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Listening to Gender Variant Children: A Humanistic Strategy for Advocates

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I am very honored to be here. I want to thank the organizers of this wonderful conference, and I especially want to thank Gary Mallon.

I would also like to extend thanks to all of you here. As social service providers, the work you all are doing is, without a doubt, some of the most important and lifechanging work in our movement. There is a saying from the Talmud that I think is particularly appropriate for this audience - "He who destroys a life destroys the whole world; he who saves a life, saves the world entire." I like this quote so much because I think it captures something very true about the dimensions of the healing work you all are doing.

In the past, some people have worried that there may be a dichotomy or a conflict between helping individual clients on the one hand and creating social change on the other. But when it comes to working with LGBTQ children and youth, I believe the two inevitably go hand in hand. There is simply no way to help an individual child or young person in our community without also immediately confronting the pervasive social context of sexism, homophobia, and transphobia. Every time you stand up for the dignity and value of an individual young person who has been rejected and labeled as worthless, simply because of who he or she is, you are challenging that context and altering it for the better.

I know there are many threads in the work you all are doing, and many threads in our community. I want to pull out and focus on one of those threads today, because it is a topic that it is difficult and challenging for many people, even within our own communities, and one that deserves more of our attention. That is the topic of gender variant children, including some children who, from a very young age, in some cases as young as three or four years old, are telling us that their gender is different than the one into which they were born. Do we listen to those children? Or do we impose our own theories and preconceptions about who we think they are supposed to be?

Rather than addressing that question in the abstract, I would like to share four short stories with you. The first involves a woman named Camille. <u>She was born in</u>

<u>the 1950s.</u> She is a transsexual woman. She lives in San Francisco. Her parents put her in a psychiatric hospital in northern Michigan when she was six years old, because she <u>was naturally a very feminine boy and</u> would not stop saying that she was a girl. Camille never saw her parents again. She was kept in the hospital for over fifteen years. During that time, she was repeatedly subjected to electroshock treatments and given psychiatric medications in an effort to make her stop identifying as a girl and to "accept" being a male. Camille finally ran away from the hospital when she was in her early twenties. She made her way to San Francisco, where she has lived now for many years.

Camille is a very talented writer, dancer, and artist, and she is fiercely devoted to protecting other children from the violence and abuse that she suffered. She has worked with a number of organizations, including NCLR, GLMA, and PFLAG, to promote awareness and inclusion of gender variant children. Most recently, she designed and raised the funds to create what I believe is the first memorial to queer survivors of psychiatric abuse anywhere in the country and perhaps in the world. The memorial is located in San Francisco's new LGBT community center, which opened in 2002. It is a beautiful, stained glass skylight, with figures of floating children, very colorful and delicate and bright, because she wanted it to be an affirmation of transcendence and survival rather than suffering. Creating this memorial was very important to Camille because, as she has said, the only thing more damaging to her than the experience of being abused in the hospital as a child has been the denial & negation of her experience by many people in the gay community, who do not want to believe that such things can, did and sometimes still do happen, especially to very feminine boys. As Camille has eloquently put it, a feminine boy in this culture is like a leaf falling upward -something not supposed or permitted to exist. Camille wanted to make sure that when queer survivors of psychiatric abuse come to San Francisco, they will know that someone acknowledges and respects their experience. In Camille's words, they will know that "yes, you really do exist, and what happened to you matters."

The second story I want to share is that of Daphne Scholinski. Daphne was born female, but was always a very masculine child. She was often mistaken for a boy, and particularly as she grew older and it was no longer acceptable to be a tomboy, she was repeatedly harassed by other kids - and sometimes also by adults -- for being "too masculine." Daphne's parents had her hospitalized in 1983, at the age of fifteen. She was kept in a hospital for the next three years, until she turned eighteen. Although Daphne's parents had not particularly focused on her masculinity as a problem, her treating psychiatrists at the hospital certainly did. She was diagnosed with gender identity disorder, and her treatment was focused exclusively on trying to coerce and manipulate her into adopting a more feminine identity. She was given points for applying make-up and for curling and styling her hair, and she was repeatedly placed in isolation and restraints and given thorazine for refusing to cooperate with this "therapy." Daphne has written about this experience in a book called The Last Time I Wore a Dress (which refers to wearing a hospital gown in the isolation room). One of the incidents Daphne recounts in the book is an encounter with an intern who had been assigned to work on Daphne's case. After meeting with Daphne on several occasions, the intern said to her, "I don't know why you are in this hospital. You are one of the sanest people I have ever met." Daphne said that until that moment, she had fully expected to be in a psychiatric hospital for the rest of her life. Before that moment, it had never occurred to her that perhaps there was nothing wrong with her - that perhaps the doctors were wrong, and perhaps it was okay to be who she was.

The third story I want to share is that of Pat Doe, a fifteen year old transsexual youth, male-to-female, who attends a public middle school in a small town in Massachusetts. The Principal of the school would not permit Pat to attend school wearing female clothing. At one point, in fact, the principal required Pat to report to his office very morning before school began so that he could inspect her clothing. She would show up every day, go to the principal's office, and if the principal decided that her clothing that day was too "girl-like," she would be sent home. Eventually, this situation was so painful and stressful that she stopped attending school altogether. Jennifer Levi, an attorney for a legal organization called Gay and Lesbian Advocates and Defenders, sued the school on Pat's behalf. The Massachusetts court held that the school must respect Pat's female gender identity and must permit her to wear female clothing and to be treated equally to all the other female students. The most critical part of this case was presenting expert testimony to the court that yes, transgender youth really do exist, and that especially for a transgender teenager, being forced to deny one's gender identity would be extremely harmful. Fortunately, Gary Mallon was able to present that expert testimony based on his extensive experience working with transgender youth.

Finally, the last story I want to share is about an extraordinary family that I just met two days ago at a transgender conference in Colorado, where I met a young heterosexual couple, in their early thirties. They told me they were attending the conference because they have a seven year old child who, in their words, is "a little FTM," who they love very much, and they wanted to learn more about transgender people. I wish I could adequately describe to you what gentle, loving people these parents were. Neither one of them had any prior knowledge of transgender issues and initially, they had assumed that their child was simply a tomboy or as the father said, they thought maybe this is just what little lesbians are like. Although they were certainly struck by how masculine the child was, they weren't concerned by that until the child became very depressed - refusing to go to school, refusing to leave the house, and expressing a great deal of anger towards them. They took the child to a therapist, who was able to recognize that the child was deeply uncomfortable with being identified as a girl. The parents began talking with their child directly, letting the child know that they loved and accepted her no matter what. The child began telling them that she was not a girl and that she felt more like a boy than a girl.

These parents were obviously shaken by this situation. They loved their child very much and were very concerned for him. They were also determined to listen to their child and to accept him, no matter what. They said they understand that no one can predict the future, that their child might grow up to be transsexual or might not, and that they are committed to staying open and to not pigeonholing him. They have asked him what pronouns he prefers, and at home right now, they said he uses male pronouns all the time. At school, he is in a somewhat different situation. They have met with all of his teachers, and the school has been very understanding and has taken a number of steps to make him more comfortable. His teachers use a male nickname rather than his female name. They try to avoid pronouns when referring to him. Generally speaking, they try to avoid situations that force the students to make gendered choices or that play into gender stereotypes. Recently, for example, when the class was reading a second grade version of Romeo and Juliet, the teacher had the boys read Juliet's part and the girls read Romeo's part. The school also just created a unisex bathroom. The father said his child came home ecstatic and was so happy that there was finally a bathroom that he could use. Although the parents had not realized it, the child had not been using the bathroom at school - had been "holding it" all day and then running home as soon as he could.

So what do these four stories tell us? I believe they tell us three things. The first is that whatever theories or philosophies any of us may have about gender or about child development, the reality is that, for whatever reason, there are children born into this world who have a very deep-seated internal conviction that their gender is different than the one assigned to them at birth. In the past, there were some clinicians and theorists who believed that children are blank slates and that particularly with regard to a child's gender identity, parents and other adults have the power to determine a child's gender identity by raising the child as a boy or a girl. There is much more caution and skepticism about that theory now, and rightly so. As stories like Camille's and Daphne's illustrate, there are some aspects of human identity -- and gender identity certainly appears to be one of them -- that no amount of aversive therapy or coercion or manipulation can alter.

The second thing these stories tell us, if we needed a reminder, is that each person can make a tremendous difference, and that the single most powerful and healing thing any of us can do for a child is to accept and affirm the child for whoever he or she is. It's very difficult for any of us to develop a solid sense of self-worth or selfconfidence unless our identities are reflected back to us by others, and particularly by our parents and families and those closest to us. As those of you who work with LGB youth know, it is very damaging for a young person to be told by a parent, "you are not really a lesbian," or "you are not really gay." It may not yet be as obvious to all of us, but the same holds true for transgender children and youth as well. As all of these stories illustrate, it can be devastating for a child to be told, "you are not really a boy," or "you are not really a girl," or to be told, "you must act more like a boy," or "you must act more like a girl." Finally, the last thing these stories tell us is that if we can make homes and schools and other settings more accepting of gender variant children, we are also making them better places for all children. Just imagine, for example, how much all of the children in that classroom in Colorado are benefiting from the steps the school has taken to de-emphasize gender differences and gender stereotypes and to make all of the children feel safe and accepted. In fact, I think it is safe to say that if we could create a world in which gay and transgender children are affirmed and valued and respected, then it would also be a world in which there was much more respect for all children and for all differences.

In closing, I would like to propose that the best strategy for working with gender variant children and including them in our advocacy is a humanistic one. If our goal is to understand more about gender variant children, then the first principle must be to listen to them, and to respect what we hear.