

Pediatric Endocrinology Fact Sheet

Gender Terminology and Gender Dysphoria

What is gender identity?

Gender identity is a person's intrinsic sense of being male, female, a combination of male and female, or neither male or female. Gender identity can be the same as one's assigned sex at birth ("cis-gender") or may be different. *Transgender* or *gender incongruence* is an umbrella term for people whose gender identity and/or gender expression differs from what is typically associated with the sex they were assigned at birth. A *transgender male* refers to a person assigned a female sex at birth who identifies as male. A *transgender female* refers to a person assigned a male sex at birth who identifies as female. A *non-binary* gender identity refers to individuals who do not solely identify as male or female. There are numerous other terms for gender identities that may be more specific to an individual. Gender identity is not the same as *gender expression*, the physical and behavioral expression of one's gender (i.e. clothing, hair style) nor *sexual orientation*, whom one is romantically, or sexually attracted to.

What causes variability in gender identity?

In most individuals, there is no identifiable cause. Research is ongoing to identify possible contributing genetic, hormonal, environmental or psychological factors. Varying gender identities can be present in individuals with differences of sexual development (reproductive or sexual anatomy that is different than typical male or female); however, this is not a factor in most people who identify as transgender or non-binary.

What is gender dysphoria?

Gender dysphoria refers to the discomfort or distress resulting from the difference between a person's gender identity and the person's assigned sex, including the associated gender role and gender-specific body characteristics. Gender explorative behavior is common among young children and may be part of normal development. Children who meet the criteria for gender dysphoria may or may not continue to experience it into adolescence and adulthood. Some research shows that children who were persistent, insistent and consistent in their transgender gender identity and had intense symptoms and distress, were more likely to be transgender adults. Some transgender children may not experience gender dysphoria in childhood but may begin to do so with the occurrence of the physical changes of puberty. There are transgender adults who do not recall any gender dysphoria in childhood.

How is gender dysphoria diagnosed?

A qualified physician or mental health professional can help confirm the diagnosis of gender dysphoria. Gender dysphoria is currently a psychological diagnosis, although this is controversial as having any gender identity, including a transgender identity, is not a disorder.

Individuals with gender dysphoria may experience depression and anxiety frequently related to the underlying gender dysphoria. Transgender individuals may have an increased risk of self-harming behaviors, suicidal thoughts and suicide attempts due to the distress associated with the gender dysphoria, emphasizing the importance of mental health support. Importantly, family support has been shown to be a significant protective factor.

What kinds of treatment options are available to reduce gender dysphoria?

The goal of treatment options for transgender individuals is to support their affirmed gender identity and to improve the gender dysphoria. Unsupportive treatment approaches, such as conversion therapy, that attempt to change individuals from being transgender, is harmful and illegal in some states. Many transgender individuals desire to *transition* to their affirmed gender, while some do not. The ability to transition, if desired, is based on individual preference, safety, access to care, and may be limited by insurance coverage and cost.

There are different types of transition including social, medical and surgical. Transitioning has been associated with positive health outcomes by reducing gender dysphoria. *Social transition* refers to making others aware of one's gender identity through the use of a name and pronouns; wearing clothing of particular style or changing hair also are part of adopting affirmed gender. Social transition is completely reversible. *Medical transition* involves the use of medications such as to prevent progression of an unwanted puberty and/or gender-affirming hormones such as estrogen or testosterone. *Surgical transition* involves altering breasts, genitalia and other body parts. Some medical and surgical interventions are reversible while others result in changes that are irreversible. There is no "right" path for transgender youth, but all require support from family, community, and their health care professionals. It is important to discuss with an experienced provider different treatment options and treatment effects.

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