

## What Should Be Done For Transgender Children?

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Good motivations do not always produce good results. Sometimes tunnel vision prevents a well-meaning person from paying attention to unintended side effects of a policy.

If a boy identifies as a girl and is uncomfortable undressing in the boys' locker room, he/she may prefer the girls' room. But what of the girls who are not transgender and look over at an anatomically male individual undressing near them? Why are those individuals' comfort and security not taken into account?

It has been shown in the adult world of retail changing rooms that fraudulent entry into the girls' rooms by men with less than honorable motivations has taken place.

What should be done? If something is to be done, the sensible solution is single, lockable, individual changing rooms, available for those who choose them. There are many non-transgender students who would also prefer that choice.

But there is a deeper aspect to this issue that has suddenly assumed "civil rights" status.

Now the common narrative is, "I have always felt this way." Because age 1½ to 2½ is the usual age when a child says, "I am a girl," or "I am a boy," any factors that may have interfered with identification to biologic gender will not be remembered. Yet there are many possibilities.

But the dominant culture says, "You can choose your gender; you can change your gender." And we have parents advocating for their child asking for hormonal therapy to block puberty and ease the transition to sex change.

Although this seems compassionate, the science is not supportive. 98% of gender confused boys and 88% of gender confused girls come to peace with their biologic gender after going through puberty. And delaying puberty, instead of increasing options, actually pushes the decisions towards sex change.

Is it really wise to move in the direction of a surgical therapy which in about 90% of cases is not necessary? Ominously, a 2011 study in Sweden showed a suicide rate **twenty times higher than expected** in adults who have undergone sex change.

A principle of medicine is "First Do No Harm." It is not wise to jump on a bandwagon when the science is disturbing. Affirming an identity helps to fix that identity. If a child believes himself or herself to be **stupid**, what do you do? You counter it and do not allow it to become a fixed false belief. You even investigate the reasons and try to deal with them.

Don't the gender confused deserve the same consideration?

### References

**Gender Dysphoria in Children** *American College of Pediatricians* – August 2016

<https://www.acpeds.org/the-college-speaks/position-statements/gender-dysphoria-in-children>

**Long-Term Follow-Up of Transsexual Persons Undergoing Sex Reassignment Surgery: Cohort Study in Sweden** <http://journals.plos.org/plosone/article?id=10.1371/journal.pone.0016885>