Working with Transgender Young People and their Families: A Critical Developmental Approach


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BOOK REVIEW


Working with Transgender Young People and their Families: A Critical Developmental Approach lives up to its title. Author Damien Riggs, a Professor in the College of Education, Psychology, and Social Work at Flinders University, South Australia, a psychotherapist and academic, critically examines the “received wisdom” about transgender young people and gender development in general, both in the public space and in the clinical literature.

His approach is critical, asking: What have we been taught? Is it correct? In what social and political contexts were existing theories developed and do they serve purposes in those contexts? How do we really know the things we think we know? What assumptions are we making? Are our direct personal observations consistent with existing theories or do our observations challenge those theories? There are always many ways to think and many ways to interpret a given set of observations. Riggs examines the literature from a gender-affirming perspective, challenging normative developmentalism—the notion that there is only one “correct” developmental pathway for all children—and describing alternate pathways of gender development for transgender young people. Identifying and challenging cisgenderism—“understood as the ideology that delegitimizes people’s own understandings of their genders and bodies” (p. 6)—he discusses how it is found in many forms, and how it is at odds with a genuinely affirming approach. In exploring how infants and small children observe and categorize others, in their drive to understand self and world, Riggs illustrates how our available language, in general, constrains thought and how cisgenderist language, in particular, reduces thought about gender to the binary.

His many illustrative case studies share two overlapping themes: that the child is worth listening to carefully and the child is the expert on his, her, or their own identity. These truths are evident to those of us who work therapeutically with children, but may be questioned, even denied, by many who take a traditional view of childhood. Riggs argues for the importance of listening with curiosity rather than with assumptions, eliciting the very individual and idiosyncratic language and experience of each child, giving insight into their internal world. When a parent listens openly, there is a greater potential for understanding between parent and child. Strongly held beliefs can impede the ability to see and hear one another; however, this problem can be observed, named, and gently challenged. Each case study illustrates one aspect of the author’s “GENDER” case formulation mnemonic, which provides a cohesive structure for the book, and highlights a range of helpful ways of working with families.

One of the most clinically useful concepts described is gender intensification prior to and during adolescence in which gendered socialization pressures become more intense and the range of acceptable gender expression narrows. Riggs notes that transgender youth may try hard to conform to those norms of the birth assigned gender during this time, experience increased gender incongruence and distress, and reach the point of deciding to disclose that they are, in fact, transgender. This is a common narrative among young people requesting gender affirming treatment, and may lead to confusion for families who see it as a sudden change from culturally typical cisgender expression. Recognizing this as the young person’s efforts to conform and fit in with peers could help families make sense of this developmental trajectory.

I was especially delighted by the final chapter, “Siblings, Grandparents, and Animal Companions.” These particular case studies illustrate how extended family members can be a source of support or, conversely, a source of distress; and how families can move toward greater understanding and acceptance. Further, Riggs recognizes that children and adolescents can have
intense, loving, reciprocal relationships with their pets, offering a safe haven and unconditional positive regard, and becoming especially important when human relationships are strained.

Though the text has many strengths, I wish more attention had been paid to how to work with parents’ fears about the possibility that gender identity could change over time, perhaps leading to regret about permanent bodily changes. Though difficult to predict or quantify on the basis of our current knowledge, discussion about the possibility of regret must be part of the process of informed consent. For a clinician, it is a delicate task to hold the affirming position that the young person’s experience is valid and that they know their own gender while simultaneously exploring the possibility that they might evolve differently in the future, for example, developing from a binary to a non-binary identity. His discussion of hormonal treatment is brief, and might have offered a clearer sense of an informed consent approach, weighing risks and benefits. Prioritizing the young person’s authentic knowledge of their own gender, Riggs does not explore in-depth how to work with those situations in which parents express concern that there may be influence from an admired peer or a sibling. While a broader discussion of these issues would have been useful, nevertheless, they could be expanded upon in future work.

Overall, I thoroughly enjoyed this book, and have already incorporated some of its lessons of observing and naming cisgenderism into my own clinical practice. Hopefully it will be of interest to all clinicians working with gender diverse young people and their families, especially those who wish to deepen their understanding of gender development.

The author’s opening premise succinctly captures his treatment philosophy: “Transgender young people exist, they know who they are, and they deserve all of the support and care we can give them” (p. vii).

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