

Transgender YP – Collation of relevant abstracts from Library literature search

Relevant – follow up

Title: *Gender Variance and Dysphoria in Children and Adolescents (looks relevant, would need to see full article to pull out info)*

Author: Bonifacio H.J.; Rosenthal S.M.,(Bonifacio) Division of Adolescent Medicine, Department of Pediatrics, Transgender Youth Clinic, The Hospital for Sick Children, University of Toronto, 555 University Avenue, Toronto, ON M5G 1X8, Canada; (Rosenthal) Pediatric Endocrine Outpatient Services, Pediatric Endocrinology, Child and Adolescent Gender Center, University of California, San Francisco, 513 Parnassus Avenue, Box0434, San Francisco, CA 94143-0434, United States

Source: Pediatric Clinics of North America 2015; 62(4): 1001-1016

Year of Publication: 2015

ISSN: 0031-3955

Availability: All e-Library Athens password holders

Abstract: Gender variant and transgender youth are seeking medical care at younger ages. Pediatricians and other primary care physicians are often the first professionals who encounter such youth and their families. The goals of this article are to provide information on the epidemiology and natural history of gender variant and transgender youth, current clinical practice guidelines regarding the use of puberty blockers and cross-sex hormones for transgender youth, and limitations and challenges to optimal care. Copyright © 2015 Elsevier Inc.

Title: *Buying time: Delaying puberty in transsexual children looks relevant, would need to see full article to pull out info)*

Author: Evans, Stephanie N.

Source: Dissertation Abstracts International: Section B: The Sciences and Engineering 2013; 73(10-B(E)):

Publication Details:US; : ProQuest Information & Learning; Year of Publication: 2013

ISSN: 0419-4217 Provider: EBSCO Type: Dissertation

Subject: transsexual children; Transsexualism

Availability: All e-Library Athens password holders

Description: There is a lack of research within the transsexual population and little is known about best practices for professionals working with this special population. The purpose of this research paper is to explore the issues of transsexuality and the life experiences of transsexual individuals. Seven male to female transsexual individuals participated in this study and completed a one-on-one interview with the primary researcher. The interview focused on participant's experiences growing up transsexual and his or her opinion on early intervention with hormone blockers for

transsexual youth. Each interview is discussed independently and major themes are identified across the interviews. The results section focuses on the limitations of this study and future directions to further research within this population. (PsycINFO Database Record (c) 2016 APA, all rights reserved)

Title: Free to be you and me: Normal gender-role fluidity—Commentary on Diane Ehrensaft's 'Listening and learning from Gender-nonconforming children'. (looks relevant, would need to see full article to pull out info)

Author: Knight, Rona

Source: The Psychoanalytic Study of the Child 2015; 6857-70

Publication Details:US; : Yale University Press; Year of Publication: 2015 ISSN: 0079-7308

Abstract: Comments on an article by Diane Ehrensaft .This paper suggests that gender role fluidity is a normal self state throughout development. It discusses the nonlinear progression of gender role identity that is constantly fluid and reactive to biological, environmental, and psychological changes. Given the normal fluidity of gender role identity, it argues that giving puberty blockers to young children is against the best interests of the child's development. (PsycINFO Database Record (c) 2016 APA, all rights reserved)

Title: Mental health and gender dysphoria: A review of the literature. (can pull key facts from abstract first)

Author: Dhejne C.; Van Vlerken R.; Heylens G.; Arcelus J.,(Dhejne) Gender Team, Centre for Andrology and Sexual Medicine and Centre for Psychiatry Research, Department of Clinical Neuroscience, Karolinska Institute and University Hospital, Stockholm, Sweden; (Van Vlerken) Centre of Expertise on Gender Dysphoria, VU University Medical Centre, Amsterdam, Netherlands; (Heylens) Centre for Sexology and Gender, University Hospital, Ghent, Belgium; (Arcelus) Nottingham Centre for Gender Dysphoria, Nottingham, United Kingdom; (Arcelus) Division of Psychiatry and Applied Psychology, Faculty of Medicine and Health Sciences, University of Nottingham, Nottingham, United Kingdom

Source: International Review of Psychiatry 2016; 28(1): 44-57

Year of Publication: 2016 ISSN: 0954-0261

Description: Studies investigating the prevalence of psychiatric disorders among trans individuals have identified elevated rates of psychopathology. Research has also provided conflicting psychiatric outcomes following gender-confirming medical interventions. This review identifies 38 cross-sectional and longitudinal studies describing prevalence rates of psychiatric disorders and psychiatric outcomes, pre- and post-gender-confirming medical interventions, for people with gender dysphoria. It indicates that, although the levels of psychopathology and psychiatric disorders in trans people attending services at the time of assessment are higher than in the cis population, they do improve following gender-confirming medical intervention, in many cases reaching normative values. The main Axis I psychiatric disorders were found to be depression and anxiety disorder. Other major psychiatric disorders, such

as schizophrenia and bipolar disorder, were rare and were no more prevalent than in the general population. There was conflicting evidence regarding gender differences: some studies found higher psychopathology in trans women, while others found no differences between gender groups. Although many studies were methodologically weak, and included people at different stages of transition within the same cohort of patients, overall this review indicates that trans people attending transgender health-care services appear to have a higher risk of psychiatric morbidity (that improves following treatment), and thus confirms the vulnerability of this population. Copyright © 2016 © 2015 Taylor & Francis

Title: Mental health comorbidities in children and adolescents with gender dysphoria (*can pull key facts from abstract first*)

Author: Janssen A.,(Janssen) Department of Child and Adolescent Psychiatry, New York University, 54 W 16th St #10A, New York, NY 10011, United States

Source: Journal of the American Academy of Child and Adolescent Psychiatry 2016; 55(10 Supplement 1): S80 Year of Publication: 2016 ISSN: 1527-5418

Abstract: Gender variance and dysphoria are present across all classes, ethnicities, and experiences, including those with severe and chronic mental illness. In this population, our most vulnerable group of individuals, adequate assessment and treatment of gender dysphoria often is overlooked despite evidence that appropriate treatment of gender dysphoria leads to improvement in psychological functioning. The World Professional Association for Transgender Health recommends in its Standards of Care (2012) that somatic and surgical treatments for gender dysphoria should be made available to those with medical or mental illness, with the caveat that "[the illness] must be reasonably well-controlled." The goal of this talk is to elucidate treatment recommendations for transgender youth who present with psychiatric comorbidities. **Methods:** Dr. Aron Janssen will draw on pertinent published studies and use case-based material that illustrates the challenges of treating gender dysphoria in the context of complex mental illness, such as bipolar disorder, schizophrenia, sexual trauma, PTSD, and depression, and will highlight the pitfalls of defining "well-controlled" criterion for the sake of initiating gender identity variant-specific medical treatment. **Results:** Psychiatric comorbidities in transgender youth provide clinical challenges for clinicians in establishing the well-controlled criterion and in delineating the etiology of transgender identity. In cases in which the youth's psychiatric symptoms are stabilized, access to transgender care should be supported and facilitated by mental health providers. Conclusions: Mental health practitioners should be aware of common psychiatric comorbidities in transgender youth and establish treatment recommendations that serve to stabilize the patient's psychiatric difficulties while facilitating the adolescent's development of a transgender identity and presentation.

Title: Approach to children and adolescents with gender dysphoria (*can pull key facts from abstract first*)

Author: Lopez X.; Stewart S.; Jacobson-Dickman E.,(Lopez) Department of Pediatrics, Division of Pediatric Endocrinology, University of Texas Southwestern Medical Center, Dallas, TX, United States; (Stewart) Department of Psychiatry, University of Texas Southwestern Medical Center, Dallas, TX, United States;

(Jacobson-Dickman) Department of Pediatrics, Division of Pediatric Endocrinology, Maimonides Medical Center, Brooklyn, NY, United States

Reference: Pediatrics in Review 2016; 37(3): 89-98 Year of Publication: 2016 ISSN: 0191-9601

Abstract: The definition of gender dysphoria (GD) includes the experience of a body that is incongruent with gender identity. The prevalence of GD is not as yet known, but the current proposed numbers are likely underestimated. Prevalence studies are complicated by several confounding factors and results may be misleading. (5)(7). On the basis of strong evidence from retrospective studies of relevant populations, clinicians should be especially vigilant in identifying GD in patients who are peripubertal because the onset of puberty heightens the risk of depression, anxiety, selfdestructive choices, and suicide. (8)(13). On the basis of strong evidence, "reparative psychotherapy" is both unsuccessful and psychologically deleterious. (15)(16)(17) (18) On the basis of expert consensus, the "gender affirmative model" is more accepted. (19). On the basis of strong evidence, adolescents treated with a protocol of **pubertal suppression followed by hormone replacement therapy during adolescence and gender reassignment surgery in adulthood have improved psychological outcomes and quality of lives compared with age-matched adults from the general population.** (10)(29). A large national transgender survey revealed that 41% of adult respondents had attempting suicide. On the basis of strong evidence, youth who are validated in their transgender identity by supportive family and social environments have much more favorable psychological outcomes. (11) The primary care clinician has a unique role and responsibility to identify patients with possible GD and provide anticipatory guidance, counseling, and family support. Primary health care clinicians can provide the impetus and means to greatly improve the lifelong psychological well-being of their patients with GD and potentially save lives. (9)(11)(13)(30). Copyright © 2016 by the American Academy of Pediatrics. All rights reserved.

Title: Gender dysphoria in childhood – **ALREDY HAVE/HAVE READ**

Author: Ristori J.; Steensma T.D.,(Ristori) Department of Experimental, Clinical and Biomedical Sciences, Careggi University Hospital, Viale Pieraccini 6, Florence 50139, Italy; (Steensma) Department of Medical Psychology, VU University Medical Centre, Amsterdam, Netherlands; (Steensma) Centre of Expertise on Gender Dysphoria, VU University Medical Center, Amsterdam, Netherlands

Source: International Review of Psychiatry 2016; 28(1): 13-20 Year of Publication: 2016

ISSN: 0954-0261 Type: Journal: Review

Subject: autism; child; childhood; counseling; feminization; *gender dysphoria; gender identity; human; priority journal; problem behavior; psychosexual development; psychosocial withdrawal; review; animal model; *childhood; clinical study; disease model; female; male; model; prevalence; psychological model

Abstract: Gender dysphoria (GD) in childhood is a complex phenomenon characterized by clinically significant distress due to the incongruence between assigned gender at birth and experienced gender. The clinical presentation of children who present with gender identity issues can be highly variable; the psychosexual

development and future psychosexual outcome can be unclear, and consensus about the best clinical practice is currently under debate. In this paper a clinical picture is provided of children who are referred to gender identity clinics. The clinical criteria are described including what is known about the prevalence of childhood GD. In addition, an overview is presented of the literature on the psychological functioning of children with GD, the current knowledge on the psychosexual development and factors associated with the persistence of GD, and explanatory models for psychopathology in children with GD together with other co-existing problems that are characteristic for children referred for their gender. In light of this, currently used treatment and counselling approaches are summarized and discussed, including the integration of the literature detailed above. 2016 Copyright © 2016 Taylor & Francis.

Title: Gender dysphoria in children and adolescents: A review of recent research. (can pull key facts from abstract first)

Author: Fuss, Johannes; Auer, Matthias K.; Briken, Peer

Source: Current Opinion in Psychiatry 2015; 28(6): 430-434

Publication Details:US; : Lippincott Williams & Wilkins; Year of Publication: 2015

ISSN: 0951-7367; 1473-6578

Source: EBSCO PSYCINFO

Abstract: Purpose of review: With the advent of medical treatments such as puberty suppression and cross-sex hormones in gender dysphoric minors, there has been a debate around questions of gender identity and brain development. This review aimed to identify recent empirical studies that addressed this controversial topic. Recent findings: Epidemiological data from several countries indicate that gender dysphoria in children and adolescents is far more common than initially anticipated. This is in line with the currently observed steady increase in referrals to gender clinics. Minors with gender dysphoria are a vulnerable population as they may face a high psychopathological burden. Recently published data on the long-term outcome of puberty suppression and subsequent hormonal and surgical treatment indicate that young people with gender dysphoria may benefit substantially with regard to psychosocial outcomes. Brain development studied by neuroimaging methods seems not to be disturbed by puberty suppression. Summary: The first reports about long-term outcome in adolescents having undergone puberty suppression have shown promising results. However, in a substantial part of gender dysphoric minors, puberty suppression is not indicated so far because of psychiatric comorbidity and long-term follow-up data from these patients are still scarce. (PsycINFO Database Record (c) 2016 APA, all rights reserved)

Title: Transgender patients: providing sensitive care . (looks relevant, would need to see full article to pull out info)

Author: Hyderi, Abbas ; Angel, Joseph ; Madison, Morgan ; Perry, L. Amanda ; Hagshenas, Leila

Source: Clinician Reviews, 2017, Vol.27(2), p.28(8)[Peer Reviewed Journal]

Abstract: puberty blockers and often derive more benefit from initiation of cross-gender...) The effects of puberty blockers are reversible.

Subjects: Hormone Replacement Therapy Mental Health Transgender

(full text available)

Title: Perceptions of Sex, Gender, and Puberty Suppression: A Qualitative Analysis of Transgender Youth (*can pull key facts from abstract first*)

Author: Vrouwenraets, Lieke ; Fredriks, A ; Hannema, Sabine ; Cohen-Kettenis, Peggy ; de Vries, Martine

Source: Archives of Sexual Behavior, Oct 2016, Vol.45(7), pp.1697-1703[Peer Reviewed Journal]

Description: International guidelines recommend the use of Gonadotropin-Releasing Hormone (GnRH) agonists in adolescents with gender dysphoria (GD) to suppress puberty. Little is known about the way gender dysphoric adolescents themselves think about this early medical intervention. The purpose of the present study was (1) to explicate the considerations of gender dysphoric adolescents in the Netherlands concerning the use of puberty suppression; (2) to explore whether the considerations of gender dysphoric adolescents differ from those of professionals working in treatment teams, and if so in what sense. This was a qualitative study designed to identify considerations of gender dysphoric adolescents regarding early treatment. All

13 adolescents, except for one, were treated with puberty suppression; five adolescents were trans girls and eight were trans boys. Their ages ranged between 13 and 18 years, with an average age of 16 years and 11 months, and a median age of 17 years and 4 months. Subsequently, the considerations of the adolescents were compared with views of clinicians treating youth with GD. From the interviews with the gender dysphoric adolescents, three themes emerged: (1) the difficulty of determining what is an appropriate lower age limit for starting puberty suppression. Most adolescents found it difficult to define an appropriate age limit and saw it as a dilemma; (2) the lack of data on the long-term effects of puberty suppression. Most adolescents stated that the lack of long-term data did not and would not stop them from wanting puberty suppression; (3) the role of the social context, for which there were two subthemes: (a) increased media-attention, on television, and on the Internet; (b) an imposed stereotype. Some adolescents were positive about the role of the social context, but others raised doubts about it. Compared to clinicians, adolescents were often more cautious in their treatment views. It is important to give voice to gender dysphoric adolescents when discussing the use of puberty suppression in GD. Otherwise, professionals might act based on assumptions about adolescents' opinions instead of their actual considerations. We encourage gathering more qualitative research data from gender dysphoric adolescents in other countries.

**Title: Mental Health and Self-Worth in Socially Transitioned Transgender Youth
(can pull key facts from abstract first)**

Author: Durwood, Lily ; McLaughlin, Katie A. ; Olson, Kristina R.

Source: Journal of the American Academy of Child & Adolescent Psychiatry, February 2017, Vol.56(2), pp.116-123.e2

Description: Objective Social transitions are increasingly common for transgender children. A social transition involves a child presenting to other people as a member of the “opposite” gender in all contexts (e.g., wearing clothes and using pronouns of that gender). Little is known about the well-being of socially transitioned transgender children. This study examined self-reported depression, anxiety, and self-worth in socially transitioned transgender children compared with 2 control groups: age- and gender-matched controls and siblings of transgender children. Method: As part of a longitudinal study (TransYouth Project), children (9–14 years old) and their parents completed measurements of depression and anxiety (n = 63 transgender children, n = 63 controls, n = 38 siblings). Children (6–14 years old; n = 116 transgender children, n = 122 controls, n = 72 siblings) also reported on their self-worth. Mental health and self-worth were compared across groups. Results: Transgender children reported depression and self-worth that did not differ from their matched-control or sibling peers (p = .311), and they reported marginally higher anxiety (p = .076). Compared with national averages, transgender children showed typical rates of depression (p = .290) and marginally higher rates of anxiety (p = .096). Parents similarly reported that their transgender children experienced more anxiety than children in the control groups (p = .002) and rated their transgender children as having equivalent levels of depression (p = .728). Conclusion These findings are in striking contrast to previous work with gender-nonconforming children who had not socially transitioned, which found very high rates of depression and anxiety. These findings lessen concerns from previous work that parents of socially transitioned children could be systematically underreporting mental health problems.

Identifier: ISSN: 0890-8567 ; DOI: 10.1016/j.jaac.2016.10.016

Possibly relevant to follow up

Ref No: B45988

Hudson-Sharp, Nathan; Metcalf, Hilary

Inequality among lesbian, gay bisexual and transgender groups in the UK: a review of evidence (might be relevant, would need to see full article to pull out info)

National Institute of Economic and Social Research (NIESR)

(Report available on the internet at: <http://ow.ly/SUw5302sUIZ>)

2016

Pages: 164 Price: na

ISBN:

Presents the results of an evidence review on the nature of inequality and disadvantage experienced by lesbian, gay, bisexual and **transgender** (LGB&T) people in the UK. Provides an overview of the evidence base, suggesting that it is

deficient and has major gaps, which precludes a comprehensive and reliable assessment of the extent of disadvantage for LGB&T people in the UK. Presents findings for nine policy areas: education; safety, including hate crime and domestic violence; health and access to healthcare; access to and experience of services; employment; LGB&T families, adoption and fostering; homelessness and access to housing; participation in civil society; and 16-19 year olds not in education, employment or training. Examines other themes including public attitudes and **young** people. Provides conclusions, identifying key issues which apply across all policy areas, and identifies evidence gaps.

Ref No: B44916

Welsh Government

Welsh Government action plan to advance equality for transgender people

(might be relevant, would need to see full article to pull out info)

Welsh Government

(Report available on the internet at: <http://ow.ly/Zth5d>)

2016 Pages: 29 Price: na ISBN:

Presents the results of a consultation by the Welsh Government asking for comments on proposed actions regarding equality for **transgender** people. Highlights the actions that the Welsh Government will take to advance equality. Looks at issues faced by children and **young** people affected and focuses on hate crime, violence against women, domestic abuse and sexual violence, sport and public transport, as well as looking at housing and health services. Discusses how to address trans equality in the workplace and how to eliminate discrimination, harassment and victimisation.

Ref No: B44347

House of Commons Women and Equalities Committee

Transgender equality: first report of session 2015–16 (HC 390)

(might be relevant, would need to see full article to pull out info)

The Stationery Office (TSO), PO Box 29, Norwich, NR3 1GN

(Report available on the internet at: <http://ow.ly/X2TDG>)

2016 Pages: 98 Price: na ISBN:

Presents the outcome of the House of Commons Women and Equalities Committee's inquiry into equality issues affecting transgender people. Describes the cross-government strategy on advancing transgender equality. Discusses issues relating to the Gender Recognition Act 2004 and Equality Act 2010. Considers general and specific NHS services relating to transgender patients. Examines the ways in which everyday transphobia is being tackled. Provides

conclusions and recommendations covering the issues addressed. Highlights key findings, including: high levels of transphobia are experienced by individuals on a daily basis, with serious consequences; the Gender Recognition Act was pioneering but is now outdated, as are the terms used in the Equality Act; the NHS is letting transgender people down and failing in its legal duty; and, across the board, government departments are struggling to support transgender people effectively.

Ref No: A58279

Gregor, Claire; Davidson, Sarah; Hingley-Jones, Helen

The experience of gender dysphoria for pre-pubescent children and their families: a review of the literature, IN Child and Family Social Work, Vol 21 No 3 Aug 2016, pp339-346

(might be relevant, would need to see full article to pull out info)

Journal article

2016

Pages: 7

ISBN:

Provides an overview of gender dysphoria, current research in the field and theoretical paradigms, drawing on the results of a literature review. Explains that gender dysphoria involves a child having a gender identity that does not match their biological identity and, despite recent sensationalised interest in the popular media, remains poorly understood. Provides an overview of gender dysphoria and considers diagnostic criteria. Discusses the causes of gender identity issues. Considers the issues faced in parenting a child with gender dysphoria and ways of promoting understanding and better practice by social workers with families dealing with this issue.

Title: Trans people's experiences of mental health and gender identity services: A UK study. (can pull key facts from abstract first)

Author: Ellis, Sonja J.; Bailey, Louis; McNeil, Jay

Source: Journal of Gay & Lesbian Mental Health 2015; 19(1): 4-20

Publication Details:United Kingdom; US : Taylor & Francis; Haworth Press Year of Publication: 2015 ISSN: 1935-9705; 1935-9713

Subject: Client Attitudes; Clinics; transgender

Abstract: Drawing on survey data from a UK study of trans people and mental health, the study presented here reports on the experiences of trans people in two health care settings: mental health services and gender identity clinics. An analysis of the primarily qualitative data indicates that in these settings practitioners tend to be poorly informed about trans issues and the realities of trans people's lives. The key observations of this study are that untreated gender dysphoria (due to delays or refusals of treatment), unnecessary and intrusive questioning/tests, prejudicial attitudes by service providers, and restrictive treatment pathways, all contribute to minority stress which is detrimental to the mental health and well-being of trans people. (PsycINFO Database Record (c) 2016 APA, all rights reserved)

Title: Transgender youth: Current concepts (*can pull key facts from abstract first*)

Author: Rosenthal S.M.,(Rosenthal) Division of Pediatric Endocrinology, Child and Adolescent Gender Center, Benioff Children's Hospital, University of California San Francisco, San Francisco, CA, United States

Source: Annals of Pediatric Endocrinology and Metabolism 2016; 21(4): 185-192

Year of Publication: 2016 ISSN: 2287-1012 Type: Journal: Review Source: OVID EMBASE

Description: In many countries throughout the world, increasing numbers of gender nonconforming/transgender youth are seeking medical services to enable the development of physical characteristics consistent with their experienced gender. Such medical services include use of agents to block endogenous puberty at Tanner stage II with subsequent use of cross-sex hormones, and are based on longitudinal studies demonstrating that those individuals who were first identified as gender dysphoric in early or middle childhood and continue to meet the mental health criteria for being transgender at early puberty are likely to be transgender as adults. This review addresses terms and definitions applicable to gender nonconforming youth, studies that shed light on the biologic determinants of gender identity, current clinical practice guidelines for transgender youth, challenges to optimal care, and priorities for research. Copyright © 2016 Annals of Pediatric Endocrinology & Metabolism.

Title: Gender identity disorder: An emerging problem for pediatricians. (*can pull key facts from abstract first*)

Author: Meyer, Walter J. III

Source: Pediatrics 2012; 129(3): 571-573

Publication Details:US; : American Academy of Pediatrics; Year of Publication: 2012

Abstract: Comments on the articles by Norman P. Spack et al. (see record [rid]2012-09899-012[/rid]) & Andrea L. Roberts et al. (see record [rid]2012-09899-011[/rid]). Combining the relatively high prevalence of cross-gender behavior with widespread information in the public domain concerning the availability of a new early treatment using puberty blocking hormones has produced a rapid increase in the number of referrals, as noted in the paper by Spack et al. The use of puberty hormone blocking agents outlined by Spack et al. provides an extension of the decision time. I agree with Spack et al that the stage of puberty, not the age of the child, should be the determining factor of when to begin medications to block puberty. The paper of Roberts et al. raises the question of the association of gender identity disorder (GID) with significant psychological and psychiatric problems such as abuse, posttraumatic stress disorder (PTSD), and depression. The article by Roberts et al. assumed that the gender nonconformity predates the abuse but states clearly they cannot prove it is a causal effect of abuse. As indicated by Roberts et al. gender nonconformity should be monitored for all types of abuse as well as poor self esteem, depression, suicidality, anxiety symptoms, and body dissatisfaction. (PsycINFO Database Record (c) 2016 APA, all rights reserved)

Title: Trans person-centred care is key (*might be relevant, would need to see full article to pull out info*)

Author: Hillyer, Sami

Source: Nursing Standard (2014+), Feb 1, 2017, Vol.31(23), p.36 [Peer Reviewed Journal]

Abstract: puberty blockers that prevent hormone development. These... . Children and young people cannot access gender... the untruth that young transgender

Subjects: Gays & Lesbians, gender, Transgender persons,

Title: Transgender patients: providing sensitive care (Online access) (*might be relevant, would need to see full article to pull out info*)

Author: Hyderi, Abbas ; Angel, Joseph ; Madison, Morgan ; Perry, L. Amanda ; Hagshenas, Leila

Subjects: Hormone Replacement Therapy ; Mental Health ; Transgender People

Source: Clinician Reviews, 2017, Vol.27(2), p.28(8)

Identifier: ISSN: 1052-0627

Title: Transgender and anxiety: A comparative study between transgender people and the general population. (*can pull key facts from abstract first*)

Author: Bouman, Walter Pierre; Claes, Laurence; Brewin, Nicky; Crawford, John R.; Millet, Nessa; Fernandez-Aranda, Fernando; Arcelus, Jon;

Source: International Journal of Transgenderism, Vol 18(1), Jan, 2017 pp. 16-26. Publisher: Taylor & Francis; [Journal Article]

Abstract: Background: Anxiety disorders pose serious public health problems. The data available on anxiety disorders in the transgender population is limited by the small numbers, the lack of a matched controlled population and the selection of a nonhomogenous group of transgender people. Aims: The aims of the study were (1) to determine anxiety symptomatology (based on the HADS) in a nontreated transgender population and to compare it to a general population sample matched by age and gender; (2) to investigate the predictive role of specific variables, including experienced gender, self-esteem, victimization, social support, interpersonal functioning, and cross-sex hormone use regarding levels of anxiety symptomatology; and (3) to investigate differences in anxiety symptomatology between transgender people on cross-sex hormone treatment and not on hormone treatment. Methods: A total of 913 individuals who self-identified as transgender attending a transgender health service during a 3-year period agreed to participate. For the first aim of the study, 592 transgender people not on treatment were matched by age and gender, with 3,816 people from the general population. For the second and third aim, the whole

transgender population was included. Measurements: Sociodemographic variables and measures of depression and anxiety (HADS), self-esteem (RSE), victimization (ETS), social support (MSPSS), and interpersonal functioning (IIP-32). Results: Compared with the general population transgender people had a nearly threefold increased risk of probable anxiety disorder (all p < .05). Low self-esteem and interpersonal functioning were found to be significant predictors of anxiety symptoms. Trans women on treatment with cross-sex hormones were found to have lower levels of anxiety disorder symptomatology. Conclusions: Transgender people (particularly trans males) have higher levels of anxiety symptoms suggestive of possible anxiety disorders compared to the general population. The findings that self-esteem, interpersonal functioning, and hormone treatment are associated with lower levels of anxiety symptoms indicate the need for clinical interventions targeting self-esteem and interpersonal difficulties and highlight the importance of quick access to transgender health services. (PsycINFO Database Record (c) 2017 APA, all rights reserved)

Title: The mental health of transgender youth: Advances in understanding. (can pull key facts from abstract first)

Authors: Connolly, Maureen D.; Zervos, Marcus J.; Barone, Charles J. II; Johnson, Christine C.; Joseph, Christine L. M.;

Source: Journal of Adolescent Health, Vol 59(5), Nov, 2016 pp. 489-495. Publisher: Elsevier Science; [Journal Article]

Abstract: This review provides an update on the growing body of research related to the mental health of transgender youth that has emerged since the 2011 publication of the Institute of Medicine report on the health of lesbian, gay, bisexual, and transgender people. The databases PubMed and Ovid Medline were searched for studies that were published from January 2011 to March 2016 in English. The following search terms were used: transgender, gender nonconforming, gender minority, gender queer, and gender dysphoria. Age limits included the terms youth, child, children, teenager, and adolescent. The combined search produced 654 articles of potential relevance. The resulting abstracts went through a tiered elimination system, and the remaining 15 articles, which presented quantitative data related to the prevalence of transgender youth and their mental health, were included in the present review. In addition to providing new estimates of the number of young people who identify as transgender (.17%–1.3%), studies since 2011 have shown that transgender youth have higher rates of depression, suicidality and self-harm, and eating disorders when compared with their peers. Gender-affirming medical therapy and supported social transition in childhood have been shown to correlate with improved psychological functioning for gender-variant children and adolescents. Recent research has demonstrated increased rates of psychiatric morbidity among transgender youth compared to their peers. Future work is needed to understand those youth who identify as gender nonbinary, improve methods to capture and understand diverse gender identities and related health disparities, and delineate the social determinants of such disparities. (PsycINFO Database Record (c) 2016 APA, all rights reserved)

Internet resources

Trans youth may have improved access to puberty blockers

<http://www.foxnews.com/health/2015/11/03/trans-youth-may-have-improved-access-to-puberty-blockers.html>

TransActive Gender Centre

<https://www.transactiveonline.org/resources/youth/puberty-blockers.php>

Puberty blocker for children considering sex change

<http://www.telegraph.co.uk/news/health/news/8454002/Puberty-blocker-for-children-considering-sex-change.html>

Blocking Puberty in transgender youth

<http://endocrinenews.endocrine.org/blocking-puberty-in-transgender-youth/>

Puberty blockers and hormones for transgender youth

<http://www.kidsinthehouse.com/teenager/health-and-development/puberty/puberty-blockers-and-hormones-for-transgender-youth>

When Transgender Kids Transition, Medical Risks are Both Known and Unknown

<http://www.pbs.org/wqbh/frontline/article/when-transgender-kids-transition-medical-risks-are-both-known-and-unknown/>

What Parents Should Know About Giving Hormones To Trans Kids

<http://thefederalist.com/2015/02/02/what-parents-should-know-about-giving-hormones-to-trans-kids/>

NY will soon make it easier for trans youths to delay puberty

<http://www.pbs.org/newshour/updates/transgender-youth-puberty-blockers/>