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To cite this article: Cal Horton (2022): “I never wanted her to feel shame”: parent reflections on supporting a transgender child, *Journal of LGBT Youth*, DOI: [10.1080/19361653.2022.2034079](https://doi.org/10.1080/19361653.2022.2034079)

To link to this article: <https://doi.org/10.1080/19361653.2022.2034079>



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Published online: 09 Feb 2022.



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“I never wanted her to feel shame”: parent reflections on supporting a transgender child

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ABSTRACT

Growing numbers of trans children are being supported by their families in childhood, including support for a pre-pubertal social transition. Existing literature provides limited insights into how parents reflect upon and evaluate their experience of supporting a trans child’s social transition. This article draws upon qualitative semi-structured interviews with thirty parents who had supported thirty trans children to socially transition at an average age of seven years old. Data were analyzed through inductive thematic analysis, with five themes presented. 1) loss of control, and loss of security 2) feeling support for social transition was their only viable option 3) evaluating affirmation 4) the risks of transition, and the risks of rejection 5) and advice for other families to support their child. Overall, parents evaluated the benefits of social transition, describing it as protective for their child’s happiness and well-being. These experience-based parental insights on the positive outcomes of pre-pubertal social transition, hold relevance for institutional policy and practice toward pre-pubertal social transition, with implications for health services, courts, schools and social services.

ARTICLE HISTORY

Received 11 November 2021
Revised 20 January 2022
Accepted 21 January 2022

KEYWORDS

Parents; children; transgender; affirmation; well-being

Introduction

Being transgender is now recognized by the medical establishment as a non-pathological part of human diversity, with space for trans lives to be celebrated and normalized, as a valued and important part of our families and communities (AusPATH, 2021; World Health Organisation, 2018). A medical shift away from the problematisation and pathologisation of gender diversity, has significant implications for trans children, who until relatively recently would have been diagnosed with a ‘disordered’ identity, growing up with isolation, rejection and shame (Bryant, 2006, 2007; Gill-Peterson, 2018). Recent healthcare guidance has put this conceptual shift into practice, acknowledging the importance of affirmation and support, including

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in early childhood (Lopez et al., 2017; Oliphant et al., 2018; Rafferty et al. 2018; Telfer et al., 2018).

Across the globe, increasing numbers of trans children are experiencing parental support and affirmation in childhood (Galman, 2020; Pullen Sansfaçon et al., 2015, 2020; Roche, 2020). Parents of trans children report learning from stories exchanged, often in confidence, from other families with trans children; as well as through listening to and learning from the childhood experiences of trans adults (Galman, 2020; Pullen Sansfaçon et al., 2015, 2020; Roche, 2020). Insights from those with lived-experience of social transition have helped more families to find the confidence to support 'social transition' (Ehrensaft et al., 2018; Sherer, 2016). A social transition may include a shift in a child's name or pronoun, indicating the point at which family, school or community respect and validate a child's identity (Ehrensaft, 2020). 'Social transition involves something beyond gender non-conformity and speaks to a shift in lived gender identity' (Ashley, 2019, 679).

Research on trans children supported and affirmed in early childhood has demonstrated good levels of well-being amongst socially transitioned trans children, in stark contrast to the high levels of depression, self-harm and suicidal ideation commonly seen in trans youth (Olson et al., 2016). Research on the experiences of parents of trans children provide limited glimpses into parental support for pre-pubertal social transition, with an emphasis on parental journeys to becoming supportive, on factors influencing parental acceptance, and on challenges faced by parents advocating for their trans children (Katz-Wise et al., 2021; Neary, 2021; Pullen Sansfaçon et al., 2015, 2020; Riggs et al., 2020). Several such studies consider how intersecting axes of inequality and marginalization impact on parental capacity and ability to support and advocate for a trans child (Carlile et al., 2021; Neary, 2021; Pullen Sansfaçon et al., 2015, 2021; Rahilly, 2015). Insights into pre-pubertal social transition are to be found in books such as the US and Canada focused 'The Trans Generation', the US focused 'Histories of the Transgender Child' and the UK focused 'Gender Explorers', which examine child and family experiences, though without a specific examination of parental decision making (Gill-Peterson, 2018; Roche, 2020; Travers, 2018). Additional perspectives can be found in parental memoirs, particularly by mothers of trans girls, including 'How to be a Girl' from the US, and 'About a Girl' from Australia (Mack, 2021; Robertson, 2019).

Within the academic literature, there is limited insight into how parents make decisions on supporting a pre-pubertal trans child, or on how parents, with hindsight, reflect on those decisions (Olson et al., 2019). This research brings a unique and important perspective to the topic of

pre-pubertal social transition. It focuses on a cohort of parents who have supported a trans child to socially transition under the age of eleven in the UK, a cohort with extensive experience-based knowledge and insight into this topic. This research takes place at a time of increased media-driven backlash against trans rights in the UK, with concerted attacks on trans children's rights and well-being, including legal challenges to trans adolescent healthcare (Faye, 2021; Jackson, 2020). At this time of precarity for trans children, this research listens to parental insights on how they navigated decision making related to social transition, and how, an average of four years later, parents reflect upon those decisions.

Materials and methods

Theoretical framework

The research is underpinned by a trans-emancipatory theoretical framework, building on wider work on emancipatory research (Noel, 2016). Here a trans-emancipatory framework is one that recognizes, and takes account of, the role of cisnormativity, and pathologisation of gender diversity, in upholding structural injustice (Wesp et al., 2019). Cisnormativity is the assumption that everyone is cisgender (not trans) or should be (Keo-Meier and Ehrensaft et al., 2018). Newbury (2013) discusses the ways in which structural or institutional cisnormativity permeates societies and institutions, invisible to most cis people, yet exacting harm on trans people, in structures and systems that were not designed to include trans lives. The research recognizes the negative impacts of cisnormativity on trans children, in research, as in society (Ansara & Hegarty, 2012). Herein the word 'trans' is used to include those who are binary-oriented as well as non-binary (Vincent, 2020). The research recognizes the continued legacy of past pathologisation of gender diversity, from decades where gender diversity was deemed a disorder, to be prevented or reformed (Bryant, 2006, 2007). The research is also cognizant of the intersectional barriers to trans-emancipation, recognizing overlapping and intersecting oppressions tied up in racism, classism, sexism, and inequality and that impede equality and justice (Gill-Peterson, 2018). The research maintains an ethical commitment to trans-emancipatory research, recognizing that gender diversity is neither pathological nor problematic, acknowledging that trans lives are equal to cis lives, and being attentive to cisnormativity or pathologisation of gender diversity within and across the research.

Research question

The existing literature provides limited insights from those with an experience-based perspective on supporting pre-pubertal social transition. Given

the importance of this topic for families and those working with trans children, this research explored the following research questions:

1. How do parents who have supported a child's social transition reflect upon their experience?
2. How do such parents evaluate the risks and benefits of pre-pubertal social transition, and what experience-informed advice do they have for other families?

Sample

Thirty parents were interviewed from across England, Scotland and Wales. Individualized demographic information is not presented, responding to participant requests for additional privacy, in a small, vulnerable and potentially identifiable cohort. 100% of interviewees were cis, 90% were white, 93% were female and 23% were disabled. 70% were aged 40–50 years old, and 10% were immigrants to the UK. Interviewees had a wide range of levels of household income, and a range of levels of education, with 20% reporting secondary education as their highest qualification, 37% reporting a graduate degree and 43% a post-graduate degree as their highest qualification. In terms of sexual orientation, the cohort was diverse, 60% of parental interviewees were heterosexual, 23% pansexual, 10% bisexual and 7% gay or lesbian. A majority of interviewees were white cisgender women. The parents interviewed shared experiences of 30 socially transitioned trans children (80% white), including 15 girls, 12 boys and 3 non-binary children. These children socially transitioned at an average age of 7 years old (range 3–10 years old). At time of parental interview, the trans children of these parents were on average age 11 years old (range 6–16 years old).

Study design

The research presented here is a portion of a wider PhD on cisnormativity, rights and well-being of trans children who socially transition pre-adolescence in the UK. The wider PhD included insights from children as well as from parents, though this specific article deals only with data from parents. The inclusion criteria for parent interviewees were i) being a parent or carer of a socially transitioned trans child in the UK ii) their child having socially transitioned under the age of eleven iii) their child currently being under age 16 (one child in the sample had just turned 16 by the time the interview took place). To recruit participants, details about the study were shared on closed online spaces in six UK support groups

for parents of trans children. None of these six support groups are actively trans-hostile, with group moderators ensuring the groups are a safe space away from transphobic discourse. Avoidance of advertisement on trans-hostile parenting fora was judged as unlikely to affect the sample, as trans-hostile parents would by definition not support a trans child's social transition under the age of eleven, and therefore would not fall into the cohort prioritized in this research. Additional interviewees were brought in via snowball sampling, through introduction from other members of these parent support groups. Access to hard-to-reach families and children was enabled by the author's positionality as a non-binary parent of a trans child, helping overcome trust related barriers to hearing from this cohort. The author is themselves a member of four of these closed online spaces and posted there directly, with other parents sharing details on two other groups. No incentive or token of appreciation was provided to interviewees, beyond the opportunity to anonymously share their experiences with broader audiences. Research participants received a project information sheet in advance, outlining the purpose of the research, their rights, and how their data would be used, with all participants signing a consent form indicating their willingness to participate and have their data included in this research and associated publications. After interview each interviewee completed a short demographic survey.

Data collection

Interviews were conducted remotely via Microsoft Teams during the period December 2020 to September 2021. Semi-structured interviews, covering broad topics including healthcare, education and families, lasted 1–3 hours (average 2 hours). This article considers a sub-set of the wider data corpus, focusing on portions of the interviews discussing social transition, and specifically portions of interviews discussing parental reflections on their experiences of supporting a child's social transition. Key questions relating to parental reflections on social transition included: 'Can you tell me about your thinking and decision making related to social transition?', 'How do you reflect upon those decisions now?', 'What do you think are the risks or benefits of social transition for your child?' Interviews were recorded, stored securely on an encrypted platform, and transcribed by the author. Transcripts were checked against the recording, with anonymised transcripts uploaded into NVivo.

Data analysis

Data were analyzed through inductive reflexive thematic analysis (Braun & Clarke, 2006), to understand parental reflections on their experience supporting a pre-pubertal social transition, with data-driven development

of codes and themes. The analysis comprised re-reading each transcript to become familiar with the data, generation of initial codes through line-by-line or section-by-section coding, coding diversely without pre-conceived coding categories. The initial codes were then reviewed to identify broader themes, with all extracts for each theme collated and re-read. The initial themes were then reviewed, and themes and sub-themes revised to ensure they were internally coherent, consistent, distinctive, and accurately capture the dataset. Each sub-theme was analyzed, and interpreted, including with reference to existing literature. Indicative quotations from a range of interviewees were selected to accurately illustrate each sub-theme. Efforts were made to include multiple quotations in this article, with this decision informed by the underpinning emancipatory theoretical perspective. A number of interviewees expressed a hope that their voices would be shared directly, noting a lack of voice of parents of socially transitioned trans children in the literature or wider discourse, and emphasizing the privacy and safety concerns that limit their ability to safely share their experiences in other fora. The analysis accompanying the quotations is recognized as the author's interpretation, acknowledging the role of any researcher in actively interpreting data (Braun & Clarke, 2006; Charmaz, 2006).

Ethics

The research received ethical approval from the author's university. The research built in ethical best practices for trans-related research (Adams et al., 2017; International Transgender Health Forum (ITHF), 2019; Vincent, 2018). Participant anonymity was a high priority, with interviewees further emphasizing the importance of individual quotes not being identifiable, given the vulnerable and small population that this research cohort is taken from. For this reason, joint with research participants, it was agreed to go a step beyond the usual criteria for anonymity, and to avoid linking individual quotes to specific pseudonyms, as well as omitting child ages from specific parental quotes, thereby preventing patchwork identification. This particular cohort places a high level of importance on privacy and safety, and a strong duty of care was upheld to respecting interviewee preferences in how their data were shared.

Results

Parents reflected upon their experiences of supporting their child's social transition. Five themes are presented: 1) loss of control, and loss of security 2) feeling support for social transition was their only viable option 3) evaluating affirmation 4) the risks of transition, and the risks of rejection 5) advice for other families to support their child.

1. Loss of control, loss of security

A number of parents described how moves toward affirmation were scary for them, even though they felt it was the right step for their child.

We just knew, in our guts, it was the right thing to do. Even though it was the terrifying, scary thing to do. It was the right thing to do for her.

Several parents described how each step of affirmation felt like a step into the unknown, with the parents reluctant and fearful of each step, and only able to see the positive impacts on the other side.

I think it's a step thing. I think whenever there is a significant and clear change, that's always hard. So, the cutting of the hair was very, it's a step. The changing of the name was a step. The transition in school was a step ... and looking back ... of course, it was the right thing to do. But it was hard at the time.

Some parents referenced how following a trans child's lead, affirming them in childhood, can feel like a loss of parental control, and a step into the unknown, with the unknown feeling unsafe and threatening. One parent highlighted, that faced with a child asking for affirmation, parental control is illusionary, and that the real choice may be between a happy trans child, or a sad trans child.

I would say make a child happy, you know, at all costs, listen to your child, ... there's nothing you can do to make the kid trans, and there's nothing you can do to make your kid not trans if that's who they are - the only thing you can do is create an unhappy trans kid, or a sad trans kid. That's the only control you have.

One parent described how supporting a trans child feels like a step away from the comfort and safety of the known, a step that takes parental courage to take.

That point at which your child comes out to you, at that point, all you can see is the fear of the future, but you haven't yet experienced the happiness of your child. So, it's this precipice that you know, you have to, you have to have the courage to jump off of with, holding your child's hand, you know, they've been brave enough to tell you, now, you have to be brave enough to take this leap with them. And, and I can promise you that your child will thank you, and your child will be happier if you do that. But it is, it's really, it's a leap of faith in themselves, and a leap of faith in their child. It does take courage.

2. Feeling support for social transition was the only viable option

A majority of parents emphasized that they had reached a point where they did not see affirmation as a choice, but as their only positive option.

I feel that we couldn't have not done it. She would have been miserable. So, it's not like I think, oh, this was a great thing. But I'd, we wouldn't have had a happy child had we not done it. So, it feels like we had to.

If your child is insistent, then what other choice do you have really? ... I do think they've experienced that acceptance and that that has benefited them.

It felt like something that was an unstoppable momentum that needed to happen at that time.

Parents had come to understand that not supporting a social transition, was forcing their child to pretend to be someone they were not.

It was just calling what he wanted, he wanted to be called a boy's name... It wasn't going to work for him, to simply pretend and to carry on as he was.

Because she was so unhappy. I guess, we could have just delayed it for another year, but we would have had a very, very unhappy child. I don't think we could have avoided it forever.

Unless you see the effect it's having on the child, you don't, you know, there's no doubt in my mind that this was needed. That he would, he would be miserable, now, if we had forced him to continue as he was.

Others were prompted to support when they realized the extent of their child's distress.

That was the point where I was like, I can't keep making this child go to school in boy's uniforms. It was a struggle every day. And I think that was the turning point for me.

I felt quite calm about it once we decided that we needed to do it, because at the end of the day, when your child, when you're being told that your child is having suicide ideation, the idea of them changing their name suddenly becomes much less upsetting. Because you've got something to compare it to, which is actually bad.

3. Evaluating affirmation

Almost all the parents in this sample talked about their child's improved happiness after social transition, and regarded affirming their child as critical in protecting their child's happiness and well-being.

I think, as parents, we see, we get to look through that window more than most people do. And we see the distress, and we see the unhappiness and the frustration with 'Why do these people keep calling me the wrong thing? You know, can't they see?'

Well, I think if you're a parent, and you see your child in distress, you know, a little child feeling like they don't want to live, and that you can, that can stop, by you just saying, Okay, wear what you want, we'll call you [Name]. You know, it's literally, you know, how could you live? How could you tell your child that that's wrong? She was so precious, I just wanted her to be happy, and to want to live, you know?

So, for me, it's about making sure that I don't do any damage to my child emotionally. ... my main objective is that they are - have good self-esteem, they're happy.

Reflecting on the benefits of acceptance for their child, a majority of parents were categorical that affirmation had been a positive thing for their child.

I think it was the best thing to happen to my child.... And for everybody to know that this is who she is - it was definitely the right thing for her to do.

It's the best thing for her. And it's the best thing for her mental health.... In terms of like, is this the right thing for [Child]? Yeah. Hundred percent.

An improvement in their child's current happiness was a key reassurance that affirmation was the right approach.

So, when you see that enormous change in your child, and you just know that what you're doing is right for them. And you don't care what barriers you face when that's, when that's what you've got, living with, you know, a happy child, that's all we want.

Every kind of step we took towards affirming her just felt right.

Several parents emphasized the importance of children knowing that they have their parents' unconditional affirmation and acceptance.

If you're tuned in to your child, and you're listening to your child, you really can't go very far wrong. And that kind of mantra we had in our head of, well, you know, even if she changes her mind, we've shown that we'll support and love regardless, and that's never a bad message for a child to grow up with. You know, and even if she changed her mind now, next week, next month, next year. All of our kids have grown up knowing that, you know, they're loved and supported for who they are. And that, that can't ever be wrong.

4. Risks of transition, risks of rejection

Parents were asked to share reflections on what they saw as the risks of supporting a social transition. Most outright rejected the idea that there was any risk associated with accepting their child.

100% of, no harm has ever come of showing somebody unconditional acceptance...I don't think there are any risks.

Instead, most parents emphasized the risks inherent in not supporting trans children.

The risk was that my child was unhappy. The risk was that my child felt unaccepted.

I think for me, why would I make him live his childhood feeling unhappy with who people see him as? Why would I do that? I'm not gonna make him live repressed and unhappy.

Several parents noted shame as an important risk they wanted to protect their child from.

I don't see what benefit can come of telling them that they can't do that. Because it's, it could be shame inducing.

Other families shared their views on the negatives that they had seen in families where children's transition was blocked.

I know people who have allowed their children to be girls at home, but boys at school, because, that suits them, but it is like, I accept you, I accept you at home, but I'm embarrassed for you to be yourself in the world. That's not a great message for a child... I never wanted her to feel shame about who she is.

Some cis parents described having greater appreciation of the risks of rejecting their child, from talking with trans adults about their childhood experiences.

You just have to talk to some trans adults, and listen to them ... because a lot of trans adults will talk about the trauma of being forced not to be transgender. You know, it didn't change them, it just gave them mental health scars.

Several parents expressed guilt about not understanding their child quickly enough.

And you know, I still feel tremendous guilt that we that we didn't see her for so long.

You know, it's - six is still really, really young. But I still feel tremendous guilt that she was trying to communicate to us all that time, that we, and we didn't get that.

5. Advice for other families to support their child

Parents recommended other families support and affirm their trans children, prioritizing their current happiness.

I think it's the best thing to do. I truly believe it's the best thing to do for a child. And if they change their mind, doesn't matter, does it? You know, they've been happy for that period. So, yeah, I can't see why anyone would not do it.

I just want him safe and well and happy. And if us accepting this does that, well, then why wouldn't we?

There was consensus from all interviewees that the social transition had been a positive thing for their child, and that they would recommend prompt affirmation to other families with trans children.

I'd do it all the same again, just quick and, quick and sharp, just do it.

A number of parents referenced negative media and societal discourses surrounding pre-pubertal trans children's social transition. Several

interviewees commented on where they felt those critiques failed to understand their situation.

They haven't seen that impact of, of a child who's desperately sad and angry all the time - who's not participating in life, who's not - yeah who's not participating in life, that, that's the clearest I can put it really, and allowing her to socially transition and be who she was, set her free - it allowed her to fully participate in life. And, again, nothing's irreversible. It was hair, and clothes and names, all of which could have reversed at any time.

Parents who had experienced supporting a trans child, felt strongly that listening to children, respecting them, accepting them, and following their lead, is hugely important.

I think by the time they come to you and ask that, the chances are they've been through enough shit. And the least you can do is support them. As a parent, that's literally your job.

I mean, I would just say, listen, listen to what your child's saying. Don't brush it under the carpet. Don't make them feel ashamed or don't ostracise them for them telling you who they truly are, and support them.

Parents within this sample were unanimous in their perception that social transition had been pivotal and beneficial for their child.

The only thing that I'd like to say, is that it's an absolute vital and pivotal moment for it to happen for a trans child...It's been one of the best things that happened for us and [Child] - the happiness that it has brought.

Discussion

Parents reflected upon their experiences of supporting a trans child's social transition. Parents spoke of a lack of control and a loss of security as their life moved in a direction they had not anticipated, and did not feel prepared for. This finding resonates with other qualitative research on the challenges parents of trans children can encounter (Pullen Sansfaçon et al., 2015), as well as echoing literature on parental experiences of 'ambiguous loss' (Bartholomaeus & Riggs, 2017).

Many parents described support for their child's social transition as the only positive option available to them, with parents reluctantly and fearfully taking that step. This finding aligns with other studies showing social transition is driven by trans children rather than by parents (Olson et al., 2019; Rae et al., 2019). It illustrates how parents, whose lives and worldviews are shaped by cisnormativity (Newbury, 2011; Serano, 2011), can be reluctant or resistant to embracing 'trans possibilities' (Pearce, 2021). These findings emphasize the support parents may require, to overcome their own cisnormativity, to relinquish 'control', and to become open to showing love, support and genuine acceptance of trans children.

Parents within this sample also evaluated the benefits of social transition, describing it as protective for their child's happiness and well-being. Parents rejected any suggestion that supporting a pre-pubertal social transition was risky, instead emphasizing the risks of continuing to reject their child. Parents reflected upon advice for other families, emphasizing how positive it had been for their child. Parents were unanimous in recommending other parents to follow their child's lead, affirming them in the present, perceiving this as safeguarding their child's well-being, happiness and self-esteem. These parental reflections chime with existing child-focused quantitative research on the positive mental health of socially transitioned trans children (Durwood et al., 2017; Olson et al., 2016) and existing qualitative insights into parental experiences of social transition (Kovalanka et al., 2014). These findings also reinforce retrospective research on the negative mental health toll of childhood rejection, drawn from research with trans adults and trans youth (Ehrensaft et al., 2018; Katz-Wise et al., 2018; Priest, 2019; Turban et al., 2020; Wallace & Russell, 2013).

This research provides a unique addition to the literature, being the first study to explore how parents with experience-based insights navigate and evaluate the risks and benefits of pre-pubertal social transition. One limitation of this research is the exclusive focus on parental reflections, offering a partial and limited perspective, without inclusion of child perspectives. Further research, including work by this author (forthcoming), can incorporate children's own experience-informed perspectives on pre-pubertal social transition. Additional retrospective research could focus on the experiences and reflections of trans youth who had wanted their parents to support a pre-pubertal social transition, but did not receive this support. A second sample limitation is noted with interviewees being 90% white (and children 80% white), although this percentage is in keeping with other UK research, with the biggest national LGBT survey having 92.4% white respondents (Government Equalities Office, 2018). Further targeted research can examine experiences of parents of color, or young parents, exploring how intersecting axes of inequality or discrimination impact on parental capacity and ability to support a child's social transition. A further limitation is recognized with interviewed parents being 100% cis and 93% female, a profile that aligns with researcher experience of UK parent support groups being largely populated by cis women, and research from other countries that has similarly noted an over-representation of women in active roles advocating for (or against) their children (Kovalanka et al., 2014). Further research can explore fathers' experiences and perspectives, as well as considering the experiences of trans parents. Finally, the research sample includes 3 parents of non-binary children, who face distinct challenges due to a lack of institutional and social

recognition of non-binary identities (Paechter, Toft, and Carlile et al., 2021). Further research can examine the specific challenges faced by young non-binary children and their families.

The findings presented in this research, in combination with wider evidence on the protective health benefits of childhood affirmation, hold relevance for institutional policy and practice toward pre-pubertal social transition, with implications for health services, schools and social services. Obstacles to parental support for trans children, grounded in individual, societal and institutional cisnormativity, also reinforce the importance of parents finding support to help them to effectively affirm and advocate for a trans child (Riggs & Bartholomaeus, 2018). These areas where parents may need support in order to effectively protect the well-being of trans children have implications for professionals interacting with parents of trans children, including social workers, counselors, children's Gender Service clinicians, and primary healthcare providers including General Practitioners.

Disclosure statement

No potential conflict of interest was reported by the author.

Notes on contributor

Cal Horton undertakes research on the experiences of trans children who socially transition in pre-adolescence. They are interested in trans children and families' experiences navigating cisnormativity, pathologisation and Gender Minority Stress.

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