girls” to misinterpret or ignore their child’s gender dysphoria.

Perspectives on gender affirming surgeries differed among parents of transfeminine youth and parents of transmasculine youth. Generally, affirming healthcare for transmasculine people was less of a concern while healthcare of transfeminine youth was a point of tension.

“I mean, this may sound weird, but if she feels like she wants to be castrated, you know, removal, I think I’d be okay with that. But actually changing it into a, um, you know, changing it to look like a female reproductive system, I think there’s too many issues that could go wrong.” –Greg (45 years old), father of 18-year-old transgender girl \*Came out at 16 years old

“With a trans male you’re talking about top surgery and potentially the creation of something that looks like a phallus, right, or something to function as a phallus. And for trans women, you’re talking about castration and removal of parts. Loss of a penis. It’s a vastly different surgery. They’re both horrendously traumatic surgeries, but they’re just different.” –Patricia (55 years old), mother of 17-year-old transgender girl \*Came out at 15 years old

Greg and Patricia, both parents of transfeminine youth, discuss hesitations of gender affirming surgeries. I was somewhat taken aback by the use of “castration” in

reference to these surgeries. “Castration” has a negative connotation of a brutal punishment. Patricia’s sentiments reflect how surgeries for transmasculine people are viewed as a “creation”; a positive addition of something to the body. Transmasculine people are seen as gaining male privilege. This is a societal promotion to the rank of “man,” when that person has passing privilege, of course. Transfeminine people are demoted even below the rank of “woman.” Gender affirming surgeries for transfeminine people are viewed as a literal loss due to the removal of the penis. This is not just about the physical penis, though that certainly creates anxiety for parents, but it demonstrates the larger transmisogynist societal views about transfeminine people that gender affirming surgery is damaging the “male body.” Viewing gender affirming surgeries as a “loss” contributes to feelings of anxiety and grief of the trans body.

The differences in views between AFAB and AMAB trans bodies, and corresponding gender-affirming surgeries, further contributes to arguments about harms of cisnormativity. Due to cisnormativity being based on a gender binary which hierarchically ranks men and masculinity above women and femininity, transfeminine people are viewed as even more pathological than transmasculine people. While it might seem positive that AFAB transmasculine and non-binary youth’s gender expressions are not automatically identified as being “wrong” or “abnormal”—unlike AMAB youth who express femininity—these gender binaristic views also harm AFAB trans youth because their expressions of transness are often ignored, delaying gender-affirming care and support.



### *The (In)Visibility of Transness*

Gender affirming surgeries that are not apparent are less anxiety-producing for parents of transgender youth. Changes to the body are less of a concern if the mark of transness is not visible. Goffman (1963) theorizes that social stigmas, or what is deemed an unusual attribute by societal norms, can fall into two categories; discredited and discreditable identities. Discredited identities describe a stigma that is apparent and therefore the individual has tension to manage when interacting with others, while discreditable identities describe a stigma that is not apparent and therefore the individual has information to manage. Some gender affirming surgeries are not apparent to strangers and audience members, and therefore the transgender youth will have information to manage in those cases. Parents struggle between having their child hold a discredited or a discreditable identity. This manifests in somewhat confusing stances on their child's access to gender affirming healthcare. There are often limits and boundaries of what feels comfortable and acceptable to assist their child in gaining access to.

“A hysterectomy doesn't seem as daunting as going on testosterone or having a double mastectomy. I don't know why. Maybe it's because it's hidden, you don't see it, maybe? I don't know.” –Andrea (49 years old), mother of 20-year-old transgender boy \*Came out at 15 years old

A hysterectomy would not be visible to audience members; this would put Andrea's child in the category of a discreditable identity. While her son, Joshua, would have information to manage about his reproductive capability, the stigma would not be apparent to others. When transness is visible to others, such as the early stages of being on hormone replacement therapy (HRT), this can become “daunting” to a parent because the stigma of

transness is apparent to others, which may mean harassment or violence, and also because the visibility of transness invisibilizes the image of the imagined-cisgender child that once was. Parents often can still see their child as the “old person,” or as the gender associated with their assigned sex at birth, if the child does not look drastically different. This brings comfort about stability in presentation despite a difference in gender identity. However, this is an illusion. Cisnormativity is exactly that—an illusion of gender stability. At a Parents of Trans Kids (PTK) meeting right at the beginning of Andrea’s son’s gender transition through HRT, Andrea cried over not being able to recognize Joshua as that little girl anymore. She said to the other parents sitting around us in the LGBTQ+ community center, “I can’t *see* my daughter.” Wahlig (2015) briefly proposes that parents experience “dual ambiguous loss,” which is a combination of Type 1 (“gone, but not for sure”) and Type 2 (“here, but not here”) (Boss 2016), due to both physical and psychological losses. This notion of “dual ambiguous loss” captures the complexity of losing the normative envisioned future of the imagined-cisgender child as well as the physical loss of no longer being able to “see” the child they once had. Andrea followed that sentiment with “but I would rather have a living transgender son than a dead daughter.” There is a realization that one “life” has to die, either the transgender child’s life or the idea of the imagined-cisgender child’s future. Physical changes brought by HRT often trigger the mourning process for many parents of trans youth because it cannot be ignored or avoided any longer and because queerness brings childhood to an end (Edelman 2004) since anything that strays from normativity is regarded as a loss of innocence associated with normative childhood. Queerness is a “death threat” (Ahmed 2006) that kills, or erases, the image of normative life dictated by heteronormativity and

cisnormativity. More specifically, queerness contributes to the perceived premature aging of the child—erasing the body of their “little girl.”

While discussing potential top surgery for her genderfluid AFAB child, Ruth compares it to her child’s recent tubal ligation; a surgical procedure Rue wanted to prevent pregnancy which would be traumatic for them both as a sexual assault survivor and as someone whose gender does not align with desires to be pregnant.

“The tubal ligation actually was a lot easier, it doesn’t show. I mean, sure, Rue’s not going to have grandchil-, you know, biological children, but I’m okay with that. But, you know, something that changes your body irreversibly, um, it’s different. It’s funny because they can dress in a way where you can’t see boobs and stuff, and I’m fine with that, and I’m sure I would adapt. But when you have a nice body – ha, ‘a nice body’ – even if it’s not the body that they want, it’s just a big step.” –Ruth (65 years old), mother of 20-year-old non-binary child \*Came out at 16 years old

Andrea and Ruth both speak to this idea that gender-affirming surgery which is not apparent is less anxiety-provoking for the parents. Non-apparent gender-affirming surgeries are not things that people will “discover” through physical intimacy with a partner, and they are also procedures that cisgender AFAB people regularly receive; they are not “trans surgeries,” per say. These are “normal” occurrences that parents can understand and have even considered for themselves throughout their life. When there are physical changes that *are* apparent, and result in discredited identities (Goffman 1963), either through gender-affirming surgeries or HRT, this is when feelings of loss and grief can become exacerbated. Ruth described her child’s body as “a nice body,” meaning

conventionally attractive through white European beauty standards of thinness and ablebodiedness. Transness is damaging the “nice body” by taking away its potential of attracting heterosexual desire. While surgeries to align one’s gender identity and body are described as “affirming” or “confirming” by trans communities, these surgeries can also be viewed as maiming the cisnormative body. As Ruth says, even when the cisnormative body is not a body the trans child wants, cisnormative and ableist frameworks impede the ability for parents to understand the desire to change a “perfectly good body.”

Brianna described that her mourning process started after her daughter began changing her wardrobe to accurately reflect her gender identity as part of her social transition.

“Sophie asked me to take all of her clothes out of her closet, and I just remember sitting in her closet and crying, and it was not a pretty cry. Like I still think about it and I can cry. About a week after her transition, um, I felt like Colton died, and I mourned the loss of Colton.” –Brianna (42 years old), mother of 7-year-old transgender girl \*Came out at 5 years old

Taking all of the clothes out of her closet was an act of essentially erasing any trace of this costume of masculinity that was given to Sophie as a baby. The clothes given to children to express their assumed gender are costumes, adhering to the expected gender performance based on their assigned sex at birth (Butler 2004). Our gender expression, whether given to us by parents or freely expressing it ourselves, does not and cannot fully illustrate the complexity of our gender identities. Getting rid of the dapper wardrobe Brianna constructed for Colton resulted in it feeling like Colton had died. This speaks to how much we link gendered expressions through clothing to personhood. Even though

Sophie was the same person, there was a break in the assumed continuous nature of gendered beings.

Linear or continuous assumptions of personhood are dominant, meaning that the embodiment a person has today will stay the same throughout life. This is false for many reasons, but it is the story that our cisnormative and ableist society teaches us. Gender binary ideologies about “good” or “correct” bodies, minds, and identities can contribute to what we know about the harms of ableism and neuronormativity. Cisnormativity, or this illusion of gender stability, causes trans bodies to be viewed as a loss or a death. Transness is equated to the loss of privilege, protection, and comfortable stability.

### **No Loss**

While experiences of mourning were prevalent in the data, there were also parents who did not experience a mourning process, some with strong opposition to the idea of mourning, and some parents who were somewhere in between grief and no grief. I believe this in-betweenness is due to the complicated nature of ambiguous loss (Boss 1999), and also due to my embodiment as a trans researcher doing this research. Some parents said they felt awkward saying their true thoughts and feelings because I am trans, so I presume that some were trying to downplay their feelings of grief. Yet, ideas of loss slipped out in subtle ways which is why some parents are coded in both expressing gendered mourning and expressing no feelings of loss. Coolhart et al. (2018) propose the absence of the mourning process might be due to parental conceptualization of loss as the physical cessation of a human being, and instead parents are viewing their child as undergoing a gender “transformation.” The differing views of what is considered a “loss” can be seen through the various categories of “no loss.”

### *Young Child, Easier to Integrate*

A few days before Christmas of 2018, I met a PTK mother at a local coffee shop to discuss how she can best support her child. Jennifer is a 35-year-old mother with an 8-year-old gender expansive AMAB child, who currently identifies as a trans girl. Jennifer noted that she wasn't sure how much she fit into the PTK group because she does not experience a lot of the struggles they were having. Jennifer had an idea that Madison was gender expansive since Madison was 1 year old, so Jennifer never really had much investment or attachment to an idea of a normative future. "Madison's future was always going to be different," she told me. Since Madison expressed gender non-conformity since a young age, Jennifer did not latch onto an idea of what her future would look like. This resulted in her not having prominent feelings of loss of the imagined-cisgender future. In my observations, parents of younger children were more likely to have less of a hard time with their child's gender transition. This involves two areas of exploration: firstly, parents with pre-pubescent children are more likely to believe their child's expression of transness or gender expansiveness because of societal ideas that if you express something from a young age, it is more real. Secondly, I have to take into consideration that I have sampling bias, due to only having access to parents who are attending a support group, which of course requires acknowledgement of their child's trans identity on some level. I am sure that there are young kids out there expressing that they are trans and their parents are indeed ignoring or mourning. Therefore, having a younger child come out can lead to more acceptance about the child's identity exploration but it does not guarantee the absence of a mourning process.

### *Fluidity of Gender*

Another dimension that impacted how parents experienced their child's coming out as transgender was their own view on gender. Parents that did not have a prominent mourning process were more likely to understand gender as being a fluid spectrum. Viewing gender as a spectrum means that parents are less likely to view their child as having a disruption in their identity and personhood. The awareness that the child is still the same person reduced feelings of loss.

“I guess it's just understanding the fluidity of gender, and letting go of, uh, holding fast to, like, someone's identity being linked with gender, and if that changes, like, it's not a separate person.” –Phoebe (28 years old), mother of 8-year-old transgender girl \*Came out at 6 years old

“I remember who I thought Madison was when those pictures happened. Right, so that feels like a different person. Um, it feels like I'm looking at a different person based on how I saw her when she was a little boy. But I found these pictures, they're like, Madison mannerisms that are just so her that come out in the photos. Just the way she's holding herself, that it's like, oh man, she's just been there all along, like she's just always been there.” –Jennifer (35 years old), mother of 8-year-old transgender girl \*Came out at 2 years old

It is also important to note that parents who understood gender as a fluid concept from the start of their child's gender journey were also among the youngest of parents in my sample. This speaks to generational differences in societal conceptualizations of gender. Risman (2018) examines how millennials understand and experience the gender structure of their social world. She proposes that millennials are the “just be yourself”

generation (Risman 2018:58) who have inherited the “Leave It To Beaver” gender structure (Risman 2018:279), which has led this generation to be more accepting of diversity while still being socialized through a binary and cisnormative understanding of gender. Though I believe this interpretation is reductionist in terms of the complexity of views on gender—especially varying gender structures depending on race, class, region, etc.—it offers insight into why millennial parents, which Pew Research Center defines as being 25-40 years old in 2021 (Dimock 2019), are often operating from an understanding of gender that is more fluid and flexible as compared to parents from older generations. Although, as Risman notes, there are still millennials who follow traditional sex-differentiated gender roles as well as those who have inconsistent opinions on gender, which is where some of the mixed reactions of acceptance with hesitation may come from.

### ***Not a Shock***

Parents who had some degree of preparation for their child’s transness also had less prominent feelings of loss, or no expression of mourning at all.

“I didn’t really agree with it was a losing of a child. That felt a little intense, but, you know, every person’s story is different, you know, so, I mean, they literally may have had one of those overnights, like, knew nothing about what was going on, whereas, you know, I knew what was going on with my kid, very much so along the way, and so, i-, it, to me it was never a shock.” –Nicole (33 years old), mother of 15-year-old transgender boy \*Came out at 9 years old

“I actually don’t think I did. Maybe it was because I’d already been through the sexual orientation part, and so, and just understanding that they’re the same kid,



and, you know, it's just part of who they were, so, and that I didn't have a real agenda for them in truth. I mean it was a journey of understanding, but, I don't remember the mourning part, but I ha-, I have heard people describe that, but I don't remember anything of the sort." –Ruth (65 years old), mother of 20-year-old non-binary child \*Came out at 16 years old

Children often come out to parents as not straight before coming out to them as not cisgender. Some parents look back and say their child was “testing the waters.” Diverse sexuality is more accepted now in comparison to diverse gender identities, so it is often less scary to come out as LGBTQ+ first, and then transgender later. Having prior knowledge about their child's LGBTQ+ identity allowed parents to understand more about the queer community, which lessened the shock, anxiety, and grief. Although, having knowledge about sexuality does not guarantee acceptance of transness.

### ***Retain a Child, Not Lose a Child***

Fears of suicide, both the learned chances and also actual attempts by their children, influenced parents' perspectives on their child's coming out. When parents learn that the attempted suicide rate among transgender populations is 40%, as compared to 2% of cisgender populations, due to family rejection, social isolation, and barriers to quality health care (Roberts and Fantz 2014), they are more likely to loosen the grips on the imagined-cisgender future. This involves assisting in the process of transition and seeing transition as something positive, not a loss. The statement “I would rather have an alive transgender son than a dead daughter” is commonly used by parents of transgender youth to display their knowledge of the realities of mental health disparities facing the transgender community and their acceptance of their child's transness. However,

sometimes this acceptance comes with a hint of reluctance; almost like a surrendering to the reality of transness. At times, this phrase acts as a mental and emotional mechanism to distance themselves from their mourning. Some parents experience feelings of grief but quickly denounce those feelings in order to support their child. This is why many parents experience an ephemeral state of mourning, or no noticeable mourning period at all, in the attempt to retain their child.

Parents, like Charlotte and Kim, often saw their children become extremely depressed and withdrawn prior to the child's coming out. Parents felt like this was their chance to keep their children alive, by helping the child work through gender dysphoria.

“I didn't really feel like I'd lost a child, I felt like I was more likely to retain a child.” –Charlotte (60 years old), mother of 18-year-old transgender girl \*Came out at 14 years old

“Honestly for me, I was thrilled. It was not hard for me at all, just because I knew this was what she wanted, and I knew that this is who she is.” –Kim (47 years old), mother of 17-year-old transgender girl \*Came out at 13 years old

Instead of feeling sad over the prospects of their child's physical body changing due to HRT, some parents were excited because it was the path to the child's happiness and comfort in their body. This state of acceptance and celebration of the physical changes that could lead to gender euphoria instead of gender dysphoria takes time and internal processing on the parents' end.

### ***No Imposed Expectations***

Parents who did not experience the mourning process expressed less imposed expectations about the child's identity and future. These parents were critical in their role

as a parent and understood their child as an entity separate from themselves; a child who can grow and develop however they wish. These parents do not have ideas, expectations, and imposed future hopes for the child's life path.

“I think people mourn children when their children change because they don't see their children as children, and they don't listen to their children's needs because they want the child to adapt to them instead of them adapting to the child.” –Ash (35 years old), mother of 14-year-old transgender boy \*Came out at 11 years old

“I just never had a lot of expectations for who I wanted my children to be. As long as they were happy and healthy. When people are pregnant, they say, as long as the baby is healthy, it doesn't matter if they're a boy or a girl. Well, that doesn't change once the child is born. As long as they're healthy, I don't care if they're a boy or a girl. So there was no mourning period at all.” –Sandra (36 years old), mother of 5-year-old transgender girl \*Came out at 3 years old

“I never felt like I was losing my little boy or anything. I think, my husband felt like that a little bit more, but I was just like, okay, well, you know, I got, we got a daughter, and, um, you know, we'll move forward... I think when, when parents grieve, they grieve this, the story, the future story that they've built up in their, in their expectations of, you know, a child growing up to be, you know, a father, a mother, and all those kinds of things, and I, you know, I, I had to let go of that in terms of, like, you know, physical, having biological grandchildren from her, but, I also don't feel like that's the definition of family.” –Charlotte (60 years old), mother of 18-year-old transgender girl \*Came out at 14 years old

Parents held less attachment to these gendered ideas of who their child is supposed to be. This means less attachment to cisnormative ideas of the child and static ideas of the self.

### **Memorialization of the Assumed-Cisgender Child**

Due to expressions of mourning and grief, I anticipated there being methods of memorialization or ways of holding on to the version of the child who they assumed to be cisgender. This was not as prevalent as I anticipated, but this is largely due to parents not feeling like they have the right to outwardly mourn and therefore memorialize that “dead” child. Brianna hints at desires of memorialization when discussing her young daughter’s past.

“I remember Dr. Louis telling me, you know, make sure you bring up, you know, just periodically ask about Colton, ask if Sophie still thinks about Colton. And Sophie has straight up told me, ‘Do not ask, I put Colton in a trash can, I don’t want you to ask me about him anymore.’ I remember asking, ‘well, can we take him out of the trash can and just put him in a box?’” –Brianna (42 years old), mother of 7-year-old transgender girl \*Came out at 5 years old

This conversation between then 5-year-old Sophie and Brianna illustrates how a parent’s mourning can be tied to a child’s disconnection from their gendered past. Parents often have a desire to keep that child present so as to not invalidate their own experience of raising that gendered being.

“In that I feel like saying that he was never a girl, I feel like it validates those first 13 years.” –Patti (43 years old), mother of 17-year-old transgender boy \*Came out at 13 years old

“I don’t think I should blot out her whole childhood. You know. I think I sh-, I can keep those memories. Which is kind of a grieving thing, I guess.” –Barbara (75 years old), mother of 21-year-old transgender girl \*Came out at 17 years old

As previously mentioned, parents felt that it was not fair to their child to hold onto the past since that past self is riddled with painful memories for the child. Parents sometimes privately considered these feelings, but did not outwardly express their feelings of loss.

“It’s nothing that I’ve really ever been able to truly sit with, I don’t think, um, unfortunately, it’s one of those things where I felt like I didn’t, I didn’t have the opportunity or the right to mourn the loss of the child, so I just kind of avoided it.” –Patti (43 years old), mother of 17-year-old transgender boy \*Came out at 13 years old

“It was just a private loss, you know, it didn’t affect anything. My wife and I talked about it, but I didn’t really talk to anybody else about it.” –Adam (50 years old), stepfather of 20-year-old transgender boy \*Came out at 15 years old

“There were times afterwards that I occasionally quietly mourned, you know, mourned my daughter, but that had so much more to do with me than it did with him.” –Mark (51 years old), father of 18-year-old transgender boy \*Came out at 11 years old

Some parents have the self-awareness that this is a personal process that should not impact their transgender child, since parental emotions should not be the burden of the child to carry. Yet, I argue it is important that parents have the appropriate space and time to process these emotions. Processing gendered mourning through a gender-

affirming lens can be an essential way of letting cisnormativity die and embracing the transgender child.

## **Conclusion**

The various dimensions of gendered mourning give insight into how familial gender systems impact one's reactions to the non-stability and unpredictability of gender. Through examination of the gendered mourning process over the span of my data collection, I find that gendered mourning stems from parental fears about a child's future as a trans person living in a transphobic society, difficulties adjusting to the dis/reorientation of gender within the family system, and cisnormative and ableist notions of the body resulting in trans bodies being viewed as a site of danger or loss. I argue that feelings of grief and loss are not rooted in the child but are instead directly linked to societal, familial, and personal investments in cisnormativity, whether intentional or not. These investments create conditions under which being transgender is, at best, not anticipated and, at worst, met with hostility. Even amongst the most accepting of parents, normative gender systems within American families create feelings of loss in relation to how things used to be and how things were anticipated to be. Gendered mourning illuminates how cisnormativity is a collective harm to us all, impacting transgender and gender nonconforming people as well as the cisgender people in our lives. Of course, the people who most suffer from this collective harm are transgender people who are left to deal with societal oppression and/or fractured family relationships.

I find that those who did not identify a prominent mourning process as part of their child's coming out process held beliefs about gender and their role as a parent which left more room for gender diversity within the family and provided an easier reorientation

in response to trans experiences of gender. However, for those who were not already operating from this position, they had a harder reorientation process due to operating from a baseline of cisgender assumption when the child was born. I anticipate the experience, or lack thereof, of gendered mourning would be different if parents were purposely ungendering their child from the moment the child was born.

Gendered mourning acts as a site of illumination of the ways in which normative gender structures fail us when we invest in the assumption of a cisgender present and future. This “phantom image” (Talusán 2019) in which parents invest haunts them as they attempt to adjust to a new understanding of their child. The fantasy and “cruel optimism” (Berlant 2011) of gender normativity is that it promises gendered expectations of personhood and family life that cannot be guaranteed in actuality, resulting in grief of those false promises.

Yet this process of mourning the failures and harms of cisnormativity that parents unknowingly invested in opens possibilities of familial adaptation and the creation of institutional space for transness. The process through which this institutional space is created will be explored in Chapter 3, particularly focusing on how transgender youth and their parents work together in undoing, ungendering, and remaking gender within the family. Identifying the dimensions of gendered mourning and the creation of institutional space for transness can help reduce this collective harm of cisnormativity within families of transgender youth.

## CHAPTER 2: TRANS FUTURITY

One evening in September of 2018, a quiet grandmother attends PTK for the first time. Just like any other meeting—even though it did not feel like any other meeting—everyone went around the room introducing themselves and sharing information about their child’s gender, where they are in the process of social or medical transition, and any current challenges they are working through. When it’s Barbara, the quiet grandmother’s turn she tells the group about her granddaughter who just came out to her and is really struggling with social anxiety. Parents nod along empathetically. Barbara also shares that she is having a hard time coming to terms with her grandchild being transgender—she says, “I feel like I’m grieving. When does this feeling go away?” The parents’ empathetic nods stop, and the conversation shifts back to the focus on social anxiety of their children as opposed to addressing Barbara’s grief. This is not the first time parents have expressed feelings of sadness and loss in the group setting, but it is the first meeting since a pivotal moment in the lives of PTK attendees. In August of 2018, Andrea and Adam’s cisgender son Brandon died by suicide at the age of 20 years old. Barbara was not aware of the recent passing of Brandon, but I think she could feel that the air was sucked out of the room when “grieving” was mentioned.

Barbara attempted to bring up her grief in conversation for a second time that evening, but again it was brushed over. I rarely interject at meetings to remain as unobtrusive as possible—only chiming in when parents directly ask me about LGBTQ+ identities, how to handle a certain situation, or community resources—but I went up to Barbara at the end of the meeting while walking to the parking lot. I told her, “A lot of



parents actually feel that way, like they're grieving...and it does get better. Keep coming to these meetings." And she did. I voiced this to her because I was worried the parents' avoidance of grief would instill shame in Barbara about these feelings and would prevent her from getting the support she needed, and the support her granddaughter desperately needed.

Before Brandon's death, Barbara's question most likely would have been addressed, comforted, and empathized with. However, with the felt absence of Andrea and Adam—two central members of PTK at the time—and the collective awareness amongst the other parents that their children are in fact still alive, perspectives about grief shifted amongst the group. Parents who knew Brandon stopped talking about grief and loss in relation to their transgender child. In comparison to what Andrea and Adam were going through, some parents felt that there was a false equivalence between grieving their transgender child who was very much still alive and the halted future of a child who is actually dead.

The next year, Barbara joined PTK at the local Suicide Prevention Walk even though she never knew Brandon. As I crossed the street to get to the park where the walk was taking place, I waved to Kim, whose trans daughter attempted suicide in a school bathroom, as she helped direct traffic at the event. Other PTK parents and some of their children all wore shirts memorializing Brandon to support Andrea and Adam through what is the parents' shared worst nightmare—a very real and present fear since many of their children have attempted suicide. Brandon's passing reminded parents of the reality of their children's struggles, the statistics they are up against, but also that their children still have a future ahead of them even though it looks different. Though parents stopped

talking about grief in the group setting after Brandon's death, that did not erase those feelings. As later illuminated in one-on-one interviews, parents still grappled with feelings of loss, but some were more likely to be able to identify that what they were grieving was an *idea* of the child, not the child themselves.

Gendered mourning wrestles with shifts in futurity; futures that will now be different or envisioned futures that will never happen. This grief experienced by parents of transgender children is a result of narrative disruption (Ashley 2019a) of the imagined-cisgender future. The hypothetical child—dictated by hegemonic normativity—frames national, community, familial, and individual understandings of the future. The child is often seen as a new start for endless possibilities in life to unfold, but this child is not completely a blank slate. The imagined future is pre-determined through the lens of normativity; straight, cisgender, and able-bodied (Edelman 2004; Elman 2014). Even before a child comes into parents' lives, they imagine a heteronormative future filled with marriage, children, and gender conformity for their child, using gender construction to anticipate the future (Kane 2012). This future is often imposed upon children before they even have the ability to express who they are. When a child does not fit into the bounds of normativity, this endangers the presumed stability and consistency of the gender binary by revealing its artificiality and impermanence. The presumed stability of family systems is also shaken as expectations for relationships and roles suddenly change.

When the expected path of a child's life is disrupted after a child comes out as transgender, parents experience a domino effect of mourning the past, present, and future of the imagined-cisgender child. Parents grasp tightly onto the imaged-cisgender child through viewing the trans child's future through not only a cisnormative lens, but a

transnormative lens as well. Trans scholar Austin Johnson describes how trans folks are subject to transnormativity, which describes how gender expressions of trans people are regulated and held to standards of “realness” and who is “trans enough” (Johnson 2016). Transnormativity positions binary trans people as “real” and “true” versions of transness, while non-binary and genderfluid people are seen as less authentically trans. Transnormativity positions binary futures as the desirable trans futures, while the more uncertain non-binary trans futures are seen as less legitimate and further unsettle the presumed stability of gender systems within the family.

The disruption of a hetero/cis/gender-normative future through the expression of a trans future is seen as threatening, dangerous, undesirable, or not even a possibility, because trans futures have not been acknowledged and included in mainstream teachings of history, leaving parents without an image of what a future might look like. Similarly, much of the literature and public discourse surrounding transgender youth states that this is a “new social form” (Meadow 2014), but transgender youth have existed long before the recognition by academia, media, or medical institutions. Having various gatekeepers such as the media, medical communities, and parents stating that this is the first generation of transgender children erases the vibrant history of transgender children and teenagers. Ignorance and denial of trans histories, as well as fear of trans futures, produces conditions for which gendered mourning is the dominant narrative of parents of transgender youth who are early on in their journey.

This chapter explores how the child’s shift in gender identity and expression often leads to the death of dreams parents held for their child which were based, however consciously or unconsciously, off a cisnormative and transnormative understanding of the

child's future. Along with the loss and letting go of dreams, parents also struggle with worries of losing their child through suicide. The ever-present threat of suicide shifts how parents see their child's present and future. When parents are faced with the reality that their child's life might be ended through suicide, this simultaneously reframes as well as contributes to the gendered mourning process. Parental grief shifts from the loss of an imagined-cisgender future to the immediate risk of losing a future altogether.

Lastly, conceptions of futurity arise for parents when comparing this "loss" to other losses they have experienced in life. The common thread which connects these losses is the loss of a life's potential, whether that loss is the potential of a literal life or the potential of an imagined cisnormative and heteronormative life. This chapter explores how parents frame their child's futurity and potentiality around binary conceptions of gender which contributes to the experience of gendered mourning.

### **Death of Dreams and Deferred Trans Futures**

"You know, the fiberglass motorcycles that you put a coin in and it rocks back and forth... he was always really into those even if we didn't put coins into them. And, he, she, th-they, they were sort of sitting on one with their feet on the ground, and I just had this image pop into my head of my grown-up daughter, like, sitting on the edge of a fountain in France or Italy or something, and there was just this image in my head of who my kid was going to grow up to be. And there have been times, not lately, not for years, but, there were times that I would, that image would pop into my head and I'd go, 'wow, okay, that's not ever going to happen like that.'" –Mark (51 years old), father of 18-year-old transgender boy

\*Came out at 11 years old

Mark's vision of the fountain represents the many daydreams and envisioned futures that parents hold about what their child's future might look like. These dreams for the child's future are often rooted in cisnormative understandings of the child. The fountain signifies the linear expectations for how a child's life will progress in terms of gender; from little girl on a coin-operated motorcycle to woman on a fountain. In fact, dominant understandings of gender lead parents to never even question that their child may not always be the gender assigned to them at birth. The assumption of a linear progression of a gender from the present into the future erases the possibility of a trans future. Without knowing the potential of fulfilling trans futures, the trans child is seen as having no future, an undesirable future, a disabled future. Kafer writes that disability is viewed as the state of having no future, or an undesirable future, and that "the inability to value queer lives is related to the inability to imagine disabled lives" (Kafer 2013:45). Some parents of transgender children experience their child coming out to them "much like diagnosis of severe illness," which leads to a "disruption of parents' vision of their future life and projects" (Ashley 2019a:88). This disrupted future assumes that a queer/trans/disabled future is a worse outcome than a straight/cis/non-disabled future. I argue that the inability to value queer lives is also directly linked to the inability to *imagine* queer/trans futures, especially for youth in which queerness/transness is particularly problematic. Transness halts the imagined future that is ahead for assumed-cisgender youth and instead contributes to the pre-existing anxiety parents have surrounding adolescence. Gender non-conformity and transness upends the potentiality of the ideal and expected straight cis future.

Trans futures are often not in the realm of possibilities that parents imagine for their children's future. Even if there is a slight potential in the parental imagination, transness is still not treated as legitimate due to parents treating teenagers as though they have incomplete brains; associating adolescence with a form of temporary brain damage (Elman 2014). There is reluctance to allow teenagers to make important and potentially permanent life decisions, such as altering their bodies, because they are thought to not have the stability or clarity of an adult brain—which is of course an ableist assumption that all adult brains are stable and clear. This anxiety, combined with youth lacking agency over their own bodies and decisions, often leaves trans youth with no choice but to delay medical transition, and in some cases social transition, until they are independent from their parents.

Delaying social or medical transition, which is often done out of fear and uncertainty from parents, is an attempt to delay a trans future—deferring the inevitable. Trans scholar Ashley Florence writes “interventions such as social transition, puberty blockers and hormone replacement therapy should not be unduly delayed solely on account of fear of uncertainty and a vague risk of distress. Gender creative youth's actual distress is very real, and future uncertainty is an inescapable reality of gender: it is not a bug, it is a feature” (Ashley 2019b). Future ambiguity is innate to transness, because we are often paving paths that no one else in our family have knowingly journeyed on. This is an embraced feature among trans communities, yet seen as a defect by our families. Delaying transition, and therefore delaying a trans future, is seen in the bargaining and compromising attempts made by parents.

“She told me in the car one day that she wanted me to call her Grace. And um, I was like, okay. Like, at home? I’m not gonna do this in public.” –Eleanor (43 years old), mother of 16-year-old transgender girl \*Came out at 14 years old

“We started the negotiating thing with like, you can wear your dresses and make-believe here, but don’t wear it out in the world.” –Jennifer (35 years old), mother of 8-year-old transgender girl \*Came out at 2 years old

“I’m not gonna change anything legally, but you know, on the school paperwork that’s something I didn’t have to change legally, so you know, it’s Scout on almost all the schoolwork even though it’s Nova still legally.” –Nicole (33 years old), mother of 15-year-old transgender boy \*Came out at 9 years old

“You sort of begin to do that bargaining, like, ‘well maybe if I take them to get on antidepressants, then this won’t be so bad, and maybe they’re really not, you know... We’ll just get that mental health thing taken care of and then this other thing will go away.’ It’s the same thing with disability groups I’ve started. They’re like, ‘well, I figure if I get them in therapy and I get them on this medication and all this stuff they’ll be fine.’ And you’re sort of like, (pause) ‘no, your kid is your kid, and this is who they are.’” –Martha (52 years old), mother of 18-year-old non-binary child \*Came out at 14 years old

Parents speak of periods of time when they engaged in methods of bargaining and negotiating in relation to the child’s gender identity and/or gender expression. Like the stages of grief when someone dies, loved ones attempt to evade or delay the emotional reality of the loss. Many parents of trans youth report trying to keep gender exploration

inside their house, if allowed at all, so it does not extend into the outside world. This functions in two ways; attempting to control the expansiveness of gender which actually cannot be contained, and attempting to minimize the reach of the child's gender non-conformity. It is thought that once this leaves the walls of the family homes, it will become a more permanent reality and something the parents must confront. Many parents reflect on this period with the understanding that their attempts were not in the best interest of the child's happiness and true self-expression, but Nicole represents those parents who are still holding onto parts of the imagined-cisgender future. By not changing the child's legal name, this functions to assert the child's assigned sex and assigned dreams. Methods of bargaining attempt to hold on to the imagined-cisgender future, minimize the reality of transness, and defer trans futures. Parental ideas of the child's imagined future are inconsistent with the child's needs for their own healthy and successful trans future. Many transgender youth struggle with mental health issues related to gender dysphoria and having to wait for transition, therefore this attachment parents have to a cisgender future for their child can lead to the detrimental effects on the physical and mental health of transgender youth (Klein and Golub 2016). When parents learn of the high rates of suicide among transgender teenagers, they are more likely to let go of and grieve the imagined-cisgender future, and assist in the process of transition.

Revisiting the idea that the inability to value trans lives stems from the inability to imagine trans futures, my intention is not to imply that parents of transgender youth do not value trans lives themselves, but instead I am arguing that the American culture in which they exist collectively does not value trans lives, thus influencing the personal imagination of the potentiality of queer/trans futures. Shifting the personal imagination



surrounding futurity takes intentional effort, which I will explore in chapter 3. Gender-deviant folks and disabled folks, and disabled gender-deviant folks, are viewed as unable to exist in the ways that were once imagined for us or unable to lead futures at all. Mary, mother of an 18-year-old transgender girl, talks of a “mother fantasy” for how her relationship with an assumed son would look and the visions she had for a “young man growing up.”

“I think that some of the sadness is just like, I’ve seen this thing about you kinda mourning the child that you, you had and, you know, try to accept the one that you do have, but, um, sometimes I think it’s just, like, letting go of that picture I had in my head of a young man growing up, and, you know, going to college and you know, meeting a girl, and, just this very heteronormative, you know, mother fantasy of what your son’s gonna do someday. Um, and I think that’s, I certainly had to, maybe early on, just, it just seemed, like I said, it changed my way I viewed their future.” –Mary (44 years old), mother of 18-year-old transgender girl  
\*Came out at 16 years old

The sadness that Mary reports is due to the change in how she viewed her child’s future. Cisnormative culture gives parents roadmaps for what to expect from “boy” children or “girl” children. As discussed in Chapter 1, familial “gender teams” are established based on the structurally instilled cisnormative roadmaps. Cisnormativity involves the obsession with gender; it is used to mold the lives and available scripts of the future to fit into cisnormative ideals and attempts to erase anything outside of that conceptualization of normative and acceptable gender. This cisnormative obsession with gender is seen through very direct and observable phenomena such as gender reveal

parties yet it is also seen in less-visible ways, to cisgender people, like anti-transgender legislation causing public access, health, and safety issues for transgender populations. Fear of the unknown is created when cisgender people cannot imagine trans lives, which is when gender obsession comes into play—legislating the gender binary into how we use the bathroom, how we play on sports teams, how we go to the doctor and access medical care, how we access shelters, how we travel, and how we navigate public space in general. To value and imagine trans futures is for everyone to exist free of gender constraints. Yet, cisnormativity is rooted in the dedication to upholding those constraints due to how gender constraints contribute to the maintenance of gender, racial, and economic power and privilege—as seen with the oppression of cis women and trans folks globally. As discussed in Chapter 1, some aspects of gendered mourning that parents experience are related to the assumed-cisgender privileges that their children no longer have, but parental gendered mourning is also tied to the societal frameworks which originally create these losses of privilege. When transness is not even in the societal and familial imagination, trans future cannot be accounted for or prepared for. As such, parents who experience gendered mourning are part of the system which created the conditions for that very mourning by excluding the potential for a trans future.

Gendered mourning not only involves the death of dreams parents had *for* their child, but it also involves the death of dreams parents had for themselves in their parenting role. I observed that parents often respond differently to the potential of a trans future depending on how much gender norms shape their parental role. Jennifer and Luke are parents of 8-year-old Madison who is a transgender girl. Jennifer did not experience a profound mourning process, but Luke did experience a mourning process early on in

Madison's expression of gender non-conformity. Jennifer and Luke were interviewed separately, and both reflected upon Luke's process of coming to terms with his child's transness.

"I think there's a lot of reasons why. I think that, um, you know, toxic masculinity's a real thing, and I think he had attachment to having a first son that he wasn't ready to let go of or grieve." –Jennifer (35 years old), mother of 8-year-old transgender girl \*Came out at 2 years old

"Even 20 years before Madison was even born, you know, I had ideas about what it meant to have a son, and the things you would do with your son, and what it means to raise a boy. This is the way that I was raised by my dad, and this was the way that I thought things were going to play out and go down. But at some point, I had to, like, grieve that stuff. Those things that I held onto and thought were important, you know, they're not important. Those are things for me, and that's not an expectation I should place on a child." –Luke (36 years old), father of 8-year-old transgender girl \*Came out at 2 years old

Jennifer and Luke touch upon how gender is central in understandings of both the role of parents and the life of a child. The imagined future, before the child is even a reality, is most readily envisioned through gender norms. This is the available script used to prepare for one's role as a mother or father. Hegemonic masculinity (Connell 1995), and more specifically toxic masculinity as Jennifer describes, is often the basis for how parental scripts are written for fathers. Hegemonic masculinity is a "pattern of practice" (Connell and Messerschmidt 2005:832) that allows for men's dominance over women, and I will

be more specific in adding cisgender men's dominance over all other gender minorities (cis women and TGNC people).

Stories and advice passed down throughout family lineage of how to be a good husband and a good father typically begin from a place of dominance and subordination of femininity. Gender gets passed down in the family through scripts of how motherhood and fatherhood will look, what to expect *for* their children, and what to expect *from* the relationship with that child. These are the dreams of fatherhood that originate from family history and broader American culture. Yet, as Luke notes, some parents of transgender youth who take a more critical view of youthhood—and come from a place of wanting to empower their children to live their true lives—eventually realize that any dreams they had for their child were in fact their dreams, not the child's. Fathers of transgender children show that there is the ability to fade out hegemonic masculinity from fathering practices by embracing more flexible forms of masculinity that make space for gender non-conformity and allow for ambiguity of father-child gendered expectations.

### **Recalibration of the Future**

As previously discussed in Chapter 1, parents go through a recalibration and reorientation process when adjusting to changes in the family system that result from gender transition of a child, particularly in terms of name changes. Expanding upon that, the recalibration process also includes adjustments when dreams are realized to no longer be possible; for example, when the long-term expectation of having a daughter for the rest of one's life is no longer a reality. Patti described an internal conflict of feeling upset due to the death of preconceived expectations for Blake, yet also not feeling able to fully express that mourning process. Certain narratives of parenting say that parents should

support their children in whatever makes them happy, yet that happiness may bring about sadness for the parents when the child's happiness is contradictory to the parental preconceived expectations of future life.

“I didn't feel like I had the right to mourn my child because Blake has the right to be himself, however it looks, and if I'm mourning the loss of the child, it means that I had preconceived expectations. I complain about my dad having expectations for me and then, you know, I have expectations for Blake. Really truly deep down all I really wanted was for him to be happy, regardless of what that looked like, and so, uh, if he's happy then why am I upset about it? I think the upset comes in because of the preconceived expectations that I had, you know, I gave birth to a daughter, so therefore I would have a daughter all my life... When I found out I was pregnant with a girl, and decided that they could tie my tubes and I wasn't going to have any more kids because I had my boy and my girl. I think that that's kinda what it comes down to, it's just that I, not that I feel incomplete, because I feel like I had my girl, and she's turned into this amazingly dashing young man. But the three generation females in my family, you know, those pictures won't happen again.” –Patti (43 years old), mother of 17-year-old transgender boy \*Came out at 13 years old

Patti's decision to not have more children was made when she felt her family was “complete” with one boy and one girl; each tasked to carry out the “men” and “women” lineages in the family system. The recalibration process involved simultaneously letting go of a linear cisnormative envisioned future and embracing a happy, dashing young man. For cisgender mothers of transgender sons, the loss of female generational

continuity represents the desire of female persistence within a male-dominated family structure. While for cisgender fathers of transgender daughters, this represents the loss of someone to “carry on the family line” and essentially reify male dominance within the family. The past, present, and future of the family are all connected in the gendered mourning process in terms of how the past is interpreted when looking back and how the future is now envisioned differently when looking forward. Parental assumptions and fantasies of having a specifically gendered child one’s entire life is one of the “cruel optimisms” (Berlant 2011) of the gender binary and cisnormativity. Parents of transgender youth go through a process of reconstructing what their child’s, and their own, future may look like when it is not through the fantastical lens of the gender binary. Berlant describes a fantasy as a “collectively invested form of life” (2011:11); cisnormativity involves the collective investment in reproducing cisnormative versions of personhood and family. When these fantasies are unraveled, in this case by the child coming out as transgender, Berlant says people can experience “depression, dissociation, pragmatism, cynicism, optimism, activism, or an incoherent mash” (2011:2). Parents in my research experience the whole gamut from depression to activism in their unraveling of the fantasy of cisnormativity. Parents of transgender children experience the unraveling, but they also participate in and do the unraveling of cisnormativity in spaces they inhabit, which I will discuss in Chapter 3.

While parents are experiencing the unraveling, undoing, or as one mother describes the “shattering” of the cisnormative dreams they had for their child, part of the “incoherent mash” of responses can involve trying to hold on to parts of that fantasy. I observed that sadness surrounding the death of gendered dreams subsides when parents

are reassured that their child will still be able to, or still desires, a resemblance of the cisnormative and heteronormative future they once envisioned for their child, such as having children and getting married.

“You kinda do have to grieve a little bit of what you thought, you know, was, and then celebrate what is. And at first, I had trouble with, you know, well, she’s, you know, she’s probably not going to have a biological child, um, because with the hormone therapy and everything, and, you know, and then we had this conversation and she said, you know, my plan is I’m going to have foster kids. And it was just like, this is an amazing person, you know, wh-, how would I, why would I grieve, you know?” –Kim (47 years old), mother of 17-year-old transgender girl \*Came out at 13 years old

“I had to go through kind of that mental process and recognizing what I was going through, that it was more about my image of his future, than about what his image of his future was. This idea of what I had for, you know, my kid and their future, your traditional, you know, fall in love, get married, have a baby with someone of the opposite gender. It was just in my mind, because that’s, I don’t know, and I just had to change that. And it took a little while and it finally came down to Joshua saying, I’m still gonna have, you know, a wedding, I’m still gonna have a marriage and children, you know, nothing changes, you know. It’s just how that happens is gonna be a little different than your traditional.” –Andrea (49 years old), mother of 20-year-old transgender boy \*Came out at 15 years old

The cisnormative dreams are replaced by versions of the future that more accurately reflect their child’s current reality. Yet, the relief that a version of the fantasy

would still be realized speaks to the power of how gender and homonormativity—the valuing of a “legitimate way of living” (Ahmed 2004:149) that promises a “privatized, depoliticized gay culture anchored in domesticity” (Duggan 2004:50)—shape our lives and imaginations. Kim and Andrea both have children who hold binary gender identities which makes it easier to swap one set of gendered expectations for another set. Binary transness provides parents with an orientation or path that is different than anticipated but it is still a path that is paved; “boy” road signs can be swapped out for “girl” road signs. When recalibration still involves parts of the envisioned future, this makes that recalibration process smoother. On the other hand, non-binary transness often leaves parents without any idea of a new direction for what the future will look like.

### **Ambiguous Non-Binary Futures**

Parents of non-binary transgender youth experience more ambiguity and uncertainty about their child’s identity and how that identity will progress into the future. In the below quote from our interview, Virginia describes confusion and anger surrounding her grandchild’s non-binary transmasculine gender identity. Spencer uses he/they pronouns and loves to wear makeup, tiaras, the occasional feather boa, and colorful tulle skirt. Spencer is taking testosterone and had top surgery a few months after this interview and still enjoys embracing forms of gender expression that are categorized as feminine.

“I get a little confused, and maybe it’s my lack of understanding, it’s how people are these days, but I get a little confused with the, want the male and the testosterone, but wanna wear all the make-up and the fingernail polish and, but I get that’s what happens these days, but it confuses me just a little...Sometimes I



get a little angry because he gets so mad at me because I don't use the right pronoun, but yet we wanna be feminine. So, I get a little confused, you know.”

–Virginia (59 years old), grandmother of 18-year-old transgender boy \*Came out at 14 years old

Genderfluid and non-binary identities are less understood due to cisgender populations not comprehending and experiencing gender in the same way that transgender communities do. Virginia's confusion surrounding current gender presentation translates into awkward wording while trying to avoid using pronouns and ultimately confusion about what Spencer's future will look like. Uncertainty surrounding non-binary identities speaks to transnormative narratives about transgender gender identity and expression only being valid if that transness is binary (Johnson 2016). Garrison (2018) says that this is because non-binary transness troubles the cultural signifiers for acceptable gender identities and gender expressions. Non-binary transness unsettles what parents think they know about gender and their child's anticipated future path. While non-binary identity brings ambiguity that may make some parents uneasy, it can also offer comfort to others who view a binary trans identity as more “real” and therefore scarier in terms of the familial consequences.

However, for some parents, binary transness is easier to grasp because they can relate that to their understanding of their own gender.

“I don't want it to sound like I was unhappy with, you know, when she was non-binary. But, as somebody completely new to that culture, that was very hard for me to grasp. I think I handled it better when she said that she identified as female, and I don't know if it's just because I had learned more, or because that was

easier for me to grasp. Honestly, I'm not sure because, you know, I'm female myself, it's easier for me to grasp that concept... I was like, you know, do you wanna shop for women's panties? You know, things that I could put my fingers on that she might want to change." –Kim (47 years old), mother of 17-year-old transgender girl \*Came out at 13 years old

Kim's transgender daughter identified as non-binary, more specifically genderqueer, for a month before she told them she does not identify as non-binary and instead identifies as a girl. The identity of "girl" was much easier for Kim to understand. Since Christina came out one month before the start of the 7<sup>th</sup> grade, they were scrambling to figure out how to support her in her upcoming school year. When Christina articulated that she is a girl, Kim could identify more tangible ways to direct and assist Christina in her transition. "Girl" illuminated a clearer picture / path of what a future would look like in comparison to "genderqueer." When discussing fears surrounding her child's future, Martha identifies being non-binary as the point of worry for her child's future.

"I think it's the non-binary thing, I think because no one really gets that. I've read and I've even seen in my own experiences sometimes, um, a child will come out as non-binary and then within a year or two it seems like they tend to not be as fluid in that, and they tend to go and identify more male or more female. Um, so, I feel like I'm waiting for this other shoe to drop which is, which is very indicative of the brainwashing binary. But I think about adults that I know that are transgender, that have identified very male or very female. They fit the binary, you know, they don't have as many issues. But when you're non-binary it's like

you live in this space, um, that no one understands.” –Martha (52 years old),  
mother of 18-year-old non-binary child \*Came out at 14 years old

Being non-binary is often thought of as a temporary phase, similarly to stereotypes and misconceptions of bisexuality, prompting Martha and other parents of non-binary children to wait for the “other shoe to drop,” meaning waiting for the child to instead come out as a binary gender identity. The in-between and fluid queerness of identities such as non-binary, genderfluid, bisexual, pansexual, etc. are difficult for binary and monosexual people to wrap their heads around, leading people to hold their breath until the binary identity is later announced. Gender is indeed fluid, and sometimes people do later come out as a binary gender identity like Christina did, but people also live their entire lives as being non-binary. The anticipation of a binary future is still so deeply engrained that non-binaryness feels like a constant state of limbo for some parents. This limbo state makes it difficult to predict or anticipate a future and renegotiate how dreams for the future will look.

### **Afraid of Losing a Future**

Not only does gender transition change the ways parents dream of their child’s future, but it also sparks the sudden fear of losing any type of future. Transgender youth have high rates of attempted and completed suicide, and informed parents are very much aware of this danger. Through my observations, these high rates of suicidality are often related to a youth’s gender dysphoria, the inability to go through social or medical transitioning that will alleviate that dysphoria, and social discrimination and ostracization they experience at home, in schools, and in public. According to minority stress theory, increased mental health distress is common in populations which experience

discrimination and social isolation due to societal oppression (Meyer 2003). Tension in the parent-child relationship caused by viewing transness as a metaphorical death is also a contributing factor to amplifying the distress that can produce literal premature death of the transgender child.

The fear of losing the child through suicide often only comes when the parents are educated and informed about the experiences of transgender youth. At a PTK meeting in December of 2016, parents shared strategies of how to monitor their children for self-harm; “look through all their things and look for blood or sharp objects” and “lock up all the medicine.”

“It’s the fear of the unknown, the fear of what is this going to be like for him, what kind of life he’s going to have. Now I know that his life would be worse if he, if he kept all this within him, and I do know that it’d be worse now, but at that time I couldn’t think about that. Yeah, it was just fear, I mean, you know, at one point I realized that it was also mourning. You’re grieving the loss of what you thought you had, or would have, you know, and then you start to replace that over time with new dreams and new images.” –Andrea (49 years old), mother of 20-year-old transgender boy \*Came out at 15 years old

As Andrea illustrates, some parents early on in their journeys cannot recognize how their child’s life would be worse if they suppressed their transness, because the parental perspective is focused on fear of the trans future. Yet parents often receive a “wake-up call” in the form of an attempted suicide, as Andrea and many other parents in my research did.

“There were some wake-up calls. I don’t think I’d have a...I know they say all transgender parents say this, but my child wouldn’t be alive. You know, we already had one [suicide] attempt. She’s highly allergic to hazelnuts— anaphylactic—and she walked herself to HyVee, and she just um, she purchased Nutella, and um, she waited until she got home to eat it on the porch.” –Eleanor (43 years old), mother of 16-year-old transgender girl \*Came out at 14 years old

Eleanor goes on to describe the image of her child standing on the front porch and smiling while eating Nutella because she thought her pain would be over soon. Parents in my research express story after story of their and their child’s pain which could have been alleviated or avoided through wider acceptance and awareness of gender diversity, which speaks to the collective harm of cisnormativity. The dangers trans children, and in extension their families, face when transness is not given proper care and support is frightening. This fear is what fills many parents with rage at the anti-trans bills attempting to ban gender affirming care for transgender youth.

“I just wanna look at those people on the committee and say, ‘okay, these children don’t get access to these things, they will probably kill themselves. That death is going to be on your head. How do you feel about that? And I wanna make sure that everyone knows that death is on your head. I will make my personal life mission to connect your name with that child’s death.’” –Martha (52 years old), mother of 18-year-old non-binary child \*Came out at 14 years old

Martha is referring to the bills that were in Missouri in March 2020 and again in March 2021. This proposed legislation would ban lifesaving gender affirming care for minors. Despite the standards for healthcare such as puberty blockers being in-

accordance with American Academy of Pediatrics' best practices (Rafferty et al. 2018), transgender youth are thought to be too young to know who they are. In fact, these treatments are regularly given to cisgender children for things such as precocious puberty, short stature, growth hormone deficiencies, congenital adrenal hyperplasia, and profound hypothyroidism (Watson et al. 2015). When cisgender children who are deemed to have inappropriate development are given puberty blockers, this is to generate their ablebodiedness and their alignment with "correct" dyadic childhood development. On the other hand, proponents of anti-transgender legislation consider puberty blockers for transgender youth to be distancing the child from normative, acceptable childhood development. Puberty blockers for transgender youth are considered dangerous and threatening to dominant sex and gender systems while this same medical intervention is seen as medically necessary for cisgender youth. Those who oppose access to gender-affirming healthcare for transgender minors see this as protecting the child until they are old enough to make decisions on their own—even though trans minors *are* active in the decision-making process about their healthcare—although what they are actually doing is grasping tightly onto the fantasy of the imagined-cisgender child and deferring the inevitable trans future.

Kim references the commonly held perspective that trans youth should just wait until they are 18 to medically transition. This is a perspective that many parents held until they had these wake-up calls.

“Lisa talked about it before. She would tell Seth, ‘Well, when you’re 18, we’ll talk about this.’ And Seth said, ‘I won’t make it to 18.’ And it just kinda hit me. Peter and I were still at that point where, you know, we knew it was real, but at

the same time we were still struggling with having a 14-year-old make life-changing decisions, um, because we knew that it will cause sterility...And then she was at the hospital after the suicide attempt..." –Kim (47 years old), mother of 17-year-old transgender girl \*Came out at 13 years old

Like many parents at the community support group, Kim learned through the experiences of other parents who shared their struggles and triumphs. Lisa, a founding member of PTK, attempted to defer her child's trans future by postponing medical transition until the child was 18 years old, but many parents eventually come to the realization that if a child is old enough to make the decision to end their life, then they should be able to make decisions that will save their life.

Even when parents are at the point of understanding and wanting to support their child's transition, fears of losing their child are still present.

"She would just fall apart, she would just kind of melt down and she would just say, 'it's wrong, everything's wrong,' and I could not calm her down. She missed a lot of school. And she just was having trouble articulating, maybe to us, and maybe partly to herself, what really was wrong. I would try to ask her, 'do you feel like harming yourself?' and she'd say, 'no, but I'm worried that I will feel suicidal.' When she was lying on the floor in her room, rolling back and forth and sobbing, 'everything is wrong,' I knew what she was talking about. I had wondered before, but I didn't want to say, 'sweetie, you're, you're a girl,' you know. Because nobody else should tell somebody that. You know, you can't tell somebody what they are." –Charlotte (60 years old), mother of 18-year-old transgender girl \*Came out at 14 years old

“I mean, she’s said some, like, pretty intense things. She gets very upset with herself and says, ‘I hate myself.’ I project that out to, like, what’s this going to look like when she’s in high school, like, is she going to be okay? Is she going to be able to move through the world being a sensitive human being and being a trans kid? Like, how do I help her now, should I get her in therapy now, should we do this now? Like, I think I have a lot more questions and reactions around her day-to-day life than I do my other kids, because I want to set her up to have enough resilience and, like, you know, whatever the fuck she needs to make it.”

–Jennifer (35 years old), mother of 8-year-old transgender girl \*Came out at 2 years old

Parents struggle with understanding the right balance of support and directing the child towards what will help them, while also letting the child unfold however they are meant to be as a person in this world. This is probably a struggle most parents can relate to, but it becomes even more stressful when there are not any available scripts for how this is supposed to look.

“I was scared for him. I was worried of how other people would treat him, and how the world would treat him. A very big factor, ironically, was, you know, the statistics we heard about the suicide rate in the LGBTQ community, and trans kids, their suicide rate, if they don’t have supportive parents, was so sky high. We gotta get on board and understand this, because we don’t want to lose, you know. I’d rather have a third son than bury a daughter. You know, and so that kind of idea was, we were very motivated to come to terms and accept and get on board,



because we didn't wanna lose him.” –Adam (50 years old), stepfather of 20-year-old transgender boy \*Came out at 15 years old

Phrases such as “I’d rather have a transgender son than bury a daughter” or “I’d rather have a transgender daughter than a dead son” are repeated amongst parents of transgender youth, often to emphasize the seriousness of the situation and often why the family ultimately supported the child’s transition. Adam notes that this worry of their transgender son potentially completing suicide was ironic because while they were working to fight against the statistics saying their transgender child might die by suicide, they were not anticipating their cisgender child to die by suicide. Fears of losing a child through suicide prompt parents of transgender youth to embrace a trans future instead of holding tightly onto the imagined-cisgender future.

When white parents of transgender youth confront their child’s potential premature death, it is considered a “wake-up call” because they have not previously needed to worry about harm directed at their children. Their own whiteness—and for many, economic privilege—has shielded parents from the fears of premature death and trauma that parents of non-white children must confront regularly. When white children come out as transgender, they are not only transitioning genders but also transitioning from a place of societal protection to being on the receiving end of societal attack. For the parents and grandparents of trans youth of color in my research, they express that they already had to consider all the ways in which their children are at-risk because of their race, and now their gender identity is an added element of danger which leads to the potential of premature loss of a future.

## Comparing Losses and Cisnormative Potentiality

During my interviews with parents of transgender youth, some parents brought up personal losses they have experienced in their lives as a way to put gendered mourning in comparison to other feelings of grief. Adam and Andrea discussed how the loss of their cisgender son, Brandon, put their former feelings of loss for their “daughter” into a different perspective.

“For a time, I mourned the loss of a daughter. I thought I did, right. I thought at the time, in 2015 and 2016, I thought, I’m never going to walk a daughter down the aisle now. Um, it wasn’t really mourning because then I learned what that really was like.” –Adam (50 years old), stepfather of 20-year-old transgender boy  
\*Came out at 15 years old

“And then of course for our family, a really, really big turning point was the loss of our other son. Brandon passed away, of course that, that changes a lot. Because, for Joshua, I fear if we didn’t get on board and we didn’t figure out how to support him, then we might be burying him. Um, and that scared the daylights out of me.” –Andrea (49 years old), mother of 20-year-old transgender boy  
\*Came out at 15 years old

When confronted with the reality of the actual death of a child, it is made clearer that gendered mourning is made not from the death of a child, but from the death of the cisnormative ideas parents had for a child. For Andrea and Adam, this process involved letting go of any previously imagined dreams and trying to fully support their transgender son. A few months prior to Brandon’s suicide, Joshua had top surgery. As mentioned in Chapter 1, Andrea was on board, but top surgery still seemed a bit “daunting.” Shortly

following Brandon's death, Andrea was diagnosed with breast cancer and underwent a double mastectomy. As difficult as it was, Andrea and Joshua bonded during this since Joshua had just been through top surgery which is a similar physical recovery process as a double mastectomy. When I asked Adam if he still views Joshua's coming out as a loss of a daughter, he responded "No. I'd like to be able to say some kind of big shift occurred, but it just became a lot less important in light of other problems we had." Through these painful processes of actual death and disease, the focus shifted away from viewing Joshua's transness as a loss or a problem to be managed. In fact, Joshua's gender identity and medical gender transition was a source of positivity and relief. The parents knew that if Joshua did not transition, he would likely also die through suicide, so they were happy he was living his authentic life. Joshua's top surgery was a reminder that the surgical removal of chest / breast tissue does not fundamentally change who you are. While top surgery seemed daunting, Andrea learned that Joshua was still Joshua after top surgery and that she, too, would still be the same person with or without breasts. I will later explore this in Chapter 4 when discussing the impact of the child's transness on parents' own understanding of themselves.

While Andrea and Adam were no longer grieving Joshua's transness, they still experienced sadness that they could not post pictures on social media of Brandon because almost all of the pictures of Brandon had Joshua in them before Joshua transitioned. Joshua did not want pictures of his childhood being shared because they were "horrible memories for Joshua" due to gender dysphoria, but "he realized how much I needed pictures of Brandon" and eventually became more comfortable with pictures of himself being shared for the sake of sharing pictures of Brandon. These experiences reveal that

gendered mourning, just like gender identity and expression, is a spectrum and does not exist in a binary. Actual death intertwined with gender dysphoria intertwined with gendered mourning is very complicated and multilayered. This complexity that Andrea and Adam had to negotiate helped them better empathize with other parents going through the gendered mourning process.

“I think they’re right, it is grieving, but it’s just not, it’s not the level of actually losing a child. And I wouldn’t want to tell them, ‘No, you’re not grieving,’ because their feelings are valid, and I hope that they would never actually understand what it’s truly like to lose a child. I still have Joshua. I visited him today just so that I could get a hug.” –Andrea (49 years old), mother of 20-year-old transgender boy \*Came out at 15 years old

As Andrea eloquently states, the fact that it is not an actual death does not make this mourning process less valid. Ambiguous loss theory (Boss 1999) helps to understand that gendered mourning is a very real experience for parents, yet there is also the simultaneous reality that their child is in fact still alive. Patricia, as well as other parents, used words like “recalibration” instead of mourning.

“Mourning is too strong of a word. You go through 16 or 17 years with this little sprout of a person in your house, and you think in your head you know pretty much what their life is going to be like, and, um, you kind of relax into that. And then something comes along like this and flips that on its side. There’s a pretty immediate and pretty drastic recalibration. And whenever you have a major life recalibration moment like that, you’re going to have some feelings. Before we had my child, we had a miscarriage about 6 months before I got pregnant with them,

and um, that kind of mourning, when you have a miscarriage, is more about a loss of the unknown, a loss of potential. It's very different from the death of someone that's alive and breathing. It's a very different kind of mourning. So I guess you could say that, uh, I experienced it to some degree, but not in the way that you would mourn someone that was dead." –Patricia (55 years old), mother of 17-year-old transgender girl \*Came out at 15 years old

Patricia compares the feelings she had with her miscarriage to the feelings she had about her child coming out as transgender. She notes that this particular loss is not the same as a death of someone alive and breathing, but there are still feelings associated with the loss of potential. Andrea describes a similar feeling of loss when comparing Brandon's death and feelings of loss she felt surrounding Joshua coming out as transgender. She described to me, "With Brandon, there is no future. With Joshua, we do have a future, but at the same time, that future is different. So, you're still kind of mourning loss of future." When put in comparison to other losses experienced by parents, it is increasingly illuminated that what is lost is the potential of a cisnormative future—cisnormative potentiality—and not the child itself.

The loss of cisnormative potentiality not only encompasses the assumed-cisgender future that is no longer a reality, but it also involves the feelings of sadness some parents experience when they wish they would have assisted their child in transition earlier in order to achieve a more "passable" future. Therefore, loss of cisnormative potentiality is connected to the loss of cisgender privilege as discussed in Chapter 1. However, the altered or abandoned futurity as seen by the parents is not something that is mourned by transgender children themselves. Trans youth most likely never invested in

this cisnormative future to begin with, which is why they do not experience the same gendered mourning that parents experience. These conflicting perspectives on futurity among transgender communities and the cisgender people in our lives produces tension in these relationships but it also generates the ability for perspective-shifting to occur surrounding cisgender views on trans futures.

## **Conclusion**

Gendered mourning is a complex process originating from the societal and familial impacts of cisnormativity and institutionalized transphobia. These systems of normativity and oppression shape how transgender children are seen and also how parents fear for their children's ability to safely navigate a hostile social world.

Cisnormative constructions of the future produce the conditions for the experience of gendered mourning amongst parents of transgender youth. The societal and familial inability to imagine trans futures leads to the attempts at deferring trans futures and evading the reality of the child's transness. As parents adjust to this new life path—a path that is difficult to envision due to the presumed “newness” of trans childhoods—recalibration is smoother when the child follows a binary path. This resemblance of a recognizable future eases parental worries over the child's gender transition and future life path.

Contesting this notion of “newness,” Julian Gill-Peterson (2018) documents the history of transgender youth and challenges the idea that transgender youth must be treated with caution due to the unprecedented nature of gender transition at a young age. Erasure of the history of the transgender child contributes to the unintelligibility (Butler 1990) of the trans child and the unawareness that there are indeed fulfilled queer and

trans futures ahead. It is vital to recognize and tell these histories to show that transgender youth have existed, have developed creative survival mechanisms, and are full of potential.

Through archival work from school board documents and medical records, Gill-Peterson (2018) uncovers the history of various transgender youth such as “Val,” “Lane,” and “Vicki.” When “Val” from Wisconsin started elementary school in the 1930s, her parents arranged for her to attend school as a girl. Her parents were on the school board and were friends with a county judge which helped them make “special arrangements for the toilet, etc.” (Gill-Peterson 2018:61). The parents’ social and cultural capital assisted them in securing the ability for the child to attend school as a girl and access proper accommodations. “Lane,” from Missouri, felt she was a girl from a very young age but her parents were not understanding. She dropped out of school at grade 9 and left home at age 17, in the 1940s, to live full time as a woman after an unsuccessful visit with a doctor from her hometown in an attempt to access hormones. She made a successful career for herself as a dancer in the Midwest and New York. Her experiences were documented in medical records when she went for breast augmentation surgery in her late 30s in New York (Gill-Peterson 2018:92). And finally, “Vicki,” a 14-year-old trans girl living in rural Ohio. She started writing letters to a doctor in New York in 1968, in attempts to access estrogen. Her father was not understanding and withheld consent to see a doctor in her hometown. In these letters to the doctor, she notes that kids at school were cruel, her grades were slipping, she had gained a lot of weight from emotional eating stemming from depression, and she was suicidal (Gill-Peterson 2018:153). But in the summer of 1969, she moved in with cousins in Columbus, started living full time as a girl, and

finally secured estrogen in 1970. These transgender youth were hiding in plain sight in the documentation of the past, yet they were not recognized due to limited vocabulary for gender diversity at that time. These documented stories showcase the creative survival mechanisms transgender youth have employed when dealing with unsupportive family structures, and also the ways that trans young people have created space for their own futures. Highlighting these untold histories combats the erasure of childhood transness as a potential and a viable future.

Transgender youth, and the parents who support and accept them, are re-envisioning what constitutes a “future”; they are re-defining the need for the future to reproduce gender normativity. A queer phenomenological approach to the future (Ahmed 2006)—one that more widely accepts and understands “alternative” futures—can allow for the minimization of mourning among parents of transgender youth through re-orientation towards the queer. This is a way of inhabiting the world by giving support to those whose lives make them appear strange or disorienting (Ahmed 2006:179). Queer phenomenology provides us with the tools to reorient the normative path of gender socialization, gendered expectations, and the dominant cultural set of gender rules. This queer orientation points us to a queer future where non-normative minds and bodies are celebrated, or even simply accepted as a common fact of life, rather than being feared.

Even in the 1930s and 1940s, we see that trans children somehow found ways to survive and deploy queer phenomenological tools of living. For many, this meant leaving home to find communities that would foster trans livability. And for others, trans livability was fostered right at home, with help from parents. Some may consider these children the “lucky ones,” but I argue that it is still lucky to have the ability to form



intentional community and chosen family with those who support and love your full being. Through learning trans histories and listening to trans youth today, we are better able to imagine, support, and embody trans futures which is beneficial to both parents of trans youth and trans youth themselves.

In *Care Work: Dreaming Disability Justice*, Leah Lakshmi Piepzna-Samarasinha writes of grief being like a garden. “Death can be loss, and can also be a sign pointing to what needs to change” (Piepzna-Samarasinha 2018:203). Piepzna-Samarasinha discusses that in the aftermath of numerous suicides of disabled trans femmes, people sought new methods of community care. The parents in my research sought out support for their gendered mourning which later put them in a position to learn about gender diversity. PTK was instrumental in directing parents towards the tools to support their child’s trans future. From sadness grows support for other parents of transgender youth, education about transgender histories and present-day communities, as well as social action to improve conditions for their children. Gendered mourning brings heartache and sadness, but it also points towards what needs to change within the cisnormative system of the family in order to reorient towards a trans future. Yet, divorcing cisnormativity from futurity and potentiality of life is an intentional and messy effort which will be explored in the next chapter.

### CHAPTER 3: TRANS LIVABILITY

As I sit in the hearing room at the Capitol building in March 2020 preparing to testify against a bill which seeks to ban gender-affirming healthcare for transgender youth, to my left are the four transgender teens I carpooled to the hearing and to my right are four white men in business suits planning to testify in favor of the bill. I bounce between my heart pounding with rage listening to the anti-trans discourse and false myths of trans bodies and lives, to tearful moments of pride seeing parents from our community and beyond testify against these bills, to my heart sinking with sadness while consoling the trans teenagers I carpooled there. I sit in awe while parent after parent begs for recognition of their children's lives, access to life-saving healthcare, and the ability to exist in schools equal to their cisgender peers. A grandmother and grandfather hand out trans pride stickers and homemade cookies to the crowd of citizens there to testify against the anti-trans bills. I did not expect the fight against transphobia to turn into a family event. But as I looked around, it was just that. Young kids whose parents didn't have childcare made the hearing room their living room. They were plugged in with headphones watching movies on their iPads so they couldn't hear what was going on.

Parents, primarily mothers, are working to reimagine what family could look like when incorporating and affirming transness. Aside from trans adults, cisgender mothers of trans kids are the loudest voices working to create space for trans kids in both private and public worlds. Mothers, particularly white cisgender mothers, can appeal to people in power—whether that be within the family or the government—and thus create cultural and political change to sustain trans life. Mothers of trans youth are reconfiguring the

cisnormative structures of the family by shifting views of transness from something that is grief-worthy, to something worth fighting for and carving out space for.

The foundational framework of cisnormativity involves the view of trans identity as abnormal and deficient in comparison to cisgender identity, thus resulting in the treatment of transness as a loss, both of social status and of visions regarding kinship relations. While disability and transness are not the same, the stigmas of disability equating to an undesirable future and loss of non-disabled status are useful in examining the connections between gendered mourning and trans advocacy in terms of the difficulties in challenging dominant narratives which lead to these stigmas of deficiency. Leah Lakshmi Piepzna-Samarasinha discusses how the most difficult part when leading disability justice workshops is to move abled people away from the deficiency model of disability (2018). I see this as similar to the perspective-shifting work parents must do to move away from the deficiency model of transness. “When I talk about disabled wisdom and skills, or about disabled people as having histories, cultures, and movements, the blank looks in the room kill me. It’s damn near impossible for many abled people to think of disability as anything other than an individual tragedy and a state no one would choose to inhabit” (Piepzna-Samarasinha 2018:232). Through attending PTK meetings, parents learn about trans histories and community culture—which is the first time they are learning that being trans does not equate to a diminished life. Lakshmi continues, “that is such a huge paradigm shift—to view coming into disability identity as birth, not a death, which is how the transition(s) are seen by ableist culture” (Piepzna-Samarasinha 2018:241). This paradigm shift highlights the tension between transgender children and their parents—while parents experience their child’s coming out as a death of the dreams

they had for their child, some trans people view their coming out as a re-birth. The phrase “deadname” that many trans people use to describe the name given to them at birth suggests that trans people also experience death of their assumed-cisgender identity, but there is a distinct difference between feeling that one has died and laying to rest the cisnormative expectations of personhood placed upon oneself. As parents learn more about gender diversity through connections with other parents of trans people as well as engagement in the LGBTQ+ community, they shift from feeling their child has died to recognizing the need for laying cisnormative frameworks to rest in order to support trans livability.

The parents in my research are almost exclusively those who have always been seeking to learn how to be supportive of their child’s gender identity. However, not *all* parents of transgender youth are open to learning how to shift their personal imaginations to include trans futurity as a possible mode of existence. I suspect I was not able to capture these parents in my research due to the following reasons; unsupportive parents did not want to acknowledge their child’s transness enough to seek support about it; unsupportive parents are not interested in attending a queer-themed social support group in a queer space; and if unsupportive parents did attend for one meeting, they quickly learned from other parents that this is a space to learn how to be supportive and not to complain about their transgender child. I did contact these parents for interviews, but none responded to my attempts at recruitment for participation. Despite not having been able to collect my own data on the gendered mourning process among unsupportive parents of transgender youth, I did observe that part of the gendered mourning process for

supportive parents of transgender youth was learning how to foster livability for their children and other transgender children.

My use of the term “livability” can be defined as the ability for one’s transness to live and be fully expressed in a relationship, a family, a community, or any space a trans person might inhabit. Livability is created through efforts of transgender communities as we push back against cisnormative expectations, assumptions, and enforcements of personhood. In Lazarus Letcher’s deconstruction of transgender murder memorials such as Transgender Day of Remembrance, they discuss how trans livability is often not acknowledged or centered on a national scale since there is so much focus on mourning trans people instead of supporting trans people who are still alive (Letcher 2018). I extend this use of trans livability to include the efforts of shifting away from the metaphorical death of the assumed-cisgender child and instead focusing on building affirming worlds for trans youth. Gender frameworks which deem transgender people disposable in relation to cisgender people, leading to higher rates of violence and murder against transgender people, are the same frameworks which inform parents’ reactions to their child coming out as transgender—a less fulfilling life filled with violence. While higher rates of violence are a true reality, the national focus only on transgender deaths instead of transgender life, as Letcher (2018) argues, further contributes to frameworks which view trans people as “hapless victims” (Crimp 1989:5). There have been calls from Black trans activists for a shift away from trans mourning and instead focusing on actions cisgender people can take to celebrate and support trans people while we are still alive (Adsit 2015; Rude 2016).

I will explore the ways in which livability is created through efforts of cisgender parent accomplices to make institutional space for gender diversity. I use the term “accomplice” to highlight how parents are interrupting cisnormative direction of the family structure to make space for their trans child, both within and outside of the family, while working alongside their children and other transgender adults. An accomplice differs from an ally because accomplices “focus more on dismantling the structures that oppress that group” (Clemens 2017) while allies focus on individual progress and representation. Both are crucial in social justice work, however many parents represented in my research use their gendered mourning as fuel to combat harmful social structures which oppress their children. As Douglas Crimp details in his essay about mourning and political action of gay men during the AIDS crisis, mourning has the potential to inform militant social action, but militancy can also obscure one’s mourning; “mourning is a psychic process that must be honored” (Crimp 1989:5) or else it will unconsciously erupt. While interviewing parents of transgender youth who are engaged in activism and family work to support their trans child, some were surprised by the emotions that came up—Patricia told me, “Wow, I’ve got some feelings here that I didn’t realize I had” when describing her feelings of name loss. There are often efforts by parents to move past or ignore gendered mourning because it has been proclaimed transphobic or they believe their grief is disrespectful to their child, however recognizing one’s own gendered mourning is central in directing one’s militancy at the social systems which caused that grief in the first place.

This chapter discusses how gendered mourning informs parents’ efforts and actions towards disrupting cisnormative social structures. Previous research shows that

supportive reactions to transgender youth include having a parent negotiate parental differences if one parent is not supportive, requiring respect from other family members, disregarding gender stereotypes, affirming the child's gender, advocating for the child's safety, seeking community for the family, and using the child's correct name and pronouns (McGuire and Conover-Williams 2010; Riggs and Due 2015). In my research, I find that parents engage in intentional efforts to support their child which results in a reimagining of the child and the future to include trans futurity. These efforts to create institutional space for trans livability in the face of grievability, both within and outside the institution of the family, appear in numerous forms; making community connections with other parents of trans kids, learning about transgender experiences, decentering hetero/cisnormativity in their parenting practices, engaging in activism surrounding LGBTQ+ topics, assisting their child in transition, and advocating for safety for youth experiencing hostile family members or spaces. In my ethnographic fieldwork, I observed that "surrogate parents" have taken up the role of fostering situational livability for trans youth who do not have supportive parents. These "surrogate parents" are either queer adult mentors or parents of trans youth whose children's friends have parents who are not accepting of the child's gender identity. When institutional space is created for transness, this allows more room for trans children to live instead of literally or metaphorically die. Parents of transgender youth, acting as accomplices in the fight against cisnormative oppression, have the ability to sustain trans life and trans futurity. However, livability is not a binary concept existing either in its fullest form or its complete absence. Livability can be situational, with boundaries of how far it can be extended due to various barriers to safely and fully existing as trans in all spaces.

## Community and Parental Connections

Parents of Trans Kids (PTK) was started only a few months prior to the beginning of my fieldwork in 2016. It was started by parents of trans kids who knew there were other parents of trans kids needing a space to talk, process, and unload because they themselves were needing that. Parents of transgender youth report experiencing loneliness due to non-acceptance or discomfort from friends and extended family members about their child's gender identity (Hidalgo and Chen 2019; Pullen Sansfaçon, Robichaud, and Dumais-Michaud 2015). Martha recalls the intention behind her and other parents forming the group.

“We gotta start something for those parents who are, who don't have that supportive co-parent. Who's that gonna be? You gotta find another one of us to talk to, because not everybody can do bibliotherapy. And not everybody has, like, a BFF that, we can text each other and say, 'oh my god, they just told me they wanna have top surgery, I'm shitting my pants, what do I do?'” –Martha (52 years old), mother of 18-year-old non-binary child \*Came out at 14 years old

Martha references the parents who don't have a supportive co-parent or a friend who understands what they are going through. Building connections with other parents of transgender youth is an essential part of shifting the perspective from grieving to living. Sharing feelings and experiences with other parents of trans youth helps normalize the process of unlearning cisnormativity. Attending PTK was beneficial in helping parents verbalize their struggles and identify how to move forward. Gonzalez et al. (2013) notes that a positive aspect of having a child come out as LGBTQ is the increased social connection and community building, which is especially true when finding other people



who can relate to one's experiences. This increased social connection assists in the destigmatization and normalization of their experiences. What was once labeled by the parents as deviant becomes mundane and/or positive through their shared common experiences.

“Just listening to the other stories of parents and their kids and what their kids had been through, and how they had dealt with it was huge. You don't feel like you're alone. And also, as a parent, coming to that understanding that it's not your comfort, you know, it's your kid's comfort you need to be concerned with.”

–Ruth (65 years old), mother of 20-year-old non-binary child \*Came out at 16 years old

“Really talking with other parents and being able to have those conversations with people who've been through it, and not saying them to my child was very helpful. And having other parents that have been through it, and you know, seeing the different steps that they took, and how those are the steps I'm taking, you know. I think that that was just really invaluable in us getting through the denial, into the being able to help and get her help.” –Kim (47 years old), mother of 17-year-old transgender girl \*Came out at 13 years old

Both Ruth and Kim mention the importance of having people they could relate to as well as frameworks they have learned from other parents. Advice and storytelling from other parents provide the frameworks that parents of trans kids lack; a path of how to navigate this new imagination of futurity. Ruth mentions the idea of comfort, which relates to the gendered mourning process. As parents process different aspects of gendered mourning and come to terms with the insidiousness of the gender binary, they

experience discomfort. This discomfort often is felt when parents confront prior parenting practices that may have harmed their transgender child and advocate for their child in ways that are completely new to them as straight cisgender people. Social connection with other parents of trans youth allows parents to navigate and reframe the discomfort as something positive—a yearning for constructive change that will improve their child’s well-being.

Kim highlights that seeing the journey other parents went on was instrumental in learning how she can help her child and assist her in the process of transition. Parents in the group made documents walking through all the steps involved in a legal name change, shared information about trans-affirmative doctors and surgeons, and put together guides for items to have during the recovery of gender confirmation top-surgery.

“During the very earliest months, seeing some other parents who had already been down the road a little bit ahead of us, and they were doing okay. Really I’m thinking of Lisa particularly how she seemed to have all of the early answers that we needed, and how her son, Seth, had been through this and this and that and we were able to learn from that and apply it. I hope that at other times we were helpful to some other folks that were newer than us. You know, we put together some documentation for, like, name change stuff.” –Adam (50 years old), stepfather of 20-year-old transgender boy \*Came out at 15 years old

Adam and Andrea created a resource guide specific to legal name changes for minors. This act of creating a resource guide for a part of the intentionally confusing process of breaking cisnormative legal boxes assists in creating institutional space for gender diversity within the family. The process of legal name changes in the state in

which my data collection takes place is a process that queer community groups regularly have workshops about for transgender adults due to the convoluted nature of the process; paperwork, needing specific wording and phrasing in order for it to get approved for gender-related reasons, court appearances, publishing the name change in a local newspaper, etc. Minors must have parental consent for a legal name change therefore having guidance from other parents who have been through the process is essential in reducing the barriers of unfamiliarity with the process. Creating a walk-through document helps parents who would otherwise find this too difficult to go through. This practice of resource-sharing creates institutional space within the family because gender non-conformity is seen less as a confusing barrier, and more like another aspect of life that other people have successfully navigated through.

As cisgender and straight parents attend PTK meetings, they also interact with other members of the LGBTQ+ community center. Along with interaction with other parents of trans youth, positive exposure to LGBTQ+ people, specifically transgender people, contributes to the destigmatization of queerness and transness. Parents who attend PTK meetings have hosted booths at the local LGBTQ+ pride festival, attended LGBTQ+-themed bingo events, drag shows, participated in fundraisers for the LGBTQ+ community center, and attended events of LGBTQ+ speakers brought to town such as Janet Mock, Tyler Ford, and Austen Hartke. Broadening community connections to include LGBTQ+ people, not just other straight and cisgender parents of trans youth, has also contributed to shifting the perspective of transness from a death to a lively association of community connection and future frames.

## **Intentional Learning about Gender Diversity**

The institutionalization of cisnormativity in the family, and other institutions of social life, has resulted in the dominant understanding of gender being a cisgender binary of assigned-male-at-birth people always being boys/men and assigned-female-at-birth people always being girls/women, with no fluctuation, variation, or room for fluidity. As parents are confronted with evidence of their child not fitting that binary, some seek out information about transgender and gender-diverse experiences. Consuming materials about transgender experiences helps parents understand their children, learn how to best support and respond to them, and ultimately results in better connections between parent and child. Luke demonstrates how education on gender diversity helps to combat the narratives about trans experiences that are false and harmful, such as the idea that transness is the result of bad parenting.

“I think I had the traditional view of gender. Like, there’s two genders, there’s male and female. That’s the way that it was taught to me, like, throughout my life. Maybe not even taught, but just, like, expressed in society and expressed in just general teachings, like with Christianity. And I had that view until I put in some research, you know what I mean, like until I actually put some effort into it.

Before I got educated and educated myself about it, I had the traditional view of if your child turns out to be trans, it’s probably because the parents fucked them up in the way that they raised them maybe.” –Luke (36 years old), father of 8-year-old transgender girl \*Came out at 2 years old

Traditional views of gender are embedded into many institutions of social life, including religion, which create the illusion that binary and fixed gender is the only

normal and natural experience of gender. The “bad parenting” narrative in particular is often used against supportive parents of transgender children, insinuating that transness is the result of harm done by the parents or that supporting transition is a form of child abuse (Kupalanka et al. 2019). This narrative also contributes to parent’s gendered mourning process because it produces shame and self-blame about their own parenting. Debunking these myths through intentional learning alleviates shame that their parenting “made their child trans” and it also increases parental confidence in actions taken to support their child. Learning about gender diversity helps facilitate the shift from shame and crisis to pride and empowerment (Brill and Pepper 2016; Menvielle 2012).

Not only has intentional learning increased parental confidence in creating supportive environments for their transgender child, but it has also assisted mothers in encouraging their husbands to get on board with accepting their child. Brianna and Eleanor both discuss how their husbands expressed doubt and denial early on when they first noticed their child’s gender nonconformity.

“Brian and I were on separate pages for a long time. Like I think once I started researching everything, and I’m like, oh my goodness. I remember my first google, ‘my son said he was a girl.’ I just started reading, and that’s when I’m like, oh my gosh, this is happening. And so I started showing it to Brian, and, you know, Brian was like, ‘no, this is not happening, our child doesn’t know who they are. They’re too little, they need us to guide them.’ What got me was watching *Gender Revolution*, um, and just kind of watching that documentary and listening to everybody tell their stories, and, um, I think that’s kind of where everything really started to turn, and I was just like, like my mind was so open. Like, super

super, like, more open than it was before.” –Brianna (42 years old), mother of 7-year-old transgender girl \*Came out at 5 years old

“He thanks me, I mean every day, [my husband] says thank you for doing, getting into someone, and looking into this instead of us just letting, you know, assuming it wasn’t a big deal. He goes, ‘you did the right thing, I was just gonna let it slide, let her just kinda play around,’ but he goes, ‘you took the steps to do what we needed and she’s where she is because of that.’” –Eleanor (43 years old), mother of 16-year-old transgender girl \*Came out at 14 years old

I observed that mothers predominantly take the first steps in addressing a child’s gender non-conformity. Mothers act as advocates for their child outside of the family, but also inside the family by attempting to educate their child’s father. For Brianna and Eleanor, these education efforts were successful, and they both now have co-parents who are supportive and accepting of their transgender child’s gender identity. The intersection of disability and gender identity appear in the doubt that Eleanor’s husband exhibits. Their transgender daughter, Grace, has autism and was severely struggling when Eleanor first started attending PTK meetings in 2018. Instead of treating gender non-conformity as a symptom of autism, which is an ableist attempt to discount the realness of that child’s experiences and expressions (Kusalanka, Mahan, et al. 2018; Shapira and Granek 2019), Eleanor took her child’s gender non-conformity seriously. With support from her parents, Grace’s communication, engagement with peers, and confidence in herself all improved.

Intentional learning helps parents better understand their child, which lessens the confusion intertwined in their experience of gendered mourning. Cisgender parents are unfamiliar with common experiences, practices, feelings, expressions, and language of transgender communities. An example of this is when trans youth change their names or pronouns multiple times—a common shared experience of gender development among transgender and non-binary youth. Parents can become frustrated with the frequent changes and their inability to “keep up” with the child. As Patti learned, this is a very common and normal part of transition for trans youth.

“I actually looked online, and I was like, ‘okay, how many transitions of a name does somebody who’s transgender actually need?’ And don’t judge me for that, but it was just one of those things where I was like, seriously, how often can I reasonably expect to do this? And then I read an article and it said that with every name change, they’re diving deeper into their final person, into their final development, into their final evolution, and I’m like, ‘oh my god, that makes sense.’” –Patti (43 years old), mother of 17-year-old transgender boy \*Came out at 13 years old

Misinformation or ignorance about transgender experiences can result in parents becoming frustrated with their child or interpreting these situations as their child going through a phase. Instead of viewing frequent name changes as proof of the inauthenticity of a child’s trans identity, intentional learning helped Patti understand that name changes are a normal part of a transgender youth’s development. Barbara, a grandmother in my research, came a long way in her understanding of her granddaughter’s identity from learning about gender and sexuality. Learning about trans experiences through books,

films, and conversations with other primary caretakers of transgender youth facilitates awareness that being transgender does not mean someone will have a miserable life.

“I was wondering if she really was transgender, I didn’t have much understanding of it. It’s still hard to understand. I’ve studied a lot and I went to the group over there at The Center for quite a while, uh, and that did help me an awful lot, it really did. But, still it’s hard, it’s not like I like it for her, or prefer for her to be transgender because of the life, kind of life she can expect to live, you know.... Learning exactly what gender identity is, you know, um, knowing about people who are fine, who are transgender, who are comfortable enough they can still feel like, um, included in society. And I think, seeing the difference between that and sexuality, that was a big thing for me to realize, initially.” –Barbara (75 years old), grandmother of 21-year-old transgender girl \*Came out at 17 years old

Learning about terminology coincides with unlearning harmful and inaccurate narratives about transgender identity and experiences. Even though Barbara still does not “prefer for her to be transgender,” she knows now that her granddaughter can live a life of joy, comfort, and acceptance in society. Ruth also demonstrates how having more knowledge about queer and trans experiences not only assists in destabilizing inaccurate narratives, but also facilitates further connection between cisgender parent and transgender child, thus fostering livability of the child and expression of internal queer experiences such as the complexity of coming out.

“I was doing more reading and I came across, you know, the stages of coming out, and that really helped me understand that it’s not like...I thought, ‘oh, you come out and your family’s accepting and then everything’s fine.’ And I couldn’t



understand why, you know, Rue was still having a lot of issues, I'm like, what's wrong? I don't get it. But then when we were able to read through those stages together, and Rue kind of was able to go, 'oh yeah, I remember that stage, that was when I was, you know, doing this, and, I remember that stage, and, okay, this is the stage I'm in now.' They really loved it, I mean, we talked extensively. In fact, I couldn't even read the stages because they were so eager to tell me about where they were when." –Ruth (65 years old), mother of 20-year-old non-binary child \*Came out at 16 years old

Ruth was not able to understand why Rue was still struggling with their identity after they came out. Ruth was operating from the narrative that self-knowledge, self-acceptance, and coming out is a linear process. Learning about the non-linear complexity of coming out gave Ruth the language and tools to have conversations about what Rue was struggling with. Parents of transgender youth who are not part of the LGBTQ+ community often lack the knowledge about community norms and processes, which is why doing research can help parents better understand their child and what they are going through. Even for cisgender queer parents, like Phoebe who is bisexual, their experience of queerness and queerphobia is different than their child's experience of transness and transphobia.

"I've had friends that are trans, but this person is in my care, and I have to help them navigate the world, and so I have to understand what that world looks like without experiencing being trans, and, it's impossible, I'm never gonna get it perfect, but, I gotta try, and, um, you have to stay informed, um, I don't always have the guts to do it all the time. I take days off from the news, but, um, you do

have to, because you're guiding this person, and it's not my lived experience, so I have to do my best." –Phoebe (28 years old), mother of 8-year-old transgender girl \*Came out at 6 years old

Phoebe's experience reflects Kivalanka et al.'s research on sexual minority mothers of transgender children; "being queer had not prepared them for parenting a trans\* child" (2018:74), even despite some having transgender friends. When individual family members have divergent social identities, this can create "outgroups" within the family (Soliz and Rittenour 2012); resulting in purposeful or accidental ostracization of the divergent family member, as well as the general lack of ability to guide the family member in regard to their divergent social identity. Research about white transracial adoptive parents shows that parents who more frequently engage with ethnic minorities and their child's cultural heritage, as well as have a greater awareness of institutional racism, are more able to prepare their children for future discrimination (Hrapczynski and Leslie 2018). Similarly, as parents learn about gender diversity, they can assist in preparing their child for navigating institutional transphobia and develop the knowledge to create space for transness within the family.

Another aspect of learning about gender diversity also involves learning about disparities within transgender communities due to racism. Parents who apply queer/trans-inclusive knowledge beyond their own transgender child begin to see patterns of isolation and violence against the larger LGBTQ+ community. When discussing the loss of their child's assumed-cisgender privilege, parents of white children repeatedly noted that their children still received social protections from their whiteness in comparison to their

Black and Brown transgender peers. Kim and Jennifer both discuss their children's relative privilege in relation to their whiteness.

“Recognizing that, just as Black women are more likely to get fucked over by the system than white women, Black trans women are, like, the most vulnerable in our world it seems like. So yeah, that definitely feels like it's been a part of my learning.” –Jennifer (35 years old), mother of 8-year-old transgender girl \*Came out at 2 years old

“While I fear for Christina being in a group that has high violence against her, it's worse for women of color, transgender women of color.” –Kim (47 years old), mother of 17-year-old transgender girl \*Came out at 13 years old

As parents learn about the experiences of their children, they also learn about experiences of the larger transgender community; Jennifer and Kim describe transmisogynoir even if they might not know that terminology. While some parents are aware of the disparities between white trans populations and Black and Brown trans populations, there are also parents who have never considered the intersection between gender and race. When asked if race plays a role in the experiences of her white transgender child, Brianna responded, “I've never thought about it actually. Um, wow, I don't know because I've literally never once thought about it.” While there are efforts to include race in learnings about gender, critical conversations about racism amongst white parents of transgender youth are still lacking. White parents at PTK have discussed that more incorporation of conversations about institutional racism could contribute to creating an environment that is more comfortable for Black and Brown parents to attend PTK. Many have commented on the strangeness of the group being made up of all white

parents, despite the knowledge that there are Black and Brown trans youth in the area. Through more Black and Brown parents feeling safe accessing support through groups like PTK, more safe spaces can be created for Black and Brown transgender youth.

The ability to create spaces where transgender youth can live and fully exist as themselves is a skill that cisgender parents learn through engaging in intentional, and sometimes arduous, efforts. Learning about gender diversity and misconceptions of transness, thus building confidence in advocating for one's trans child, is less accessible to parents of color due to community segregation and the LGBTQ+ community center being a predominantly white space, which will be further discussed later in this chapter. The learning process—done through internet searching, reading books, watching documentaries, and having conversations with other parents as well as their transgender child—chips away at the bricks of cisnormativity and transphobia that frame relationships within the family and broader society. Once parents understand more of their child's experiences with gender, they are better able to foster livability of the transgender child.

### **Decentering Hetero/Cisnormativity through Feminist Parenting**

As parents learn more about the nuances of gender identity, gender expression, and diverse sexuality, they implement that knowledge into their parenting practices—both with their transgender children as well as their cisgender children. I observed that as parents start to arrive at a place of applying knowledge about diverse gender and sexuality into their parenting practices, feelings of loss start to subside. Conversations in PTK shift from feelings of confusion and loss to sharing milestones in their children's lives. Application of knowledge is an active part of creating a future that is more aligned

with the reality of their child's life. Instead of fighting against it, parents are leaning into practices that affirm their children, which is the first step in embracing a feminist ethos of parenting. As bell hooks writes, "within white supremacist capitalist patriarchal cultures of domination children do not have rights." Feminist movements were the first to bring attention to how children are seen as property of parents, having to obey the will of adults. There has been recent emergence of parents challenging this culture of domination through teachings of consent and bodily autonomy to their children—as seen in the numerous children's book publications such as *C is for Consent* (Morrison and Orlove 2018), *Don't Touch My Hair!* (Miller 2018), and *My Body Is My Own* (Hawkins 2021). The adoption of feminist parenting practices which challenge the idea of children as passive property of their parents lays the groundwork for cisgender parents to see the transgender child as someone who can be trusted and believed. Parents of transgender children follow their children's lead by respecting name and pronoun changes, assisting in medical transition, and embracing queer fluidity that they might have previously rejected.

Parents who participate in feminist parenting are active agents in changing socialization practices, disrupting the embeddedness of cisnormativity in the lives of their children. Even if trans youth encounter cisnormativity elsewhere in society, they at least have a space at home which recognizes the possibilities and realities of transness. Socialization surrounding sexuality and gender is particularly seen in conversations about sex and bodies. During a PTK meeting, a mother shares an example of implementing trans-inclusive knowledge into a sex talk with her 14-year-old assigned-female-at-birth non-binary child.

“I had a winning parent moment this weekend. Rain and I were talking about sex. I said, ‘If you decide to have sex with a sperm-producing partner, we need to talk about appropriate birth control.’ You all... their jaw hit the floor, in a good way! They said, ‘Okay mom! Nice use of appropriate terms!’” –Stacey (42 years old), mother of 15-year-old non-binary child \*Came out at 13 years old

The use of “sperm-producing partner” instead of “boy” is a trans-inclusive description of the people that the teenager may have a future romantic or sexual relationship with. Rain may engage in a relationship with a transfeminine partner who is not a boy but is sperm-producing. Therefore, framing conversations in a way that is relevant to the realities of transgender youths’ lives and experiences allows them to engage and apply that knowledge. This is important because LGBTQ+ people have higher rates of sexual unpreparedness, sexual violence, and risky sexual behaviors due to heteronormative sexual health education (Hobaica and Kwon 2017) and societal cisnormative understandings of bodies. The other parents in the group responded with positive and congratulatory reactions which affirmed the practice for Stacey and other parents in the space. Through sharing feminist parenting wins, other parents witness the possibility of decentering the hetero/cisnormative systems that have been engrained in them throughout their socialization.

Sandra provides another example of how supportive parents of transgender youth are changing socialization practices to reflect the realities of their children’s lives. While Sandra is engaging in this practice, she notes the difficulties she encounters due to the lack of trans-inclusive resources and tools for parents.

“Emmy talked about when she grows up, she wants to be a girl, and we talked about that not all girl bodies are the same. We’re actually trying to start seeking out like, an LGBT-affirming... there’s not a lot of, like, body books for kids that are inclusive of all bodies. But we’re trying.” –Sandra (36 years old), mother of 5-year-old transgender girl \*Came out at 3 years old

As Sandra navigates preparing Emmy for how her body is and will be different from many other girls, she encounters impediments to trans-inclusive gender and body socialization. Frameworks for feminist and trans-inclusive parenting are greatly lacking, leaving parents of transgender children to figure it out as they go and become creative with resources that are already available. Using gender-inclusive books, or changing language in books to make them gender-inclusive, expands perspective on bodies and gender. Parenting practices that are inclusive of all different types of bodies and expressions of gender can help transgender children develop an understanding of their own body that is not filled with internalized-transphobic and cisnormative ideas. Growing up with the perspective that “girls’ bodies” can exist with or without a penis, breasts, a high-pitched voice, or facial hair works to combat the onslaught of cisnormative and transphobic messages that transgender youth receive on a daily basis, whether subtle or explicit.

Parents of trans and gender nonconforming children decenter hetero/cisnormativity by providing their children with information that acknowledges identities and experiences beyond the gender and sexuality binary.

“He started having more issues with gender, and had been wanting to explore other gender identities, and wanting to talk more about gender, and so then in 6th

grade is when he would be like, ‘I don’t really feel like a boy or a girl,’ and I was like, ‘there are words for that, you know, like, genderqueer or genderfluid or non-binary. There’s a lot of different ways we can explore those feelings.’”–Ash (35 years old), mother of 14-year-old transgender boy \*Came out at 11 years old

Though Ash currently identifies as genderqueer, at the time their child came out they understood themselves as a queer / pansexual woman. I bring attention to Ash’s identity here because Ash already had an existing knowledge, due to being part of the LGBTQ+ community, of diverse gender identities before their child came out as not “a boy or a girl.” Meadow refers to this category of parents as the “rainbow pioneers”; parents who have some type of involvement in LGBTQ+ politics and social movements before their child came out and employ a more fluid understanding of gender (Meadow 2018). Ash provided their child with information about non-binary identities and gave them the language to explore what they were experiencing and feeling. Instead of asserting a gender binary, parents are engaging with and utilizing feminist, queer knowledge to affirm their children. Eleanor exhibits the application of her learned knowledge about the fluidity of sexuality and gender when her cisgender daughter, Stephanie, came out to her as “not heterosexual.”

“In fact, when Stephanie came out to us, she just said, ‘I’m not, mom I’m, I’m different, I’m not heterosexual, I don’t know what I am. Maybe I’m bi, maybe I’m, you know, lesbian, I don’t know.’ It was really hard for her at first because she couldn’t put her fingers on it, and I said, ‘it doesn’t matter, does it? You’ll figure it out.’ But I wouldn’t have reacted that way if I hadn’t already been through it with Grace. I don’t think I would, I would’ve just been, well, I don’t



understand, you need to be this way or this way because of how I was raised, but now with her, I'm just like, it's okay." –Eleanor (43 years old), mother of 16-year-old transgender girl \*Came out at 14 years old

Without the previous experience of learning how to support her transgender daughter, Eleanor says that she would have reacted in a way that centers heteronormativity in response to her cisgender daughter coming out as “not heterosexual.” Instead of attempting to encourage and reproduce heterosexuality (Solebello and Elliott 2011), supportive parents of transgender youth who are engaged in learning about gender diversity are open to the possibilities beyond heterosexuality.

Decentering hetero/cisnormativity in parenting practices is a form of transfeminist world-making that recognizes the realness of youth transness. Queer and feminist parenting is a powerful rebuttal to the social and political systems that attempt to deny the existence of youth transness. These parenting practices allow for parents to create livable homes and livable bodies for transgender youth.

### **Assisting with Gender Transition**

Parents of transgender youth act as gatekeepers for many aspects of gender transition. While youth can change name and pronouns amongst friends, they cannot make any legal or medical transition-related decisions without parental consent. When assisting in the process of transition, through social support and consent in medical transition, parents participate in making livable minds and bodies for transgender youth. Assisting with gender transition often also includes advocating on the child's behalf with unsupportive co-parents or family members. Support for and cooperation with gender

transition, as well as devising creative solutions to transition in an unsupportive environment, are aspects of fostering livability for trans youth.

Parents, primarily mothers, work to create safe spaces for their child inside and outside of the family home. Supportive mothers help their children navigate people and places that are potentially hostile, advocating for them when necessary. Trans youth often come out to their mothers first, leaving mothers as information keepers for the sake of the safety of the child until the child is ready to tell other people. Patti illustrates how she helped Blake navigate if or when he wanted to tell his father and grandparents that he is transgender.

“We talked about how to handle this with family as far as, you know, is this something you want to share with your dad, is this something you want to share with your grandparents? I kinda got the sense that this is his deal, and that this is his to share with people as he wanted, um, you know, and it took him another year before he actually told his dad.” –Patti (43 years old), mother of 17-year-old transgender boy \*Came out at 13 years old

During the year that Blake did not come out to other family members besides his mother, Patti was tasked with being the keeper of information. Keepers of information act as safe people who affirm a trans youth’s identity while withholding this information from potentially unsafe people and navigating the use of names and pronouns until a child is ready and able to come out to others. For Greg, the father of a trans girl, it felt like “keeping a secret” from his co-workers. Other parents describe having to switch back and forth between pronouns with co-parents, siblings, or extended family until a child is ready to let other people in. While the burden of information control is on the parents

during this period of in-betweenness of “out” and “closeted,” this lifts the burden off the child of needing to navigate all spaces and relationships at once. Queer and trans children often come out in stages, sharing a little bit more about themselves each time and there is no set timeline for when a child will be ready to tell others. Parents who act as keepers of information are giving their child agency over their own coming out and transition process.

Sandra helps her young child navigate wanting a “girl name” that affirms her gender identity, but also not being ready or able to tell people at her school due to safety issues.

“Kind of how we landed on Emmy was, she was trying all these wonderful princess names every day, and she was really upset that she couldn’t have her girl-name at school. So, we talked about how Emmy was a really cool nickname that could be a boy or a girl name. I told her they could still call her Emmy at school, and she could learn how to write Emmy and no one would ever know. Because she’s very concerned about people finding out and being mad at her.”  
—Sandra (36 years old), mother of 5-year-old transgender girl \*Came out at 3 years old

Sandra lives in a more politically and socially conservative city within the region and the child’s father is extremely unsupportive—such as refusing correct name and pronouns, encouraging Emmy’s siblings to use incorrect name and pronouns, and punishing Emmy for “feminine” behaviors. Per the divorce and custody agreement, Sandra’s transgender daughter could not use a different name at school and the father was not going to use a name other than the name given at birth. Sandra was able to assist her

trans daughter in coming up with a name that was close enough to her given name so that it could be interpreted as a nickname but also felt comfortably feminine and affirming of her gender identity. Sandra's efforts assisting with social transition through the frame of information control is a very nuanced way of fostering livability. Emmy's transness was able to exist and live, even if only Emmy and Sandra were the only ones who were aware.

Parents of trans youth also assisted with their child's transition and ability to navigate society by anticipating barriers they might encounter. Parents were aware of certain triggers their child had that would bury them in a wave of gender dysphoria, so they attempted to avoid those.

“We chose to [legally] change the name earlier than, I think, Joshua even was ready for or wanted because, I mean, we were like, ‘okay, let’s go ahead and move forward,’ and he was like, ‘really?!’ You know, he wasn’t pressing us as much as he was with testosterone. But we knew that he wanted it eventually. And we knew from our other sons that the minute you take the ACT or SAT, you get flooded with mail from universities all over the country. And when we had that realization, we’re like, ‘oh shit, our mailbox is gonna have this name every single day, this is gonna be awful.’ And Joshua gets home first, and Joshua checks the mail, so like, this is gonna be bad. That’s when we were like, ‘okay, are you ready? Because we’re ready.’ So, we changed it so that he wouldn’t have to face the mailbox.” –Andrea (49 years old), mother of 20-year-old transgender boy

\*Came out at 15 years old

Instead of reacting after-the-fact to the issues their trans child is facing, Andrea and Adam proactively anticipated a difficult situation and took steps to avoid the issue in the first place. By taking the lead as parents working in the best interest of their trans child, they initiated the conversation about legal name change before it became a barrier to their child safely navigating the college application process. Through my data collection, I have observed that trans children often wait to tell their parents or ask their parents for permission to take a step in terms of social or medical transition due to fears of the parents rejecting them or their request. When trans youth finally do tell their parents, they are often beyond ready and are at a point where delaying this step in social or medical transition has become detrimental to their mental health (Ashley 2019b). This results in parents thinking this “came out of nowhere” and having to catch up to their child, which contributes to the disorientation that is prominent in gendered mourning. When parents are able to anticipate the next step through knowledge gained by other parents of trans youth, it eases parental disorientation and takes the burden off the child.

Lastly, assisting with medical transition is essential for creating livable bodies for many transgender youth.

“When we’d go see the endocrinologist and he would talk about the changes and things like that, for me it was just thrilling because I knew it was thrilling for her. And every little bit, to me, felt like she’s getting closer to who she feels she wants to be, and feeling more comfortable in her body, and that feeling comfortable in her body was so important. I mean the day that she started her hormone blockers we had cupcakes with, uh, high heels on them, they were pink cupcakes with high

heels, and it was just, you know, a fun celebration.” –Kim (47 years old), mother of 17-year-old transgender girl \*Came out at 13 years old

Treating medical transition as a celebration instead of a loss is an important shift from viewing transness as a deficit to something that is positive. Since gender dysphoria is linked with increased suicidality and self-harm (Aitken et al. 2016), support for medical transition, particularly puberty blockers if the child is pubescent, is vital for creating more livable minds and bodies for trans youth as they age.

The above quote highlights that although parents decenter cisnormative parenting practices to support their children, gender normativity still creeps into views of the child. Kim’s choice of cupcakes with high heels on them indicates her persistent view of girlhood as one linked with femininity, despite her transgender daughter not being interested in performing stereotypical ideas of femininity. Both cisgender girls and transgender girls are held to certain standards of femininity and acceptable notions of girlhood. While Kim did not actively enforce these stereotypes on her transgender daughter, many transgender people do experience enforcement and gender policing to fit into the gender binary.

While medical transition is often the focus of public discourse about transgender youth, there are many other pieces to the puzzle of gender transition. Some parents of transgender children and adolescents do engage in active steps regarding medical transition, but much of a young trans person’s gender transition revolves around social transition. Transgender children are oftentimes too young for puberty blockers, or are past the developmental age where puberty blockers would be effective but simultaneously too young for gender affirming surgery. Yet, many parents still affirm

their gender without any medical transition. Since transness is often held to standards of “realness” dependent on medical transition and binary views of the body (Gordon et al. 2016; Johnson 2016), parental fostering of livability of transness without relying on medical standards encourages an expansive view of transness and youth autonomy. Parents who assist in transition of young trans children are instrumental in facilitating out trans childhoods as well as trans adulthoods where looking back on school picture day photographs can be done without pain.

### **Creating Institutional Space for Transness through Activism**

Parents of transgender youth, primarily mothers, engage in creating institutional space for transness through local and state-level activism. As discussed by Gray et al., parents first need to learn the language surrounding gender variance, and then learn when and how to advocate for their children (2016). Learning about gender diversity and putting the knowledge into practice within their family comes before extending this knowledge to the outside world. During my observation at PTK from 2016 to 2020, many parents participated in local and state-wide activism related to LGBTQ+ issues. Parents explained to me their reasoning for getting involved in activism which included improving living conditions for their own child and advocating on behalf of youth who do not have supportive parents. As discussed in chapter 2, parental views of futurity shift when confronted with the fear of losing a child through suicide. Motivation behind activism is primarily spurred by these negative experiences. Meadow describes these parents as “accidental activists” (Meadow 2018) who only became active in transgender youth advocacy once their child became depressed and suicidal. The “accidental activists” are also classified as typical “Midwestern moms” in comparison to the

“rainbow pioneers” who express a more “West Coast queer political sensibility” (Meadow 2018:112). While the mothers in my research are Midwestern moms, they are also encountering a type of anti-trans hostility in their home state that West Coast mothers have not dealt with in relation to their child. Cities on the coasts are considered more conducive places for queer and trans livability, as seen in the Great Gay Migration in the 1970s and 1980s (Weston 1995), while the Midwest is positioned as an “uncontested site of middle-class white American heteronormativity” (Manalansan et al. 2014:1). Queering Midwest family lineage, rural school district policies, suburban places of worship, and hostile state powers is anything but an accident. Trans youth and their parents deliberately contest structures of hetero/cisnormativity, creating and revitalizing paths for future Midwestern trans youth who are dealing with more public scrutiny than Urban Coast trans youth. Parents of transgender children in Midwestern states, particularly ones where anti-trans bills are being proposed and passed, embody a “queer political sensibility” out of survival for their children.

As a hostile political climate towards transgender youth increased over the years, parents’ conversations at PTK focused more on local and state-wide advocacy. Many of the parents who attend PTK have the ability to dedicate time and have the resources to assist youth in navigating social institutions, but there are also parents who are not interested in being involved in trans-related activism or do not have the resources to do so. For the parents with the ability and willingness to engage in trans-affirming activism, there was a desire to make the community a safer place for youth who do not have supportive parents. During my ethnographic observation, this advocacy most notably included: laying the groundwork for “gender plans” and gender-related bathroom and



physical education accommodations at schools, pushing back against school administrators who removed a queer student group's posters and flags from the school resulting in the reinstatement of those signs, hosting a gender-inclusive reading event at a local book store, conversing with local anti-LGBTQ+ pastors, getting conversion therapy banned in the city in which the group is located, and testifying against anti-trans legislation in the state.

Participation in activism is spurred by first-hand experience with barriers and learned awareness of larger systemic issues. Attempts at lessening the impact of cis/heteronormativity within the home has led some parents to translating this perspective and these skills to larger efforts of creating social change. Jennifer, mother of an 8-year-old transgender girl, wanted to read a gender-inclusive children's book to her daughter's class, but she was denied by school administrators. Jennifer also attempted to facilitate district-wide participation in a national reading event "Jazz & Friends," which highlights gender-inclusive children's books, which too was blocked by school administrators. After encountering institutional barriers, Jennifer and I co-organized a community event at a local bookstore highlighting three trans-inclusive children's books. Even though this would not reach all the teachers and students who she desired to reach, it was still an opportunity to create community space for trans youth to be celebrated in a place outside of the queer community center or the family home. This event took place in March 2020, coinciding with the numerous anti-trans bills being proposed in the state legislature. Hosting a trans-inclusive children's book reading event functioned as an attempt to outweigh the hate trans youth were experiencing on the state level. Jennifer shares her

experience of testifying at the state capitol building in front of politicians who do not think her child deserves equal treatment in schools and equal access to healthcare.

“It was very empowering, and also very difficult. It felt important to share my child’s experience with some discrimination, specifically on her soccer team. And honestly just being in that space with, like, 60 other people in a room who were also opposing the same thing felt really connecting. Like, this is not a thing where we’re alone or she’s alone, and there’s a group of people that support and are fighting for kids like mine, and that feels really, really good. It also felt challenging because I had face-to-face conversations with people who basically, like, don’t believe my child exists as she is, you know, and so holding that tension of, like, showing up in solidarity with people who believe the same thing and also facing the fact that, like, there are equal amounts or more people that oppose just my kid being a human being. That part felt hard. She was super proud and wanted me to read [the testimony] to her, which was cool. But then she was like, okay mommy, go, you go. I’m gonna go play.” –Jennifer (35 years old), mother of 8-year-old transgender girl \*Came out at 2 years old

Parents have the ability to fight against institutional transphobia so that youth, lacking agency and power, do not have to navigate complicated political climates and social institutions on their own. Although finding a community of people opposing the same thing was a positive experience for Jennifer and many other parents who testified against these bills, it was also difficult to confront the lawmakers and citizens who held opposing views about the rights of their children.

Another major effort of using parental power to reduce or prevent harm done to trans youth was when parents organized in getting conversion therapy banned in the city. This was a multiple-years-long effort of educating various city officials and the public about the harms of conversion therapy. In October 2019, the city successfully banned the practice of conversion therapy, a measure supported by medical professionals, parents of LGBTQ+ youth, LGBTQ+ people, and the broader community. While I read the voices of trans youth who could not attend the hearing, Ruth testified about her experience unintentionally exposing her child to conversion therapy while her child was at a mental health treatment center. Ruth spoke about the need for even supportive parents to be vigilant while attempting to access mental health supports for their LGBTQ+ child due to the veiled nature of non-affirmative practices. While the harm cannot be undone for the youth who have suffered due to conversion therapy, parents celebrated their efforts in reducing the chances of this happening to others in the future. The state's ACLU chapter hosted an event at a local restaurant to celebrate the work that was done, and to motivate parents to keep pushing because more was in the pipeline (those anti-trans bills in early 2020 discussed above). Parents from PTK, who were the main organizers of the ban, spoke at the celebration. Steve, a father who has two LGBTQ+ children, spoke passionately about the importance of educating parents of LGBTQ+ children. "We need to help parents through their grief, which wouldn't exist if we didn't live in a heteronormative world!" This was the first time I heard a parent making the distinct connection between grief and hetero/cisnormativity. The fact that this connection was made in the context of discussions surrounding conversion therapy is not all that surprising. When some parents start to experience this grief, they make attempts to

reduce the behaviors in their child that they interpret as causing the grief. Parents interpret the grief they are experiencing as being inherently due to the child's gender non-conformity. Reparative or rehabilitative practices attempt to secure heteronormative desirability and social protections which would otherwise not be available to the queerly disabled (McRuer 2006). Cisgender parents who seek out the pseudoscientific practice of conversion therapy do not hold the social frameworks to understand that transness is normal and healthy, and that instead cisnormativity is the cause of their grief. However, Steve's process shows that, for some parents, grief is a pathway towards advocacy—mourning morphed into militancy (Crimp 1989) against the harmful constraints of cisnormativity. Affirmative parents proclaim “trans is beautiful” as a challenge to the notion that trans is undesirable or damaged. McRuer says that “identity-movement identities are rehabilitated identities (‘gay is good [not bad],’ ‘black is beautiful [not ugly],’ ‘disabled and proud [not pitiful]’) (2006:141). These affirmative statements such as “trans is beautiful” or “protect trans kids” represent the work of rehabilitating the public perception of transness while stating that their child does not need to be “fixed.”

Engaging in advocacy and activism helps to create more livable institutions for transgender youth and attempts to prevent institutions from becoming more unlivable. Efforts to create social change stem from the parents' realization of the uninhabitability and hostility of public space for many trans people, and that their kids are in a more privileged social position than other transgender kids. The vast majority of the trans youth represented in my research are white, middle class, and have parental support. Even with their privileged social position, these youth still struggle immensely due to difficulty in accessing affirming and competent health services, less than equitable

treatment and representation in school, lack of acceptance from family members, and the embeddedness of transphobia and binary gender ideologies in almost every space they encounter. Their parents are also of a more privileged social position, and being engaged in activism often requires a flexible or secure job with the ability to take time off from work to testify on short notice, or have mid-day meetings with city officials, healthcare providers, school administrators, etc. The power and privilege of the parents' whiteness acts as a tool for the aforementioned people in power to listen to them in the first place.

“Well, you’re celebrating, you’re happy, you’re living in your privilege, you’re so excited, and then, you look around, and it hits you... What about all the other kids? What about all the other parents? What about all the other people that don’t know, can’t get to us? We have to do something to protect them, because no one else is going to do it.” –Martha (52 years old), mother of 18-year-old non-binary child \*Came out at 14 years old

Parents who have the ability and privilege to engage in activism use that privilege to advocate for the youth without parental support or those whose parents do not have social and economic privilege to be advocates for their children. Mothers’ voices have been utilized to appeal to politicians, city officials, and school board members who share the same cisgender identity—being cisgender is a common ground that they all share and can relate to. Cisgender identities are non-threatening in relation to transgender identities, especially when conversing with people who think transgender identities are scary and harmful. White mothers’ voices particularly are influential in appealing to people in power due to the elevated social positionality of whiteness—stories of pain are taken more seriously when it comes from a white person. Fathers’ voices, although rarer, also

have a big impact and hold a place of authority in these conversations because people listen to men and the people in power are also predominantly men.

The erasure of Black mothers' voices in the fight for their LGBTQ+ children and the inaccessibility of activism for Black mothers has been seen throughout queer history. After Matthew Shepard—a young white gay man—was murdered in 1998, Matthew's mother, Judy, received national media attention, and she went on to create The Matthew Shepard Foundation which helps pass hate crime legislation. Only a month after Matthew Shepard was murdered, Rita Hester—a black trans woman—was murdered. Rita received no national media attention despite outcries from her family and the Boston trans community for attention to violence against trans women of color. Rita's mother, Kathleen, was documented saying at her memorial, "I would have gladly died for you Rita. I would have taken the stabs and told you to run. I loved you" (tdor.translivesmatter.info n.d.). While the nation's heart broke for Matthew Shepard's mother and she gained support for her political activism inspired by Matthew's life and death, no one in political office paid attention to Kathleen as she cried for her child.

The ability for parents to advocate for their marginalized children often relies on the elevated social positionality held by the parents. Activism is not impossible without some aspect of a privileged social position—whether that is whiteness, being cisgender, middle/upper class, or non-disabled and neurotypical—but it does make it much more likely that a person will be listened to and applauded for their work when they come from some privileged social position. The ability to foster livability is limited and constrained by societal forces such as racism, classism, transphobia, and ableism. For the parents who are listened to and have the resources to engage in activism, this parental activism

contributes to the prevention of harm that leads to literal deaths of trans youth and exclusion of trans youth in public space.

### **Surrogate Parenting**

Transgender youth whose parents are not supportive of their gender identity and gender expression often seek out what Ash—parent of a 14-year-old trans boy—calls “surrogate parents.” Surrogate parents are supportive adults who contribute to fostering livability when a trans youth’s parents cannot or will not nurture trans lives and futures. Previous research indicates that mentorship from supportive adults is crucial in the well-being and sense of belonging of LGBTQ+ youth (Allen, Watson, and VanMattson 2020; Bird, Kuhns, and Garofalo 2012; Johnson and Gastic 2015; McDermott et al. 2021; Pryde and Mech 1995; Reed et al. 2019; Sebastian Torres et al. 2012; Sterrett et al. 2015), although this research primarily cites non-parent family members and teachers as the sources of mentorship. My research indicates that parents of transgender youth and LGBTQ+ adults also provide affirmation and safety for the transgender youth who do not have supportive parents. Parents of trans youth often take the role of supporting their children’s friends who do not have accepting parents. Likewise, queer and trans adults step into this role of “surrogate parent” for transgender youth both with and without supportive parents through shared involvement in queer community spaces. Transgender youth with at least one accepting adult in their lives are significantly less likely to report a suicide attempt (The Trevor Project 2019), therefore having “surrogates” when home environments are unsupportive is an important piece of trans livability.

The parents in my research contribute to trans livability in subtle yet significant ways—like carpooling youth to Spectrum, the local LGBTQ+ youth group, who do not

have transportation due to unsupportive parents or not being out to parents. Without extra-familial support from non-parent adults acting as “surrogates,” some youth would be unable to access queer and trans community support, a lifeline to trans futurity.

“Blake had some friends who ended up turning to me, and they’re like, you know, my parents don’t get it, or my grandparents don’t get it. Those first two years, right after Blake came out, I think almost every single weekend we had multiple kiddos at the house who Blake had either met through Spectrum, or, you know, who, um, felt at home in our house. Most of them were looking for some sort of support, um, you know, or they felt like that their parents thought it was a phase.”  
–Patti (43 years old), mother of 17-year-old transgender boy \*Came out at 13 years old

Other parents create safe spaces for trans youth to fully exist as themselves when in their home, even if the youth do not have the ability to do that in their own home. As previously stated, Ash describes their role as a “surrogate parent” when they provided housing for a youth experiencing homelessness due to an unsupportive and unsafe family situation. Although, there are difficulties to “surrogate parenting” trans teens due to the limits of the support one can provide. Ash was able to provide shelter and emotional support, but they were not able to nurture the other aspects of the teen that were important to them, such as living in their rural community.

“One kid de-transitioned after leaving my care because they felt like it was too hard to live as themselves in a rural community, and they missed living in a rural community.” –Ash (35 years old), mother of 14-year-old transgender boy \*Came out at 11 years old



For some youth, they must choose between leaving their home to live as their authentic selves, or suppressing their identity to stay in the community they grew up in. While the home environment and community might not foster livability for transness, it is often scarier to leave everything you know and start from scratch. Throughout my ethnographic fieldwork, I encountered at least five trans youth experiencing homelessness due to unsupportive home environments; many temporarily “couch surfed” at friends’ homes and only one was able to access support through an emergency youth shelter. I observed that while extra-familial support from non-parent adults is vital in the well-being of trans youth, there are also limits to the support that non-legal guardians can provide. Medical gender transition and legal name change require parental consent, and oftentimes even staying at a youth shelter requires parental consent. Despite availability of gender-affirming resources, accessing them is still contingent upon support from one’s parent.

A resource that is often *not* contingent upon support from one’s parent was attending Spectrum, the LGBTQ+ youth group run through the local queer community center. I served as an adult mentor of Spectrum, which is primarily made up of transgender youth, during the entirety of my data collection. Through my role I observed that trans youth who attend meetings but do not have parental support often tell parents they are going to a friend’s house, a study group or other extracurricular activity, or attending meetings as an ally to support an LGBTQ+ friend. Queer and trans adults, acting as mentors through Spectrum, are instrumental in facilitating the possibility of trans livability. Queer and trans adults who facilitate the weekly LGBTQ+ youth group act as “surrogate parents” by creating a safe space for transgender youth to be validated,

respected, and provide respite from institutional transphobia. Transgender youth who receive affirmation of their gender identity experience better mental health outcomes (Olson et al. 2016), therefore even when youth did not have home or school environments that saw, trusted, heard, believed, and validated them for who they are, they at least had two hours once a week where they had their correct name and pronouns repeated back to them. As previously stated, while there are limits to the support of non-legal guardians, affirming mentorship and relationships with non-parent adults helps sustain trans youth until they are old enough to access gender-affirming care and legal name change on their own and generally live amongst supportive people.

“That was, you know, a place where he started kind of feeling acceptance, um, that was the really kind of the first social gathering, social acceptance thing that he had, where he felt like he could be absolutely, positively himself no matter what and that his pronouns would be recognized.” –Patti (43 years old), mother of 17-year-old transgender boy \*Came out at 13 years old

“I think that having support groups and things like the kids have now, probably has saved multiple kids, multiple kids from doing something they shouldn’t do or would regret later in their lives, or maybe not live through.” –Virginia (59 years old), grandmother of 18-year-old transgender boy \*Came out at 14 years old

Many parents described Spectrum as a life-saving space for queer and trans youth in the community. For some youth, Spectrum mentors became more like family than their families of origin. Queer people, particularly queer people of color, have always been forming chosen family, as seen in ballroom culture with houses acting as families and in drag culture with drag mothers and drag children (Arnold and Bailey 2009; Bailey 2013;

Dewaele et al. 2011; Hailey, Burton, and Arscott 2020; Kubicek et al. 2013; Levitt et al. 2015; Weston 1997). Queer chosen family is constructed as a way to survive when families of origin do not accept us or do not understand the racialized queerphobia impacting one's everyday life. Virginia describes how, when given limited tickets to high school graduation due to COVID-19 pandemic, her grandchild wanted myself and Róka, another Spectrum mentor, to be there instead of his father.

“You know, and I got it, I totally got why he chose who he chose. You know, I offered to back out and stay at home and let his dad come if he wanted him, and he didn't want that. He wanted you, myself, his mom, and Róka. He wanted that, and I respected that decision. He's never been at anything else, why would he be there? Spencer wanted who Spencer wanted there, and since it's already been crapped out and was made terrible anyway with the pandemic, I wanted it to be what Spencer wanted.” –Virginia (59 years old), grandmother of 18-year-old transgender boy \*Came out at 14 years old

Spencer's father does not acknowledge Spencer's trans identity and has not been a source of trans-affirmation. On this important day, Spencer wanted to be surrounded by people who supported his authentic self and sustained trans livability amongst family environments that were not supportive. Even amongst supportive family environments, mentorship from trans adults is particularly important. Finding extra-familial support within LGBTQ+ community spaces provides validation for experiences of prejudice and tools for building self-advocacy skills (Allen et al. 2020; Singh 2013). Martha expressed to me that she feels like cis straight parents are “immigrants” to a community of which their children are “natives.” Cisgender straight primary caregivers are often unable to

provide the type of support and information that trans adults can provide to their children because of shared identity and experiences navigating institutional transphobia.

“Surrogate parent” relationships which affirm trans existence and trans futures when trans youth do not receive that from their parents of origin are crucial in creating social worlds where transness can be expressed instead of hiding; can live instead of literally or metaphorically dying. Despite these social worlds being situational—meaning there are limits and boundaries to the support that can be provided—even situational affirmation plays a meaningful role in the lives of transgender youth, sustaining transgender youth through unsupportive home environments. The role surrogate parents play in fostering livability of trans youth speaks to the possibilities that unfold when we expand dominant hetero/cisnormative understandings of the family. Imagining multiple forms of kinship beyond families of origin allows for the creation of relationships and social worlds that sustain young trans lives so that trans futurity is possible.

### **Barriers to Livability: Parental Gender, Geographic Location, Socioeconomic Status, and Racism**

Supportive parents of transgender children cannot guarantee livability in all areas of life due to societal transphobia and the institutionalization of the gender binary. There are factors that parents cannot change despite how supportive they are and how much they want to foster livability. Impediments to nurturing transness within and outside the family include social, economic, and geographic barriers, including lack of proximity to supportive communities, presence of unsupportive co-parents, and marginalized social locations.

While community connections prove important for reducing stigma and increasing knowledge about gender diversity, there are social and geographic barriers to participation for some parents. Almost all the parents who attend PTK are mothers, and most of those mothers are in heterosexual marriages. Yet, their husbands rarely, mostly never, attend meetings. During my 4-year data collection period, there were 4 fathers who regularly attended meetings, in comparison to the dozens of mothers who came in and out of the physical and virtual doors of The Center. Greg, one of the few fathers who regularly attends meetings, discussed how he does not feel completely comfortable sharing in the group.

“I will say that one thing that’s hard for me is, um, I don’t really have anyone to talk to. Um, you know, if I have concerns, if I have issues, if I have anything like that, the only one I can talk to is my wife pretty much. Um, uh, [my child’s] given us permission to talk to the PTK group, but I don’t necessarily feel comfortable. They’re still strangers to me.” –Greg (45 years old), father of 18-year-old transgender girl \*Came out at 16 years old

Greg struggles with a lack of network to discuss issues and concerns related to his transgender daughter. Despite regularly attending meetings and having permission from his child to discuss her life with PTK, he still feels uncomfortable sharing in the group setting. Hegemonic masculinity and normative masculine stereotypes impact fathers and prevent the vulnerable discussion of gender and sexuality (Connell 1995; Connell and Messerschmidt 2005; Kane 2006), as well as parenting struggles. After a PTK meeting in 2017, Kim’s husband, Peter, jokingly said to me that we should host a pub crawl, alluding that fathers are more in their comfort zone in a bar as opposed to a queer

community center. Peter's comment points to the societal pressures of normative masculinity which may hinder the fathers' ability to participate in an emotionally vulnerable group setting. The joking suggestion of the pub crawl, along with mothers proposing a barbeque to get the fathers to participate, reveals the idea that men would rather participate in masculine bonding activities instead of feminized spaces such as a support group. Cisgender men benefit from participating in peer-support settings, most notably improved outcomes in depression and life satisfaction as well as developing alternatives to traditional masculine expectations and social roles (Burke et al. 2010), but getting to that place requires entering into feminized space in the first place. Fathers too would benefit from processing the loss of cisnormative ideas of futurity, but the space is emotionally inaccessible for many fathers. Overwhelmingly, fathers struggle with their child's transgender gender identity more than mothers (Gregor et al. 2015; Kane 2006; Malpas 2011; Riggs and Due 2015; Wren 2002), and I argue that is because fathers are not engaging in spaces which teach them how to foster livability for their trans child, due to pressures of conforming to normative masculinity.

Hegemonic masculinity also impacts fathers of color, as described by white mothers in my data. For two of the transgender youth who are multiracial—in the case of my data, that means a white mother and non-white father—the mothers describe what they interpret as cultural reasons for the fathers' conservative ideologies surrounding transness causing tension in the father-child relationship. White mothers in PTK whose children are multiracial discuss their children's non-white fathers' reactions to their child being trans. Sandra describes the influence of the culture that her ex-husband, who is

Puerto Rican and African, has been socialized with that impacts how he views gender within the family.

“Her father’s family is very, very against it, and he’s very against it. They’re very conservative and they’re very, um, how could I say that? Like, that toxic masculinity where, you know, the females serve the males, so they have this idea of masculinity in their heads. Culturally it’s very strong with them, the very strong males. That’s why my husband’s really pushing that I’m pushing this on my child, but I just can’t imagine why I would want to make things any harder for her than things already are. She’s already a brown kid in Mid-Missouri. I worry about how she’ll have to deal with police officers and how to be safe at school, and how to do all these things. I just don’t know. We’ll just take it one day at a time.” –Sandra (36 years old), mother of 5-year-old transgender girl \*Came out at 3 years old

Rigid ideas of masculinity, manhood, and family gender roles also create barriers for cisgender fathers of color to support their child’s gender identity. The “demands of Black masculinity” to constantly “straighten out your wrist” (Willis 2016:324)—meaning to perform masculinity in a way that rejects all traces of femininity—impact how fathers of color view gender operating within the family. While hegemonic masculinity does prescribe certain gender roles and gendered familial frameworks, racial and ethnic stereotypes also play into how white mothers experience the non-white fathers’ non-support of their transgender children. White mothers, and grandmothers, interpret non-white fathers’ actions through a racialized lens which may extenuate the fathers’ dismissal and hostility towards transness. Chicana feminists are critical of the use of

machismo culture to create damaging stereotypes of Chicano men and instead call for the distinction between machismo and sexism within Chicano communities (Garcia 1989). The sexism and cisnormativity that are cornerstones of hegemonic masculinity for both white and non-white fathers hinder the father's ability to create livable spaces and relationships for the child's transness. Virginia, a white grandmother of a multiracial transmasculine teenager, describes that Spencer has "issues with their mixed side" in terms of acceptance from their Black father's side of the family. When analyzing the gendered frameworks of Black and Brown fathers of transgender children, it is important to consider how racialized lenses of white caregivers impact their understanding of the non-support. This is especially crucial since Black and Brown fathers of transgender children are greatly underrepresented in research on parents of transgender youth and therefore their own perspectives on transness are not being heard. While the issue of non-support is being attributed to the father's race and the supposed cultural transphobia within the racial group, I argue that it is instead important to be critical of the cultural cisnormativity and hegemonic masculinity that is embedded into American family systems, as well as the racial privilege that enables white middle class mothers / grandmothers to distance themselves from the harmful systems that they are pointing out in the non-white side of the family but not within their own side of the family.

Similarly to how masculinity makes seeking support emotionally inaccessible for some fathers, geographic location makes seeking support physically inaccessible for some parents of transgender youth. The community center which hosts PTK is the only LGBTQ+ community center in the region, serving 25 counties, however it is located in the largest city within the region. This makes it difficult for parents from the outskirts of



the city or in other counties farther away to attend meetings at all or on a regular basis where they can build a network of community support.

“I joined PTK and I’ve attended some PFLAG meetings where other parents could help educate me because I don’t know anything about anything, and I wish I did, I just don’t really know. I have a friend who’s, um, they are non-binary, my best friend from college. Um, they live on the west coast, so they hooked me up with this really lovely trans woman down at PFLAG in [southwestern MO city of 170,000]<sup>4</sup>. Since everything’s been Zoom, I’ve attended some of their meetings, so then she hooked me up with some [eastern MO city of 300,000] Mama Bears, and then with the PFLAG at [eastern MO suburb of 70,000] so I’ve tried to go to some of the meetings. And PTK is very nice, I mean, it’s nice that they’re closer, but they’re really focused on what’s going on in [central MO city of 130,000; where data collection took place] schools, which doesn’t really affect us in any way, but it is nice to have people around you who understand.” –Sandra (36 years old), mother of 5-year-old transgender girl \*Came out at 3 years old

Since LGBTQ+ spaces and groups often exist within bigger cities, these resources are not conveniently accessible to those who live further away or in more rural areas. Generally, nonmetropolitan areas are more socially and politically conservative, resulting in less opportunity for LGBTQ-specific social gatherings (Butler 2017; Pacey et al. 2020).

Sandra represents the struggle of parents who are located outside of the cities with the

---

<sup>4</sup> City names are de-identified for confidentiality of participants, but population estimates are given for context. Population data is gathered from 2020 Census.

resources, bouncing between networks of support. Since PTK meetings are frequently focused on issues happening within the local public school system, or sharing information of safe local healthcare providers, parents from other counties do not receive this same information since the conversation was primarily focused on the county in which the community center is located. Parents in counties without established LGBTQ+ support networks, particularly those in more rural areas, struggle with the ability to create a livable space because they are literally further away from resources and a supportive community.

The COVID-19 pandemic necessitated the use of video conferencing technologies to allow groups to continue meeting when the community center closed for in-person meetings. Even after the community center re-opened for in-person meetings in April 2021, after a year of being online-only, PTK continued having a Zoom option for those who could not attend in-person. Attendance increased during the time of Zoom meetings because this was a more accessible option to people who typically cannot attend in-person meetings due to distance, a busy schedule, social anxiety, or disability. Attending these group meetings is extremely vulnerable for some parents, worried about being judged for their struggles or reactions to their children. Zoom lowered the barriers for mothers to attend from home, muting themselves while cooking dinner and performing parenting duties. Similar to the social and economic privilege of being able to participate in activism, meetings are only accessible to parents who do not work evenings or who do not have care responsibilities during the times of the meetings. Leaders of the group desire to make changes, such as free childcare during PTK meetings and continuing online meetings, to increase accessibility and reduce barriers to participation. For those

who would otherwise literally and figuratively be afraid to show their faces in a space centered on queerness, Zoom allowed parents to attend PTK with their cameras off. However, Zoom meetings could also be a barrier to participation for parents without internet access or those with unsupportive co-parents. Online meetings made it difficult for LGBTQ+ youth with unsupportive parents to attend the online Spectrum meetings because they could not openly talk about queer topics while their parents were in the next room. Parents with unsupportive co-parents could typically sneak away for a meeting at The Center but Zoom meetings made it more difficult to escape the boundaries of the hetero/cisnormative home.

In addition to being physically further away from affirmative spaces and communities, some parents feel unable to facilitate the advancement of social or medical transition for their child because of unsafe and unsupportive environments. Sandra is a teacher at a parochial school with a morality clause that can cause her to get fired for her child's gender non-conformity.

“I’m not losing my job today, but that doesn’t mean that if Emmy is living out and proud next month that I’m not gonna lose my job. Because all it takes is one parent to complain that they saw us at the park with her in a dress.” –Sandra (36 years old), mother of 5-year-old transgender girl \*Came out at 3 years old

While this is not a common experience among parents who attended PTK meetings, Sandra's concerns of losing her job reflect common experiences of employment discrimination for trans people living in conservative areas (James et al. 2016; Rosich 2020). Sandra is cisgender, but she fears experiencing transphobic employment discrimination related to her transgender daughter's gender expression. Mothers of

transgender youth experience secondary stigma due to the child's gender identity and gender expression being seen as the "mother's fault" (Johnson and Benson 2014). As a single mother, Sandra must balance wanting to support her child's gender expression, but also having to protect her employment. Living in a more politically and socially conservative town which is impacted by conservative religious ideologies hinders the family from living openly about transness.

Financial concerns are present amongst some parents of transgender youth. Even for parents who are supportive of a child's social transition, financial concerns become a roadblock to pursuing medical transition. In a country without equitable healthcare, some parents are more easily able to afford gender affirming care than others. Puberty blockers, hormone replacement therapy, and gender confirmation surgeries can be expensive depending on insurance plans and they are not always covered by health insurance plans (Stevens et al. 2015). For those of lower socioeconomic status, such as Nicole who is a housecleaner and a bartender, medical transition is not seen as an option.

"Scout had started to want to talk about hormone replacement stuff and changing the name at school and legal document stuff, and I'm like, whoa whoa whoa, hold on, that all costs money, and we're not a rich family here. Come back at 18 when you have a full-time job." –Nicole (33 years old), mother of 15-year-old transgender boy \*Came out at 9 years old

When I asked Nicole if she would support Scout's medical transition if she did have the money to do so, she replied by saying "Eh, probably not, but I like to use that excuse. I probably would've stayed the same of, you know, wait until you're 18 before you make those types of decisions." While financial limitations are a legitimate barrier to gender

transition, it was also the most convenient reason to give her child for why she would not support hormone replacement therapy and a legal name change. Instead of grappling with her own views of bodily autonomy for people under 18 and reckoning with the risks of delaying transition for people struggling with gender dysphoria (Ashley 2019b), financial concerns were utilized as a tool to shut down any further conversation and consideration with her child.

Eleanor, a stay-at-home mother whose husband is a doctor, describes how her husband's health insurance decided they would not cover any transition-related care. Eleanor and her husband ended up paying out of pocket for all of Grace's "testing, hormones, doctors' appointments, [and] endocrinology." Grace also receives services and care related to having autism and numerous personality disorder diagnoses; if her parents did not have a high income, transition-related care might be off the table due to her other care needs. For transgender people with disabilities, transition-related care is often thought of as an afterthought or a complication in receiving care for the specific disability (Kusalanka, Mahan, et al. 2018; Shapira and Granek 2019). Parents have shared numerous stories of their children's doctors saying they cannot treat gender dysphoria until these other diagnoses are "under control." This not only delays medical transition which exacerbates distress, but it also suggests people with disabilities cannot be anything other than disabled—gender identity takes a backseat to the "more pressing concerns" and is sometimes even seen as a byproduct of untreated mental illness. However, once Grace started hormone replacement therapy and distress over dysphoria was decreased, she was better able to and more interested in engaging with peers—something that had always been a struggle due to her autism and personality disorders. In

this case, financial barriers to livability were avoided due to the higher socioeconomic status of Grace's parents.

Parents of higher socioeconomic status have noted that if anti-trans bills pass in the state, making medical transition impossible for their children, they would have the financial means to relocate if necessary. Additionally, other transition-related supports not necessarily related to medical transition are expensive. For example, many of the trans-competent therapists who work with youth in the area where I did my research do not take health insurance. Additionally, transition-related items such as chest binders and tucking underwear average \$40 a pair—Brianna noted that buying a dozen pairs of underwear for her transgender daughter would be more than her family's monthly food budget. The LGBTQ+ community center provides transition-related items to low-income families to assist in decreasing the financial barriers to livability, although there is not nearly enough financial support to eliminate financial barriers to the livability of transness in a capitalist system that labels transgender-related care as "specialty" and therefore more expensive.

When living in a predominantly white city, accessing spaces that affirm transness oftentimes also means being in predominantly white community spaces. While there are queer and trans youth of color who attend the LGBTQ+ youth group, the community in which my research took place is still significantly racially segregated and therefore I suspect parents of color do not feel like PTK is their space, due to the overwhelming whiteness of the queer community center. On the surface, the absence of Black and Brown parents at PTK meetings could suggest that parents of color are simply not in need of support, but I believe this absence suggests the increased need for support focused on

Black and Brown parents of transgender youth. Parents of color must contend with the gendered racism (Hill Collins 2006) their children will encounter, as well as unpack how their own views of gender are influenced by histories of racism. Black non-binary cultural writer, Hunter Ashleigh Shackelford, describes how the concepts of “womanhood” and “manhood” are hard-fought categories for people of color which influenced her own choice not to use they/them pronouns (Shackelford 2016). Shackelford reflects on being labeled as “one of the boys” or “it” due to not being “girl-enough,” or not living up to standards of white feminine gender performance. She writes, “I’m not a Black woman, but I identify with Black womanhood and the experiences I had in creating my own girlhood/womanhood for myself when it was always denied to me” (Shackelford 2016). In the dehumanization process of Black women particularly, “woman” was a concept only white women had access to (Beauboeuf-Lafontant 2009; Hill Collins 1990; hooks 2015). Historically, categories of who is “normal” and “civilized” equated to white Americans with a particular “sexual fitness” for the purpose of reproducing the white race (Carter 2007). White supremacy has been enforced and upheld through the labeling of Black men and women as abnormally gendered. When Black trans youth defy normative gender categories, this can be seen as rejecting something that was fought so hard for by Black communities—leading parents to then reject non-normative gender categories.

Being trans, and being non-normatively gendered, distances Black youth from the safety and protections of being seen as “normal,” which can lead parents to the desire for their child to adhere to a cisnormative future. Denial and shame, which have been noted as experiences of white parents of transgender youth (Granucci Lesser 1999; Menvielle

and Tuerk 2002), are similarly impacting parents of color from accessing supportive communities and educational resources which contribute to fostering livability. Layered on top of that are the historical and cultural pressures, and traumas, that encourage Black people to conform to acceptable gender performances out of a desire for safety and admittance to the category of “woman” or “man.” Systems of white supremacy have been built on denial of Black humanity and death of Black life, and continuously impact trans youth of color’s access and proximity to trans livability.

### **Battling over Trans Livability with Unsupportive Co-Parents**

Mothers with unsupportive co-parents—the fathers—experience limits to the support they can provide. Mothers will often negotiate on behalf of the child, trying to further trans livability within the family, but this negotiation process becomes excruciatingly difficult during divorce proceedings and custody battles. While Sandra was in the divorce process, her now ex-husband was attempting to obtain full custody so he could make medical decisions for the children and prevent Emmy from accessing gender-affirming healthcare.

“I think [medical transition] is probably something she would try to, um, pursue, which is kind of why we’re concerned about this custody thing with her dad. I’m trying to get legal custody so I can make all the medical decisions.” –Sandra (36 years old), mother of 5-year-old transgender girl \*Came out at 3 years old

During the divorce proceedings, Sandra was unable to bring Emmy to doctors for transition-related conversations. When trans kids are as young as Emmy, transition-related care primarily looks like affirming any social transition while keeping an eye on the progression of puberty so that puberty blockers can be started at the right time to



prevent the irreversible bodily changes that do not align with their gender identity. However, affirming social transition is complicated when there is an unsupportive co-parent. Emmy has been growing her hair out, now sporting a short bob with swooping bangs over her eyes. Emmy's father was wanting to shave her hair into a buzzcut, to make her appear more masculine; attempting to cut the girl out of her. Parents at PTK brainstormed how Sandra can help Emmy be affirmed as a girl and read as a girl out in public despite a buzzcut. The suggestions of headbands, bows, clips, scarves, and even wigs were ultimately not needed due to Sandra being awarded final say over gender-related decisions in the divorce, which includes puberty blockers and haircuts.

Phoebe was another mother going through a divorce during the time of my ethnographic observation. In October of 2019, Phoebe invited me to her house to get advice on how to best support her transgender daughter during the custody battle. I shared with her research on the experiences of mothers of trans youth in custody battles against unsupportive fathers (Kovalanka et al. 2019), and she resonated with the experiences of being blamed for the child's transness and the father using that as an argument of her being unfit for full custody.

“That’s something that I’m fighting for in the custody case because one of the conditions of her dad’s parenting plan is that he gets to pick all the therapists and doctors, and, like, I absolutely cannot have that. So, um, my lawyer and I are working hard on that so that she at least has access, you know. I want it to be available to her.” –Phoebe (28 years old), mother of 8-year-old transgender girl

\*Came out at 6 years old

Custody cases where one parent is supportive of the child's transgender gender identity and the other parent is not often revolve around decisions about transition-related care. The parental stance of either facilitating or denying gender transition speaks to their view on trans livability. Fathers wish to have power over all medical care to suppress the child's gender identity and gender non-conformity, and ultimately prevent the trans child from living publicly. Even when gender-affirming medical care is denied, that does not stop the child from being trans; the child is still trans, albeit closeted and at great risk for self-harm. Seeking to prevent transition-related care through gaining sole custody or sole power over medical decisions contributes to the social death of transness. Encouragement of cisnormative behaviors and expression, especially when one has the knowledge of the child's gender non-conformity, is an attempt to kill queer expressions of gender. The experiences of mothers struggling against transphobic fathers demonstrate the limits to livability when up against hostile powers—either individuals or larger systems.

Mothers with unsupportive co-parents can produce situational livability for their trans children. Situational livability is exemplified by mothers who take off the child's nail polish when the child goes to their father's house and who keep a different set of clothes at the mother's house so the child can wear gender affirming clothes in the supportive environment. This is demonstrated by parents who refrain from using any names or pronouns when sharing about their child on social media, due to not wanting to "out" their child to unsupportive family but also not wanting to deadname and misgender their child. Situational livability is also seen when mothers must use their child's deadname while in court, so she is not violating the parenting plan which states the legal name must be used. While in court, the mother acts as though the assumed-cisgender

child is still present and alive, while momentarily setting aside transness. Switching back and forth between using deadname in court and using correct name outside of court is part of information control efforts which keep the child safe and still able to live as trans when in the mothers' care. As trans people often know, momentarily muting transness is sometimes necessary in order to safely navigate a hostile environment and secure future trans livability.

Mothers with unsupportive co-parents act as their child's lifelines to trans futurity—paving a more accessible path to transition without the need to completely suppress their transness. Paving this path comes with many roadblocks when the mother cannot simply facilitate the child's gender-related needs, but instead must battle over the ability to let transness flourish openly. As Emmy once told her mother, her heart is broken in two where her “pink heart lives at home where it's safe and her blue heart lives at dad's because she has to be a boy at dad's.” Until trans children are old enough to have complete agency over their body, gender presentation, and medical decisions, unsupportive co-parents produce conditions where the supportive parent's hypervigilance is needed to maintain a space where trans livability, or even situational trans livability, can exist.

## **Conclusion**

Parents of trans children experience the unraveling of the envisioned future produced by both passive and active investment in the gender binary, but they also participate in and do the unraveling of cisnormativity in spaces they inhabit. Shifting the personal imagination surrounding futurity and potentiality of life is an intentional and sometimes difficult effort for cisgender parents pushing back against cisnormativity

within the family and beyond. Parents re-make the institution of the family by embracing feminist parenting practices which make space for transness. Through these concrete practices, cisgender parents give life to the familial and societal frameworks which recognize and embrace their transgender children. Through parental work, institutional space for living and thriving is created as opposed to trans experiences being equated with death.

Examining the barriers to trans livability highlights how marginalized social locations and social inequalities compound the difficulties of pushing back against cisnormativity. Cisgender parents of transgender youth have power and privilege in being an adult, being cisgender, sometimes being financially stable, and sometimes being white, yet still encounter barriers to fostering trans livability. This points to just how difficult it is for transgender youth to create hospitable environments for themselves without the support of parents or surrogate parents. Nevertheless, transgender youth themselves and the supportive parents or surrogate parents in their lives continue to come up with creative solutions to navigating institutionalized cisnormativity and transphobia.

## CHAPTER 4: PARENTAL TRANSFORMATIONS OF GENDER

As parents learn to create livable spaces for their transgender children, they experience shifts in their own conceptualizations of gender and sexuality. Binary and rigid views of sex, sexuality, and gender begin to expand to more fluid and nuanced understandings. Parents tell me that creating room for their child to express their full self also created space for them to “dig deep” and examine their own gender or sexuality. Through exploration and learning about queerness and transness, some parents find that they feel more secure in their cisgender gender identity and straight sexual orientation. On the other hand, some seemingly straight and cisgender parents—to the outside world—reveal that they are not as exclusively straight and/or cisgender as it seems. Throughout my data collection, I was surprised at the number of parents that were not strictly heterosexual or cisgender. About 45% of my sample—10 out of 22 parents interviewed—expressed fluidity in their gender and sexuality. In another study about parents of transgender children, it was found that approximately 70% of the parents in the study identified as heterosexual while the remaining 30% identified as gay, lesbian, bisexual, or queer (Rahilly 2018). Expanding from the previously mentioned research, I find that parents of transgender youth also fit into gender nonconforming and gender diverse communities.

This chapter will look at parental transformations of gender ideology, particularly how having a transgender child shifts parents’ own ideas of gender and sexuality. Transgender youth are initiating the shift in gender conceptualization; opening their parents’ minds to think about gender differently and freeing their parents of gender

constraints, or at least loosening the constraints. Parents and trans children, sometimes unknowingly, work concurrently to create space for themselves and others. As parents navigate their expanding understandings and expressions of gender and sexuality, they are subject to pressures of heteronormativity (Rich 1980), cisnormativity, and transnormativity (Johnson 2016). These concepts are useful in understanding parents' hesitations to openly embrace a label of queer, trans, or non-binary. Parents express that they feel like less "real" members of these categories due to their binary gender presentation or their lack of experience with same-gender romantic or sexual partners. Cisnormativity, explaining the pressures to be cisgender, and transnormativity, explaining the idea that transness is only valid if it is binary, both link back to the harmful idea that binary cisgender gender identities are the more valid genders. The differentiations between the two concepts illuminate the nuances of internalized self-doubt, shame, and silence surrounding some parents' queerness. As reflected throughout this dissertation, shifting understandings of a child's gender is an evolving process, and so are parents' own understandings of themselves. As parents learn how heteronormative, cisnormative, and transnormative pressures impact their children and their own views of futurity, I find that parents also engage in the process of unpacking how these pressures unfold in their own lives.

### **From Genderblind to Gender Kaleidoscope**

According to the latest survey conducted by Gallup on LGBT identification in the United States, Generation Z is the queerest generation yet (Gallup 2021; Nast 2021)—LGBT youth are coming out at younger ages and embracing more fluid understandings of gender identity and sexuality. As parents witness their trans child's queerness, they begin

to interrogate their previously held rigid ideas of self-understanding and desire. Parents' views about sex and gender subsequently shift due to their experiences with their trans children. Many parents reference the gendered frameworks in which they were socialized as children, and how they are reckoning with new information that challenges their socialization.

“The world isn't black or white, it isn't male or female. There's so much more than I ever realized there was. It's opened my eyes just so much more, and I think that's given me a better appreciation for what's out there, and I think it's made me a better person at work, it's made me a better person in life. To start appreciating differences, as opposed to just not thinking about it at all. It's kind of like the whole, you know, the Black Lives Matter, oh, let's be colorblind. No, if you're that, then you're not seeing the differences and appreciating the differences. I think before it was like, I was almost colorblind to gender.” –Kim (47 years old), mother of 17-year-old transgender girl \*Came out at 13 years old

Though I do not endorse the comparison of blindness to anything that is ignorant or unaware, the term “genderblind” is being used more and more to describe the similarities to what Bonilla-Silva calls color-blind racism (2018). While “genderblindness” has been used in positive ways to describe partners of transgender people who view their love as being stronger than the shifts in their relationship due one partner's gender transition (Motter and Softas-Nall 2021), Kim's sentiments also illuminate how it can be a hinderance in seeing the diversity in gendered expressions and experiences. Color-blind racism references a type of racism that ignores racial differences while perpetuating white supremacy. Similarly, genderblind frameworks ignore gender differences while obscuring

gender diversity and the impacts of cisnormativity. Instead of being unaware of the diversity of gender, parents of transgender youth are beginning to see and appreciate the entire spectrum of gender.

“I get the concept that gender is really blurry and, uh, I liked what, um, you know, I went to that talk that Janet Mock gave and she described it as a kaleidoscope. I thought that was a really great description of gender. That it’s so completely diverse. I feel like I’m not super, super feminine in a lot of ways, so I can understand somewhat, not being the traditional feminine person. So I think this process has allowed me to really go deeper in that, like I said, that kaleidoscope of gender. That all of it’s valid, and all of it’s normal, and all of it should be celebrated basically, as opposed to just, like, ‘oh, okay, you do you, but maybe don’t do it on TV, or maybe don’t tell my mom.’ I don’t know if you get what I’m saying, but... I wouldn’t really feel like it’s wrong but it’s like, ‘oh, that’s kind of strange,’ but I don’t really feel that way anymore.” –Tessa (55 years old), mother of 19-year-old non-binary child \*Came out at 14 years old

As parents participate in the never-ending practice of undoing cisnormativity to support their trans child, their conceptualizations of gender start to incorporate the perspective of gender as a kaleidoscope or spectrum instead of an unchanging binary. Parents also relate their new understandings of gender to their own gendered experiences, making sense of both their children’s experiences of gender as well as their own gendered embodiment. This shift in views on gender moves away from shame and silence and instead affirms celebration and normalization of the process of internal examination of gender and sexuality.



“I was always taught if you have certain plumbing, you’re one way. And I never realized that that’s not the case sometimes... And I realized my husband is very specific in what he’s interested in. He’s very heterosexual, and I could be maybe more... I don’t know how to explain it, but you know what I’m saying, I could be more open to things but yet he’s not. It’s just... I wouldn’t have been here 10 years ago, at all.” –Eleanor (43 years old), mother of 16-year-old transgender girl

\*Came out at 14 years old

Eleanor, described by her cisgender daughter as “probably bisexual,” now realizes she has a “bigger umbrella” than her husband—noting that her love for her husband would not change if he came out as a transgender woman, while her husband said he “couldn’t say the same” regarding if she came out as transgender. When she says that she “wouldn’t have been here 10 years ago,” Eleanor is crediting her transgender daughter for expanding her view of gender and allowing her to be more comfortable in expressing non-heterosexuality—contrasting from her own childhood socialization.

I find that mothers are doing more of the work of learning how to be supportive of their child’s gender identity and making efforts to create livable and trans-affirming family environments, therefore it is not surprising that Eleanor is deconstructing her previous understandings of gender and sexuality while her husband holds more inflexible perspectives. Just as the demands of hegemonic masculinity (Connell 1995; Connell and Messerschmidt 2005; Kane 2006) prevent fathers from participating in spaces that would assist them in learning how to best support their transgender child, it also prevents them from allowing themselves to explore and question their own relationship to gender and sexuality.

Shifts in views about gender allow parents, primarily mothers, to think differently than they did before their child came out and discover new understandings of themselves, their relationships, and of course their trans child. Being aware of the spectrum of gender due to having a transgender child allows more room for the expression of diverse gender and the deconstruction of previously held binary beliefs.

### **Not as Straight and Cis as it Seems**

When beginning my data collection, I interpreted all the parents at PTK to be cisgender and heterosexual, due to them either being in different-gender relationships, not being knowledgeable about LGBTQ+ identity, or not openly identifying with LGBTQ+ experiences in the group setting. Throughout my interviews, I was surprised at how many parents have more fluidity and queerness in their understandings of themselves than what they present to the world. Even when asked demographic questions, many of those who disclosed feeling not completely heterosexual or cisgender to me in our interview together still identified as cisgender and heterosexual on paper. I find that there is a reluctance to claim an LGBTQ+ identity due to their cisgender and heterosexual presentation to the outside world and lack of experience with same-gender relationships.

I asked my participants if their child coming out as transgender has changed the way they think about their own gender. Some parents noted that how they viewed their gender did not necessarily change, but instead what changed was the understanding of their sexuality. Sandra, who identified herself as heterosexual in the demographics questionnaire yet describes herself as bisexual during our interview, explains how her trans daughter, Emmy, helped her give herself permission to accept her sexual orientation.

“To be honest, um, I’ve always thought of myself probably as more bisexual. I just never really dated any women. I think once we realize, like, that our kids have permission to be who they are, but we don’t give ourselves permission to be who we are. But Emmy’s helped me, yeah. While my gender identity has not changed, I feel that I’m more okay with my sexual orientation, or I’m more okay with accepting that maybe I’m not who I always thought I was. Had I grown up knowing that there were other options, I don’t think the option that I picked my entire life would’ve been the option. I feel like I picked being a straight female even though that’s not always how I felt, but there wasn’t...you weren’t able to do that.” –Sandra (36 years old), mother of 5-year-old transgender girl \*Came out at 3 years old

Jennifer, a mother who is newly separated from her children’s father after realizing she is queer, laughs at my question about the impact her child’s transition has had on her understanding of her own self.

“Why you gotta ask me that question?! Um, uh, yeah, I think for sure, like, there’s definitely some parallel experiences with opening up space for Madison to be who she is and understanding for myself, then, that like, oh, maybe I’m actually—not necessarily my gender—but like, my orientation is more fluid than I allowed it to be before I gave Madison the space to be who she was. So that’s been interesting. It just freed me up to bring up into consciousness all of the ways that I had internalized expectations for how I was supposed to be. I thought I was just moving in the world the way that I wanted to, but then I realized, like, no, there’s

a lot that tied me to this box that doesn't actually fit.” –Jennifer (35 years old),  
mother of 8-year-old transgender girl \*Came out at 2 years old

The ubiquitousness of heteronormativity leads people to think that heterosexuality is the only way of being—the only normal, natural, good, healthy, correct way of being. Some parents, like Sandra and Jennifer, begin to see that heterosexuality was in fact something they “picked” to be accepted by their families and communities—rather than something they chose for their own fulfillment—when they unpack the hetero/cisnormative expectations they themselves unknowingly had for their children. Heterosexuality is “compulsory” (Rich 1980); it is “a system in which there actually is no choice” (McRuer 2006:8) despite an illusion of untethered self-expression. Parents of transgender youth unpack *the must* of heterosexuality and cisgender identity when reckoning with their gendered mourning which allows them to interrogate the ways in which they were put in boxes as well.

As parents create livable spaces for their children to be authentically themselves, parents can better see and identify the constraints of cisnormativity and heteronormativity placed upon all of us as children. In working to undo those expectations for their own children, parents are better able to live life outside of those boxes themselves. While Jennifer might have eventually realized she is queer regardless of her having a transgender daughter, Madison was the impetus that began Jennifer down her own path of self-exploration and acceptance. Madison is described by her mother as sensitive yet confident and effervescent, someone who is “more in-tune with who she is than her 35-year-old mother” and who will have an impactful future. Not only will transgender youth have impactful futures, but trans youth are already making cultural and institutional

impacts. By affecting change in their families, schools, places of worship, sports teams, and all the spaces they exist, transgender youth broaden the horizons of what is an accepted and possible life.

As parents describe the impacts of heteronormative socialization and compulsory heterosexuality (Rich 1980) which are oppressive to the possibilities of queerness—erasing those queer life paths from their future imagination—parents also unpack the life-long constraints felt by compulsory cisnormativity. Having a transgender child allows parents to think differently about their gender identity and interrogate the ways in which the cisnormative structures they are pushing against for the sake of their child have also impacted them. I was under the impression that my research was about cisgender parents of transgender children, but more parents than I anticipated had internal feelings of being something other than strictly cisgender.

“I’ve continued to live in a female body my whole life, so, if you think about gender identity as a spectrum, I would pr-, eh, you know, I—how I think about myself and how I present obviously are two different things. And how I think of myself is probably more fluid than a strictly female interpretation from somebody born in 1964. So, if I had, if I had grown up in the years that my child has grown up, I would probably identify as trans also.” –Patricia (55 years old), mother of 17-year-old transgender girl \*Came out at 15 years old

If Patricia had the language, knowledge of trans identities, and affirming cultural frameworks that are more accessible today as compared to in 1964, she might have decided to no longer continue to “live in a female body.” While being transgender is not a choice, it is a choice to decide to transition. Transition is not desirable or attainable for

some—due to numerous factors including economic or safety considerations and lack of support—but the feelings of incongruence between internal gender identity and external presentation to the world are still there. Parents suggest experiencing bodily and psychological discomforts similar to what their children experience, finding more common ground and empathetic identification than expected.

“I hated my boobs too, so it’s like, I totally get it dude, you want them gone, I totally get it. I’ve never felt wholly female, I guess, if you will. I’ve always been more tomboy and kinda not happy with my little feminine body. I have wondered often, you know, like, what would’ve happened if I’d been younger, and, you know, if my parents had been different back then. If the world had been different back then, what would’ve happened with me? I’m definitely, um, more towards that, the middle ground, which is non-binary? I think that Blake helped me label it.” –Patti (43 years old), mother of 17-year-old transgender boy \*Came out at 13 years old

Transgender youth are helping guide their parents through their own journey of self-discovery. Ash, who identifies as a genderqueer mom, shares that “doing more research into gender identities to try to help my son navigate his stuff really helped me figure out my stuff.” Efforts to foster trans livability and create safety for their child to express their gender inadvertently created room for parents to explore their own gender. The opportunity to intentionally engage with trans-affirmation allows parents to affirm the parts of themselves that do not feel strictly cisgender.

Mark’s interview stood out to me because of two reasons; how sure I was of Mark’s identity as a man before the interview began—which speaks to my own

cisnormative perspectives even as a trans person—and how Mark hesitantly dove deeper into their identity as the interview went on, noting their fear of backlash.

“I was actually kinda hoping for a daughter. My friends are mostly women. I don’t socialize well with men, I’ve never really understood the guy thing, you know, I just don’t get it. And so, I was like, I don’t know what I’d do with a son. I have always felt more feminine. Um, I knew that I was sexually attracted to men all the way back to puberty. But it’s always been one of those, you know, it’s, I mean, I’m 51 years old. When I was a kid, I didn’t know that trans was a thing, you know. I came out as non-binary fairly recently, but the truth is that most all of my relationships have been romantic and sexual relationships with women, and I don’t look or sound anything other than male. I’m one of those folks who is, you know, off the gender binary spectrum, but who basically looks and sounds like they’re binary. And so for most folks, you know, most folks are gonna be like ‘yeah, sure, whatever.’ And so that’s the thing that I struggle with.... trans butch<sup>5</sup> is such a fraught identity. I’m a little afraid to call myself trans butch. I’m afraid of backlash frankly... (Long exhale) In my head, as long as I can remember, I am a woman. I have a male body. I have a very male voice. But, in my head, all the way back, I fee-, I, I, I am, I am, I’m female.” –Mark (51 years old), father of 18-year-old transgender boy \*Came out at 11 years old

---

<sup>5</sup> Trans butch describes an assigned-male-at-birth individual who sees themselves as a butch / masculine woman.

Mark unpacked the nuances of their identity, noting that their son’s transition made it easier for them to think about their own gender identity. Mark experiences the same impacts of cisnormativity—the assumption that because they “don’t look or sound anything other than male” that means they must be a man—and transnormativity (Johnson 2016)—that binary trans identity is more real or valid than non-binary trans identity—that the non-binary children of my participants encounter regularly. The parallel experiences of identity invalidation of trans youth and trans adults coming out later in life speaks to the broader infantilization of trans people. Non-binary identities and neopronouns<sup>6</sup> are particularly seen as a new fad which delegitimizes those identities for both trans youth and trans adults, though trans youth have the added layer of not being taken seriously because of their age. Although, being trans is not new or a fad. People living beyond the gender binary have existed throughout all of history—for example, androgynous depictions of Aztec, Mayan, and Hindu gods and the use of terminology such as Māhū, Fa’afafine, Hijra, and Nádleeh to represent people beyond the gender binary in Indigenous cultures (Haefele-Thomas 2019)—and society is now catching up to a more nuanced and accurate recognition of all the ways gender unfolds.

Despite having self-knowledge of their identity, Mark is still afraid of backlash from the larger community due to infantilization and invalidation of non-binary trans identities.

---

<sup>6</sup> Any set of pronouns that are not officially recognized by the language in which they are used, such as ze/zir, ey/em, sie/hir, xe/xem, etc.



“I had pretty much given up on my female identity for a long, very long time. You know, it’s like, I know I’m a woman, but no one else is gonna believe this, no one else is gonna buy it. The backlash would be such that I don’t want to, it’s not worth expressing it to me. I can just be a woman by myself and, and that’s fine, because that’s always how I’ve been.” –Mark (51 years old), father of 18-year-old transgender boy \*Came out at 11 years old

Mark’s identity as a woman was kept private for so long. The varying levels of comfort or desire to tell others about one’s transness illuminates that there are more trans people in our world than we realize or can capture. A few months after this interview, Mark started expressing themselves more publicly in ways that honor who they are as a woman. That is the power of trans youth; they are unexpected social actors in trans liberatory politics by creating space for closeted trans adults to come out as well. Youth are often positioned as powerless and voiceless, with adults needing to lead the way, but it is evident that adults—cisgender, transgender, or somewhere in between—have much to learn from trans youth. Furthermore, when parents advocate for their trans children to be taken seriously, that legitimization of identity extends to trans adults as well. As a trans adult myself, when I observed parents accepting nothing less than the utmost respect for their child at school, at the doctor, and amongst extended family, I too began to believe I deserved that respect; the type of respect I was told was too much of an inconvenience to the others around me to expect.

Parental affirmation of transgender youth’s gender identity allows parents the room to affirm their own diverse gender or sexuality even when they identify as LGBTQ+ outside of the socially acceptable timeframe (not too young, not too old) or

have never dated same-gender partners. While LGBTQ-identification is seen as “more real” when you come out earlier in life, trans youth are simultaneously told they are too young to know who they are. Parents are instructed by medical professionals to only take their transness seriously if it is “insistent, persistent, and consistent” (Janicka and Forcier 2016; Zucker and Lawrence 2009), which centers the idea that authenticity of one’s identity depends on unwavering span of identification. Parents are told to “wait and see” or to discount the possibility of the child being transgender if they child is not consistent with their expression of gender identity. These rigid boxes of queerness and transness do not take into consideration the heteronormative, cisnormative, and transnormative pressures and invalidations which impact both children and adults causing them to be uncertain or hesitant. The common rule of “insistent, persistent, and consistent” also does not take gender fluidity into consideration. As exemplified by Mark’s gender journey throughout their life, transness is often the very opposite of consistent due to unsupportive environments as well as internalized and external pressures of cisnormativity and transnormativity.

The bravery of trans youth to live their truths despite structures of cisnormativity and adultism creates room for trans adults to also live our most authentic selves out loud. Transgender children are trans-trailblazers, paving the path for trans futures within their family lineage and beyond. While parents are working to make trans futurity possible for their child, trans children are concurrently, potentially unknowingly and unintentionally, making queer futures possible for their family and community members.

## Who Is Allowed to Embrace the Kaleidoscope?

Just as there are limitations to the extent parents can foster livability for their transgender child, there also exist limitations to who can dive into the kaleidoscope of gender. As discussed in Chapter 3, the system of hegemonic masculinity makes it difficult and unsafe for assigned-male-at-birth (AMAB) individuals to expand their expression of gender. Assigned-female-at-birth (AFAB) parents are more able to engage with and participate in gender exploration because they already have more permission to explore gender. Femininity on AMAB people is seen as much more problematic than masculinity on AFAB people, therefore it is more socially acceptable for AFAB parents to broaden how they do gender. Parents who are read as binary fathers expressed more hesitation to show femininity, or any type of queerness, to the outside world. Greg explains that his childhood bullying for not doing boyhood correctly has impacted his expression of himself today.

“Um, I mean, I might’ve thought of something like this when I was very younger, but um, I, I don’t think I would’ve transitioned. Um, but I, I know, personally, I’m a male, I present as male, um, but I’m not, I’ve never been this macho-type person... I’d rather hang out with girls than guys, but girls wouldn’t accept me either, so I was an outcast as a kid. Bullied, severely bullied, um, and it has left scars on me for, well, until now. Um, so gender, again, that’s, I feel that’s the way you present yourself.” –Greg (45 years old), father of 18-year-old transgender girl  
\*Came out at 16 years old

Similar to Mark’s fear of backlash, Greg’s scars from being bullied prevent him from engaging more openly with queer expressions of self. Even though Greg explicitly

does not identify as part of the LGBTQ+ community, he explained to me that he is attracted to feminine people such as men with long hair, and that it “doesn’t matter what’s in your pants, I’m attracted by the looks.” While his wife knows “a little bit about that,” no one else in his life knows and he has never acted upon those attractions. While mothers, as exemplified by the above quotes by Patricia and Patti, also expressed that they might have identified as trans if given the language earlier, there was much less fear and shame in their explanations of their internal feelings. Transfemininity is met with intense misogynist degradation in our social world (Koyama 2001; Serano 2007), making it dangerous for AMAB people to express anything other than normative manhood and masculinity.

The protections of whiteness are also a factor in terms of which parents benefit from their child’s gender exploration. While I did not have Black parents in my sample, I can anticipate that white parents are able to explore their gender and sexuality more than parents of color since I found that white parents feel more able to be in queer spaces like the LGBTQ+ community center where PTK meets. White people are already labeled as normatively gendered (Carter 2007) and therefore have more room to explore gender and have proximity to queerness without social, economic, or physical repercussions. For people of color who are already viewed as abnormally gendered, any further distancing from normative conceptualizations of personhood is an immediate safety concern. Black and Brown trans people experience higher rates of anti-trans violence as compared to white transgender people (Lamble 2008; Lee 2020; Spade 2011) because of these intersections of racism and transphobia, specifically transmisogynoir (Krell 2017). Black and Brown parents—despite likely also expanding their understandings of gender through

learning from their transgender child—are not allowed the space to express the expansiveness of gender and sexuality.

The limitations of who is allowed to dive into the kaleidoscope of gender give insight into which kinds of trans futures are more accepted. As room expands for white, passable, binary, predominantly transmasculine futures, there still exists fear for non-white, non-binary, and transfeminine expressions of gender to exist openly.

### **More Comfortable and Confident in their Gender**

Transgender youth are dismantling the barriers of societal expectations placed upon them, which in extension makes parents aware for the first time of how the constraints of hetero/cisnormativity are impacting their own lives. The surprisingly large amount of secretly queer parents in my relatively small sample suggests that older generations too, not just Generation Z, are very queer. Generation Z may not be an anomaly in how many queer people there are, but they are certainly breaking through societal barriers in new ways that have historically led people to be closeted or suppress their feelings of queerness.

Even for straight and cisgender parents, they too are viewing their gender through a different lens. Parents feel more comfortable, confident, and secure in their cisgender gender identity. Previously, their gender went unexamined, but when given the tools, language, and opportunity to examine their own gender, it resulted in feeling more at home in their gender. I argue that this is the entire point of gender liberation; not to dismantle all gender categories so that we are uniform, gender neutral, gray blobs, but instead to allow room for all of us to examine our relationship to gender with the intent of feeling more at-home in our bodies and minds.

“I do think it helped me be more comfortable and confident in making choices for myself, um, particularly when it came to my double mastectomy. When I chose to go through that, it was an easy choice, and it was like, that doesn’t really change who I am. I didn’t think that affected me as a woman. I don’t know if I would’ve been that quick to come to that comfort level had it not been for, um, yeah, understanding gender better and being more confident in that.” –Andrea (49 years old), mother of 20-year-old transgender boy \*Came out at 15 years old

“I haven’t worn a dress for 4 years now, and it’s made me think about how even though I’m out of shape—I really need to lose weight, I need to lose more weight now after, uh, 5 months of working at home in front of my computer all the time—but, in spite of those kinds of things, I have a comfort in my body that I am very lucky to have and a comfort with my overall appearance and the way I present myself to the world.” –Charlotte (60 years old), mother of 18-year-old transgender girl \*Came out at 14 years old

Cisgender parents, like Andrea and Charlotte, experience more comfort in their gender presentation because of their newly gained queerer gender frameworks; for example, one does not have to have breasts or dress stereotypically feminine to be a woman. As some not-so-cis parents realize they can relate to their child’s experience of gender dysphoria, cisgender parents also gain self-knowledge when they recognize they *cannot* relate to their child’s experience of gender dysphoria. A new sense of comfort in their bodies is found when they learn that not all people experience that sense of at-homeness in one’s body. This is an aspect of cisgender privilege that is only recognized

when parents witness the distress their children experience when they do not feel at-home in their body.

Even though Adam—who always felt secure in his identity as a cisgender man—still primarily holds views of gender that align with binary gender roles, he is beginning to understand that instead of gender roles being innate based on sex, gender roles often derive from how we were taught to exist.

“I never really particularly was worried about the fact that, uh, I was a man. It was okay to cry, and I cook, and I do theater, and I never was tremendously hung up on that. On the other hand, I still think, you know, yes, I taught the boys how to go kill the spiders, and you did that for the girls, you know. This is a really dumb example, but when we were at Lisa’s house to watch *Gender Revolution*, one of her dogs dragged in a dead mouse. Did I think anybody else but me was going to pick it up and deal with it? No, I just grabbed it and did it because that’s just some of the things that a guy does. But maybe because that’s some of the things that *this* guy does.” –Adam (50 years old), stepfather of 20-year-old transgender boy  
\*Came out at 15 years old

The subtle clarifier that picking up a dead mouse is something that “*this* guy” does instead of the job or expectation of all men represents an important shift in views about gender—how one does gender is not innate but instead reflects how one simply enjoys being in this world, which may or may not align with binary gender roles. When Adam’s stepson, Joshua, first came out as transgender, Adam changed Joshua’s chores from washing the dishes to mowing the lawn. Later, Adam realized that Joshua’s personality and interests did not change just because he came out as transgender, and that

not everyone's boyness is the same. Even though Joshua came out as a boy, he still enjoyed activities labeled as "feminine." Transnormativity privileges binary understandings of gender, therefore there is the assumption that trans men will be unwaveringly masculine and if there is any divergence from masculinity, that acts as evidence of the trans person's inauthenticity. Cisgender parents of trans children start to grasp the limits of binary gender ideologies as well as the inaccuracies of those roles and expectations. When applied to oneself, gender shifts from something that is limiting to something that has more room and flexibility to the expression of one's whole self.

Previous research about heterosexual parents of LGBTQ+ children finds that parents experience positive personal growth such as open-mindedness, less rigid perspectives, awareness of discrimination, and compassion due to having an LGBTQ+ child (Gonzalez et al. 2013). I extend this finding to include that cisgender parents of transgender children experience positive outcomes such as a new sense of comfort and confidence in their gender presentation due to the opportunity to learn about the distinction between gender identity and gender presentation, as well as the fluidity and validity in all of our unique gender presentations. As parents move through their mourning process, the experience of their child coming out as transgender is no longer a stressful or sad event but eventually parents experience positive change in how they interact with the world, their child, and themselves.

## **Conclusion**

Realizing I was not solely researching heterosexual and cisgender parents was an unexpected finding of my data. I was taken aback at how my own internalized heteronormative and cisnormative assumptions were playing out while I was researching



the very impacts of cisnormative assumptions. Similarly, the parents in my research are often shocked at how they were stuck in a binary way of thinking before their child came out as trans and just how much it infiltrated every aspect of how they interacted with their child, envisioned their child's future, and viewed themselves. While parents are intentional participants in their child's gender socialization (Berkowitz and Ryan 2011), children are also active participants in their own gendering, not simply passive recipients of their parents' gender frameworks (Kane 2006). Furthermore, I argue that transgender children are also agents of re-socialization for their parents. Supportive parents of transgender children embrace gender frameworks which affirm and recognize their child's experience of gender. Through conversations with their children and intentionally seeking out information about trans identity and experiences, parents begin to unlearn aspects of their cisnormative gender socialization.

Transgender children initiate the change in thinking about gender as an expansive kaleidoscope of gender possibilities instead of a fixed binary. Having a trans child broadens views of futurity as well as present-day being, giving parents the permission to embrace the queer parts of themselves. If it were not for their children coming out as transgender, parents might have continued to move through the world utilizing genderblind or gender binary frameworks. Transgender children loosen the constraints of gender normativity on their parents by illuminating the ways in which cisnormativity and transnormativity act as oppressive forces in the lives of both children and parents. Transgender youth hold the power to instigate positive social change that will expand societal perspectives of gender. Yet, this power is seen as dangerous by institutions and people who are committed to enforcing cisnormative gender systems—this is exemplified

in the attempts to legislate transgender youth out of existence and punish the parents who support their trans child. As parents work to disentangle systems of cisnormativity within their families and their own imaginations of personhood, they also begin to unravel the repressive gender and sexuality-based expectations impacting their own identity.

## CONCLUSION: THE UNDOING OF CISNORMATIVITY

In a recent lecture by Jack Halberstam on his upcoming book, *Unworlding: An Aesthetic of Collapse* (Halberstam 2022), Halberstam discusses how instead of world-making, we need to consider “unworlding” and the destruction of the world as we know it. Before we can look ahead to a utopian trans-inclusive and trans-affirming society, we need to undo and unmake this particular cisnormative arrangement of society. Only through the collapse of the powers that oppress trans people can we create worlds which truly produce trans livability in all its forms. I return to the quote by Alok Vaid-Menon at the beginning of my introduction chapter; “The trans movement isn’t about trans people moving forward, it’s about cis people catching up with us.” When perspectives shift from the death and deficiency of trans people—and the burden on trans people to fight against anti-trans powers—to instead focusing on the work cisgender people can do to catch up with us, this illuminates how it is the job of cisgender people to undo cisnormativity and destroy our current cisnormative order of things.

This dissertation argues that before we can get to the place of fostering livability and a trans-affirming society as a whole, cisgender people must first identify the producer of loss and then undo cisnormative systems and structures. This research documents the essential unpacking of gendered mourning in the lives of parents of transgender youth, allowing for us to identify where gendered mourning comes from and how to move towards trans-affirming practices. Through this, we see that cisnormativity is the ultimate producer of loss.

The previous chapters outline how cisnormativity impacts family operations including the ways in which naming practices and family bonding are built around cisnormative assumptions of personhood, leading to the trans child's coming out being experienced as a loss. I also consider how cisnormative and ableist views of the body are entangled into parents' views of their transgender child, and how cisnormative structures in our social world make it unsafe for transgender people, which informs parents' perspectives of the future. I found that fear is a predominant feeling in expressions of gendered mourning; fear of their child navigating transphobia and fear of the increased rates of suicide due to that transphobia, resulting in loss of safety, security, and predictability of expected gendered life paths.

This research makes contributions to the field of trans studies and the sociological analysis of gender systems by engaging with a contentious subject within the trans community. I asked Ash, a genderqueer mom in my research, about their thoughts on grief and mourning and their response represents how many people in the trans community feel.

“I think that is fucking gross. I was hoping you wouldn't ask me that question because that makes me so fucking mad. I literally left support groups over that. Like, when people are like, ‘we're allowed to mourn our child,’ I'm like, ‘your child's not fucking dead, Becky, your child's alive.’ Who gives a shit? Let go of expectations. Get into Buddhism or something, but don't mourn your alive, healthy child.” –Ash (35 years old), mother of 14-year-old transgender boy

\*Came out at 11 years old

While this perspective stems from the undeniable emotional pain trans people hold surrounding being relegated to the status of living dead, it does not allow room for the process of becoming and undoing. If there were only Ultimate Trans Ally Parents or Shitty Transphobic Parents, how do we explain the parents who advocate for their child but still hold underlying cisnormative beliefs? Or the parents who love their child deeply but do not have the tools and frameworks to understand their child's gender identity? The analysis of gendered mourning provides the avenues for exploring what it *feels like* to be in the process of becoming a better supporter of trans youth and undoing engrained systems of cisnormativity and transnormativity. Through tracing why parents experience grief and what is actually being grieved, this has allowed for interrogation into how multiple systems of oppression—namely transphobia, ableism, and racism—inform cisgender peoples' understandings of transness as well as transgender folks' experiences in our social world. Examination into gendered mourning creates openings for disrupting the systems of oppression that inform trans beings and bodies as a site of loss and danger.

Despite being controversial, I argue that the experience of gendered mourning is useful and crucial in parents' interrogation of how gender functions in their lives. This forces them to confront uncomfortable cisnormative internal beliefs that they otherwise might not have done if they did not have a transgender child. When mourning, grief, and feelings of loss are rejected as merely negative, we are denying the reality of emotion which is not only a masculinist and ableist response to someone's lived experience, but it also disregards the opportunity for meaningful reflection and change. Instead of denying the emotion, the sociological analysis of gendered mourning allows us to view this grief through a different lens and facilitates the identification of what parents are really

grieving; the falsehood and failure of cisnormativity, not their actual child. The illumination of these falsehoods and failures is essential in the undoing of cisnormativity.

Supportive parents of transgender youth are engaged in truly transformative work, centering trans-affirmation and trans livability in their families. This work being done within the family acts as a model for broader collapse of societal cisnormativity. I have put together a document (see Appendix B) of compiled resources intended for parents of transgender children to help in their process of unpacking cisnormativity and supporting their transgender child. Many of the resources were suggestions shared at PTK meetings that helped them in their process of learning about trans and non-binary gender identities. This is included because my research found that increasing education about transness and connection with other parents—even through media—is essential in decentering cisnormativity in the family.

TGNB youth and their cisgender parent accomplices are pulling on the threads of cisnormativity within the family, which begins the unraveling of cisnormative structures at play in schools, sports teams, doctors' offices, places of worship, government buildings, etc. Through the work to protect their children, parents are raising expectations of trans-affirmation in other spaces in which their children exist, and are contributing to roadmaps for the undoing of cisnormativity in other social structures. There are also pockets of our world outside of the family participating in the undoing of cisnormativity and working towards trans-affirming societies; like queer and trans intentional communities or summer camps for trans youth. Instead of focusing on loss, these spaces focus on trans joy and gender euphoria; centering queer bodily autonomy and trusting trans youth.

As I write this, there are numerous anti-transgender bills in Missouri. Participants in my research have been traveling to the state capitol to testify against these bills, for the third year in a row. The constant onslaught of anti-trans bills, specifically ones that target trans youth, is exhausting. It is also frightening given the context of states who have already passed bills that ban transgender children from playing on sports teams and that criminalize parents and healthcare providers who support trans youths' gender transition. It often feels as though we are moving further away from a trans-affirming society. Nevertheless, parents, grandparents, cisgender siblings, and trans community members show up time and time again to sustain trans livability. A mother who was forced to leave Texas as a result of legislation that considers her efforts to keep her child alive to be child abuse said, "We are choosing to grieve the loss of our home instead of the loss of our child" (Marques 2022). Parents who have the economic ability to relocate are fleeing their home states to protect their children from the government. Instead of grieving the loss of the trans child due to non-affirmative frameworks or due to the loss of life from increased rates of suicidality when forced to delay transition, parents—once again, who have the financial security to do so—are choosing a different subject of grief.

While this mindset flips the common narrative of grieving the transgender child, loss is still present no matter what as long as we live in a transphobic and racist society. Since low-income and racial minorities make up the majority of the demographic of trans children (Gill-Peterson 2018), *these* are the trans kids who will be greatly harmed under these laws because their families likely do not have the ability to leave their home state. These laws act as an attempted punishment for the disorientation and bewilderment caused by trans children and those that care for them who are unsettling the foundations

of our cisnormative society. The unavoidability of choosing between subjects of grief—losing your child *or* losing your home, friends, family, job—indicates the need for undoing systems of cisnormativity in all areas of life so that one day, transness will not have to equate to loss and grief.

As we struggle against anti-trans forces, the words of Leslie Feinberg echo in my mind; ze writes, “surrender was unimaginably more dangerous than struggling for survival” (Feinberg 1993:247). The option of surrendering would mean succumbing to the grief of a hostile world. Even though the constant internal interrogation and external work of unraveling cisnormativity is a struggle, we must continue to try until it is all torn down.



## APPENDICES

### Appendix A: Interviewee Demographics

Relationship to Child	Name (Age)	Race	Gender	Sexual Orientation	Occupation	Child (Age)	Child's Race	Child's Gender	Age of coming out
Mother	Phoebe (28)	White	Cis woman	Bisexual	Barista	Rose (8)	White	Trans girl	6
Mother	Nicole (33)	White	Cis woman	Bisexual, Poly	House Cleaner, Bar Tender	Scout (15)	White	Trans boy	9
Mother	Ash (35)	White	Genderqueer	Queer, Pansexual	Unemployed, Disabled	Jax (14)	White	Trans boy	11
Mother +	Jennifer (35)	White	Cis woman	Queer	Educator	Madison (8)	White	Trans girl	2
Father +	Luke (36)	White	Cis man	Straight	Educator	Madison (8)	White	Trans girl	2
Mother	Sandra (36)	White	Cis woman	Straight*	Educator	Emmy (5)	African, Latino, Native American, White	Trans girl	3
Mother	Brianna (42)	White	Cis woman	Straight	Catering Manager	Sophie (7)	White	Trans girl	5
Mother	Eleanor (43)	White	Cis woman	Straight*	Stay-at-Home Mom	Grace (16)	White	Trans girl	14
Mother	Patti (43)	White	Cis woman*	Pansexual	Unemployed, Former Educator	Blake (17)	White	Trans boy	13
Mother +	Mary (44)	White	Cis woman	Straight	Database Admin.	Ruby (18)	White	Trans girl	16
Father +	Greg (45)	White	Cis man	Attracted to Feminine People	Chemist	Ruby (18)	White	Trans girl	16
Mother	Kim (47)	White	Cis woman	Straight	Engineer	Christina (17)	White	Trans girl	13
Mother +	Andrea (49)	Hispanic	Cis woman	Straight	Human Resources	Joshua (20)	Hispanic, White	Trans boy	15
Stepfather +	Adam (50)	White	Cis man	Straight	Retail Manager	Joshua (20)	Hispanic, White	Trans boy	15
Father	Mark (51)	White	Non-Binary	Hetero-flexible	Librarian	Warren (18)	White	Trans boy	11
Mother	Martha (52)	White	Cis woman	Straight	Advocate	Calvin (18)	White	Non-binary	14
Mother	Patricia (55)	White	Cis woman, Fluid	Mostly Straight	Higher Ed Admin. Assistant	Trinity (17)	White	Trans girl	15
Mother	Tessa (55)	White	Cis woman	Straight	Physician	Miles (19)	White	Non-binary	14
Grandmother	Virginia (59)	White	Cis woman	Straight	Retired Nurse	Spencer (18)	Black, White	Trans boy	14
Mother	Charlotte (60)	White	Cis woman	Straight	Professor	Audrey (18)	White	Trans girl	14
Mother	Ruth (65)	White	Cis woman	Straight	Retired Economist	Rue (20)	White	Genderqueer	16
Grandmother	Barbara (75)	White	Cis woman	Straight	Retired Accountant	Scarlet (21)	White	Trans girl	17

+ Indicates that they are married to or separated co-parents with the interviewee directly above or below them in this chart.

\* Indicates that they reported being straight or cisgender when asked demographic questions, even though they described more fluidity during the interview.

## Appendix B: Resources for Fostering Trans Livability

### Books

- *The Transgender Teen: A Handbook for Parents and Professionals Supporting Transgender and Non-Binary Teens* by Stephanie Brill and Lisa Kenney (2016)
- *The Transgender Child: A Handbook for Families and Professionals* by Stephanie Brill and Rachel Pepper (2008)
- *Transitions of the Heart: Stories of Love, Struggle, and Acceptance by Mothers of Transgender and Gender Variant Children* by Rachel Pepper (2012)
- *Raising the Transgender Child: A Complete Guide for Parents, Families & Caregivers* by Michele Angelo and Alisa Bowman (2016)
- *At the Broken Places: A Mother and Trans Son Pick Up the Pieces* by Mary Collins and Donald Collins (2017)
- *The Bold World: A Memoir of Family and Transformation* by Jodie Patterson (2019)
- *A Quick & Easy Guide to Queer and Trans Identities* by Mady G. and Jules Zuckerberg (2019)
- *A Quick & Easy Guide to They/Them Pronouns* by Archie Bongiovanni and Tristan Jimerson (2021)
- *Transgender History, Second Edition: The Roots of Today's Revolution* by Susan Stryker (2017)

### Films

- *Gender Revolution* (2017): Katie Couric explores our evolving understanding of gender identity, speaking with transgender and intersex individuals about their experiences.
- *Disclosure* (2020): This documentary looks at depictions of transgender people in film and television, revealing how Hollywood simultaneously reflects and manufactures our deepest anxieties about gender.

- *Transhood* (2020): Filmed over 5 years in Kansas City, Missouri, this film documents four young people (ages 4, 7, 12, and 15) and their families as they navigate growing up in America's heartland.
- *Real Boy* (2016): As 19-year-old Bennett Wallace navigates early sobriety, late adolescence, and the evolution of his gender identity, his mother makes her own transformation from resistance to acceptance of her trans son.
- *Growing Up Coy* (2016): A Colorado family is thrust into the media spotlight to fight for the rights of their 6-year-old transgender daughter in a landmark civil rights case.
- *Raising Zoey* (2016): With the help of her mother and the ACLU, 13-year-old Zoey fights for her right to be herself at school in the face of ignorance and intolerance from school officials and students.

#### Websites

- <https://genderspectrum.org/>
- <https://standwithtrans.org/>
- <http://www.imatyfa.org/>
- <https://www.practicewithpronouns.com/>
- <https://pronouns.minus18.org.au/>
- <https://everydayfeminism.com/2016/02/130-examples-cis-privilege/>

## REFERENCES

- Abelson, Miriam J. 2014. "Dangerous Privilege: Trans Men, Masculinities, and Changing Perceptions of Safety." *Sociological Forum* 29(3):549–70. doi: 10.1111/socf.12103.
- 2016. "Trans Men Engaging, Reforming, and Resisting Feminisms." *TSQ: Transgender Studies Quarterly* 3(1–2):15–21. doi: 10.1215/23289252-3334139.
- Adsit, Lexi. 2015. "24 Actions You NEED to Take to Help Trans Women of Color Survive." *Autostraddle*. Retrieved (<https://www.autostraddle.com/24-actions-you-need-to-take-to-help-trans-women-of-color-survive-300526/>).
- Ahmed, Sara. 2004. *The Cultural Politics of Emotion*. New York: Routledge.
- 2006. *Queer Phenomenology: Orientations, Objects, Others*. Durham: Duke University Press.
- Aitken, Madison, Doug P. VanderLaan, Lori Wasserman, Sonja Stojanovski, and Kenneth J. Zucker. 2016. "Self-Harm and Suicidality in Children Referred for Gender Dysphoria." *Journal of the American Academy of Child & Adolescent Psychiatry* 55(6):513–20. doi: 10.1016/j.jaac.2016.04.001.
- Allen, Luke R., Laurel B. Watson, and Sarah B. VanMattson. 2020. "Trans Young Adults' Reflections on Adolescent Sources of Extra-Familial Support." *Journal of LGBT Youth* 17(1):1–23. doi: 10.1080/19361653.2019.1591323.
- Arnold, Emily A., and Marlon M. Bailey. 2009. "Constructing Home and Family: How the Ballroom Community Supports African American GLBTQ Youth in the Face of HIV/AIDS." *Journal of Gay & Lesbian Social Services* 21(2–3):171–88. doi: 10.1080/10538720902772006.
- Ashley, Florence. 2019a. "Puberty Blockers Are Necessary, but They Don't Prevent Homelessness: Caring for Transgender Youth by Supporting Unsupportive Parents." *The American Journal of Bioethics* 19(2):87–89. doi: 10.1080/15265161.2018.1557277.
- 2019b. "Thinking an Ethics of Gender Exploration: Against Delaying Transition for Transgender and Gender Creative Youth." *Clinical Child Psychology and Psychiatry* 24(2):223–36. doi: 10.1177/1359104519836462.
- Austin, Ashley. 2016. "'There I Am': A Grounded Theory Study of Young Adults Navigating a Transgender or Gender Nonconforming Identity within a Context of Oppression and Invisibility." *Sex Roles* 75(5–6):215–30. doi: 10.1007/s11199-016-0600-7.

- Bailey, Marlon M. 2013. *Butch Queens up in Pumps: Gender, Performance, and Ballroom Culture in Detroit*. Ann Arbor: University of Michigan Press.
- Barron, Cecillia, and Moshoula Capous-Desyllas. 2017. "Transgressing the Gendered Norms in Childhood: Understanding Transgender Children and Their Families." *Journal of GLBT Family Studies* 13(5):407–38. doi: 10.1080/1550428X.2016.1273155.
- Bauer, Greta R., Rebecca Hammond, Robb Travers, Matthias Kaay, Karin M. Hohenadel, and Michelle Boyce. 2009. "‘I Don’t Think This Is Theoretical; This Is Our Lives’: How Erasure Impacts Health Care for Transgender People." *The Journal of the Association of Nurses in AIDS Care: JANAC* 20(5):348–61. doi: 10.1016/j.jana.2009.07.004.
- Beauboeuf-Lafontant, Tamara. 2009. *Behind the Mask of the Strong Black Woman: Voice and the Embodiment of a Costly Performance*. Philadelphia: Temple University Press.
- Berkowitz, Dana, and Maura Ryan. 2011. "Bathrooms, Baseball, and Bra Shopping: Lesbian and Gay Parents Talk About Engendering Their Children." *Sociological Perspectives* 54(3):329.
- Berlant, Lauren. 2007. "Slow Death (Sovereignty, Obesity, Lateral Agency)." *Critical Inquiry* 33(4):754–80. doi: 10.1086/521568.
- 2011. *Cruel Optimism*. Durham: Duke University Press.
- Bernstein, Mary, and Renate Reimann, eds. 2001. *Queer Families, Queer Politics: Challenging Culture and the State*. New York: Columbia University Press.
- Billard, Thomas J. 2019. "'Passing' and the Politics of Deception: Transgender Bodies, Cisgender Aesthetics, and the Policing of Inconspicuous Marginal Identities." Pp. 463–77 in *The Palgrave Handbook of Deceptive Communication*, edited by T. Docan-Morgan. Cham: Springer International Publishing.
- Bird, Jason D. P., Lisa Kuhns, and Robert Garofalo. 2012. "The Impact of Role Models on Health Outcomes for Lesbian, Gay, Bisexual, and Transgender Youth." *Journal of Adolescent Health* 50(4):353–57. doi: 10.1016/j.jadohealth.2011.08.006.
- Blum, Linda M. 2015. *Raising Generation Rx: Mothering Kids with Invisible Disabilities in an Age of Inequality*. New York: New York University Press.
- Bonilla-Silva, Eduardo. 2018. *Racism without Racists: Color-Blind Racism and the Persistence of Racial Inequality in America*. Fifth edition. Lanham: Rowman & Littlefield.

- Bornstein, Kate. 1995. *Gender Outlaw: On Men, Women, and the Rest of Us*. Revised and updated [edition]. New York: Vintage Books, a division of Penguin Random House LLC.
- Boss, Pauline. 1999. *Ambiguous Loss: Learning to Live with Unresolved Grief*. Cambridge, MA, US: Harvard University Press.
- 2016. "The Context and Process of Theory Development: The Story of Ambiguous Loss." *Journal of Family Theory and Review* 8(3):269–86. doi: 10.1111/jftr.12152.
- Boyle, Coleen A., Michael H. Fox, Susan M. Havercamp, and Jennifer Zubler. 2020. "The Public Health Response to the COVID-19 Pandemic for People with Disabilities." *Disability and Health Journal* 13(3):100943. doi: 10.1016/j.dhjo.2020.100943.
- Brill, Stephanie, and Rachel Pepper. 2016. *The Transgender Teen: A Handbook for Parents and Professionals Supporting Transgender and Non-Binary Teens*. San Francisco, Calif: Cleis Press.
- Burke, Christopher K., Kenneth I. Maton, Eric S. Mankowski, and Clinton Anderson. 2010. "Healing Men and Community: Predictors of Outcome in a Men's Initiatory and Support Organization." *American Journal of Community Psychology* 45(1):186–200. doi: 10.1007/s10464-009-9283-3.
- Butler, Judith. 1990. *Gender Trouble: Feminism and the Subversion of Identity*. New York: Routledge.
- 2004. *Undoing Gender*. New York ; London: Routledge.
- Butler, Sandra S. 2017. "LGBT Aging in the Rural Context." *Annual Review of Gerontology and Geriatrics* 37(1):127–42. doi: 10.1891/0198-8794.37.127.
- Capous-Desyllas, Moshoula, and Cecillia Barron. 2017. "Identifying and Navigating Social and Institutional Challenges of Transgender Children and Families." *Child and Adolescent Social Work Journal* 34(6):527–42. doi: 10.1007/s10560-017-0491-7.
- Carter, Julian. 2007. *The Heart of Whiteness: Normal Sexuality and Race in America, 1880-1940*. Durham: Duke University Press.
- Castañeda, Claudia. 2014. "Childhood." *TSQ: Transgender Studies Quarterly* 1(1–2):59–61. doi: 10.1215/23289252-2399605.
- CDC. 2021. "Racism and Health." *Centers for Disease Control and Prevention*. Retrieved February 21, 2022 (<https://www.cdc.gov/healthequity/racism-disparities/impact-of-racism.html>).

- Clare, Eli. 1999. *Exile and Pride: Disability, Queerness, and Liberation*. Cambridge, MA: SouthEnd Press.
- Clemens, Colleen. 2017. "Ally or Accomplice? The Language of Activism." *Learning for Justice*. Retrieved January 27, 2022 (<https://www.learningforjustice.org/magazine/ally-or-accomplice-the-language-of-activism>).
- Connell, R. W. 1995. *Masculinities*. Berkeley, Calif: University of California Press.
- Connell, R. W., and James W. Messerschmidt. 2005. "Hegemonic Masculinity: Rethinking the Concept." *Gender and Society* 19(6):829–59.
- Coolhart, Deborah, Kayla Ritenour, and Anna Grodzinski. 2018. "Experiences of Ambiguous Loss for Parents of Transgender Male Youth: A Phenomenological Exploration." *Contemporary Family Therapy* 40(1):28–41. doi: 10.1007/s10591-017-9426-x.
- Crimp, Douglas. 1989. "Mourning and Militancy." *October* 51:3–18. doi: 10.2307/778889.
- 2004. *Melancholia and Moralism: Essays on AIDS and Queer Politics*. 1. MIT Press paperback ed. Cambridge, Mass: MIT Press.
- Cvetkovich, Ann. 2003. *An Archive of Feelings: Trauma, Sexuality, and Lesbian Public Cultures*. Durham, NC: Duke University Press.
- Davis, Georgiann. 2015. *Contesting Intersex: The Dubious Diagnosis*. New York: New York University Press.
- Dewaele, Alexis, Nele Cox, Wim Van den Berghe, and John Vincke. 2011. "Families of Choice? Exploring the Supportive Networks of Lesbians, Gay Men, and Bisexuals1." *Journal of Applied Social Psychology* 41(2):312–31. doi: 10.1111/j.1559-1816.2010.00715.x.
- Dimock, Michael. 2019. "Defining Generations: Where Millennials End and Generation Z Begins." *Pew Research Center*. Retrieved April 23, 2021 (<https://www.pewresearch.org/fact-tank/2019/01/17/where-millennials-end-and-generation-z-begins/>).
- Drescher, Jack. 2015. "Out of DSM: Depathologizing Homosexuality." *Behavioral Sciences* 5(4):565–75. doi: 10.3390/bs5040565.
- Driskill, Q. L. 2010. "Doubleweaving Two-Spirit Critiques: Building Alliances between Native and Queer Studies." *GLQ: A Journal of Lesbian and Gay Studies* 16(1–2):69–92. doi: 10.1215/10642684-2009-013.

- Duggan, Lisa. 2004. *The Twilight of Equality? Neoliberalism, Cultural Politics, and the Attack on Democracy*. Nachdr. Boston: Beacon Press.
- Dutta, Aniruddha, and Raina Roy. 2014. "Decolonizing Transgender in India: Some Reflections." *TSQ: Transgender Studies Quarterly* 1(3):320–37. doi: 10.1215/23289252-2685615.
- Edelman, Lee. 2004. *No Future: Queer Theory and the Death Drive*. Durham: Duke University Press.
- Ehrensaft, Diane. 2011. "Boys Will Be Girls, Girls Will Be Boys: Children Affect Parents as Parents Affect Children in Gender Nonconformity." *Psychoanalytic Psychology* 28(4):528–48. doi: 10.1037/a0023828.
- Elias, Norbert, and Michael Schröter. 1991. *The Society of Individuals*. Oxford, UK ; Cambridge, Mass., USA: Basil Blackwell.
- Ellis, Kelly M., and Karen Eriksen. 2002. "Transsexual and Transgenderist Experiences and Treatment Options." *The Family Journal* 10(3):289–99. doi: 10.1177/10680702010003005.
- Elman, Julie Passanante. 2014. *Chronic Youth: Disability, Sexuality, and U.S. Media Cultures of Rehabilitation*. New York: New York University Press.
- Enke, Anne, ed. 2012. *Transfeminist Perspectives in and beyond Transgender and Gender Studies*. Temple University Press.
- Feinberg, Leslie. 1993. *Stone Butch Blues*. Ithaca, N.Y: Firebrand Books.
- 1996. *Transgender Warriors: Making History from Joan of Arc to Dennis Rodman*. Boston: Beacon Press.
- Forstie, Clare. 2020. "Disappearing Dykes? Post-Lesbian Discourse and Shifting Identities and Communities." *Journal of Homosexuality* 67(12):1760–78. doi: 10.1080/00918369.2019.1613857.
- Foucault, Michel. 1994. *The Order of Things: An Archaeology of the Human Sciences*. New York: Vintage Books.
- Freedom for All Americans. 2021. "Legislative Tracker." *Freedom for All Americans*. Retrieved March 24, 2021 (<https://freedomforallamericans.org/legislative-tracker/>).
- Gallup. 2021. "LGBT Identification Rises to 5.6% in Latest U.S. Estimate." *Gallup.Com*. Retrieved November 17, 2021 (<https://news.gallup.com/poll/329708/lgbt-identification-rises-latest-estimate.aspx>).



- Garcia, Alma M. 1989. "The Development of Chicana Feminist Discourse, 1970-1980." *Gender and Society* 3(2):217–38.
- Garrison, Spencer. 2018. "On the Limits of 'Trans Enough': Authenticating Trans Identity Narratives." *Gender & Society* 32(5):613–37. doi: 10.1177/0891243218780299.
- Gilley, Brian Joseph. 2006. *Becoming Two-Spirit: Gay Identity and Social Acceptance in Indian Country*. Lincoln: University of Nebraska Press.
- Gill-Peterson, Julian. 2018. *Histories of the Transgender Child*. Minneapolis: University of Minnesota Press.
- Goffman, Erving. 1963. *Stigma: Notes on the Management of Spoiled Identity*. Englewood Cliffs, NJ: Prentice-Hall.
- Gonzalez, Kirsten A., Johanna L. Ramirez, and M. Paz Galupo. 2018. "Increase in GLBTQ Minority Stress Following the 2016 US Presidential Election." *Journal of GLBT Family Studies* 14(1/2):130–51.
- Gonzalez, Kirsten A., Sharon S. Rostosky, Robert D. Odom, and Ellen D. B. Riggle. 2013. "The Positive Aspects of Being the Parent of an LGBTQ Child." *Family Process* 52(2):325–37. doi: 10.1111/famp.12009.
- Gordon, Allegra R., S. Bryn Austin, Nancy Krieger, Jaclyn M. White Hughto, and Sari L. Reisner. 2016. "'I Have to Constantly Prove to Myself, to People, That I Fit the Bill': Perspectives on Weight and Shape Control Behaviors among Low-Income, Ethnically Diverse Young Transgender Women." *Social Science & Medicine* 165:141–49. doi: 10.1016/j.socscimed.2016.07.038.
- Gordon, Avery. 2008. *Ghostly Matters: Haunting and the Sociological Imagination*. New University of Minnesota Press ed. Minneapolis: University of Minnesota Press.
- Gould, Deborah B. 2009. *Moving Politics: Emotion and Act up's Fight against AIDS*. Chicago: The University of Chicago Press.
- Granucci Lesser, Joon. 1999. "When Your Son Becomes Your Daughter: A Mother's Adjustment to a Transgender Child." *Families in Society: The Journal of Contemporary Social Services* 80:182–89. doi: 10.1606/1044-3894.660.
- Gray, Mary L. 2009. *Out in the Country: Youth, Media, and Queer Visibility in Rural America*. New York: New York University Press.
- Gray, Sarah A. O., Kristen K. Sweeney, Renee Randazzo, and Heidi M. Levitt. 2016. "'Am I Doing the Right Thing?': Pathways to Parenting a Gender Variant Child." *Family Process* 55(1):123–38. doi: 10.1111/famp.12128.

- Green, Kai. 2016. "Troubling the Waters: Mobilizing a Trans\* Analytic." in *No Tea, No Shade: New Writings in Black Queer Studies*, edited by E. Patrick Johnson. Durham ; London: Duke University Press.
- Gregor, Claire, Helen Hingley-Jones, and Sarah Davidson. 2015. "Understanding the Experience of Parents of Pre-Pubescent Children with Gender Identity Issues." *Child & Adolescent Social Work Journal* 32(3):237–46. doi: 10.1007/s10560-014-0359-z.
- Grossman, Arnold H., and Anthony R. D'Augelli. 2006. "Transgender Youth: Invisible and Vulnerable." *Journal of Homosexuality* 51(1):111–28. doi: 10.1300/J082v51n01\_06.
- Haefele-Thomas, Ardel. 2019. *Introduction to Transgender Studies*. New York: Harrington Park Press.
- Hailey, Jamal, Whitney Burton, and Joyell Arscott. 2020. "We Are Family: Chosen and Created Families as a Protective Factor Against Racialized Trauma and Anti-LGBTQ Oppression Among African American Sexual and Gender Minority Youth." *Journal of GLBT Family Studies* 16(2):176–91. doi: 10.1080/1550428X.2020.1724133.
- Halberstam, Jack. 1998. "Transgender Butch: Butch/FTM Border Wars and the Masculine Continuum." *GLQ: A Journal of Lesbian and Gay Studies* 4(2):287–310. doi: 10.1215/10642684-4-2-287.
- 2020. *Wild Things: The Disorder of Desire*. Durham: Duke University Press.
- 2022. "Bewilderment and Unwordling," March 4, University of Missouri.
- Haraway, Donna Jeanne. 2008. *When Species Meet*. Minneapolis: University of Minnesota Press.
- Hawkins, Tracy L. 2021. *My Body Is My Own: Learning Consent, Respect, and Responsibility*.
- Hidalgo, Marco A., and Diane Chen. 2019. "Experiences of Gender Minority Stress in Cisgender Parents of Transgender/Gender-Expansive Prepubertal Children: A Qualitative Study." *Journal of Family Issues* 40(7):865–86. doi: 10.1177/0192513X19829502.
- Hill Collins, Patricia. 1990. *Black Feminist Thought: Knowledge, Consciousness, and the Politics of Empowerment*. New York: Routledge.
- 2006. *Black Sexual Politics: African Americans, Gender, and the New Racism*. New York: Routledge.

- Hill, Darryl B., and Edgardo Menvielle. 2009. “‘You Have to Give Them a Place Where They Feel Protected and Safe and Loved’: The Views of Parents Who Have Gender-Variant Children and Adolescents.” *Journal of LGBT Youth* 6(2/3):243.
- Hinchy, Jessica. 2019. *Governing Gender and Sexuality in Colonial India: The Hijra , c.1850–1900*. Cambridge University Press.
- Hobaica, Steven, and Paul Kwon. 2017. “‘This Is How You Hetero:’ Sexual Minorities in Heteronormative Sex Education.” *American Journal of Sexuality Education* 12(4):423–50. doi: 10.1080/15546128.2017.1399491.
- hooks, bell. 2015. *Ain’t I a Woman: Black Women and Feminism*. Second edition. New York: Routledge, Taylor & Francis Group.
- Hrapczynski, Katie M., and Leigh A. Leslie. 2018. “Engagement in Racial Socialization Among Transracial Adoptive Families With White Parents.” *Family Relations* 67(3):354–67. doi: 10.1111/fare.12316.
- James, S. E., J. L. Herman, S. Rankin, M. Keisling, L. Mottet, and M. Anafi. 2016. *The Report of the 2015 U.S. Transgender Survey*. Washington, DC: National Center for Transgender Equality.
- Janicka, Agnieszka, and Michelle Forcier. 2016. “Transgender and Gender Nonconforming Youth: Psychosocial and Medical Considerations.” *Rhode Island Medical Journal* 99(9):31.
- Johnson, Austin H. 2016. “Transnormativity: A New Concept and Its Validation through Documentary Film About Transgender Men.” *Sociological Inquiry* 86(4):465–91. doi: 10.1111/soin.12127.
- Johnson, Dominique, and Billie Gastic. 2015. “Natural Mentoring in the Lives of Sexual Minority Youth.” *Journal of Community Psychology* 43(4):395–407. doi: 10.1002/jcop.21692.
- Johnson, Julia. 2013. “Cisgender Privilege, Intersectionality, and the Criminalization of CeCe McDonald: Why Intercultural Communication Needs Transgender Studies.” *Journal of International & Intercultural Communication* 6(2):135–44. doi: 10.1080/17513057.2013.776094.
- Johnson, Susan L., and Kristen E. Benson. 2014. “‘It’s Always the Mother’s Fault’: Secondary Stigma of Mothering a Transgender Child.” *Journal of GLBT Family Studies* 10(1–2):124–44. doi: 10.1080/1550428X.2014.857236.
- Kafer, Alison. 2003. “Compulsory Bodies: Reflections on Heterosexuality and Able-Bodiedness.” *Journal of Women’s History* 15(3):77–89. doi: 10.1353/jowh.2003.0071.

- 2013. *Feminist, Queer, Crip*. Bloomington, Indiana: Indiana University Press.
- Kane, Emily W. 2006. “‘No Way My Boys Are Going to Be Like That!’: Parents’ Responses to Children’s Gender Nonconformity.” *Gender & Society* 20(2):149–76. doi: 10.1177/0891243205284276.
- 2012. *The Gender Trap: Parents and the Pitfalls of Raising Boys and Girls*. New York, NY: New York University.
- Katz-Wise, Sabra L., Stephanie L. Budge, Joe J. Orovecz, Bradford Nguyen, Brett Nava-Coulter, and Katharine Thomson. 2017. “Imagining the Future: Perspectives among Youth and Caregivers in the Trans Youth Family Study.” *Journal of Counseling Psychology* 64(1):26–40. doi: 10.1037/cou0000186.
- Kidd, Kacie M., Gina M. Sequeira, Taylor Paglisotti, Sabra L. Katz-Wise, Traci M. Kazmerski, Amy Hillier, Elizabeth Miller, and Nadia Dowshen. 2020. “‘This Could Mean Death for My Child’: Parent Perspectives on Laws Banning Gender-Affirming Care for Transgender Adolescents.” *Journal of Adolescent Health*. doi: 10.1016/j.jadohealth.2020.09.010.
- Klein, Augustus, and Sarit A. Golub. 2016. “Family Rejection as a Predictor of Suicide Attempts and Substance Misuse Among Transgender and Gender Nonconforming Adults.” *LGBT Health* 3(3):193–99. doi: 10.1089/lgbt.2015.0111.
- Koyama, Emi. 2001. “The Transfeminist Manifesto.” in *Catching a Wave: Reclaiming Feminism for the 21st Century*.
- Krell, Elías Cosenza. 2017. “Is Transmisogyny Killing Trans Women of Color? Black Trans Feminisms and the Exigencies of White Femininity.” *TSQ: Transgender Studies Quarterly* 4(2):226–42. doi: 10.1215/23289252-3815033.
- Kubicek, Katrina, William H. Beyer, Miles McNeeley, George Weiss, Legendary Father Taz Ultra Omni, and Michele D. Kipke. 2013. “Community-Engaged Research to Identify House Parent Perspectives on Support and Risk Within the House and Ball Scene.” *The Journal of Sex Research* 50(2):178–89. doi: 10.1080/00224499.2011.637248.
- Kübler-Ross, Elisabeth. 1969. *On Death and Dying*. New York, NY: Macmillan Pub. Co.
- Kuvalanka, Katherine A., Samuel H. Allen, Cat Munroe, Abbie E. Goldberg, and Judith L. Weiner. 2018. “The Experiences of Sexual Minority Mothers with Trans\* Children: Experiences of Sexual Minority Mothers with Trans\* Children.” *Family Relations* 67(1):70–87. doi: 10.1111/fare.12226.
- Kuvalanka, Katherine A., Camellia Bellis, Abbie E. Goldberg, and Jenifer K. McGuire. 2019. “An Exploratory Study of Custody Challenges Experienced by Affirming

- Mothers of Transgender and Gender-Nonconforming Children: Custody Challenges Involving Trans Children.” *Family Court Review* 57(1):54–71. doi: 10.1111/fcre.12387.
- Kuvalanka, Katherine A., Derek J. Mahan, Jenifer K. McGuire, and Tracey K. Hoffman. 2018. “Perspectives of Mothers of Transgender and Gender-Nonconforming Children With Autism Spectrum Disorder.” *Journal of Homosexuality; New York* 65(9):1167–89. doi: 10.1080/00918369.2017.1406221.
- Lamble, Sarah. 2008. “Retelling Racialized Violence, Remaking White Innocence: The Politics of Interlocking Oppressions in Transgender Day of Remembrance.” *Sexuality Research & Social Policy* 5(1):24. doi: 10.1525/srsp.2008.5.1.24.
- Lawrence, Anne A. 2011. “Do Some Men Who Desire Sex Reassignment Have A Mental Disorder? Comment on Meyer-Bahlburg (2010).” *Archives of Sexual Behavior* 40(4):651–54. doi: 10.1007/s10508-010-9720-2.
- Lee, Mark. 2020. *Dismantling a Culture of Violence: Understanding Anti-Transgender Violence and Ending the Crisis*. Human Rights Campaign Foundation.
- Lenning, Emily, Sara Brightman, and Carrie L. Buist. 2020. “The Trifecta of Violence: A Socio-Historical Comparison of Lynching and Violence Against Transgender Women.” *Critical Criminology: The Official Journal of the ASC Division on Critical Criminology and the ACJS Section on Critical Criminology* 1. doi: 10.1007/s10612-020-09539-9.
- Letcher, Lazarus. 2018. “Transgender Murder Memorials: A Call for Intersectionality and Trans Livability.” *American Studies ETDs*.
- Levitt, Heidi M., Sharon G. Horne, Julia Puckett, Kristin Kay Sweeney, and Martavius L. Hampton. 2015. “Gay Families: Challenging Racial and Sexual/Gender Minority Stressors through Social Support.” *Journal of GLBT Family Studies* 11(2):173–202. doi: 10.1080/1550428X.2014.958266.
- Light, Alexis D., Juno Obedin-Maliver, Jae M. Sevelius, and Jennifer L. Kerns. 2014. “Transgender Men Who Experienced Pregnancy After Female-to-Male Gender Transitioning.” *Obstetrics and Gynecology* 124(6):1120–27. doi: 10.1097/AOG.0000000000000540.
- Lorber, Judith. 2001. “The Social Construction of Gender.” in *Women’s voices, feminist visions: classic and contemporary readings*. Mayfield Publishing Company.
- Malpas, Jean. 2011. “Between Pink and Blue: A Multi-Dimensional Family Approach to Gender Nonconforming Children and Their Families.” *Family Process* 50(4):453–70. doi: 10.1111/j.1545-5300.2011.01371.x.

- Manalansan, Martin F., IV, Chantal Nadeau, Richard T. Rodríguez, and Siobhan B. Somerville. 2014. "Queering the Middle: Race, Region, and a Queer Midwest." *GLQ: A Journal of Lesbian and Gay Studies* 20(1–2):1–12. doi: 10.1215/10642684-2370270.
- Marques, Rebecca. 2022. "State Laws, State Agencies and State-Sponsored Fear Are Being Weaponized Against Transgender Children." *Human Rights Campaign*. Retrieved March 9, 2022 (<https://www.hrc.org/news/state-laws-state-agencies-and-state-sponsored-fear-are-being-weaponized-against-transgender-children>).
- McDermott, Elizabeth, Jacqui Gabb, Rachael Eastham, and Ali Hanbury. 2021. "Family Trouble: Heteronormativity, Emotion Work and Queer Youth Mental Health." *Health: An Interdisciplinary Journal for the Social Study of Health, Illness & Medicine* 25(2):177–95. doi: 10.1177/1363459319860572.
- McGuire, Jenifer K., Jory M. Catalpa, Vanessa Lacey, and Katherine A. Kovalanka. 2016. "Ambiguous Loss as a Framework for Interpreting Gender Transitions in Families." *Journal of Family Theory and Review* 8(3):373–85. doi: 10.1111/jftr.12159.
- McGuire, Jenifer K., and Meredith Conover-Williams. 2010. "Creating Spaces to Support Transgender Youth." *Part of a Special Issue: Creating Supportive Environments for Lesbian, Gay, Bisexual, and Transgender Youth* 17(4):17–20.
- McGuire, Jenifer K., Katherine A. Kovalanka, Jory M. Catalpa, and Russell B. Toomey. 2016. "Transfamily Theory: How the Presence of Trans\* Family Members Informs Gender Development in Families: Transfamily Theory." *Journal of Family Theory & Review* 8(1):60–73. doi: 10.1111/jftr.12125.
- McRuer, Robert. 2006. *Crip Theory: Cultural Signs of Queerness and Disability*. New York: New York University Press.
- Meadow, Tey. 2014. "Child." *TSQ: Transgender Studies Quarterly* 1(1–2):57–59. doi: 10.1215/23289252-2399605.
- 2018. *Trans Kids: Being Gendered in the Twenty-First Century*. Oakland, California: University of California Press.
- Menvielle, Edgardo. 2012. "A Comprehensive Program for Children with Gender Variant Behaviors and Gender Identity Disorders." *Journal of Homosexuality* 59(3):357–68. doi: 10.1080/00918369.2012.653305.
- Menvielle, Edgardo J., and Catherine Tuerk. 2002. "A Support Group for Parents of Gender-Nonconforming Boys." *Journal of the American Academy of Child & Adolescent Psychiatry* 41(8):1010–13. doi: 10.1097/00004583-200208000-00021.

- Meyer, Ilan H. 2003. "Prejudice, Social Stress, and Mental Health in Lesbian, Gay, and Bisexual Populations: Conceptual Issues and Research Evidence." *Psychological Bulletin* 129(5):674–97.
- Meyer-Bahlburg, Heino F. L. 2010. "From Mental Disorder to Iatrogenic Hypogonadism: Dilemmas in Conceptualizing Gender Identity Variants as Psychiatric Conditions." *Archives of Sexual Behavior* 39(2):461–76. doi: 10.1007/s10508-009-9532-4.
- Miller, Lisa R., and Eric Anthony Grollman. 2015. "The Social Costs of Gender Nonconformity for Transgender Adults: Implications for Discrimination and Health." *Sociological Forum* 30(3):809–31. doi: 10.1111/socf.12193.
- Miller, Sharee. 2018. *Don't Touch My Hair!* First edition. New York: Little, Brown and Company.
- Morgensen, Scott Lauria. 2011. *Spaces between Us: Queer Settler Colonialism and Indigenous Decolonization*. Minneapolis: University of Minnesota Press.
- Morrison, Eleanor, and Faye Orlove. 2018. *C Is for Consent*. Phonics with Finn.
- Motter, Barry L., and Lia Softas-Nall. 2021. "Experiences of Transgender Couples Navigating One Partner's Transition: Love Is Gender Blind." *The Family Journal* 29(1):60–71. doi: 10.1177/1066480720978537.
- Murray, Heather A. A. 2010. *Not in This Family: Gays and the Meaning of Kinship in Postwar North America*. Philadelphia, Pa: University of Pennsylvania Press.
- Nahata, Leena, Gwendolyn P. Quinn, Nicole M. Caltabellotta, and Amy C. Tishelman. 2017. "Mental Health Concerns and Insurance Denials Among Transgender Adolescents." *LGBT Health* 4(3):188–93. doi: 10.1089/lgbt.2016.0151.
- Nast, Condé. 2021. "Gen Z Is the Queerest Generation Ever, According to New Survey." *Them*. Retrieved November 17, 2021 (<https://www.them.us/story/gen-z-millennials-queerest-generation-gallup-poll>).
- Norwood, Kristen. 2012. "Transitioning Meanings? Family Members' Communicative Struggles Surrounding Transgender Identity." *Journal of Family Communication* 12(1):75–92. doi: 10.1080/15267431.2010.509283.
- 2013. "Grieving Gender: Trans-Identities, Transition, and Ambiguous Loss." *Communication Monographs* 80(1):24–45. doi: 10.1080/03637751.2012.739705.
- O'Brien, Marion. 2007. "Ambiguous Loss in Families of Children with Autism Spectrum Disorders." *Family Relations* 56(2):135–46.

- Olson, Kristina R., Lily Durwood, Madeleine DeMeules, and Katie A. McLaughlin. 2016. "Mental Health of Transgender Children Who Are Supported in Their Identities." *Pediatrics* 137(3):e20153223. doi: 10.1542/peds.2015-3223.
- Ostgathe, Antonia, Thomas Schnell, and Erich Kasten. 2014. "Body Integrity Identity Disorder and Gender Dysphoria: A Pilot Study to Investigate Similarities and Differences." *American Journal of Applied Psychology* 314:138–43. doi: 10.11648/j.ajap.20140306.14.
- Paceley, Megan S., Patricia Sattler, Jacob Goffnett, and Sarah Jen. 2020. "'It Feels like Home': Transgender Youth in the Midwest and Conceptualizations of Community Climate." *Journal of Community Psychology* 48(6):1863–81. doi: 10.1002/jcop.22378.
- Pfeffer, Carla A. 2014. "'I Don't Like Passing as a Straight Woman': Queer Negotiations of Identity and Social Group Membership." *American Journal of Sociology* 120(1):1–44. doi: 10.1086/677197.
- Phillips, Nelson, and Cynthia Hardy. 2002. *Discourse Analysis: Investigating Processes of Social Construction*. Thousand Oaks, CA: Sage Publications.
- Piepzna-Samarasinha, Leah Lakshmi. 2018. *Care Work: Dreaming Disability Justice*. Vancouver: Arsenal Pulp Press.
- Pilcher, Jane. 2017. "Names and 'Doing Gender': How Forenames and Surnames Contribute to Gender Identities, Difference, and Inequalities." *Sex Roles* 77(11):812–22. doi: 10.1007/s11199-017-0805-4.
- Pryde, Julie A., and Edmund V. Mech. 1995. "Empowering Lesbian and Gay Foster Adolescents Through Mentoring Relationships." *Journal of Gay & Lesbian Social Services* 2(2):59–72.
- Puar, Jasbir K. 2017. *The Right to Maim: Debility, Capacity, Disability*. Durham: Duke University Press.
- Puckett, Jae, Peter Cleary, Kinton Rossman, Brian Mustanski, and Michael Newcomb. 2018. "Barriers to Gender-Affirming Care for Transgender and Gender Nonconforming Individuals." *Sexuality Research & Social Policy: Journal of NSRC* 15(1):48.
- Pullen Sansfaçon, Annie, Marie-Joëlle Robichaud, and Audrey-Anne Dumais-Michaud. 2015. "The Experience of Parents Who Support Their Children's Gender Variance." *Journal of LGBT Youth* 12(1):39–63. doi: 10.1080/19361653.2014.935555.



- Pyne, Jake. 2014. "Gender Independent Kids: A Paradigm Shift in Approaches to Gender Non-Conforming Children." *Canadian Journal of Human Sexuality* 23(1):1–8. doi: 10.3138/cjhs.23.1.CO1.
- Rafferty, Jason, Committee on Psychosocial Aspects of Child and Family Health, Committee On Adolescence, and Gay Section on Lesbian. 2018. "Ensuring Comprehensive Care and Support for Transgender and Gender-Diverse Children and Adolescents." *Pediatrics* 142(4). doi: 10.1542/peds.2018-2162.
- Rahilly, Elizabeth P. 2015. "The Gender Binary Meets the Gender-Variant Child: Parents' Negotiations with Childhood Gender Variance." *Gender & Society* 29(3):338–61. doi: 10.1177/0891243214563069.
- 2018. "Re-Interpreting Gender and Sexuality: Parents of Gender-Nonconforming Children." *Sexuality & Culture; New York* 1–21. doi: 10.1007/s12119-018-9532-4.
- Reed, Sarah J., Trevor Strzyzkowski, Danielle Chiaramonte, and Robin Lin Miller. 2019. "'If It Weren't for Them, I'd Probably Be Lost': The Diversity and Function of Natural Mentors Among Young Black Men Who Have Sex With Men." *Youth & Society* 51(7):961–80. doi: 10.1177/0044118X18771246.
- Rich, Adrienne. 1980. "Compulsory Heterosexuality and Lesbian Existence." *Signs* 5(4):631–60.
- Ridgeway, Cecilia L., and Shelley J. Correll. 2004. "Unpacking the Gender System: A Theoretical Perspective on Gender Beliefs and Social Relations." *Gender & Society* 18(4):510–31. doi: 10.1177/0891243204265269.
- Riggs, Damien, and Clare Bartholomaeus. 2018. "Cisgenderism and Certitude: Parents of Transgender Children Negotiating Educational Contexts." *TSQ: Transgender Studies Quarterly* 5(1):67–82. doi: 10.1215/23289252-4291529.
- Riggs, Damien, and Clemence Due. 2015. "Support Experiences and Attitudes of Australian Parents of Gender Variant Children." *Journal of Child & Family Studies* 24(7):1999–2007. doi: 10.1007/s10826-014-9999-z.
- Riley, Elizabeth A., Gomathi Sitharthan, Lindy Clemson, and Milton Diamond. 2013. "Recognising the Needs of Gender-Variant Children and Their Parents." *Sex Education* 13(6):644–59. doi: 10.1080/14681811.2013.796287.
- Risman, Barbara J. 2004. "Gender As a Social Structure: Theory Wrestling with Activism." *Gender & Society* 18(4):429–50. doi: 10.1177/0891243204265349.
- 2018. *Where the Millennials Will Take Us: A New Generation Wrestles with the Gender Structure*. New York, NY: Oxford University Press.

- Risman, Barbara J., and Georgiann Davis. 2013. "From Sex Roles to Gender Structure." *Current Sociology* 61(5–6):733–55. doi: 10.1177/0011392113479315.
- Roberts, Tiffany K., and Corinne R. Fantz. 2014. "Barriers to Quality Health Care for the Transgender Population." *Clinical Biochemistry* 47(10–11):983–87. doi: 10.1016/j.clinbiochem.2014.02.009.
- Robinson, Margaret. 2017. "Two-Spirit and Bisexual People: Different Umbrella, Same Rain." *Journal of Bisexuality* 17(1):7–29. doi: 10.1080/15299716.2016.1261266.
- Rosich, Gina R. 2020. "Sexual Citizenship Theory and Employment Discrimination among Transgender-Identified People." *Societies* 10(1):17. doi: 10.3390/soc10010017.
- Rude, Mey. 2016. "Black Trans Woman Rae'Lynn Thomas Is At Least the 19th Trans Person Murdered This Year." *Autostraddle*. Retrieved (<https://www.autostraddle.com/black-trans-woman-raelynn-thomas-is-at-least-the-19th-trans-person-murdered-this-year-348404/>).
- Sebastian Torres, Rodrigo, Gary W. Harper, Bernadette Sanchez, M. Isabel Fernandez, and Adolescent Med Trials Network HIV. 2012. "Examining Natural Mentoring Relationships (NMRs) among Self-Identified Gay, Bisexual, and Questioning (GBQ) Male Youth." *Children and Youth Services Review* 34(1):8–14. doi: 10.1016/j.childyouth.2010.12.018.
- Serano, Julia. 2007. *Whipping Girl: A Transsexual Woman on Sexism and the Scapegoating of Femininity*. Emeryville, CA: Seal Press.
- Shackelford, Hunter. 2016. "Why I'm Nonbinary But Don't Use 'They/Them.'" *Wear Your Voice*. Retrieved November 1, 2021 (<https://wearyourvoicemag.com/why-im-nonbinary-but-dont-use-theythem/>).
- Shakespeare, Tom, Florence Ndagire, and Queen E. Seketi. 2021. "Triple Jeopardy: Disabled People and the COVID-19 Pandemic." *The Lancet* 397(10282):1331–33. doi: 10.1016/S0140-6736(21)00625-5.
- Shapira, Shahar, and Leeat Granek. 2019. "Negotiating Psychiatric Cisgenderism-Ableism in the Transgender-Autism Nexus." *Feminism & Psychology* 29(4):494–513. doi: 10.1177/0959353519850843.
- Singh, Anneliese A. 2013. "Transgender Youth of Color and Resilience: Negotiating Oppression and Finding Support." *Sex Roles* 68(11):690–702. doi: 10.1007/s11199-012-0149-z.
- Solebello, Nicholas, and Sinikka Elliott. 2011. "'We Want Them to Be as Heterosexual as Possible': Fathers Talk about Their Teen Children's Sexuality." *Gender & Society* 25(3):293.

- Soliz, Jordan, and Christine E. Rittenour. 2012. *Family as an Intergroup Arena*. Routledge Handbooks Online.
- Spade, Dean. 2011. *Normal Life: Administrative Violence, Critical Trans Politics, and the Limits of Law*. Brooklyn, NY: South End Press.
- Spoon, Rae, and Ivan E. Coyote. 2014. *Gender Failure*. Vancouver, British Columbia: Arsenal Pulp Press.
- Spradley, James P. 1980. *Participant Observation*. New York: Holt, Rinehart and Winston.
- Steensma, Thomas D., Roeline Biemond, Fijgje de Boer, and Peggy T. Cohen-Kettenis. 2011. "Desisting and Persisting Gender Dysphoria after Childhood: A Qualitative Follow-up Study." *Clinical Child Psychology and Psychiatry* 16(4):499–516. doi: 10.1177/1359104510378303.
- Sterrett, Emma M., Michelle Birkett, Lisa Kuhns, and Brian Mustanski. 2015. "Non-Parental Adults in the Social and Risk Behavior Networks of Sexual Minority Male Youth." *Children and Youth Services Review* 55:62–70. doi: 10.1016/j.chilyouth.2015.05.007.
- Stevens, Jaime, Veronica Gomez-Lobo, and Elyse Pine-Twaddell. 2015. "Insurance Coverage of Puberty Blocker Therapies for Transgender Youth." *Pediatrics* 136(6):1029–31. doi: 10.1542/peds.2015-2849.
- Stryker, Susan. 2008. *Transgender History*. Berkeley, CA: Seal Press : Distributed by Publishers Group West.
- Talusan, Meredith. 2019. "Celebrate Your Kid's Transition. Don't Grieve It." *The New York Times*, October 18.
- tdor.translivesmatter.info. n.d. "Remembering Our Dead - Rita Hester (28 Nov 1998)." *Remembering Our Dead*. Retrieved October 19, 2021 ([https://tdor.translivesmatter.info/reports/1998/11/28/rita-hester\\_boston-massachusetts-usa\\_1e497cc2](https://tdor.translivesmatter.info/reports/1998/11/28/rita-hester_boston-massachusetts-usa_1e497cc2)).
- The Trevor Project. 2019. *National Survey on LGBTQ Mental Health*. The Trevor Project.
- Travers, Ann. 2018. *The Trans Generation: How Trans Kids (and Their Parents) Are Creating a Gender Revolution*. New York: New York University Press.
- Vernier, Bernard. 2017. "The Power of Naming and Its Gendered Effects: Materials for a Comparative Anthropology." *Clio. Women, Gender, History* No 45(1):223–59.

- Vivienne, Son. 2017. “‘ I Will Not Hate Myself Because You Cannot Accept Me ’: Problematizing Empowerment and Gender-Diverse Selfies.” *Popular Communication* 15(2):126–40. doi: 10.1080/15405702.2016.1269906.
- Wahlig, Jeni L. 2015. “Losing the Child They Thought They Had: Therapeutic Suggestions for an Ambiguous Loss Perspective with Parents of a Transgender Child.” *Journal of GLBT Family Studies* 11(4):305–26. doi: 10.1080/1550428X.2014.945676.
- Watson, Sara E., Ariana Greene, Katherine Lewis, and Erica A. Eugster. 2015. “Bird’s-Eye View of GnRH Analog Use in a Pediatric Endocrinology Referral Center.” *Endocrine Practice : Official Journal of the American College of Endocrinology and the American Association of Clinical Endocrinologists* 21(6):586–89. doi: 10.4158/EP14412.OR.
- Weiss, Jillian T. 2007. “The Lesbian Community and FTMs: Détente in the Butch/FTM Borderlands.” *Journal of Lesbian Studies* 11(3–4):203–11. doi: 10.1300/J155v11n03\_03.
- Weiss, Robert Stuart. 1995. *Learning from Strangers: The Art and Method of Qualitative Interview Studies*. 1. paperback ed. New York: Free Press.
- West, Candace, and Don H. Zimmerman. 1987. “Doing Gender.” *Gender and Society* 1(2):125–51. doi: 10.1177/0891243287001002002.
- Weston, Kath. 1995. “Get Thee to a Big City: Sexual Imaginary and the Great Gay Migration.” *GLQ: A Journal of Lesbian and Gay Studies* 2(3):253–77. doi: 10.1215/10642684-2-3-253.
- 1997. *Families We Choose: Lesbians, Gays, Kinship*. New York: Columbia University Press.
- Willis, Morgan Mann. 2016. *Outside the XY: Queer Black and Brown Masculinity ; a Bklyn Boihood Anthology*. First edition. Riverdale, NY: Riverdale Avenue Books.
- Wren, B. 2002. “‘I Can Accept My Child Is Transsexual but If I Ever See Him in a Dress I’ll Hit Him’: Dilemmas in Parenting a Transgendered Adolescent.” *Clinical Child Psychology and Psychiatry* 7(3):377–97.
- Zanghellini, Aleardo. 2013. “Sodomy Laws and Gender Variance in Tahiti and Hawai‘i.” *Laws* 2(2):51–68. doi: 10.3390/laws2020051.
- Zucker, Kenneth J., and Anne A. Lawrence. 2009. “Epidemiology of Gender Identity Disorder: Recommendations for the Standards of Care of the World Professional Association for Transgender Health.” *International Journal of Transgenderism* 11(1):8–18. doi: 10.1080/15532730902799946.

Zucker, Kenneth J., and Robert L. Spitzer. 2005. "Was the Gender Identity Disorder of Childhood Diagnosis Introduced into DSM-III as a Backdoor Maneuver to Replace Homosexuality? A Historical Note." *Journal of Sex & Marital Therapy* 31(1):31–42. doi: 10.1080/00926230590475251.

## VITA

Mel Constantine Misco (they/them pronouns) is currently a doctoral candidate in the Department of Sociology at the University of Missouri with a graduate minor in Women's and Gender Studies. They are passionate about translating academic skills into community-oriented work that benefits marginalized populations and are invested in creating more trans-affirming worlds through the dismantling of cisnormativity. Mel currently resides in Columbia, Missouri where they enjoy cooking, crafting, cleaning, and cats.