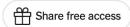
The New York Times

NEWSLETTER Opinion Today

OPINION

The Complexities of Transgender Care for Kids

Feb. 2, 2024









By <u>Kathleen Kingsbury</u> Opinion Editor

Being a child or teenager today — and being a parent trying to raise a happy, healthy individual — sometimes feels like the hardest thing imaginable. There is so much information and advice and so much counterinformation and counteradvice that can be applied to our personal choices at any given time.

Those of us raising tweens find that kids can have more questions and demand more answers than many of us did growing up. The old "Father Knows Best" and "Ask Mom" models are outdated for a lot of children today; they have both less patience and more certainty at their age than my generation did, and they now often find new peers and influences from TikTok, YouTube and elsewhere on the internet as they try to figure things out for themselves.

Fortunately, this has led to a great deal of healthy freedom of thought and freedom of expression — a deep curiosity about themselves and the world. I'm

thinking in particular about kids who identify as transgender. When I was growing up in the 1990s, I didn't know any peers who were trans; surely that's because if I did know kids with gender dysphoria, they didn't feel comfortable sharing the truth about themselves, for many reasons. That is different today, thankfully, and it's giving more trans young people a greater chance at living fuller lives.

There are also tweens and teenagers who think they are trans but, in time, realize they are not. This is a very small population. Overall, by best estimates, about 1.6 million people in the United States identify as transgender, of which about 300,000 are ages 13 to 17. That second figure has grown significantly in the past few years, but among those ages 13 and older, the total population identifying as trans is still far less than 1 percent. And within that population is a subset of youths who identify as trans and come to change their minds — sometimes with painful consequences.

My colleague Pamela Paul recently spent a lot of time talking to several of these young people about how and why they once thought of themselves as trans and then went through the experience of what's called detransitioning. Pamela, who writes often about society and culture, including issues of gender identity, wanted to listen to and learn about the questions, anxieties and experiences that these young people and their families have grappled with.

Reading <u>Pamela's column</u>, I was struck, too, by the disagreement among medical experts on how best to care for patients with gender dysphoria. The World Health Organization recently noted, for example, that "the evidence base for children and adolescents is limited and variable regarding the longer-term outcomes of gender-affirming care for children and adolescents."

Yet what stuck with me more was what one young person who had detransitioned told Pamela: "What should be a medical and psychological issue has been morphed into a political one. It's a mess."

While I am not trans, this remark resonated strongly with me as a mother; there is so much pressure and confusion in the lives of children and parents today and a desire on all of our parts to get the best information and care when we need it. The idea of medical and mental health treatment taking on political dimensions can only add to the pressure and confusion in people's lives and cloud the decisions we all must ultimately make for ourselves.

Given the state legislative fights over trans Americans and their civil liberties and access to medical and psychological care, we have
published many columns
 and guest essays from health professionals and activists on issues affecting trans people, as well as a focus group last year hearing from trans Americans
 about their lives. In my experience, trans issues are a topic that inspires a range of partisans, all arguing that their point of view is correct and often demonizing people who don't agree with them. The voices of the people most directly affected get lost in the arguing.

It's a loss for real conversation, especially as more and more of us want to know more about the journey that some people have been on with gender identity. If we listen to trans kids and adults talk about their experiences and hopes and if we listen to people who once thought they were trans and now say they are not, I think we will only learn more and approach these struggles and questions with a greater degree of humanity, nuance and empathy.

Kathleen Kingsbury is the Opinion editor of The New York Times, overseeing the editorial board and the Opinion section. Previously she was the deputy editorial page editor. She joined The Times in 2017 from The Boston Globe, where she served as managing editor for digital. She received the 2015 Pulitzer Prize for distinguished editorial writing. @katiekings

https://www.nytimes.com/2024/02/02/opinion/transgender-care.html?action=click&module=RelatedLinks&pgtype=Article

I remember when Elizabeth Lofton launched the False Memory Syndrome movement. The backlash! Despite the scientific evidence for the shakiness of memory—if this was fully acknowledged, our courts would be thrown into further disarray; a researcher at even little University of Regina contributed compelling research here before getting himself into professional misconduct trouble—Dr. Lofton was decried by all the "recovered memories" (of sexual and traumatic abuse) advocates for furnishing villains with the means for claiming "reasonable doubt" to escape from justice. Agendas! How we are willing to sacrifice new victims (e.g. those wrongly transgendered, or attacked for detransitioning) for the sake of advancing and protecting a "greater" cause (the needs and rights of those who truly do have "gender dysphoria").