



Mum, Dad, I'm  
**TRANS**

What can I do as a parent?

## Mum, Dad, I'm Trans

Your child is going through puberty, a confusing time for many. Adolescents are often insecure and can feel unhappy with themselves and their changing bodies, as well as about their inner world. Your child is probably also wondering: who am I really? This requires a lot of attention, care and love from you.

Suppose your daughter comes home one day and tells you “I'm not a girl, I don't want to become a woman. I feel like a boy.” Or your son says: “I'm not a boy, I don't want to be a man. My body doesn't suit me.”

## Development

An increasing number of young people are struggling with the problem of gender dysphoria: their gender identity (the feeling of being a boy or a girl) and their biological sex do not seem to match. The number of cases being seen at specialized centers, often called “gender clinics,” has increased exponentially in recent years. What is striking is that among adolescents it mainly concerns girls, while in the past it mainly concerned boys.

## Help offered

Research shows that in up to 98% of cases, gender dysphoria disappears spontaneously when it is neither encouraged nor dismissed by the social environment (e.g. caregivers, teachers, friends, family).

However, all over the world, Belgium and France included, early intervention is increasingly common. Already in primary school or at the beginning of puberty, medications are recommended that block its natural course. This is presented as a logical and sensible step to put puberty 'on pause' for a period of reflection and waiting. Its use is claimed to be reversible and without side effects. However, research is increasingly showing that puberty blockers have negative consequences, especially on bone density, brain development and subsequent sexuality (e.g. they can cause anorgasmia or infertility). Furthermore, we know that young people taking puberty blockers almost always follow up with gender-affirming hormones, while others with the same questions, but who don't take these medications, often see their gender dysphoria spontaneously evolve into other concerns— typical of adolescence.

Parents are advised to act in accordance with their child's dysphoric feelings, which means accepting the “trans” reorientation at home and at school. But here again, the young person is on a slippery psychological slope: this treatment and this parental attitude leave little room for a return.

## Hormonal treatments

After treatment with puberty blockers, or if the young person presents after puberty, cross-sex hormones, i.e. the sex hormones of the opposite sex are prescribed. These have to be taken for life as the body cannot produce them itself. Many of the effects of cross-hormones are permanent, such as hair growth, a change in voice, or enlargement of the clitoris in girls. We also know that cross-sex hormones can increase the risk of cardiovascular disease.

## Surgery

Before or after adulthood, depending on the country, girls' breasts are sometimes surgically removed. What then follows, and this for both sexes, are possible "sex change" surgeries: the genitals are transformed into a neo-vagina for boys who identify as girls and into a neo-penis for girls who identify as boys. These interventions require constant care afterwards and the risk of complications is high.

So, there are plenty of reasons why, as a parent, you don't have to simply adopt a medical and psychological transition of your child based on a simple feeling at a certain point in their life.

## Transition does not solve all problems

- dysphoria is often associated with other psychological or even psychiatric problems. Sometimes it is simply low self-esteem in adolescence. It is therefore important to pay special attention to this first.

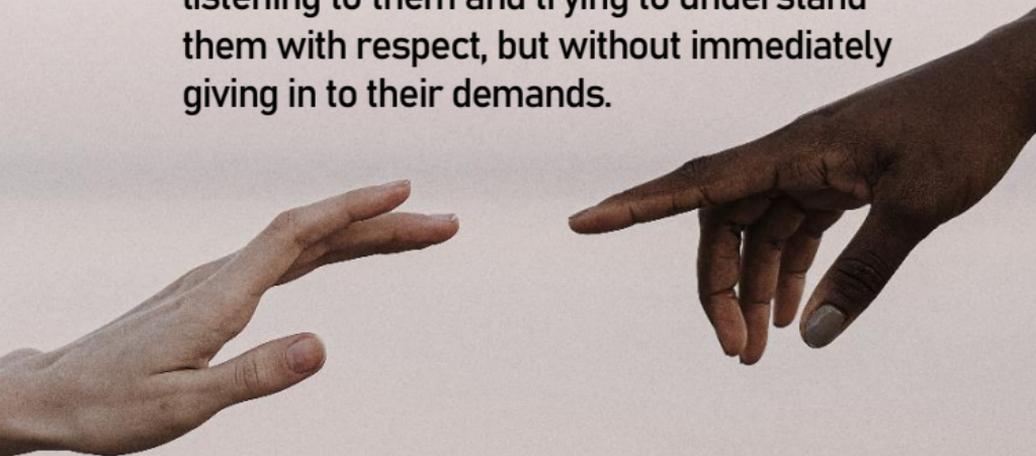
- Feelings cannot erase biological facts. And although cosmetic procedures, hormonal treatments and operations can make the body look different, it is never possible to change sex: a man cannot become a woman and a woman cannot become a man. Every cell in the body "informs" us about sex and the replacement genitals are just imitations which are not very functional during sexual intercourse. This means they are unlikely to enable physiological sexual pleasure and are not functional in reproduction.
- Since this exponential wave of "gender dysphoria", the number of detransitioners manifesting themselves on social networks has also increased very quickly, despite the fact that many wish to remain anonymous.

## The transition has long-term consequences

- A transition starts with the social "acceptance" of the environment, and so the young person ends up on the affirmative path. As a result, the young person will take medication and may also opt for surgical procedures. The hormones have to be taken for life.
- Very little research has been done on the long-term consequences of medication. We know that – in addition to risk of irreversible infertility, and a high risk of the inability to feel physiological sexual pleasure – they have serious side effects.

## What can you do?

- Take your child's feelings and personal questions seriously. Specifically, this means listening to them and trying to understand them with respect, but without immediately giving in to their demands.



- Talk to your child at every stage of their life, ask them how things are going at school and with their friends. Check the websites he or she visits.
- If your child shows persistent identity problems, first see an experienced professional, at a general mental health center or privately.
- In the family social space with your child, try to avoid discussions about first names and pronouns; do not change your usual behavior and offer physical outdoor activities that distract the child from these questions.
- Look for information together about gender dysphoria, its possible causes and treatments and its consequences.

- Social networks often have a catastrophic impact, in causing or encouraging gender dysphoria. Watch carefully what your child accesses on the internet and stop toxic sources.

## Your child cannot decide for himself

- Your teenager's brain is not yet fully matured. An adolescent cannot be sure of what he says, nor can he properly assess the long term, severe and partly irreversible consequences of a transition.
- As a parent, you are responsible for making decisions. This is called parental authority, which is exercised jointly by both parents. Only in the case of proven parental shortcomings are they replaced by society.

## Guideline

As a parent, it is important to keep an eye on what influences your child is being exposed to. At school, TV and the internet, the message is being sent that your sex is a choice. Most children do not think about the fact that they are a boy or a girl and do not wonder whether they were born in the wrong body. But with the huge media attention given to gender identity these days, they might be influenced to ask themselves these questions, in order to be noticed, to challenge authority, or because they falsely believe this is a solution to their problems of the moment.

With this leaflet, the support groups for parents with a gender dysphoric child, "Cry for Recognition" in Belgium and "Ypomoni" in France, offer just a few guidelines for parents facing this problem.

More information can be found on the following websites:

<https://cryforrecognition.be>

<https://ypomoni.org>

<https://observatoirepetitesirene.org>

## For more information

Send your email to:

For Belgium

- [info@cryforrecognition.be](mailto:info@cryforrecognition.be)
- [lapetitesirenedebelgique@hotmail.com](mailto:lapetitesirenedebelgique@hotmail.com)

For France

- [ypomoni@protonmail.com](mailto:ypomoni@protonmail.com)
- [observatoirelapetitesirene@gmail.com](mailto:observatoirelapetitesirene@gmail.com)

