



TRANSGENDER FAMILIES

marriage, parenthood and children

Transgender family is a family where at least one person has come out as being transgender: the child, one or even both of the parents, etc.

Here is a **systematized overview of the status of transgender families around the world**. Its scope encompasses the details of legal regulations in different countries, remarkable court cases and positions of international organizations on the status of such families, social studies among the families experiencing gender transition, and, naturally, voices of the people in the trans community. The information is presented in three sections: trans relationships and their regulation (Trans marriage), trans people's right to have a child and possibilities for its upholding (Trans parents), and the situation of children expressing transgender features (Trans children).

'Initially, I took an interest in trans families for personal reasons—I'm a trans person myself. However, I soon realized that this topic rarely becomes the focus of research or human rights advocacy. It has its white spots, and some people are hardly aware of it. Having worked with the trans issues for 10 years already, I decided to gather and streamline the information myself. Instead of limiting myself to the formal texts of regulatory documents, statements, and cold figures from the studies, I endeavoured also to include the opinions and aspirations of trans people themselves in the context of the family relationships. I worked on this material at the turn of 2019–2020, and I am excited to share its result with the English-speaking readers,' **Inna Iryskina, the publication's author and coordinator of the trans program of Insight NGO.**

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Introduction

In the discourse around LGBT+, the "family issue" has always been one of the critical issues. In fact, achieving marriage equality, i.e., the ability to enter into marriages and receive the same rights that heterosexual couples have, is often the primary goal of LGBT movements, which is sometimes equated to achieving equality in general.

However, most of the discourse, both from supporters and opponents of equality, focuses by default on cisgender LGBT+people.

trans people and their needs and problems in the family context often fall out of this focus and end up in a particular blind spot. Therefore, when the issue of family rights comes to the political agenda level, only a few voices can be heard for trans people.

On the one hand, since the concept of sexual orientation as such is built around relationships, it is not surprising that it also implies urgent needs for the settlement of these relationships. On the other hand, the fact that any sexual orientation can be combined with any gender identity and transgender status, and that adds its own characteristics, can also not be denied or rejected. And when people start talking about such features, it sometimes causes no less contradictory reactions in society than the question of same-sex relationships. An example of this is the recent attempt to remove from Ukrainian legislation a ban on the adoption of children by people with medical diagnoses related to gender dysphoria, which has not yet succeeded.

So, this text is explicitly dedicated to transgender families considering their current situation in different countries of the world and amplifying the voices of people from the trans community. Transgender families are defined here as any families in which at least one person is transgender. There are three main types of trans family statuses:

- ☐ **Marital status:** a trans person is in an established relationship with another person. In this perspective, the key issue is the legal recognition of such a family unit as a marriage or a partnership.
- ☐ **Parental status:** a trans person, usually in a relationship with another person, has or wants to have children, there may be questions about reproductive rights and opportunities, as well as matters related to raising a child.
- ☐ **Child status:** the issues of needs and opportunities for transition for such a child and, in general, its socialization come to the fore.

Further, each of these statuses is dedicated to a separate detailed section.

Let's look at how the legislation of different countries currently regulates these issues and the positions of international institutions, what concerns arise in society, how trans people themselves identify their needs – and, in the end, what can be the ways to solve existing problems to achieve true equality.

Trans marriages

The critical aspect that raises specific questions about family unions involving trans people is the gender transition. Legal gender recognition means altering the gender marker, i.e., the "passport gender," in a person's identification documents. And this usually means that if a person is married at the time of recognition, then their marriage legally turns from opposite-sex marriage to a same-sex one (or vice versa). Where non-binary identities can also be recognized, such marriages generally go beyond binary definitions.

Naturally, in countries where full marriage equality has already been achieved – and by "full" we mean one where not just same-sex marriages are equal in rights with those of opposite-sex, but the definition of marriage as such has nothing to do with gender – this should not cause any additional complications. Another case is where the right to marry is restricted to a certain extent or even allowed only between "a man and a woman."

Let's look at this in more detail.

Types of legislative regulation

The legal framework of different countries that directly or indirectly regulates marriages involving trans people can be classified according to multiple criteria. For example:

- Based on the existence of separate legal provisions specifically related to trans people and marriages, or their absence, when these issues are regulated on a common basis. "Common basis" leaves room for ambiguous and subjective interpretations in countries where there is no full marriage equality, as will be discussed later.
- Depending on whether the law allows trans people to marry and maintain marriages freely or restricts them somehow.
- Based on how the possibility of entering into marriages by trans people and the possibility of remaining in a previous marriage after legal recognition is regulated.
- Depending on how marriage rights were gained - whether trans people resorted to separate measures for this purpose, or whether it happened, for example, in the general course of the fight for marriage for LGBT+.

In our view, the existence or absence of recognition of same-sex marriage in the state is a significant differentiator, since such legislation directly affects and often determines marriage rights for trans people. So, let's look separately at the countries where it exists and those where it does not - stopping at the same time on the features of the above criteria. We will also pay attention to countries where there are or were certain features for trans people entering into same-sex marriages.

In this case, we will talk about marriages in the binary paradigm – that is, those in which the legal gender of each of the persons in the marriage is female or male. The possibilities of marriage for non-binary people, given that the legislation governing the recognition of non-binary is not yet prevalent and is unique for each country where it exists will be considered separately.

Trans marriages and same-sex marriages

At the time of writing, [28 countries](#) in the world recognize same-sex marriage in all or most of their territories. At first glance, it may seem obvious that such recognition should automatically mean the recognition of marriages for trans people. However, this is not always the case: if the country's legislation has separate provisions for trans people, they should be reviewed

separately. In **Ireland**, after the approval of same-sex marriage in a referendum in 2015, the Gender Recognition Act was [immediately taken into account that there should](#) be no requirement for divorce. In some countries, it sometimes took years:

- In **the UK**, civil partnerships were introduced by law in 2004. Still, trans people were required to divorce to obtain legal recognition, and only then could they re-form their relationship as a partnership if they wished. In 2013, in England and Wales, the requirement for divorce was abolished with the introduction of same-sex marriage, but there was a [spousal veto](#), which could be imposed by one of the spouses to obtain legal recognition of the other's gender. Thus, the rights to marriage and recognition of identity remain partially dependent on each other. In Scotland, where same-sex marriage was introduced in 2014, [there is no such requirement](#).
- In **Portugal**, same-sex marriage has been allowed since June 2010, and the law that regulated the legal gender recognition [has been in force](#) since March 2011. [Before that](#), the prerequisite for recognition was surgical sterilization, and for it, in turn, non – marriage.
- In **Sweden**, same-sex marriage was introduced in 2009, but the transition procedure continued to be subject to a 1972 law that [required divorce](#) for legal gender recognition. Only in 2013 was a new law introduced that abolished this requirement along with some others, such as [sterilization](#).
- In **Australia**, legislation that allowed same-sex marriage began in December 2017. Still, for another year after that, the requirement to divorce before obtaining legal gender recognition [remained in effect](#) at the country level– although some States had abolished it earlier.

There are also reverse examples – when trans people sought to preserve their marriage, which after the legal gender recognition turned into a same-sex marriage, even though it was not allowed at that time.

- In 2006, in **Austria**, the Highest Constitutional Court had declared illegal the requirement that only unmarried people could change the entry in the register of births, deaths, and marriages so as to obtain legal recognition. According to the court's decision, this requirement [was removed from the law](#). Soon, Angelika Frasl became the first transgender woman in Austria who was officially in a same-sex marriage with her wife. At the same time, the conclusion of same-sex partnerships was introduced in Austria in 2010 and same-sex marriages were recognized in 2019.
- In **Germany**, in 2008, the Constitutional Court [recognized](#) that it was unfair to demand a choice between two fundamental rights – personal self-determination and marriage. As a result, the requirement not to be married was removed from the Transsexual Law that regulated the transition procedure. Same-sex partnerships were already recognized in Germany at that time, but marriages were only allowed in 2017.
- In **Uruguay**, the law on legal gender recognition was first introduced in 2009. Although at the time only same-sex partnerships were recognized in the country, but not marriages, this law [did not contain restrictions](#) for married trans people. It only mentioned that it did not affect general marriage legislation, added to appease conservatives. However, since 2013, same-sex marriage is allowed in Uruguay in full.
- In 2012, in **France**, the couple went to court after a trans woman was denied legal recognition of her gender because of being married. The court of appeal [decided](#) that since the marriage was initially between a man and a woman, it remains valid, and since the transition procedure was carried out in a legal way, legal gender recognition should also be allowed. However, the court did not allow changes to be made to the marriage certificate and children's birth certificates. Since 2013, the recognition of same-sex marriage in France has removed such issues.

- A compelling case was in **Taiwan** in 2012, where two transgender women were married. Only one of them at that time had already received legal gender recognition, so it was legally a marriage of "a man and a woman." The following year, the other one also received recognition, after which they were sent a message from the government to dissolve their marriage. However, soon after having consulted with colleagues and experts, Taiwan's Interior Minister [announced](#) that the government respected the couple's rights and would not seek a divorce. At the same time, same-sex marriage in the country was recognized only in 2019.
- Legislation on legal gender recognition varies quite a bit from state to state in **the United States**. However, even before the 2015 court decision that allowed same-sex marriage across the country, [according to](#) the American Transgender Law Center, there was no known case where trans people were required to separate in order to obtain recognition. At the same time, interestingly, there were problematic cases with marriages concluded after recognition, but this will be discussed separately.
- We mentioned **Australia** in the list of countries where the legislation on trans marriage was late in relation to same-sex marriage, but in some states, on the contrary, it was [ahead of the curve](#). Australian Capital Territory and South Australian abolished the requirement of divorce for legal gender recognition in 2014 and 2016.

Separately, let's mention

Finland – as a case, in contrast to the above, with a negative result. There has been the Act on Legal Recognition of the Gender of Transsexuals since 2002, and civil partnerships were recognized the same year. Accordingly, when recognizing the gender of married persons, this law allowed them to convert their marriages into partnerships. In 2012, however, the European Court of Human Rights (ECHR) received a complaint from a trans woman who wanted to preserve the marriage. After reviewing the case, the Court [concluded](#) in 2014 that there was no violation of rights in this situation, since the partnership grants the spouses "almost the same" rights as the marriage. Since 2017, same-sex marriage has come into force in Finland, which effectively eliminated the problem. However, the case has set a precedent that courts and government agencies in other countries, which now recognize same-sex partnerships but not marriages, can also deny trans people their desire not to terminate their marriage.

Transgender marriage in the absence of same-sex marriage

If we now move on to those countries where same-sex marriage is not recognized, they can be divided into two categories:

- countries that have legal constraints – usually those that explicitly require people to be unmarried in order to recognize gender legally;
- countries that do not have a clear legal regulation of marriage for trans people, due to the absence of this aspect in the regulations on legal gender recognition or the lack of clear regulation of the recognition process as such

[According to](#) the organization "Transgender Europe" (TGEU) for 2019, 22 countries out of 42 that in Europe and Central Asia have procedures for legal gender recognition, have put a requirement for divorce in them. However, the TGEU does not distinguish whether such conditions arise directly from legislation or actual legal recognition practice. For example, while in the **Czech Republic**, the requirement to terminate a marriage to obtain gender recognition is specified in the [relevant law](#), in **Romania**, the recognition legislation is generally very vague. However, it appears from the [Civil code](#) that such a marriage will be null and void.

In **China**, the law does not require divorce specifically for gender recognition, but its prerequisite is surgery, which requires that a trans person is not married. However, approaches may differ in different provinces, and in particular, in 2004, there was a case in which a trans woman [obtained compensation](#) from a clinic that refused her surgery because she was married. The Court argued that although same-sex marriage is not legal, if certain actions are not prohibited in themselves, they cannot be denied, even if their consequences are illegal. However, according to [another source](#), the 2009 government guidelines do not require a divorce, but only the partner's consent to surgery.

Italian law has stipulated that if a person who receives legal gender recognition is married, the marriage is automatically terminated. In 2010, trans woman Alessandra Bernaroli and her wife demanded to cancel the termination of their marriage, because they did not agree to it. At first, the court ruled in their favor, but later the court of appeal rejected them. Subsequently, in 2014, the Constitutional Court ruled that the state should develop legislation that would regulate the possibility for trans people to remain married, given that same-sex marriage is not recognized in the country. Finally, in 2015, the Supreme Court [recognized](#) that trans marriages after the legal gender recognition should be considered valid – at least until this form of relationship is otherwise regulated. In 2016, same-sex partnerships were allowed in Italy, which can be considered a variant of such a regulation, but with more limited rights than marriages.

It is particularly interesting to look at countries where there are no requirements for divorce before legal gender recognition, or annulment of marriage after it. In other words, the law actually **leaves the marriage valid despite the fact that it turns into a same-sex marriage**, although same-sex marriage is not allowed in the country.

- In **Switzerland**, legal gender recognition does not have a separate administrative regulation and is subject to a court decision. In 1996, a trans woman applied for gender recognition without having to break up the marriage. The court [found](#) that such a requirement was in the interests of both the individual and the public interest in protecting marriage, and granted it. In 2007, civil partnerships were allowed in Switzerland, after which it became possible to turn marriage into a partnership with legal gender recognition. However, this is not mandatory, and there is no requirement for divorce in the legislation, although that same-sex marriage has not yet been introduced in the country.
- In **Estonia** and **Slovenia**, where only limited forms of partnership are available for same-sex couples, there is [no mention of marriage in the](#) procedures governing transitioning. However, data on specific precedents when married trans people, undergoing these procedures, would remain married, could not be found.
- In **Croatia**, the legal documents regulating transition [do not contain](#) the requirement of being unmarried. However, the decision to recognize gender is made by the national medical Council, and the criteria under which it should do so are not legally established. Taking into account that the Constitution and the Family Act of this country define marriage solely as the union of a man and a woman, it may well be seen as an obstacle to recognition. However, there is still insufficient data to draw conclusions about how this works.
- **Georgia** also does not require divorce for trans people, but there is no legislation for legal gender recognition. The Civil Code only specifies the possibility of [changing the name](#) in connection with "sex change." Therefore, in each specific situation, the decision may depend on civil registry employees' subjective views at the place of the treatment of a trans person. There are no data on cases of appeals that would raise the issue of preserving marriage. Note that same-sex unions are not recognized in Georgia in any way.

- **Russia** makes a particularly interesting example, where there is no recognition of same-sex couples and a repressive law against "propaganda of non-traditional sexual relationships." However, the legislation on legal gender recognition there did not contain any marriage related requirements, neither before nor since 2018, when the procedure was streamlined by the introduction of a new form of certificate of "sex change." There is some evidence of how trans people in Russia received gender recognition while married, and the marriage remained valid. However, marriage certificates and children's birth certificates are not reissued, meaning they still have old data. In general, according to one married trans woman, the typical behavior of such people in a transhomophobic country is "don't ask – don't tell."

Finally, **Ukraine** has recently been included in the same list of countries. Let's look at our situation in more detail.

Until 2016, the Ministry of Health's [Order](#) No. 60, which was the main document regulating the transition procedure, contained "contraindications for change (correction) of sex," in particular, "being married at the time of consideration their application by the Commission." It meant that a married trans person could not get permission from the Sex Change (Correction) Commission to perform medical interventions that were a prerequisite for legal gender recognition.

In 2016, order 60 was repealed, and order 1041, which replaced it, [contained](#) neither such contraindications nor any mention of marriage. Consequently, it became possible to obtain legal gender recognition without having to terminate the marriage. At the same time, the Constitution states that "*Marriage is based on the free consent of a woman and a man,*" and the Family Code: "*Marriage is a family union of a woman and a man registered at the state civil registration institution.*" At the same time, among the grounds for which a marriage can be declared null and void under the same Family Code, there are no grounds like changing the legal gender of a married person.

Today, there are at least two cases in which trans people in Ukraine have received legal recognition, that is, they have changed their passport and other identity documents while remaining married. In [one of them](#), the civil registry office has refused to reissue the trans woman's marriage certificate, arguing that its current form includes the wording "husband" and "wife" and does not suggest other options. After that, she filed a lawsuit, and at the time of writing, the process is still ongoing.

As the author of this text, I note that I am also married at the time of writing. In 2015, I married a non-binary person, which became possible, since my documents have a male gender marker, and my beloved has a female one. And after I get legal gender recognition, our marriage will become legally same-sex. And since my partner does not have Ukrainian citizenship, if we are forced to terminate this marriage, he will lose the right to reside in Ukraine. So if anyone still has a question why preserving marriage can be so important – here is a clear example.

Restrictions in different-sex marriages

So far, we have been discussing the peculiarities arising from the transformation of a legally different-sex marriage into a same-sex one. However, in some cases, there were nuances even in purely different-sex marriages, and they are also worth mentioning.

- Probably the first case to consider the validity of marriage for a trans person was a [1971 case](#) in the **UK** in which a husband sought a divorce from his wife, a transgender model April Ashley. After the court did not grant them a divorce solely on their mutual desire, he decided to take a different approach and get the marriage annulled on the ground that, despite the recognition of gender, she is allegedly a man. The court, having considered the set of biological characteristics of sex, satisfied his claim. An indirect consequence of the

court's decision was that for a long time, changing birth certificates for trans and intersex people, which was done informally in the country at that times, was stopped.

- It was only in 2002 that the ECHR [decided](#) in the case of Christine Goodwin V. United Kingdom, in which a trans woman turned against the British state for not providing mechanisms for legal gender recognition despite the actual possibility of a transition. One of the lawsuit's key points was that she could not marry because her gender legally remained male. This case resulted in the introduction of the "Gender Recognition Act" in the UK in 2004, which at that time became one of the most progressive in the world (but, having hardly changed since that time, has lost this position).
- In **the United States**, in 1999, a court in Texas [invalidated](#) the marriage of a transgender woman after the death of her husband, considering that in terms of gender at birth, she should also be considered a man. In doing so, she lost her inheritance rights, as well as the right to legal action that she had filed, believing that her husband's death was caused by improper medical care. At the same time, in a similar case in California in 1997, the court sided with the transgender husband, rejecting his wife's demand to recognize him as legally a woman and terminate the marriage.
- In 2001, [the case of Kevin](#), a trans man who wanted to marry a woman, was considered in **Australia**. He was denied this because he was supposedly a woman from birth. In the end, the judge ruled in favor of Kevin, recognizing that gender is determined not only by biological qualities from birth but also by social and psychological aspects. Therefore, "in the modern sense of the word," this person is a man. This case became a landmark not only for Australia. It was referred to in other countries, including in the above-mentioned case of Christine Goodwin.
- In **Malta** in 2006, a trans woman, Joanne Cassar, wanted to marry a man. And although she had gone through the entire transition procedure, including surgery and a change of birth certificate, the couple was denied marriage registration. She filed a lawsuit, and the following year the court awarded to allow them to marry, but in 2008, after an appeal, this decision was overturned. The court held that Cassar could not be considered a woman in terms of the Marriage Act, and changes to the birth certificate only ensured the right to privacy. Subsequently, after a series of legal proceedings, when the case had already reached the ECHR, the government [shifted its position](#). It reached an agreement with the trans woman, paying compensation and allowing her to marry. Soon, in 2015, the Gender Identity, Gender Expression and Sex Characteristics Act (GIGESC) was adopted in Malta, which removed any restrictions on marriage for trans people.
- In **Hong Kong** in 2008, a trans woman who received legal gender recognition submitted a request for marriage to the marriage registry. She was refused because the recognition procedure in Hong Kong does not provide for changing the birth certificate, which is taken into account for marriage. After a series of lawsuits that lasted five years, the plaintiff still [received permission](#) to marry – the court revised the definition of "women" in the context of the marriage provisions, having included transgender women who made surgical correction of the genitals, confirmed by medical evidence. However, this decision did not lead to changes in legislation on gender recognition.
- In **Bolivia**, the Gender Identity Law has been in force since 2016, but it does not apply to marriages. This effectively means that trans people are denied the right to marry after the legal gender recognition. In 2017, the Supreme Electoral Tribunal decided to lift this restriction, but the Supreme Court [renewed it](#) a few months later. In 2018, LGBT initiatives in Bolivia filed a lawsuit to lift the marriage restriction before the Inter-American Court of Human Rights, where it is still being considered.

Marriages for non-binary people

Now that various aspects have been considered in the context of both same-sex and different-sex marriages, let's remember that full marriage equality should be beyond gender and also apply to people identifying as non-binary. There are now about 15 countries in the world where such identities are recognized in some way. Where do they stand on the accessibility of marriage?

Here we can name several Asian countries separately in which the recognition of genders other than "male" and "female" arose primarily because of the need to recognize those genders that have long existed in their traditional culture. In particular, [Hijra](#) in **India, Pakistan, Bangladesh**, [Meti](#) in **Nepal**. They may receive legal recognition as a "third," "different" gender, or something like that. At the same time, marriage in these countries is defined as a union between a man and a woman. This leads to situations of ambivalence, when, for example, a person belonging to the Hijra can be perceived as a woman in the context of marriage, and in some other legal categories – as a person of the third gender.

Other countries that legally recognize non-binary gender fully or partially, also recognize same-sex marriages. In **Germany** and the **Netherlands**, however, the absence of a gender marker [is used](#) temporarily for intersex children, and is not taken into account particularly in legislation, including marriage law. In the legislation of such countries as **Austria, Argentina, Denmark, Canada, Malta, New Zealand, and Uruguay**, marriage is defined either simply as the "Union between two persons," or with the clarification: "of same or different genders." The concept of "different genders" also includes non-binary people.

In **Australia** and the **United States**, laws on non-binary people differ in different States, and recognition does not apply throughout the country. This should not be an obstacle to marriage as such. Still, it [leads to situations](#) where non-binary people are forced to position themselves as individuals of female or male gender. And even the existence of laws with legal recognition [does not guarantee](#) the adaptation to non-binary genders of all official forms associated with marriage, and even more so of wedding ceremonies, which are often based on certain traditions and the corresponding roles of "husband" and "wife."

When [recognizing](#) non-binary people, **Denmark** and **Malta** leave a female or male marker in separate documents, which is taken into account in those areas where there is no accounting for non-binary people yet. For similar reasons, in **Canada**, [it is allowed](#) to have both a binary and non-binary marker in international passports, so that one of them can be used depending on which country the person is traveling to. This approach can also work with marriage law, although in general, it should still be considered more of a temporary solution.

International organizations about trans families

Although international organizations' positions are only recommendations, they do not directly affect the domestic policy of countries, yet their authority can prompt changes. Therefore, we will quote the most prominent ones here, clearly stating the issue of trans marriage.

- **UN Yogyakarta Principles** (2006), [Principle 3](#): *"No status, such as marriage or parenthood, may be invoked as such to prevent the legal recognition of a person's gender identity."*
- **CoE Commissioner for Human Rights** Thomas Hammarberg, [Human Rights and Gender Identity](#) (2009), a recommendation to Council of Europe member States: *"Remove any restrictions on the right of transgender persons to remain in an existing marriage after a recognized gender change."*
- [Recommendation CM/Rec\(2010\)5](#) of the **Committee of Ministers** to member states on measures to combat discrimination on grounds of sexual orientation or gender identity (2010), paragraph 22: *"Member states should take all necessary measures to ensure that, once gender reassignment has been completed and legally recognized... the right of transgender*

persons to marry a person of the sex opposite to their reassigned sex is effectively guaranteed.."

- **Parliamentary Assembly of the Council of Europe**, [Resolution](#) 2048 (2015) "Discrimination Against trans people in Europe," call to member countries, paragraph 6.2.3: *"remove any restrictions on the right of trans people to remain in an existing marriage upon recognition of their gender; ensure that spouses or children do not lose certain rights."*
- [Identity recognition statement](#) of **the World Professional Association for Transgender Health (WPATH)**(2017):*"WPATH argues that marital and parental status should not be barriers to recognition of gender change."*
- **UN Independent Expert on protection against violence and discrimination based on sexual orientation and gender identity**: [Report](#) on Protection Against Violence and Discrimination Based on Sexual Orientation and Gender Identity(2018), recommendations: *"Remove cruel requirements that are prerequisites for changing the name, legal gender or gender, including ... requirements related to economic status; health; marital, family, and parental status."*

So, we can say that there is already a certain consensus among international organizations dealing with human rights issues as well as transgender rights, that legal gender recognition and the right to marriage for trans people should not interfere with each other.

If we sum up the interim results, we can see that the approaches to recognizing transgender marriages in public institutions and courts in different countries vary considerably in terms of formal legislation and practice. At the same time, there is a tendency to expand the marriage rights of trans people over time, as the world expands marriage equality, but these processes do not always coincide.

However, the legal aspects only set the general framework within which transgender marriages can exist. Let's now look at the socio-psychological elements that are more likely to determine the daily life in such marriages of both trans people and their partners and, in the end, what these marriages are and should be for them.

Transgender families in a social context

In the last century, ideas about being transgender were mostly based on models of so-called "true/core transsexuality," derived from the [classification](#) proposed by Harry Benjamin in 1966. These models were exclusively binary in terms of both gender and sexuality. According to them, a "true transsexual" could not have any permanent relationship before the transition. Firstly, because of their attitude to their own body and especially the genitals, which excluded sexual relations. Secondly, due to a heterosexual orientation relative to gender identity, which was impossible to exercise before bodily changes and recognition. After the transition, such a person must merge with the cisgender normative majority and build a family that looks no different from other "normal" families.

This approach seemed to remove the issue of marriage from the agenda for trans people, based on the fact that before the transition, they do not need it, and after the transition, it does not require any special attention. To a large extent, this has led to its being placed in a "blind spot" outside the field of view of both researchers and human rights defenders.

The discourse of "truthiness" also influenced the perception of trans people themselves. In particular, those who did not feel "true enough" to make the transition, tried to suppress the transgender manifestations in themselves, recreating the image of a "true man" or "true woman." Sometimes people would start a relationship that, especially with the support of relatives, could grow into a family – with marriage and subsequent birth of children. However,

it soon became apparent that gender identity could not be changed in this way. The author of this text, over the years of communication with various trans people, has heard more than one story in which a person led a double life: for their environment, including their family, they tried to "play normal," in no way disclosing being a transgender person, and only on the Internet and in rare periods of being alone they could express themselves according to their identity. If the secret was eventually revealed – in particular for the fact that a transgender person still decided to start transitioning, it became a tragedy for the entire family and often led to its collapse.

However, from the section of the review of legislation, you can already see examples of the fact that not all families break up during the transition. On the contrary, some struggled out the right to officially remain a family from the state, and sometimes this struggle lasted for years, despite defeats at the beginning.

Now that the "truthiness" model has been abandoned even in such authoritative classifications as the American Psychiatric Association's [DSM-5](#) (2013) and the World Health Organization's [ICD-11](#) (2019), it is obvious that it describes only a small part of the transgender spectrum. Modern experts do not question that trans people can have any sexual orientation and, accordingly, the need for relationships and their legalization.

However, we can still divide transgender families into two categories, depending on whether they were founded before or after the transition. The transition experience, whether it is fatal for the family or not, obviously has a significant impact on it in any case. Let's look more closely.

The study of transgender families

A [2012](#) study by **the European Union Fundamental Rights Agency** found that 15% of trans people surveyed are in marriages or civil partnerships, and 7% are divorced – while the percentages of both married and divorced people are higher among transgender women than transgender men. For the US, similar data from another study are 12.3% and 19.5%, respectively. For comparison, a bit more than 55% of adults in both the EU and the US were married for the same years, while those divorced in the EU – 7.4%, in the US – just over 10%. Although, at first glance, the divorce figures for cisgender and trans people do not differ much, if you compare them with the number of married people, it is evident that fewer trans people have created a family and kept it. However, the numbers themselves do not provide an answer as to what factors lead to this difference.

Identity	EU average	Trans women	Trans men	Female cross dressers	Male cross dressers	Trans gender	Gender variant	Queer / other
Single	75	60	83	86	70	70	62	84
Married / in a registered partnership	15	18	12	8	20	19	28	10
Divorced	7	17	4	3	8	7	8	4
Separated	2	4	1	2	2	3	2	2
Widowed	1	1	0	1	0	1	1	0

Civil status of trans people in EU countries, %

Even in the studies conducted in recent years, this topic is still poorly studied. Most researchers focus on medical issues of transition or theoretical ideas about the social construction of gender identity and, again, transition. However, even from the few available works, you can see certain trends.

The most extensive study of transgender families to date is [the 2017 PhD work](#) **Families in Transition: The Family Context of a Gender Transition** in Belgium. The author studied trans families' experience, their requests for psychological help in medical institutions and support groups through interviews and their subsequent analysis, and reviewed previous research on this topic. The study looked at 18 families with different trans statuses: trans partners, trans parents, and trans children. The last two will be discussed in the following sections, and we will now focus on the relationship between trans people and their partners.

If at the beginning of the relationship the partner wasn't aware of their partner's being transgender, coming out might come as a shock and can generate stress, anger, sadness, feelings of betrayal, loneliness, fear. This often leads to a break-up – but, as we have seen, not always. The following factors may influence the further development of the relationship:

- If the disclosure of being transgender occurs step by step, rather than suddenly in a moment, it promotes mutual understanding between partners. However, if there were certain agreements between them regarding such manifestations that were valid for a long time (for example, the possibility of crossdressing at home, but without others knowing about it), then the decision to transition may be perceived as a violation of these agreements and a change in the rules in the relationship.
- The partner feels the need to be involved in the transition process and coming out to relatives and loved ones, so their more active role in this helps strengthen the relationship.
- The partner also needs time to adjust to the fact that with the transformation of the relationship to transgender, their own identity (particularly in the context of sexual orientation) also changes to a certain extent.
- The more rigid the gender roles in the family, the more difficult the transition in such relationships is perceived.
- It's essential to feel support from family and friends, which is often lacking in such situations.

The transition can cause conflict between the roles that partners play in the relationship. In particular, there are possible contradictions between the ally and co-parental roles, when the desire to support a loved one in the transition conflicts with concerns about how this process will affect children. And the biggest test is the romantic partner role, especially when the partner clearly defines their sexual orientation and preferences, and both the transgender person's bodily changes and the fact that the society now sees their couple as same-sex, for example, violates this picture. The study suggests three strategies for adapting to role conflicts depending on their depth:

- "intimate joint," when, despite some disagreements, there is a common understanding, and the relationship can be maintained in full;
- "rational separation," when it is impossible to continue a romantic relationship, but mutual respect and a certain level of support for each other is maintained;
- "emotional dissolution," when partners continue to maintain contact exclusively in matters of parenting.

All these roles, obviously, often have a distinct gender component. The transition in the binary system can lead to the fact that the partner feels as if their own gender is being questioned, and tries to emphasize it in a certain way – for example, through feminine or maternal manifestations.

Families during a transition often seek psychological support. However, the support they receive in health facilities is more formal and limited to the medical aspects of transition and doesn't help them. Informal support groups are often more useful, but they also have drawbacks: for example, sometimes their participants, taking an expert position, generalize

their own experience and ignore the fact that everyone may have different individual characteristics.

The significant problem is that as long as there is stigmatization based on sexual orientation and gender identity in society, its impact extends to the entire family. For example, some respondents noted that they are comfortable in relationships with transgender partners, but uncomfortable when these relationships become visible to a broader range of people. On the other hand, fears of facing stigma were often exaggerated in comparison to reality. However, some of the participants - both among partners and trans people themselves - transmitted views that reproduced the stigma, for example, considering negative reactions to manifestations expressing transgender status normal.

Despite the difficulties, with 17 couples considered in this part of the study, 11 stayed together after the transition and only 6 divorced. Most of them are unions of transgender women and cisgender women, where the latter from the beginning defined themselves as heterosexual. Most families also had children.

The same author and co-authors in the section about transgender families from the [Transgender Handbook](#) recall the problem of different rates of perception of changes by a transgender person and their partner. While the trans people themselves, who waited for many years before deciding to transition, now want to follow this path faster, the partner, for whom this is entirely new information, on the contrary, wants to take time and have enough time to assimilate it. The difference between the desire to speed up the process on the one hand and slow it down on the other can both exacerbate the conflict in the couple itself and provoke adverse reactions among the extended family. Maintaining a relationship depends on the willingness of partners to agree on specific steps and the pace of transition.

The 2013 British paper **The Good Practice Guidelines for the Assessment and Treatment of Adults with Gender Dysphoria** [raises](#) families' issues in one of the appendices to the guide itself. It also mentions the possibility of conflicts and mutual accusations of selfishness, when the transgender person wants to speed up the transition. The family, on the contrary, tries to slow it down. Lack of support from the family is recognized as a factor in increasing the risk that a person may regret having surgery. The guide emphasizes the importance of supporting and educating families in general, which should improve both family relationships and adaptation to the new gender role. However, such measures should not become a prerequisite for access to medical interventions.

The [study](#) **The Other Side of Metamorphosis**, conducted in 2008 in the United States, focused on couples where the relationship was initially defined as lesbian, and then one of the partners made the transition as a transgender man. In this case, it was easier for those who defined their sexual orientation as fluid to a certain extent to accept the changes. However, the partners distinguished their status and identity. While remaining in a relationship with a transgender man, they continued to define themselves as lesbians, even consciously taking advantage of the fact that they were now perceived as a heterosexual couple by others. For their part, the partners after the transition tried to take on the role of the "head of the family," who earns more and performs "male" work next to his wife, "a housewife," which caused her resistance, but in the end, the need to negotiate a new way of organizing family life.

While all of the above may be perceived as more of a problem with maintaining a relationship during the transition, there are also positive aspects to this experience. In the above-mentioned Belgian study, these include the development of new communication strategies that ultimately lead to an improvement in the well-being of the family.

Other researchers in the United States, analyzing data from the **National Transgender Discrimination Survey**, [concluded](#) in 2017 that trans people, especially married transgender women, experience less discrimination compared to unmarried people, including those who have permanent but unregistered cohabiting relationships, in areas such as workplace, family, health care, and public accommodations. As the researchers suggest, this is due to the fact that marriage gives greater access to economic, social, and psychological resources, which makes marriage especially important for trans people, given that they are often limited in these resources.

This brings us back to why trans people might need more than just stable relationships that persist during transition, namely marriages.

Doubts and counterarguments

The **Open Society Foundations** published [License to Be Yourself: Marriage and Forced Divorce](#) in 2015. It provides several typical arguments used by opponents of transgender marriage to question them and explains why these arguments are incorrect. Here are some of them combined with the data we found:

- *Legal gender recognition of married trans people creates "special privileges" where same-sex marriage is not recognized.* However, the state should protect trans people's marriages just like any other, and the only decision to preserve the marriage or not should be the decision of the couple itself. The fact that a small number of same-sex marriages are formed this way should not outweigh the need to protect the right to a family of already married people.
- *After legal gender recognition, the marriage must be considered invalid.* However, other legal relationships and contracts entered into by a person do not become invalid due to a person changing their name or gender marker. The same should apply to marriage if, at the time of its conclusion, all the criteria required by law were met.
- *A trans person who makes the transition forces their partner into a same-sex marriage.* However, if this is unacceptable, the partner always retains the right to divorce. At the same time, as we have seen, being in a same-sex marriage often does not feel like an insurmountable obstacle, so the partners should have the right to remain married. Therefore, additional regulation by the state is not required here.
- *There are only a small number of people who want to stay married and still make the transition, so it is unnecessary to extend the possibility of legal gender recognition to them.* First, "few" or "many" is a subjective assessment that may differ from person to person. Despite the overall low visibility of the trans community, it is highly likely that the actual needs, in any case, exceed the number of cases that become known. Secondly, in human rights, it is not correct to appeal to the argument of "a small number" – even if such people existed only hypothetically, their rights should be protected. Finally, third, as can be seen from the analysis of legislation, often, the possibility of legal gender recognition while maintaining marriage does not require a separate regulation. Still, it is the requirement of divorce that is introduced by a separate provision.
- *If the law allows for civil partnerships, then the requirement of divorce does not create difficulties.* Almost everywhere, the rights of people in partnerships are limited compared to marriages. Most often, such restrictions relate to the sphere of parenthood, so first of all, couples who have or plan to have children will suffer. Not to mention the fact that renegotiating or turning marriage into a partnership forces spouses to spend extra effort on passing these bureaucratic procedures.
- *Trans people just have to wait for the state to allow same-sex marriage, and they will also get all the marriage rights.* However, first of all, as you can see, this does not always happen

automatically – in particular, in Australia and Sweden, trans people had to wait for some time after that. Secondly, the protection of human rights for one group cannot be made dependent on another.

What trans people say

"You all put too much weight on the subject of genitals. My essence has not changed. I'm the same person my wife has fallen in love with. I had changed aesthetically, but the creature she had fallen in love with remained unchanged. The aggregate result is still valid, so the relationship can continue" (Alessandra, Italy).

"Like any other woman I feel the best thing in life is getting married and having a family. And don't bring children into the argument... For me marriage is not only about having children. You marry a man because you love him" (Joanne, Malta).

"It is not connected at all. I don't know how doctors and other people connect it. It's not a counter-indication for me [marriage and having children under 18]. We have to look at how it will be more comfortable for the family, the family has to decide with support of a psychologist and people who get the knowledge and can provide legal help" (trans man, Ukraine).

"There is nothing on earth that will get us separated. We won't terminate our marriage. We do not call it cis or trans or whatever. It is a religious marriage as I have proven to the court" (Heli, Finland).

"In the eyes of government officials, gender is far more important than the value of marriage and family" (Ji-yi, Taiwan).

"There were things that maybe I would have changed if I had the ability to, like, press that button and just be a woman. I would have done it with the condition that I was still with Laura, and that's because I cared about her a lot and I didn't want to lose her" (Galen, USA).

"I didn't want to be faced with the decision to choose between being married or choose something that was equally important to me in a sense – being recognized as my true self" (Zoey, Australia).

Summary

Key points:

- ☒ One of the main features of trans marriages is that after the legal gender recognition, they turn from opposite-sex to same-sex, or vice versa.
- ☒ Historically, most countries have required married trans people to divorce to obtain gender recognition.
- ☒ Leading international organizations take the position that those who want to preserve marriage after the legal gender recognition should be allowed to do so in any case – in particular, regardless of whether same-sex marriage is allowed in the country.
- ☒ People of non-binary identities also need the opportunity to marry, but with their gender fully recognized, they still have it only in certain countries.
- ☒ Although many families break up during the transition, there are enough those who want to keep them. The chances of saving are higher for those families where the partner is actively involved in the transition process and has more support from the environment.
- ☒ Society should pay more attention to transgender families, in particular for them to receive support, which is usually not enough today.

Recommendations to the Ukrainian state:

- ☒ Update regulations so that married trans people can change their name and gender marker on their marriage certificate after the legal gender recognition.

- ☒ Raise public awareness and sensitization, particularly for civil servants, to reduce bias against trans people and their partners in legally same-sex and other non-heteronormative families.
- ☒ Conduct a sociological study to determine the situation of transgender families and their needs.
- ☒ Consider ways to ensure full marriage equality, including for people with non-binary gender identities.

Trans parents

If the topic of trans families is just in the shadows, then the topic of trans people's children, when raised, is perhaps the most complex and causes the most contradictory reactions in society (in fact, just like the topic of children in same-sex families). Most of the restrictions in the regulatory acts regulating trans people's issues relate specifically to the ability to have children in one way or another. These abilities themselves can generally be the same as those of any people:

- sexual intercourse with subsequent conception and birth of a child;
- assisted reproductive technologies (ART);
- adoption of a child.

Each of them, however, can be regulated by law separately for trans people. On the one hand, the ability to have children if there is a certain trans status, and, on the other, the ability to obtain gender recognition if there are children or reproductive ability itself.

Besides, the issue of recognizing trans parent status according to gender identity is also subject to regulation. For example, when the person who carried and gave birth to a child is a transgender man, whereas it is traditionally believed that only women can give birth.

Forced sterilization

Historically, the transition has been associated primarily with genital surgery, which were often equated to "sex change." Such surgeries, including the removal of genitals or partial use of their tissue for reconstruction of organs of the "opposite sex," automatically meant the sterilization of a person, that is, depriving them of the possibility to have their own genetic children in the future. When different countries, in addition to medical procedures, began to introduce procedures for legal gender recognition, such recognition in them was usually assumed as the final stage of transition – so, after the surgical operation. Accordingly, surgical intervention or sterilization began to be prescribed as a prerequisite in the regulatory acts governing the procedure.

In the discourse of "truthiness" discussed in the previous section, it was taken for granted that a trans person despises genitals they have from birth. Therefore, they still will not use them for their intended purpose, including making children. Over time, however, the limitations of these perceptions became clear. More and more trans people declared that they did not need operations and sought to have them removed as mandatory requirements for gender recognition. Since then, sterilization in the transgender context has increasingly been referred to as forced.

- In 2009, a trans woman in **Austria** performed a number of feminization procedures, which she considered sufficient even without genital surgery. To get legal gender recognition, she went to court. The court decided that since her psychological sense of belonging to the desired gender is irreversible in any case and her appearance is also close to that gender, "severe" genital surgery is unnecessary. As a consequence, the Constitutional Court [ruled](#)

that gender reassignment surgery should not be a prerequisite for changing the gender mark of a person in the birth register.

- In **Germany**, in 2011, a 62-year-old transgender woman went to court. She was denied legal gender recognition because she did not undergo gender reassignment surgery and, therefore, did not comply with the requirements of the Transsexual Law. The Constitutional Court took into account that gender reassignment surgery is a very "massive intervention" in the physical integrity of a person, can have side effects and is not necessarily indicated for trans people. The court also noted that, in general, the infertility requirement is legitimate from the point of view of securing against transgender men give birth and transgender women conceive children. However, despite the small potential number of such "violations," separate solutions can be found for such cases to ensure the rights of children born in them. As a result, the court [found](#) that the requirements for mandatory genital surgery and infertility to obtain legal gender recognition violated the German Constitution.
- In **Sweden**, in 2012, the administrative court, considering the legality of the sterilization requirement, noted that it appeared because of the need to "avoid the risk of confusion that may arise in family relations if a transgender person has a child of their own." However, the court [recognized](#) that a person should not be subjected to compulsory medical intervention to obtain certain rights and, therefore, such requirements violate the right to respect for privacy. In 2013, the requirement for sterilization was removed from Swedish law.
- In **Turkey**, trans people were required to be already infertile before undergoing gender reassignment surgery. In 2015, a trans man appealed this requirement to the European Court of Human Rights, pointing out, in particular, its absurdity, since infertility is also achieved through surgery. The court [found](#) the requirement to violate human rights, also noting the pan-European trend to abolish sterilization requirements for legal gender recognition. The case became a landmark, as the illegality of forced sterilization was first declared at the ECHR level.
- In **Italy**, in 2015, the Supreme Court [ruled](#) in favor of a trans woman who was denied legal gender recognition by local courts because she did not want to undergo surgery. The court's decision stated that the number of medical procedures that a transgender person resorts to depends on individual characteristics and should be the result of self-determination.
- In **Ukraine**, in 2015, there were two administrative lawsuits in which trans people sued the Commission on the Issues of Sex Change (Correction). It required them to undergo surgery, which would include removing the reproductive organs and mammary glands of trans men and the testicles and penis of trans women in order to obtain legal gender recognition. The court [found](#) that such claims had no legal basis. These decisions played an essential role in changing the transition regulations in 2016, which removed both mandatory surgery and the central Commission's monopoly.
- Finally, in 2017, the ECHR ruled in a joint case of three trans women from **France** seeking legal recognition of their gender for about ten years because they did not want to perform the irreversible surgical procedures required of them. In 2016, France introduced new legislation in which sterilization was no longer among the requirements for legal gender recognition. However, the ECHR [brought the case](#) to an end, recognizing that the requirements of medical interventions that result in a high probability of infertility violate the state's obligations to guarantee the right to respect for private life. So, all member states of the Council of Europe that are subject to the ECHR must remove from their legislation the requirements of sterilization for legal gender recognition.

These precedents show how the discourse has gradually changed. If earlier courts, even when deciding in favor of trans people, found arguments about why the infertility requirement is generally correct, in recent years, the courts have already recognized the illegality of this requirement. The general trend does show that forced sterilization of trans people is gradually becoming a thing of the past: from 2016 to 2019, according to the TGEU, the number of European countries that require it has almost halved. There are now [16 such countries](#) in Europe and Central Asia, with Serbia dropping out over the past year, and soon, considering another [court decision](#), at least the Czech Republic should drop out as well.

At the same time, **in Finland**, a legislative reform that was supposed to remove the sterilization requirement, in particular, failed in 2017. In the same year, Amnesty International [campaigned](#) in support of trans activist Sakris Kupila, who was denied legal gender recognition clearly because of his unwillingness to undergo sterilization. The new government, elected in 2019, announced the abolition of this requirement for the next four years.

Neighboring **Sweden** did not stop at the abolition of forced sterilization but went even further. Shortly after the law was changed, trans people who had been forced to undergo this procedure against their will during the previous law since 1972, under the leadership of the RFSL organization, filed a lawsuit seeking compensation. The court granted their claim, and in 2016 the government agreed in principle to pay such compensation for sterilization. After all the details were agreed and [approved by Parliament](#) in 2018, about 800 trans people, who were forcibly sterilized, applied to get 225,000 Swedish kronor from the state. This example can be inherited by other countries – although it would be harder to achieve the same result anywhere compared to Sweden, where the government is generally very LGBT+friendly.

As for **Ukraine**, despite the court victories mentioned above, the situation remains ambiguous. On the one hand, the "medical certificate of sex change (correction)" required for legal recognition refers simply to "medical intervention," which may be at the choice of the patient. On the other hand, the text of the Unified Clinical Protocol, which regulates medical procedures in detail, [contains](#) contradictory wording, one of which specifies "surgical intervention" as a requirement for obtaining a certificate. In real today's practice, doctors usually do not require surgery if a trans person does not want it, yet this wording leaves room for such requirements, which may include sterilization.

International organizations, in particular those already mentioned in the previous section, have repeatedly expressed their opposition to forced sterilization.

- **UN Yogyakarta principles** (2006), [Principle 3](#): *"No one shall be forced to undergo medical procedures, including sex reassignment surgery, sterilization or hormonal therapy, as a requirement for legal recognition of their gender identity."*
- **Council of Europe Commissioner for human rights** Thomas Hammarberg, [Human Rights and Gender Identity](#) (2009), recommendation to Council of Europe member States: *"Abolish sterilisation and other compulsory medical treatment as a necessary legal requirement to recognise a person's gender identity in laws regulating the process for name and sex change"*.
- [The interagency statement](#), **OHCHR, UN Women, UNAIDS, UNDP, UNFPA, UNICEF and WHO** "Eliminating forced, coercive and otherwise involuntary sterilization" (2014): *"According to international and regional human rights bodies and some constitutional courts, and as reflected in recent legal changes in several countries, these sterilization requirements run counter to respect for bodily integrity, self-determination and human dignity, and can cause and perpetuate discrimination against transgender and intersex persons."*
- **Parliamentary Assembly Of The Council Of Europe**, [Resolution 2048 \(2015\)](#) Discrimination against trans people in Europe, a call to member States, paragraph 6.2.2: *"abolish sterilisation and other compulsory medical treatment, as well as a mental health diagnosis, as*

a necessary legal requirement to recognise a person's gender identity in laws regulating the procedure for changing a name and registered gender."

- **World Medical Association**, in [Statement on trans people](#) (2015): *"reaffirms its position that no person, regardless of gender, ethnicity, socio-economic status, medical condition or disability, should be subjected to forced or coerced permanent sterilisation ... this also includes sterilisation as a condition for rectifying the recorded sex on official documents following gender reassignment."*
- **World Professional Association for Transgender Health (WPATH)**, "[Statement on Identity Recognition](#)" (2017): *"WPATH opposes all medical requirements that act as barriers to those wishing to change legal sex or gender markers on documents. These include requirements for diagnosis, counseling or therapy, puberty blockers, hormones, any form of surgery (including that which involves sterilization), or any other requirements for any form of clinical treatment or letters from doctors."*

From this, we can see that, first, support for the right to family preservation is usually correlated with the position on the inadmissibility of forced sterilization, and, second, the latter is increasingly comes in the context of the general position on the abolition of any medical requirements as prerequisites for legal gender recognition.

Assisted reproductive technologies and adoption

In an environment where trans people are no longer forced to be sterilized, many of them still voluntarily resort to medical interventions that lead to loss of fertility. It can be irreversible or reversible under certain conditions, such as the suspension of hormone therapy, which not all trans people are willing to do. If they do not exclude the possibility of having children, then they potentially have ways to use ART (provided that they have previously turned to cryopreservation of their biomaterial) or adoption. However, trans people, just like cis people, can resort to such measures because of all kinds of reasons – not necessarily because of infertility.

Usually, the legislation regulating access to ART and adoption does not have separate provisions that specifically concern trans people. They are subject to general provisions and if, for example, the law provides for such access to heterosexual families, but not same-sex, so trans people in opposite-sex marriage will have access to them, but not in same-sex one. Only in some instances can transgender status indirectly impose additional provisions. Namely:

- As of early 2020, 24 **US States** [prohibit discrimination](#) based on the gender identity of those who care for or adopt children. However, while no state explicitly prohibits adoption, in many States, trans people risk being overly picky or rejected because of trans status. In particular, in 11 States, the legislation allows the refusal of family services to LGBT people if their provision involves a conflict with religious beliefs.
- Sometimes indirect restrictions may arise due to gender-specific legislation. For example, **in Kyrgyzstan**, the term "woman" is repeatedly used in the wording of the law regulating access to ART. This may [limit](#) transgender men's access to methods such as artificial insemination, embryo implantation, and in vitro fertilization.
- In **Bolivia**, in 2017, a court [found](#) that the law on gender recognition does not apply, in particular, to the right to adopt, thus restricting trans people's access to it. This provision is currently being challenged in the Inter-American Court of Human Rights.
- In **Ukraine**, an order of the Ministry of Health of 2008 [established](#) a list of diagnoses prohibiting adoption. This list also includes trans-related diagnoses of the F64 category, according to ICD-10. Similar [list](#) is also among the contraindications to the use of ART for people with a female reproductive system. However, it only applies to infertility treatment

in cases where the state budget covers it. That is, it does not apply to commercial services in private clinics.

- The situation is similar in **Kazakhstan**, where trans diagnoses are included in the [list of diseases](#) that prohibit adoption and guardianship.

It is worth noting that this topic is still not in the focus of even organizations with a trans profile. Hence, the information from it is unsystematic, and we can assume that this list of typical examples of legislation is incomplete.

Recommendation CM/Rec(2010)5 of the Committee of Ministers to member states on measures to combat discrimination on grounds of sexual orientation or gender identity (2010) in paragraph 27 call for: *"taking into account that the child's best interests should be the primary consideration in decisions regarding adoption of a child, member states whose national legislation permits single individuals to adopt children should ensure that the law is applied without discrimination based on sexual orientation or gender identity."*

Provisions concerning the specifics of access to ART and its use by trans people are more often found in medical and clinical recommendations – from the global level to the regulations of individual clinics. First of all, it is worth mentioning the Standards of Care of the **World Professional Association for Transgender Health (WPATH)**, currently – [version 7](#) of 2011, primarily used by medical professionals in matters related to treating trans people, at least in most Western countries.

The WPATH standards contain a separate section on reproductive health. It calls for discussing reproductive issues with trans people before starting any medical interventions. Moreover, it is desirable to hold such a discussion regardless of whether trans people themselves show interest in reproduction – because such interest may appear later when the ability to do it is already lost. It is noted that reproductive technologies can be costly, which can become an indirect restriction on access to them, because trans people, being discriminated against, in particular in the field of employment, often have a small income, part of which may also be the constant medicine expenses. It is also mentioned that today no method allows you to save the sexual material of teenagers who use puberty blockers, which is why their reproductive function does not develop at all.

"Transsexual, transgender, and gender-nonconforming people should not be denied reproductive opportunities for any reason," WPATH emphasizes.

The Ethics Committee of **the American Society for Reproductive Medicine** published its [position](#) on trans people's access to reproductive services in 2015. It says that the Committee does not see an ethical basis for people to be restricted in such access based on their identity or trans status. At the same time, reproductive options should be offered before the transition begins, as well as information about possible medical risks and insufficient data on the long-term consequences for trans people and their descendants.

The issue of gamete storage has been addressed in the appendices to the [British guidelines](#) on gender dysphoria published in 2013. It must be carried out on the basis of informed consent, which can be withdrawn at any time. If a transgender person is on hormone therapy at the time of expressing the desire to store them, it should be suspended.

The Unified Clinical Protocol of Medical Care of **the Ministry of Health of Ukraine**, which is mainly based on adapted British guidelines, also contains a section on access to ART and paternity/maternity rights. In general, it [reiterates](#) the WPATH recommendations that reproductive options should be discussed before starting treatment. The last recommendation is interesting: *"Patients with gender dysphoria should not be denied reproductive opportunities.*

And if reproduction is no longer possible due to medical intervention – then in the adoption of a child.” Thus, the clinical protocol directly contradicts the Ministry of Health's already mentioned orders, which establish the corresponding prohibitions.

On the one hand, given that the clinical protocol was put into effect later for those orders, it can be considered that it reflects the Ministry's current position. At the same time, in 2017, the Ministry of Health [made an attempt](#) to lift the ban on adoption. Still, it did not bring it to completion because of high resistance expressed by many representatives of churches during public discussion of the draft updated order. With the support of the Insight NGO, a trial has begun to prove the illegality of the ban on adoptions, which is not yet completed at the time of writing.

In 2019, Global Action for Trans Equality (GATE) released the [publication](#) "Gender identity and reproductive autonomy," which focuses a lot on ART issues. In particular, it mentions the Plus 10 [addition](#) to **the Yogyakarta Principles of 2017**, which provide an additional obligation of States to ensure the right to establish a family: *"Enable access to methods to preserve fertility, such as the preservation of gametes and tissues for any person without discrimination on grounds of sexual orientation, gender identity, gender expression, or sex characteristics, including before hormonal treatment or surgeries."* It also mentions the [legislation](#) of **Argentina**, which corresponds to this principle – they are given full access to ART regardless of marital status, sexual orientation and gender identity, which applies to cases of infertility not only of a medical nature, but also for social reasons.

According to the latter, legal parents are defined as those who have demonstrated "intentional will" to become parents – regardless of whether they have provided their genetic material. GATE examines 8 different types of cases in which families can resort to ART, including 5 cases involving trans people (a trans woman and a cis woman, a trans man and a cis man, a trans woman and a cis man, a trans man and a cis woman, a trans man and a cis woman, a trans woman and a trans man). In each of these cases, the family must be recognized as parents regardless of whether their child was born simply as a result of sexual intercourse, or with the help of donor sperm or eggs, or surrogacy.

The publication also mentions advanced technologies that are just being developed:

- [Mitochondrial replacement therapy](#), which allows a pair of two people with a female reproductive system each pass on part of their genetic material to a child.
- Creating artificial gametes from stem cells already demonstrates the results of obtaining a fetus from "same-sex couples" in mice – so it should soon become available to people.
- The uterus transplantation will potentially allow trans women who wish to carry and give birth to children. It is worth remembering that one of the first attempts to transplant a uterus in history was made to a transgender woman – Lili Elbe in 1931. However, then the operation [became fatal](#), and the woman soon died. Only now has humanity come close to repeating this experience with great success.

The recognition of trans parents

If, until now, we have considered the possibility of trans people having their children while having a trans status, now we will look at the other side: the possibility of obtaining legal gender recognition for trans people who already have children.

A complete ban on recognizing trans people with children in national legislation is rare. Almost the only such country today is **Japan**, where the "law on special cases of gender status processing for people with gender identity disorder" has been in force since 2003, and in 2019 its effect was [confirmed](#) by the Supreme Court. One of the goals of this law is officially to "prevent confusion with the status of parents and children." In order to achieve this goal, in

particular, the law imposes a requirement not to have minor children (initially under the age of 20, from 2018 - under 18) in order to obtain legal gender recognition.

In **Ukraine**, the order of the Ministry of Health, which previously regulated the transition procedure, contained among the contraindications to it "having children under the age of 18," thereby limiting access to legal gender recognition. In 2015, after a lawsuit by the civil initiative "T-EMA," the court found this restriction unlawful, but soon the court of appeal [overturned](#) this decision. In 2016, with the intervention of the Insight NGO, a new procedure was approved, from which this contraindication, along with others, was removed.

In several countries, it is also worth mentioning that legal gender recognition is not legally regulated, or the law expressly provides that the decision on it is made by the court, as in **Italy, Poland, Romania, France, Switzerland**. And if, for example, in France, a court decision is more of [a formality](#), then in more conservative countries like Poland, the court can [subjectively evaluate](#) the life circumstances of a trans person, including the presence of children, and use them as a reason for the refusal.

And in general, more often, problems arise with recognizing the parental status of a trans person according to their gender – that is, for example, a trans woman as a mother or a trans man as a father. After all, this means recognizing that the mother can provide sperm to conceive a child, and the father can carry and give birth to it.

On the one hand, today, it is increasingly possible to come across documents that specify parents in a gender-neutral way, without specifying the "father" or "mother." First of all, this applies to countries where same-sex unions are recognized and, consequently, families legally differ in gender composition. On the other hand, in the birth certificates of a child, the person who gave birth to it is usually indicated as "mother," and the need to replace such a certificate may arise in the case of trans families.

So far only a few countries provide recognition at this level:

- In **Malta**, legislative changes were made in 2017, primarily aimed at legalizing same-sex marriage. These changes also included bringing the legislation into [a gender-neutral format](#), in particular, the terms "father" and "mother" were universally replaced with "parent," thereby removing the gender parameter from this sphere altogether.
- In **Sweden**, since the beginning of 2019, amendments to the law [have come into force](#), which allows specifying trans man as "father" and trans woman as "mother" in documents for a child, including changing this information for children born before gender recognition. This law is considered the first in Europe to regulate such recognition specifically for trans people explicitly.
- In **Argentina**, the Gender Identity Law provides for full legal gender recognition. However, the issue of trans parenting is explicitly addressed only in the province of Buenos Aires, where it is [assumed](#) that after gender recognition, the original birth record of the child should be invalidated and replaced with a new one, in which the trans person will be registered according to their identity.
- In some provinces of **Canada**, such as [Ontario](#), parents are gender-neutral on birth certificates.
- In the **Netherlands**, trans men who have given birth to children can be listed as parents on their birth certificates. However, this seems to apply only to cases where they gave birth after receiving legal gender recognition.

Sometimes the option to designate a parent as gender-neutral formally exists but is not available to trans people. For example, in **the UK**, under the 2008 law, this option is available only to cisgender partners of women who are giving birth to a child. [In general](#), the person giving birth is registered as the "mother," and their husband or the person providing the sperm

is registered as the "father." In 2017, the spouses of cis- and trans women tried to register the latter as a neutral parent of the child. The registrar kept asking personal questions, whether their marriage was defined as same-sex or whether the wife identified as a woman or as a man at the time of conception. In the end, they replied that they could only refer to her as "father."

The 2017 UN **Yogyakarta principles [Plus 10](#)** call on States to ensure the right to establish a family: *"issue birth certificates at the birth of children that reflect the parents' self-determined gender identity."*

In October 2018, an organization of such level as the **Parliamentary Assembly of the Council of Europe** called for recognition of trans parenting. In the [resolution](#) Private and Family Life: Achieving Equality Regardless of Sexual Orientation, it calls on the Member States of the Council of Europe *"to provide for transgender parents' gender identity to be correctly recorded on their children's birth certificates, and ensure that persons who use legal gender markers other than male or female are able to have their partnerships and their relationships with their children recognised without discrimination."* As we can see, the text is also notable for the fact that it recalled the importance of family rights for non-binary people as well.

In the explanatory memorandum to the resolution, speaker Jonas Gunnarsson makes an important argument that *"freedom of movement is in practice denied to families with a transgender parent whose gender is not legally recognised."* After all, if they travel with children, they must provide documents for them and, accordingly, in the absence of proper recognition, disclose their trans status.

The issue of recognizing the identity of trans parents has also been raised in the courts. [A court decision](#) probably influenced the adoption of the law mentioned above in **Sweden** in 2015 when a trans man demanded to be recognized as the father of the child he gave birth to, and the Tax Agency continued to label him as the "biological mother." The court took into account that legal gender recognition must occur for all legitimate purposes, while the current state of affairs contradicts that, and the recognition is necessary to protect the child's privacy. Thus, according to the court's decision, the transgender man was eventually registered as the child's father.

However, in the autumn of 2019, that is, even after the PACE resolution, in **the UK**, the court in the case of transgender man Freddie McConnell [ruled](#) that he could not be registered as the father of a child born to him. According to the judge, maternity is associated with pregnancy and birth, regardless of whether the person is legally a woman or a man. McConnell said almost immediately that he would appeal the decision.

In general, we can say that the issue of recognizing the gender identity of parents has only been actively raised in recent years. Therefore, we can expect that soon the list of countries in which it is available will begin to increase rapidly, as is the case with the number of countries that recognize same-sex unions.

Parental rights

The trials of trans people who want to have and raise children are not limited to making them and getting proper recognition. Sometimes they are faced with the need to assert their parental rights as such. In particular, this happens in situations after divorce, when the question of who the child will stay with and what will be the rights of the other parent in relation to it is decided.

The [publication](#) of the **American Civil Liberties Union** (ACLU) provides examples of court cases in **the United States**, where such issues were considered.

- In several cases (between 1982-2007), the courts restricted the right of a trans person to have custody of their genetic child for trans status as such, because in their opinion, they could cause psychological harm to the child. In some cases they ultimately deprived trans people of their parental rights.
- In some cases, the courts have granted trans people (usually trans women) custody and visitation rights, provided they conceal their own gender identity. Sometimes this actually meant that the person was forced to give up to make the transition.
- There have also been cases where courts have ruled in favor of a transgender person. In particular, back in 1973, a court in Colorado found no evidence that a transgender father's home environment could be dangerous for the physical or emotional well-being of a child. However, other courts have often relied less on actual evidence than on assumptions or even so-called "common sense" in their decisions.
- In 2004, cases involving adopted children were considered in Florida and in 2005, in Illinois. Trans men's ex-wives demanded to recognize that their marriages, as if same-sex, were invalid and, therefore, these men do not have the right to adopt their children. In both cases, the processes resulted in the removal of trans men's parental status and related rights.
- In another case in similar circumstances in the same year 2004 in Louisiana, the court, although it also declared the marriage invalid, decided at the same time that the trans father should still have custody of the child.

Similar cases have been tried in other countries:

- In 2004, **in Spain**, the ex-wife of a trans woman obtained in a local court the restriction of contacts with the child. In 2008, the Constitutional Court rejected the appeal of a trans person, arguing that the reason for the restriction of contacts was not "transsexualism" as such, but related to the transition emotional instability, which could harm the child. Finally, the ECHR [found no violations](#) of rights in this situation and confirmed the national court's decision, concluding that restrictions, in this case, are in the child's best interests.
- In **the UK**, a court has denied a trans woman the possibility of contact with a child. In its opinion, hostile reactions of the social environment to a woman's gender identity can harm the child. The Manchester court of appeal [overturned](#) this decision at the end of 2017, considering that the previous court did not even take human rights issues into account. However, it did not make a final decision, merely returning the case with its arguments back to the family court. At the time of writing, there was news that a trans woman had withdrawn her claim.
- In 2017, **in Russia**, the guardianship authorities took two adopted children from the family of a trans man because he decided to have a mastectomy. The peculiarity of the situation is that at that time this person did not openly declare his trans status. However, for the Russian court, even suspicions about him were enough to see a conflict between the interests of the children and the guardian. Subsequently, the trans person departed to Spain with three genetic children, where he [began the transition](#). In 2019, he filed a complaint against the actions of the Russian authorities in the ECHR, and this case is now being considered.

All these cases eventually logically lead to the question. Whatever the courts' decisions, they somehow appeal in their arguments to the "best interests of the child." But how do the interests of the child relate to the trans parent? Is there any real reason to believe that trans status can harm a child somehow, or is such an assumption nothing more than a transphobic bias?

Let's try to answer this question by referring to the research material.

The study of trans-parenting

Probably the most extensive study of this topic today remains Transgender Parenting, [carried out](#) in 2014 by the American **Williams Institute**, which has been conducting various studies on LGBT+ topics since 2001. It is a meta-study since it is a review of various studies – 51 in total – that at that time addressed trans parenting issues to some extent. Almost all of them (except 6) were held in the 21st century, which shows the increase in interest in the topic in recent years, while previously it was raised only sporadically.

The review divides transgender parenting issues into four aspects, each of which is discussed separately in more detail.

☒ **General characteristics of trans parents.**

- Various studies give from 15% to almost 50% of the number of trans people who have children. This is below 70% of the total adult population in the United States. However, it is still high enough that such cases are not considered separate exceptions, as they might be if the model of "true transsexual" corresponds to reality.
- Those who have children are significantly more than those who live with children. This is partly because some children are already adults and live independently, but also because trans people, as we have seen in the examples above, can be forced to limit their contact with children.
- Studies that differ in gender identity show the highest percentage of parents among trans women than trans men and gender-nonconforming people. At the same time, trans women are less likely to live with children.
- People who made the transition at a later age are more likely to have children. This is due to the fact that they usually have children prior to transition due to their own reproductive ability, which may be lost after the transition.

☒ **The quality of trans parents' relationships with their children.**

- Most trans parents have a good relationship with their children, and it does not deteriorate during the transition. In some cases, a family going through a crisis after a transgender person came out of it even stronger.
- Younger children adjust to the transgender transition more easily, while difficulties often occur with teenagers and adult children.
- The most significant stress factors for children are tension in the relationship between parents and the divorce process, rather than the transition itself.

☒ **Consequences for children with a trans parent.**

- None of the studies found the impact of a parent's trans status on a child's gender identity or sexual orientation.
- Of several studies that examined discrimination and other negative attitudes toward trans people's children, only one found a markedly increased level of bullying. In contrast, others did not show a noticeable difference. At the same time, many trans parents have prepared themselves and their families for possible cases of stigmatization and reactions to them.

☒ **The needs of trans parents.**

- Many trans parents expressed a need for social support, focusing on issues such as child care, parenting skills development, and family planning.
- trans people rarely resort to adoption because they face discrimination despite the absence of a formal ban, or simply because they fear of such discrimination.
- Also, discrimination often occurs when dealing with guardianship issues and the ability to see children after divorce – both from the courts and from former partners. They try to make meetings with children impossible in various ways.

It is noted that further research is still needed on many issues. In particular, about the difference between the experience of parenthood for trans people with different identities; about the impact of discrimination on parenting; about the difference depending on the age of becoming parent and the age of transition; about the different ways of forming a family, considering the increasing availability of ART. Long-term research is also required, with a more detailed study of the various effects of a parent's transition on children.

And if we summarize the available data, we can conclude that the main problem for children is not the trans features of their parents, but rather the close social environment that does not perceive these features and thus causes conflicts.

The study **Families in Transition** mentioned in the previous section, [conducted](#) in Belgium in 2017, also pays much attention to the issue of trans parenting.

The section of the literature review – which obviously refers largely to the same sources as the Williams Institute research – draws almost the same conclusions. Factors that affect the simplification or, conversely, complication of the transition process of a parent for children are given:

- Age of the child: younger children adapt more quickly; the experience is harder on teenagers because they are more likely to take everything personally.
- Family relationships: the ability to freely discuss and ask questions improves the relationship, transphobia of a cis parent negatively affects both the relationship and the well-being of the child.
- Social stigma can make the situation worse.
- If the child's gender matches the gender attributed to the transgender parent at birth, this may be a complication factor.
- The way the trans parent generally experiences their transition, as well as the family's accepted values.
- The transmasculine transition can be perceived easier than transfeminine because in culture usually "female androgyny" is considered more acceptable than "male femininity."

The part of the study conducted directly by the authors, who interviewed both parents and children, examines the model of "family resilience," which, if followed, should protect the family from shock during the transition. It has four aspects:

- **Family continuity.** This assumes that the transition is not something rapid, instantaneous, but occurs gradually, without abrupt changes. The transgender parent's behavior also does not change instantly but rather is simply a further development of those manifestations that were present before the transition. Everyday family activities in free time, which do not stop due to the transition, also play an essential role. All this together helps ensure that children feel safer and do not experience the transition as a loss of the parent they are used to.
- **Family communication.** The family should be able to openly and honestly discuss issues related to the transition. The child should not receive different information from different parents. Although a certain degree of privacy may be necessary, it is worth remembering that the omission of certain points can lead to speculation and the generation of erroneous interpretations. Humor can also help to deal with difficult topics.
- **Significant others' acceptance.** The child is much easier to perceive the parent's transition when it is supported by close people, first of all, the other parent. Children may also be afraid of being stigmatized by the environment, so parents must take their concerns seriously, initially raising topics related to transitioning only in a close circle of friends. At the same time, as practice shows, if children do not perceive the transition as a problem, then, in the end, others do not consider it as such either.

- **Attributing meaning.** Children usually perceive a person not just as a parent, but as a father or mother. Therefore, the transition can cause thoughts like: "have I lost my father?" "my father is now a second mother?" and so on. Sometimes children quickly switch to calling their "ex-dad" mom or vice versa, and sometimes they continue to call them by the old name. This can lead to awkward situations, but in any case, it is important not to discard all previous parenting experience. But it is worth finding the most acceptable form of transition from it to a new gender status, reflecting on the situation, sometimes forming their personal meaning of "fatherhood" or "motherhood."

Finally, the study respondents, who were more or less committed to these points, recognized that transition was not only a difficult challenge for them, but brought a lot of positive experiences. In particular, they became more impartial and stopped judging people.

The birth of children after the transition

You can see that almost all studies focus on cases where a child in a trans family was born before the transition, and very little mention is made of cases where the child was born after. There are objective reasons for this. This includes the obstacles mentioned in the previous subsections to trans people's enjoyment of their reproductive rights. And the discourse of "truthiness," which contributes to the fact that many trans people disappear from the field of view after the transition, so the future fate of them and their families is difficult to trace. Yet in recent years, more and more people have resorted to reproduction or adoption during or after the transition, and such examples are worth mentioning.

Perhaps the most famous is the case of [Thomas Beatie](#) from **the United States**, which is also the first documented case when a legally recognized trans man gave birth to a child. He decided to get pregnant by artificial insemination in 2007 after it became clear that his wife was infertile. Since then, he has given birth to three children and was officially recognized as the father. In 2012, he divorced his wife – that was not so easy, as, in Arizona, where they lived, their marriage was considered gay and not recognized, and therefore, they couldn't get a divorce until the court finally made it in 2015.

As a public figure, Beatie became the subject of numerous media publications and television programs, as well as an LGBT activist, speaking out against the forced sterilization of trans people, among other things. At the same time, he often faced rejection and ridicule – both from the cisgender society and the LGBT community, including the transgender community – because of his inconsistency with gender stereotypes and, again, the image of a "true trans man." Beatie and his new wife, who gave birth to another child, live as a happy, loving family – at least, interviews in the press and photos and videos with children [do not give reason](#) to doubt this.

Another example is Yuval Topper-Erez from **Israel**, who gave birth to his first child in 2011. In 2013, he and his partner managed to get both of them [legally recognized](#) as the child's biological parents, and they became the first such same-sex couple in the country. In fact, this was made as an exception: firstly, the Ministry of the Interior was ready to register Yuval only as a "mother", and only with the direct participation of the Minister and the Chairperson of the relevant Knesset committee, the desired decision was acquired. In May 2019, Yuval gave birth to his third child after four pregnancies. A year later, on the International Day against Homophobia, Transphobia and Biphobia, he decided to publish [photos of births](#), thus seeking to normalize the perception of trans and non-binary parents who give birth to children.

In **Ecuador**, in 2016, a child was born to the couple, consisting of two trans people, a trans woman, Diane Rodríguez, who is a well-known activist and politician in the country, and a trans man, Fernando Machado. During the transition, they did not perform genital surgery and were

able to conceive a child in the usual natural way, which was subsequently born to Fernando. They soon began [receiving threats](#), including to kill their son, about which they had to contact the police. It seems that in a country where, despite quite liberal legislation, there are quite strong transhomophobic attitudes, it might become the biggest problem for a child, and not the family's trans status as such.

There was a case when a trans man gave birth to a child in the process of transition **in Ukraine**. This [was done](#) by trans-queer activist Fritz von Klein in 2014. He did not undergo gender reassignment surgery. Still, since he was already on hormone therapy for a certain time, to get pregnant, he suspended it for the appropriate period. Although he was previously monitored in a Ukrainian clinic, the childbirth took place in another country. In the process, he repeatedly had to deal with various manifestations of both transphobia and sexism. It should be noted that he had not yet received the legal gender recognition at that time, so he was designated a "woman" on documents, although he was allowed to register under a male name in a private clinic.

If we now return to the question of whether leaving children with a transgender parent violates their best interests, it looks wrong not only from the point of view of human rights but also from a socio-psychological standpoint. It is reasonable to raise the question of what could be done to ease the stage of transition for all family members, including children – which the researchers also tried to answer.

Legal recommendations for protection

In the meantime, the **ACLU** [publication](#) Protecting the Rights of Transgender Parents and their Children provides recommendations on what trans people can undertake to ensure a stronger position in the case of a potential need to defend their rights as parents:

- Plan your gender transition process with the guidance of a doctor or therapist. It might help your former spouse or partner to be more accepting and understanding of your transition and more detailed documentation of the transition, which can be useful for the court if necessary.
- Consult with a child development expert (e.g., a child psychologist or social worker) to get advice on how to make the adjustment as easy as possible for them
- If possible, include the children's other parent in the plan for coming out to them.
- In the case of the adoption of a child, apply for it explicitly, not relying only on the fact that marriage automatically grants parental rights.
- For couples using assisted reproduction involving donor sperm or eggs, sign a consent form acknowledging an intent to be a parent.
- If adoption is not possible, you can document your agreement about your parental role.

If the case has already reached the court, where the parental rights are in question, the authors also advise parents and their lawyers. In particular, it is recommended:

- give evidence from doctors that the transition process improved the transgender parent's mental state;
- give evidence from a child development expert who was consulted on coming-out before the child;
- give evidence on transition planning with the other parent in a way that better ensures the child's well-being;
- provide expert testimony that explains what it means to be transgender;
- provide a testimony that if there is prejudice in the community against trans people, the child will not be shielded from that prejudice by separating her from her transgender parent;

- give a testimony that children of transgender parents are hardly the only children who may be exposed to teasing, bullying or other adverse reactions of peers or others in the community;
- if some time has already passed since the child learned that the parent is transgender and the child has good peer relationships—the parent or other witnesses may be able to testify about the child's experience to refute speculated harms;
- if it is argued that the parent should conceal her gender identity from her children - provide testimony about how requiring a parent to conceal a core part of herself is harmful to the parent-child relationship;
- if the child is young, testimony from an expert explaining the scientific research shows that children may have an easier time adjusting to a parent's gender transition at young ages. Thus, it is best not to delay disclosure;
- give testimony from the parent's treating doctor or therapist about how part of her treatment includes living full time in accordance with her gender identity and attempting to conceal her gender identity would be psychologically harmful;
- cite the legal framework in support of the fact that divorce does not affect parental rights;
- make arguments based on the legal doctrine of "estoppel": The legal parent should be barred from challenging the validity of the marriage or parent-child relationship that she participated in creating;
- cite to statutes or case law recognizing de facto parents.

First of all, I would like to draw attention to the fact that such recommendations are given to trans people, while cis people do not need them. One can find various explanations for this situation, but it demonstrates a fundamental inequality of positions in any case. While cis people enjoy the presumption of innocence, trans people are, as it were, by default guilty of having a trans status, and are forced to prove that it is not a problem.

If you are a cis person, we suggest this mental exercise: imagine that you would have to resort to such a set of measures to keep in touch with your child for your cis status. How would you feel? Then you can draw your own conclusion.

What trans people say

"If I had a child let say who would be 5 years old, and I am 22, I would have had to wait another 13 years. I would have been an old fart already [laughing]. To live all your life waiting for your documents to be changed, for your life to be changed... I don't know" (trans man, Ukraine).

"Anyway, the presence of [my son] supported me in taking that step [to start the transition]. Because of him I was more aware of it. He comes home from kindergarten and says 'daddy'. I would normally be the mother. I was already confused and it makes it even more confusing if that little boy already sees me as a daddy. Maybe that was an encouragement for me." (Lennert, Belgium).

"In our last months in Russia, I was afraid of any knock on the door. I felt like a survivor of a robbery. People came to my house, violating the law, using power and psychological pressure, blackmail and threats, and took away the children who had lived with me for three years. I know stories that guardians before me refused my child in an orphanage because she was bedridden, because she was considered a difficult case. We managed to cope - and then everything collapsed" (Francis, Russia).

"I'm not flying abroad because I'm very worried that I can no longer prove at the latest on the return flight that I'm the parent of my child. The idea of being in the presence of my child in a situation in which it is not clear whether I may travel with them and whether I manage to prove my parenting I find unbearable for me as well as for my child" (trans man, Germany).

"I have a very stable male gender identity. I see pregnancy as a process, and it doesn't define who I am. It's not a male or female desire to want to have a child - it's a human desire... I'm a person, and I have the right to have my own biological child" (Thomas, USA).

"We are the same as other families. Even though we might not have the same rights, we are the same. ... We always believed that our way of having children was adopting, we never believed we could have our own children. We know that as a LGBTI transsexual family we can give all the love and love that their parents could not" (Fernando and Diane, Ecuador).

"Because I don't see pregnancy as inherently feminine, and because I don't subscribe to make-believe gender roles, I wasn't threatened by the idea of pregnancy. It didn't make me feel any less masculine. As my bump grew bigger and bigger I got nervous going out in public because people would stare. They noticed my abnormal shape. There was a lot of anxiety but the most important thing for me was sending the message that pregnancy is not a gendered thing" (Kaci, USA).

"No, I probably never wanted [children]. And then I felt that here, in this life, I want to. That it's possible. I don't like children, it's true. Another question is that your child is perceived quite differently" (Fritz, Ukraine).

Summary

Key points

- ☒ Historically, trans people have been restricted in their right to have children, usually by making medical interventions involving sterilization a condition for legal gender recognition.
- ☒ Today, there is a consensus at the international level that forced sterilization is unacceptable, as well as that trans people should have access to reproductive rights.
- ☒ Although having children is usually not an obstacle for trans people to obtain legal gender recognition, recognition of their correct gender as the parents of a child is still a problematic issue. It is available in full only in a few countries.
- ☒ Where there are no legal barriers to parenthood, trans people may still face bias and discrimination – in particular, when trying to adopt or when asserting their rights in the courts after a divorce.
- ☒ However, such biases have no basis, since according to research, the trans status of a parent does not affect the child's gender identity or well-being in general.
- ☒ Society needs more education on trans issues because it is negative attitudes and stigma from the environment that create more problems for families and especially children of trans people.

Recommendations to the Ukrainian state:

- ☒ Update the Clinical Protocol that regulates the procedure for transition, so that any provisions that may be interpreted as requirements for sterilization are removed.
- ☒ Lift the ban on adoption for trans people.
- ☒ Remove any restrictions on the use of assisted reproductive technologies by trans people.
- ☒ Ensure that parental status can be indicated according to gender identity in children's birth certificates and other relevant documents.
- ☒ Take measures to ensure fair treatment based on trans status when dealing with adoption, guardianship, and child visitation.
- ☒ Conduct awareness-raising activities aimed at acceptance and reducing the stigma of trans families with children in society.

Trans children

In the previous chapter, we talked about families with children in which the parents are transgender; now, we'll consider trans children. By children, we mean all minors, usually under the age of 18, although in some countries, the age that implies full legal capacity may differ. It covers children and adolescents exclusively up to and starting from puberty, which has an impact on their perception of their own sex and gender characteristics.

In general, the transition-related needs of children, like those of adults, can be divided into two categories:

- social, including legal gender recognition and acceptance in society in the corresponding gender identity;
- medical, including procedures aimed at bringing the body in line with gender identity.

Of course, for children and teenagers it has its own peculiarities related to the legal aspects of limited capacity – that is, that children are unable to make their own decisions without adults – and to the physiological aspects of the body and its sexual characteristics, which are in the natural process of formation and development.

Recognition of the gender of minors

The "truthiness" discourse, which has been mentioned many times, defines "true transsexualism" as innate, and therefore manifests itself at the earliest possible age – almost from the moment when the child begins to become aware of themselves. It would seem that this should mean encouragement to start the transition at the earliest possible age – especially since at this age until secondary sexual characteristics are formed, changing gender expression does not require medical intervention at all, and legal gender recognition is technically a completely reversible procedure. However, traditionally, access to recognition was granted only to adults.

This kind of paradox can be explained by the fact that, first, in that discourse, legal gender recognition was considered only as a final auxiliary procedure in the medical part of the transition, which necessarily included surgical operations, and children were not allowed to do them. Secondly, children's desires and ideas are often perceived as frivolous and fleeting. Consequently, the application of any measures that can significantly affect the child's life was postponed until the time when they were old enough to take responsibility for their own decisions.

With the departure from "truthiness," when the medical and legal part of the transition gradually separated, different countries began to introduce legal gender recognition for minors on various conditions. In general, the legislation that regulates it can be classified as follows:

- access to recognition for all minors under explicit conditions;
- access to recognition for certain categories of minors;
- absence of age limits in the legislation, which indirectly provides full access to recognition at any age;
- direct or indirect restriction on the age of majority.

Among the countries and territories where recognition is available under explicitly specified conditions for all minors, the following are:

- In **Argentina**, under the [Gender Identity Law](#) of 2012, an application for gender recognition is submitted by the legal representatives of the child with their explicit consent, after which

the application is considered under the same conditions as in the case of adults. A lawsuit is also possible if the child wants to get recognition, but their representatives are against it. The judge's decision should be based on the "development opportunities and best interests of the child."

- In **New Zealand**, there are actually two different [procedures](#) for changing a birth certificate and passport, but both have no age restrictions. For children, the application is submitted by their parents or guardians.
- In **Canada**, recognition for minors is only available in [the province of Alberta](#) since 2015. It requires parental consent, although it is available to emancipated minors who have full legal capacity without it.
- In **Spain**, gender recognition without age restrictions is only available in the province of [Andalusia](#) since 2014 and since 2016 in [Madrid](#), where the procedures are based on self-determination. In the rest of the country, the age limit is 18, although children of any age can change their name with the consent of their parents or guardians.
- In **Malta**, according to the 2016 amendments to the Gender Identity, Gender Expression and Sex Characteristics Act, legal recognition [is available](#) from the age of 16 on the same terms as for adults – that is, on self-determination. At an earlier age, recognition is possible by a court decision, and the application is submitted by parents or guardians. The process should take place with "due weight given to the minor's point of view" and from the position of "the best interests of the child."
- Under a law [adopted](#) in **Luxembourg** in 2018, the general recognition procedure is available from the age of five, but a parent or guardian applies for children. However, a child over the age of 12 must explicitly consent to the change of name and gender marker. For children under five years of age, recognition is also possible but is decided by the relevant district court.
- In **Uruguay**, under a 2018 law, gender recognition [is fully available](#) to children, subject to parental consent.
- In **Australia**, legislation on gender recognition varies from state to state. A law [passed](#) in Tasmania in 2019 gives full access to recognition from the age of 16, and up to this age, documents for recognizing the gender of children can be submitted by parents.

Here are the countries where recognition is only available for certain groups of minors (for example, after reaching a certain age). If there are no further clarifications on the general conditions for recognition, it is based on the individual's self-determination.

- In **the Netherlands**, the recognition procedure has been fully [extended](#) to people aged 16 and over since 2014. The prerequisite for access to the procedure is an expert opinion confirming the person's trans status.
- In **Montenegro**, since 2014, the procedure [is available](#) for teenagers from 16 years on the same terms as for adults. Recognition is granted for medical reasons after being examined by a number of specialists.
- In **Norway**, since 2016, recognition [is available](#) for children from 6 years of age with the consent of one of the parents. Since the age of 16, it is available for self-determination.
- In **Ireland**, the general recognition procedure, which has been in effect since 2015, [applies](#) only to those who have turned 18. However, there is an exception for teenagers from 16 years of age: they can apply to a Circuit Family Court to get a court order that exempts them from having to meet the requirement to be over 18 years old.
- In **France**, according to a law adopted in 2016, "emancipated minors" [can also receive](#) recognition by a court decision in addition to adults – that is, those who have acquired full legal capacity on an equal basis with adults (for example, when parents are incapacitated

or after marriage at an early age). However, among the total number of minors, this is a fairly small group.

- In **Colombia**, the recognition procedure from 2015 is only available to those over the age of 18, but in 2017, the court made an exception for a transgender guy who was just about to turn 18. After that, the court also [set out the criteria](#) for granting recognition to minors: the will of the child's parents, expert opinions (doctors, therapists or social workers), the proximity to the age of 18, and the importance of the decision, taking into account the side effects and the possibility of its cancellation.
- In **Greece**, full access to the recognition procedure, which has been in effect since 2017 and is based on a trial, [is available to people](#) over the age of 17 (with the age of majority at 18). Between the ages of 15 and 17, you must first obtain a certificate from the medical council in Athens, which actually decides whether to allow a teenager to undergo the procedure.
- In **Kyrgyzstan**, under the 2017 recognition procedure, [an exception can be made](#) for minors if their official representatives provide the relevant notarized agreement. For all other cases, the age under 18 years is a contraindication to the medical part of the procedure that precedes gender recognition.
- In **Chile**, where [the self-determination](#) recognition procedure has been in effect since 2018, it is only available to teenagers between 14 and 18 years through a family court, either directly or through legal representatives. Children under 14 can't change the gender marker, but they can get some recognition as "transgender."
- In **Belgium**, legislation came into force in 2018 that [allows](#) teenagers from the age of 16 to obtain recognition with the consent of their parents and a psychological report confirming that this decision was free. Children as young as 12 can change their name, but not their gender marker.
- In **Portugal**, the gender recognition procedure, which has been in effect since 2018, [applies](#) only to adults. For teenagers over 16 years of age, recognition is possible with the provision of parental consent and a psychological conclusion that the decision was free without any external pressure.

In countries such as **Austria, Estonia, Germany, South Africa, Switzerland**, and so on, legislation with legal gender recognition does not contain restrictions on the age of the person who is entitled to use the procedure. However, in these countries, the procedures involve obtaining a recognition based on a medical opinion and/or a court decision, which can mean additional complications – since the decision depends on the subjective positions of those who accept it, and they are more likely to be fastidious on minors.

The legislation of such countries as **Belarus, Denmark, Ecuador, Finland, Great Britain, Japan, Sweden**, and several others contains a direct restriction on access to legal gender recognition by the age of majority. There are also indirect restrictions when the age limit is not directly in the document regulating the procedure, but it occurs through other related conditions.

For example, **in Ukraine**, per [order](#) of the Ministry of Health, a "medical certificate on change (correction) of sex", needed for further recognition, can be issued based on a diagnosis of "Transsexualism" according to the International Classification of Diseases 10th revision. However, this diagnosis can only be established at the age of over 18 years, and at an earlier age, "Gender identity disorder of childhood diagnosis" is established, which only after reaching 18 can be revised and changed to Transsexualism, and does not give the right to recognition by itself. A similar situation may occur in any country where the prerequisite is to recognize Transsexualism according to ICD-10 – in particular, **in Russia**.

Finally, there are many countries, especially in Asia and Africa, where there are no clear legal procedures for gender recognition. In such cases, as a rule, the decision is made by the court,

and in theory, minors can also have access to it. However, in practice, everything depends on the subjective views of a particular judge and what basis they rely on making their decisions.

In addition to recognizing gender at a certain age, it is also possible for children not to specify a gender marker from the very beginning, i.e., at birth. This potentially allows the child to determine gender identity more freely, without having to relate it to the assigned gender. At the time of writing, only three countries have such opportunities, and they are constrained:

- In the **Netherlands**, a temporary birth certificate [can be issued](#) for newborn intersex children. It must be replaced with a permanent one later, when the child's gender is finally determined. However, the law does not provide an explicit obligation for such a replacement.
- The situation is similar in **Germany**, where since 2013, the birth certificate of intersex children may not contain a gender marker, but also on a temporary basis. In 2018, there [was adopted](#) legislation that allows to change the gender marker to "other" or to its complete absence permanently, but this requires a medical opinion, that is, in fact, it also applies only to intersex people.
- In **Australia**, in the already mentioned state of Tasmania, the gender marker on the birth certificate [has become optional](#) since 2019. However, a binary gender designation is still entered in the registry, which has an additional 120 days to assign if it is impossible to determine it unambiguously based on the genitals.

In addition, in 2017, there was a special case in **Canada** when a non-binary person, Kori Doty, [received](#) a medical card for their child marked with the gender "U," which probably means "unspecified or unknown." However, the issue of a birth certificate without specifying the gender was refused, and Doty is seeking this through the court, wanting the child to be able to determine their gender later on their own.

Interestingly, in Ukraine, the form of a birth certificate does not contain the field "gender." However, gender is listed in [the medical birth certificate](#) and in [the birth record](#), so it is not the case to talk about the possibility of avoiding its indication.

At the international level, positions regarding trans children, their access to legal gender recognition, and overall age barriers have also been expressed by various organizations.

- **UN Yogyakarta principles** (2006), [Principle 24](#): *"...the best interests of the child shall be a primary consideration, and that the sexual orientation or gender identity of the child or of any family member or other person may not be considered incompatible with such best interests."*
- [Recommendation of the Committee of Ministers](#) on measures to combat discrimination on grounds of sexual orientation or gender identity (2010), explanatory memorandum: *"States should take measures to adequately address the special needs of transgender students in their school life (for example, to facilitate name or gender changes in school records)."*
- **Parliamentary Assembly Of The Council Of Europe**, [Resolution 2048 \(2015\)](#) Discrimination Against trans people in Europe, a call to member countries, paragraph 6.2.1: *"make these procedures [with legal gender recognition] available for all people who seek to use them, irrespective of age, medical status, financial situation or police record."*
- **UN Committee on the Rights of the Child et al.**, [Joint statement](#) Embrace Diversity and Protect Trans and Gender-diverse Children and Adolescents (2017): *"Regardless of their legal gender markers, young trans and gender diverse people should be allowed to use their own names and pronouns, and to dress according to their self-defined gender identity and expression. ... States should thus ... provide accessible and non-discriminatory legal gender recognition procedures without abusive pre-conditions, including for young trans people."*
- **Independent Expert on sexual orientation and gender identity, Victor Madrigal-Borloz** [thematic report](#) Violence and Discrimination Based on Gender Identity (2018),

recommendations: *"Enact recognition systems for the gender identity of trans and gender-diverse children, taking into account the best interests of the child as a primary consideration and respect for the child's right to express views in accordance with age and maturity."*

Transgender Europe (TGEU), in their [review](#) *Legal Gender Recognition in Europe*, notes that explicit or implicit age restrictions violate the principle that the child's the best interests must come first in all matters that concern children. As a result, such restrictions violate the non-discriminatory provisions of several international agreements, such as the Convention on the Rights of the Child, the European Convention on Human Rights, the Yogyakarta principles already mentioned, and the like.

In [another brief](#), *Legal Gender Recognition and the Best Interest of the Child*, the TGEU provides the following recommendations on recognition procedures for children:

- procedures ought to be quick, transparent and based on self-determination;
- the best interest of the child is the primary consideration in all proceedings involving minors;
- no automatic age barriers;
- no medicalization, i.e., requirements for medical interventions and diagnoses as prerequisites for recognition;
- ensure safeguards protecting the child's right to identity, for example, separate proceedings should be introduced in case parental consent is missing;
- facilitate easy name change, which may be a simpler alternative to the gender recognition procedure.

Medical standards for children

As for the medical part of the transition for children and adolescents, it is regulated by relevant standards and classifications, as well as, sometimes, by regulations of executive authorities, such as the Ministry of Health. Medical diagnoses work as cornerstones because they set the basic criteria that other standards rely on in one way or another. At the global level, such diagnoses are primarily determined by the International Classification of Diseases (ICD), as established by the World Health Organization, so it applies to all UN member countries. However, the Diagnostic and Statistical Manual of Mental Disorders (DSM) published by the American Psychiatric Association also has some influence on the medical community. So let's look at the diagnoses of these two classifications concerning trans children.

- **ICD 10th revision** (1990): F64.2 [Gender Identity Disorder of Childhood](#), category "Mental and behavioral personality disorders." It is a current diagnosis in most countries of the world, including Ukraine. It can be set at the age before puberty or up to 18 years (in Ukraine - up to 18 years). The diagnostic criteria are written out separately for "girls" and "boys" - thus, this diagnosis cannot be applied to children with non-binary identities.
- **DSM 5th edition** (2013): [Gender Dysphoria in Children](#), category "Gender dysphoria". Directly applied by mental health professionals in the United States. It can be diagnosed at the prepubescent period. In contrast to ICD-10, here, the criteria are binarized to a lesser extent - for example, the wording "other gender" is used instead of "opposite."
- **ICD 11th revision** (2019): HA61 [Gender Incongruence of Childhood](#), category "Conditions related to sexual health". The classification should come into force in 2022, but each country will organize the implementation process separately. However, we can expect that soon Ukraine will adhere to it - so it already deserves attention. Children could be diagnosed here, as well as in the DSM, at the prepubescent period.

It is worth mentioning that the approval of ICD-11 was preceded by a debate as to whether a diagnosis is necessary for children at all. The position for its abolition was taken primarily by trans activists. In particular, from the beginning of the reform of the ICD, it was consistently supported by the organization **Global Action for Trans Equality** (GATE). They [argued](#) that this diagnosis would not be of any use, because trans children do not require specific medical interventions before puberty, but placing a diagnosis on them can increase stigma and discrimination. Although theoretically, there is a chance that by 2022 the classification will be amended, and in particular, this diagnosis will be removed. However, there are no direct prerequisites for this yet.

Diagnoses only set the basis for more specific conditions of medical interventions, which are prescribed in clinical recommendations. So let's see what they recommend for trans children.

The World Professional Association for Transgender Health's (WPATH) [Standards of Care](#) Version 7 have a separate section for children and adolescents. In particular, it notes that gender dysphoria in adolescents is more stable than in younger children and is more likely to persist into adulthood. The competencies and roles of mental health professionals when working with children and adolescents are considered. It is recommended to approach social transition carefully in early childhood since studies on this topic are still lacking and consult with specialists.

As for the medical interventions actually, they fall into three categories:

- **Fully reversible interventions** – hormone blockers to suspend puberty, which can be restored if they are canceled.
- **Partially reversible interventions** – masculinization (testosterone) and feminization (estrogen) hormone therapy.
- **Irreversible interventions** – surgical interventions.

The WPATH standards recommend the use of sex hormone blockers after puberty for adolescents if they persistently show signs of gender dysphoria or nonconformity. The use of hormone replacement therapy is allowed with parents' consent in modes adapted for young people. Surgery for minors is not allowed – an exception can be made for chest surgery for transgender boys after ample time of living in the desired gender role and after one year of testosterone treatment.

Because WPATH is widely recognized as the most authoritative organization in transgender health care, other clinical guidelines often take it as their basis or at least refer to its standards.

- The Clinical Practice Guidelines of the International **Endocrine Society** [focus](#) primarily on hormone therapy and generally inherit the WPATH recommendation regarding the preferential use of blockers, but provide additional evidence-based arguments for this. We will return to it in more detail soon.
- In the UK, medical services that deal with trans adults and children are separated from each other and have separate medical standards. Trans children and adolescents are provided with assistance at the **Gender Identity Development Service** (GIDS), which is supported by the state and the basics and principles of which are described in a [publication](#) from 2018. In particular, teenagers and their families are required to be warned about the possible loss of fertility. At the same time, they offer options for preserving reproductive material, which should be taken into account when choosing so that they do not lead to severe gender dysphoria. Similarly to WPATH, GIDS recommends blockers to suspend puberty, and full-fledged hormone therapy is allowed if the adolescent is fully inclined to live in the desired gender. Surgical interventions are also possible only after the age of 18. Unlike the WPATH standards, it also mentions teenagers with non-binary identities who may need special approaches.

- In **Australia**, medical interventions for minors [are divided](#) into two stages. The first stage is puberty suppression; it involves the use of puberty blockers, which can be started at the early stages of puberty. The second stage is the gender-affirming hormone treatment, usually available at the age of more than 16 years. Surgical interventions are available only after reaching the age of majority. Until recently, access to both stages was granted only by decision of the Family Court – even with the full consent of both children and parents. After a series of lawsuits involving several families with trans children, the approach was changed so that court permission is only required in cases of disagreement between children, parents or doctors who provide care – from 2013 for [the first stage](#) and from 2017 for [the second](#). The actual medical procedures are regulated by the instructions of the Endocrine Society.
- The Unified clinical protocol of medical care for [gender dysphoria](#) by **the Ministry of Health of Ukraine** contains a separate section for children and adolescents, the recommendations of which also follow the approaches of WPATH. At the same time there is a certain contradiction in the issue of access to medical interventions. While Ukrainian legislation generally allows to choose independently doctors and treatment methods from the age of 14, the Clinical Protocol allows such interventions only with the consent of parents.

It can be seen that despite small differences, modern medical approaches are unanimous in key positions:

- any medical intervention for minors can only be performed after the physiological onset of puberty;
- during puberty, preference is given to sex hormone blockers, which is considered entirely reversible;
- completely irreversible interventions, such as surgery, are not performed before the age of majority.

Controversial questions on blockers

Just at the beginning of 2020, a [lawsuit started](#) in **the UK**, in which a mother of a trans child and a former psychiatric nurse at a children's gender clinic are seeking to declare illegal any hormonal interventions for children under the age of 18. According to the lawyers supporting them in this case, the minor cannot provide proper consent for medical interventions.

Although the focus here was on the issue of children's ability to make conscious decisions, however, the use of puberty blockers is debatable in itself. For example, in Great Britain, the **Transgender Trend** movement unites parents and some scientists who question modern approaches to recognition of gender identity and transition for children. Regarding blockers, they [point](#) to such potential problems:

- the presence of side effects, such as their impact on bone mineral density;
- lack of sufficient data on long-term consequences;
- lack of data on whether their use is truly reversible;
- possible problems from the suspension of puberty as such – for example, insufficient development of cognitive functions.

Now it's time to look at what medical standards that recommend the use of blockers, and scientific research in general, say about this.

The **WPATH** standards mention that the use of blockers can have side effects, particularly on bone growth and height. Also, the suspension of the genitals' growth for trans girls who will have vaginoplasty surgery in the future may result in insufficient penile tissue for penile inversion vaginoplasty techniques. However, the standards do not go very deep into the topic,

merely recommending that any therapy be performed under the close supervision of a pediatric endocrinologist.

More detailed on the issue of side effects is the [guideline](#) of **the Endocrine Society**. It indicates the risk of adverse effects on bone mineralization, which is confirmed by several studies. However, some studies also show that after stopping pubertal suppression, the density returns to normal. It is recommended to use calcium and vitamin D to counteract the side effects. In some cases, the use of blockers led to arterial hypertension, so it is recommended to monitor blood pressure before and during treatment. As for effect on brain development, the guide points to a limited amount of such data, which is still confirmed in animals, but not in humans. Among the side effects mentioned is that the use of puberty blockers followed by the transition to sex hormones eventually leads to loss of fertility, which must be discussed before starting therapy.

If scientists generally agree that data on the undesirable effects of hormone blockers are still ambiguous and insufficient, why are they still recommended? Among the arguments for the same guide gives the following:

- pubertal suppression can expand the diagnostic phase by a long time, giving the child more time to explore options and live in the experienced gender before deciding to proceed with gender-affirming sex hormone treatments and/or surgery;
- the experience of full endogenous puberty is an undesirable condition for the GD/gender-incongruent individual and may seriously interfere with healthy psychological functioning and well-being;
- therapy with blockers, on the contrary, has shown to improve psychological functioning in several domains;
- blocking puberty with the subsequent implementation of transition gives better results in terms of matching the appearance of the desired gender, than if you just start the transition after the end of puberty.

The Endocrine Treatment Guideline refers, in particular, to a 2014 study [conducted](#) in the **Netherlands**. It involved 55 trans adolescents who were examined three times: before using blockers, at the initiation of gender-affirming hormones, and a year after surgery. Their psychological state and objective and subjective indicators of well-being were studied. The researchers found a partial improvement in psychological state in the interim, and after completing the transition, their well-being was similar to or better than that reported by age-matched young adults from the general population, and none of the study participants regretted treatment.

As for the statement about the complete reversibility of the action of blockers, it is rather theoretical in nature, mainly because, in most cases, after their use, adolescents switch to full-fledged hormone therapy. Another [comprehensive study](#), which was also conducted in the Netherlands over a long period of 1972-2015, found that out of more than 800 adolescents, only 1.9% refused to continue using blockers. The same study found only 0.5% dissatisfied with the transition results, which is generally on the verge of statistical significance.

To sum up, the use of pubertal blockers is a choice in which there is a very likely psychological improvement in the short term on one side of the scale, and on the other – uncertain potential risks and loss of the ability to have genetic children of their own in the longer term. And in the end, life, including in adolescence, is filled with choices, often with an even greater degree of uncertainty, and this can hardly be a reason to prohibit them. At the same time, this is also not a reason to mindlessly follow the recommendations of even major authorities. In the end, any choice should be approached carefully and taking into account the individual situation.

State regulation in education

The issue of children's gender identity and their ability to express it depends not only on what marker is in the child's documents and what medical diagnosis they have but also to a large extent on how society perceives them in the context of gender; whether it tries to impose strict gender attitudes on them, taking into account their "assigned gender," or allows them to develop freely, taking into account self-determined gender identity or leaving opportunities for such self-determination.

In addition to the family, educational institutions play a key role in this. After all, the child not only directly receives knowledge that affects their ideas, including on sex and gender, but also spends a significant part of their life there. Today, about half of European countries have a ban on discrimination in education based on gender identity in their legislation. However, the existence of such a general wording does not say much about how protection against discrimination is translated into reality. Therefore, it is worth looking at more detailed policies and actual practices that are recommended and implemented in educational institutions.

In **Malta**, [policies and procedures](#) for trans, gender-variant and intersex students in schools were also made public shortly after the introduction of the advanced law on legal gender recognition in 2015. They provide a holistic approach involving teachers, administrators, parents and students to improve the well-being and learning environment. The goal of these policies is to create an inclusive and safe environment in schools that is free from discrimination, to support human diversity that includes trans and intersex students, and to provide a school environment that is physically, emotionally and intellectually safe for all students. Policies and procedures include:

- A list of international and national legal instruments related to children's rights in general and specifically in the field of education and in the context of sexual orientation and gender identity.
- The main problems faced by trans, gender-variant and intersex students.
- The basic needs of these students.
- A detailed review of their characteristics in the context of gender identity, the need for transition, medical interventions, and the use of correct non-pathological terminology.
- Recommendations on how the staff of the educational institution should act if the student needs a transition.

As for the transition actually, when the student wants to start it, the school is encouraged to develop a School Transition Management Plan based on what period will be the best for such changes (for example, vacation). It is noted that it is necessary not to wait for the decision on gender recognition to be made by the court but to focus on the desire of the student, agreed with parents, from the moment when the recognition procedure has just begun. Special attention is paid to the following aspects:

- use of the desired name and pronouns congruent with gender identity;
- the ability to switch to clothing that matches gender identity within the school dress code;
- privacy protection, in particular by limiting the number of staff who are aware of a student's transgender or intersex status;
- access to gender-specific spaces, such as toilets and changing rooms, according to gender identity, or be provided with a safe and non-stigmatizing alternative. However, requiring a trans, gender variant or intersex student to use a separate, non-integrated space threatens to publicly identify and marginalize the student as trans or intersex and should not be done unless requested by a student;
- students shall be permitted to participate in physical education classes and sports activities, including competition sports, in a manner consistent with their gender identity;

- all school documentation for a student must be changed after the court has ruled on legal gender recognition; also, after recognition, any certificates and diplomas must be replaced at the request of the student;
- the schools should be vigilant for any bullying, harassment, or discrimination of students based on a person's actual or perceived sex, sexual orientation, gender identity, gender expression, or sex characteristics.

Malta's approach is probably the most comprehensive at the state level. In other countries the state is more concerned with specific aspects:

- In **Portugal**, the law on legal gender recognition, which has been in force since 2018, [contains](#) a section on education and teaching. It provides that the state should implement mechanisms to prevent and combat discrimination based on gender identity, expression and sex characteristics, and mechanisms to counter situations in which the well-being of trans students may be at risk. Conditions must be created to avoid all forms of exclusion and violence in schools and to respect the autonomy, privacy and self-determination of students that transition. There should also be training for staff in educational institutions and a review of the school curriculum to include gender identity issues. Finally, all educational institutions must ensure that students are properly respected, taking into account their gender identity, expression, and gender characteristics.
- In 2017, in the province of Castilla-La Mancha, **Spain**, the local government [introduced](#) a protocol dedicated to supporting trans minors in the educational, social, and medical fields. The protocol provides for the free development of the personality of trans students, in particular, the staff must address them by their chosen name, regardless of what is in official documents. Students should be allowed to wear clothing and use toilets and changing rooms in accordance with their gender identity. The protocol also provides for the possibility of resorting to special measures if a trans child suffers from domestic violence or is homeless.
- In **the Netherlands**, since 2010, the Ministry of Education, Culture, and Science has recommended that students' gender be [displayed correctly](#) in their diplomas. Classes where there are trans students receive special instructions, in particular training for teachers. Since 2015, every school must have a social security plan. Also in the Netherlands, gender diversity [is a mandatory part](#) of the curriculum, although its content remains the responsibility of particular educational institutions.
- In **Sweden**, future teachers receive mandatory training on countering discrimination and violence. The National Agency for Education also provides training for teachers who are already working, which is based on a [norm-critical approach](#) to LGBT youth. This approach involves questioning the prevailing social norms, rather than individuals falling outside of them.
- A number of countries according to the Council of Europe data for 2017, such as **Denmark, Finland, France, Germany, Iceland, Ireland, Montenegro, Norway**, [contain](#) issues of gender identity and gender diversity in their basic national educational programs. In general, such programs have 26 European countries, but with a greater degree of optionality for educational institutions in how to fill and implement them.
- According to the same data, in countries such as **Belgium, Germany, Ireland, Sweden, and the United Kingdom**, teachers can receive training on issues such as gender identity through state support. In a number of other European countries, 21 in total, such training is also held, but not within the entire country or on a permanent basis.

Experience of individual educational institutions

In addition to the approaches that are being implemented at the national level, there are also cases when certain policies regarding transgender students are introduced in separate educational institutions.

- In the British city of **Brighton & Hove**, a Trans Inclusion Schools Toolkit [has been prepared](#), in 2018 there are already three versions, intended for all educational institutions in this city. It has a very thorough approach to the topic - starting from basic definitions, covering data on the situation of trans children including personal experience, legislation, principles for building a holistic system for preventing transphobia in school, support for children, adolescents and their families in transition, the specific needs of trans children and those who doubt their own gender identity, and even giving typical examples of possible situations and responses to them. The aspects covered by the publication are generally the same as in the above-mentioned Maltese policies, the use of names and pronouns, school uniforms, access to gendered spaces, opposition to bullying, but are covered here in even more detail. They also advise on the medical part of the transition and even in areas such as communication with the media, where it is important to maintain confidentiality. Although some recommendations of the guide are linked to specific local realities, such as systems for documenting students, most of them are universal. They could be applied in virtually any school if desired.
- In Iceland, a gender-neutral policy [was introduced](#) at a primary school on **the Reykjanes Peninsula** in 2016 to create a more inclusive environment. They removed gender marks from toilets and abolished the rules that established gender-specific clothing in swimming classes. The goal is to make the school gender-neutral not to force children to choose one of two genders. It is interesting that, to a certain extent, this approach contrasts with the [Hjalli model](#), implemented today in a big network of kindergartens and primary schools in Iceland. This model also aims at gender neutrality and equality, assuming the same uniform, toys, and training programs for girls and boys. However, it also provides for the division of children into small groups of the same sex, to compensate for the gender attitudes that they receive from the external environment. However, it is noted that children with non-binary identities can freely choose which groups to join.
- In Sweden, gender-neutral approaches [are being implemented](#) in certain preschool institutions, in particular in Egalia, which has existed since 2010 in the suburbs of **Stockholm**. The rules of this kindergarten provide for the complete rejection of male and female personal pronouns, instead of which the neutral "hen" is used, or such addresses as "friend." Gender-specific words like "boy" and "girl" are also not used. In kindergarten, there are no books whose characters have firmly fixed gender roles, and toys are distributed equally so all children can play with them. According to the kindergarten director, this should give children more choices and not limit them to social expectations related to gender.
- In **Vancouver**, Canada, the school Board in 2014 [adopted a policy](#) that introduced gender-neutral pronouns that can be used to address those students, particularly trans and intersex students, who are uncomfortable with being addressed "he" and "she." It was also provided that students will be able to use the restrooms they want, regardless of their gender marking.
- In the capital of Chile, **Santiago**, [a special school](#) for trans children aged 6 to 17 was opened in 2017. The goal was to create an environment in which such children would be free from discrimination, for which they often miss classes in regular schools, and sometimes can not finish them at all. In addition, discussion of "gender ideology," including sexual orientation and gender identity, is prohibited in public schools in Chile. At this very school, children are

perceived according to their identity, regardless of the gender marker in the documents. As of mid-2019, the school had 28 students divided into two classes - before and after 12 years. The school is private and is supported by its founders, who are trying to keep school attendance fees at a minimum level and seek external grants, hoping for further expansion. As for Swedish kindergartens, [a small study](#) was conducted there in 2017. It showed that children in these institutions are less likely to consider the gender of unfamiliar children in their interest to play with them. They are also less likely to associate gender with the corresponding stereotypes, but they determine gender by the appearance in the same way as ordinary children. Norwegian researcher Nina Rossholt believes preschool institutions have little impact because outside of them, children still interact with a thoroughly gendered society.

The situation in **the United States** deserves special attention. There is a general Title IX - an amendment to the law prohibiting gender discrimination in education. During the presidency of Barack Obama in 2016, the Department of Justice, together with the Department of Education, prepared a [manual](#) that extended the effect of this amendment to gender identity and explained that the treatment of transgender students should be based on their identity. In particular, they should be addressed using their desired names and pronouns. They should be allowed to participate in gender-segregated activities and access to gender-marked premises according to gender identity. Also, their trans status should not be disclosed without their consent.

On the one hand, the initiative had much support. On the other, it provoked opposition from conservatives, particularly in attempts to limit its effect or get it canceled through the courts in individual states, such as [as Texas](#). In 2017, after Donald Trump and the Republican party came to power, the guidance was withdrawn, and the administration allowed States to set policies on trans students at their discretion.

At the same time, the legacy of this is the [publication](#) of Examples of Policies and Emerging Practices for Supporting Transgender Students, which collects such examples from educational institutions in different states of the US and links to documents that regulate them. Examples are grouped by topics such as student transition, confidentiality and school records, sex-segregated activities and facilities, practices to support trans students, and terminology. Even without being mandatory, this material can be used as a set of models that can be used to build a trans-inclusive school environment.

Objects or subjects?

If the Title IX case is perhaps the largest example of resistance to the freedom of self-determination of trans children, followed by a backlash at the political level, in other situations, the opposition concerned individual trans children and occurred at the level of the courts.

One of the most remarkable is [the case](#) of Gavin Grimm in **the US**. In 2015, while at school in Virginia, he came out as a trans boy and started using men's restrooms. In response, the school issued an order for students to use toilets and changing rooms according to their "biological gender." At the same time, the school administration addressed Grimm with insults and incorrect statements. With the American Civil Liberties Union's legal support, he filed a lawsuit against the Gloucester County School Board. However, the judge ruled against him, citing that protection from discrimination concerns only gender, not gender identity, and called being transgender a "mental disorder." The case was appealed, and after a series of trials at various levels, only in 2019, the district judge of the Eastern District of Virginia decided in favor of

Grimm. The school's policy was called discriminatory, and it was forced to reimburse all legal expenses and recognize Grimm's gender identity in all documents.

At a school in Pennsylvania in 2016, there was a case where cis students filed a lawsuit against a school policy that allegedly violated their rights by allowing trans students to use restrooms in accordance with gender identity. At various levels, courts [rejected their claim](#) and recognized the school's policy as constitutional.

In **Argentina**, where the Gender Identity Law has been in force since 2012, according to which minors have repeatedly received recognition, in 2018, the civil registry of Buenos Aires unexpectedly [refused](#) to recognize a trans girl and two trans boys. The conclusion stated that an interdisciplinary body should first be formed to determine whether children are mature enough to give proper consent. The Office of the Ombudsman appealed this decision, demanding a detailed justification for the refusal. According to the lawyers, the legislation does not provide any conditions for the intervention of interdisciplinary institutions in the recognition process, so this decision looks quite groundless.

In **Germany**, the Transsexual Law initially set an age limit of 25 years. In 1982, the court [decided](#) on a case of a 21-year-old trans woman for a restriction on legal gender recognition, and in 1993, three trans men aged 22-24 were also [refused](#) a name change. In both cases, the court found the age restrictions unreasonable and lifted them. At first glance, this does not apply directly to minors. However, it is essential that by removing these restrictions, the court did not set other ones, making the procedure accessible to children.

Also, **in Germany**, at the end of 2017, the Constitutional Court [ruled in a case](#) concerning custody of a trans girl. If the child's mother supported her female identity, the father did not recognize her, forbade her to wear women's clothing, and insisted that she had to cut her hair. The local court first granted the father sole custody. The mother appealed the decision, and the Constitutional Court eventually overturned it, recognizing that the child's best interests and well-being were not taken into account.

A similar situation [occurred](#) in **the US** state of Texas. Here, the parents also had different views on their child's gender expression, who identified as a girl starting at age 3, and was diagnosed with gender identity disorder at age 5. The father decided that pandering to a child's gender identity is cruelty to a child and filed for the mother in court. At first, the court also sided with the father. However, the judge reversed this decision and granted the parents joint custody, which also provides joint decision-making on medical and psychiatric procedures for the child. The situation gave rise to discussions, including in the political environment, in which conservatives spoke from the position that a child at this age could not make a real choice of gender identity, therefore, instead of supporting them in such desires, we should wait for them to come of age when they can decide for themselves.

The idea that the child cannot make decisions on their own, but is only an object whose fate should be decided by adults, somehow runs through all the cases mentioned above, even where this issue was not raised directly. But there are stories in which a trans child acted as a subject, created their destiny, and changed society, and their relatives supported them in this.

This can be seen in particular in the case of [Jazz Jennings](#), perhaps the world's most famous trans child, now an adult girl born in 2000 in **the United States**. She initially had family support: at five years old, she was diagnosed with "gender dysphoria" and soon began to transition. And since the age of six, she has virtually become a public figure, regularly appearing on television with stories about her trans experience. Since 2015, together with her family, she has starred in the TV series *I Am Jazz* about her life and transition. In 2007, together with her parents, they founded the [TransKids Purple Rainbow Foundation](#), whose mission states explicitly that "it is society that needs to change, not children," and that families must support their children and help them grow up free of gender roles. The case of Jazz shows how a trans child can make a

successful transition and become an example, a role model, inspiring others, and helping them.

Another story in which a trans child became the driving force of social change is [Willa Naylor](#) from **Malta**. She felt like a girl from an early age, and her parents initially resisted this, but soon understood and supported her. However, according to the legislation of that time, Willa had to go to school as a boy. Feeling very uncomfortable, she avoided contact with other children there so that doctors even suspected that she had selective mutism. Parents urged the school authorities to allow her to attend school as a girl, but they nodded in the direction of government policy, which they could not violate. In the end, the parents reached the Minister, who promised changes. So the campaign launched by Willa and her parents was one of the factors that changed the legislation for legal gender recognition and policies regarding trans children in schools, already mentioned earlier. She later became the author of the [book](#) *Truly Willa*, dedicated to her story, so that other people can better understand what it means to be a trans child.

However, there are always those who see in such stories not subjectivity, but [only](#) the desire of parents to benefit from the characteristics of their children and support for the "ideology of transgenderism." But in any case, as the [joint publication](#) "Back Me Up!" of TGEU and Humboldt University reminds us, **The UN Convention** on the rights of the child includes the right of the child to be heard: "*States Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child.*"

Social studies of trans children

In the previous section, we have already raised the issue of the "best interests of the child" in terms of how they are affected by the trans parent. Now let's look at the same question in a different situation – when the family has a transgender child. To do this, again, let's look at the research data.

In 2019, the results of a significant study **Similarity in Transgender and Cisgender Children's Gender Development**, which was conducted in the United States among transgender children, [were published](#). The study included 317 children from almost all states of the country aged 3 to 12 years, who at the time of the study had already made a social transition, that is, for some time, lived in accordance with their gender identity. The goal was to compare the features of their identity and behavior with cisgender children. Two separate groups were taken for comparison: cis siblings of trans children, and just a control group of unrelated cis children. The main results were as follows:

- trans children clearly identify with their current gender, which is different from the one assigned to them at birth, and demonstrate typical benefits and behaviors;
- their gender identity and benefits are generally no different from cis children;
- gender-specific developmental features were also found to be similar for cis and trans children;
- there is almost no difference in the gender manifestations of children, depending on how much time has passed since their transition.

Regarding the last point, the only small difference was that children who made the transition recently were more likely to choose more stereotypical clothing according to their gender identity. In general, there was no significant difference between children, for example, ten years old, whose transition took place a year or five years ago. The authors of the study believe that this does not mean that gender socialization does not have an impact. In their opinion, this rather means that at an early age, when children begin to learn the difference between genders and their characteristics, trans children tend to socialize in accordance with traits that

are not inherent in the gender they were assigned to. This can be considered the "nail in the coffin" of the popular "parenting theory" of the last century, according to which a child's gender identity is formed depending on the gender role a child is raised in. In scientific circles, this theory, at least in such ["head-on" approach](#), has not been seriously considered for a while, but conservatives continue to grasp at it. It is also interesting that a certain divergence that children showed within the same group, that is, a greater or lesser propensity for stereotypical femininity or masculinity, was equally evident among trans and cis children.

Researchers also point to certain limitations of their work. In particular, in all participating families, parents accepted the identity of their trans children, so the question remains of how a less friendly family environment can influence its development. Also, all these families belong to the western culture of educated people who live in affluence, so what the picture would be in a wider socioeconomic range is also questionable.

In any case, we can conclude from the study that when a trans child is provided with conditions in which they develop in accordance with their gender identity, they will not differ significantly from cis children except the very fact of trans status.

Despite all the limitations, these results go against the prevailing view that transgender manifestations are just a stage of development that children "outgrow" over time. Moreover, this point of view seems to be supported by several studies that focused on children first diagnosed with "gender dysphoria," but who later desisted from transition. The number of such children is estimated from 60% to 95%.

In recent years, however, these studies [have been criticized](#). First of all, because previously, the identification of transgender status was based not on the features of gender identity, but on gender nonconformity such as crossdressing. With more modern approaches, many of the "desisters" would not have qualified as transgender from the beginning. In addition, the researchers counted cases when children simply did not return to the clinic where they first applied – obviously, this in itself does not indicate an intention to refuse the transition and return to identification with the assigned gender.

Finally, it is noted that today's reality offers a wide range of gender identities in addition to the traditional "female" and "male" ones. In such circumstances, the classification with only two options – continuing or stopping the transition – also turns into a false dichotomy, as more and more trans children (one-third according to a 2015 [survey](#) in the US) define themselves as non-binary. At the same time, they may want other transition options, which they may not always be able to obtain in gender clinics, which usually have experience only with trans boys and trans girls.

Another 2016 study, **Mental Health of Transgender Children Who Are Supported in Their Identities**, also [conducted](#) in the United States, examined the mental health of trans children and how it is affected by family support. It involved 73 children aged 3-12 years, who were also compared with their siblings and a control group of cis children.

Levels of depression and anxiety in children were considered. The results showed that for depression, they do not differ from the general population, while for anxiety, the level is slightly higher, but only slightly. Researchers explain this increase by the fact that, no matter how great the relationship in the family would be, the child spends some time in other social environments – for example, in school, where they may face manifestations of stigma and microaggression. If they do not disclose their trans status, they may still be concerned that it will somehow become known, for example, that their body is different from other children of the same gender.

The authors compare their results with data from other studies conducted among trans children, particularly in the Netherlands and Canada, in which the acceptance factor was not

considered separately. In them, the level of mental problems in children, such as depression and anxiety, was high – in one study, 36% of cases fell within the clinical range for this indicator.

The 2017 Belgian [PhD work](#) **Families in Transition**, already mentioned in previous sections, also addresses the issues of families with trans children, but more on the part of the parents of such children. It is noted that they often feel responsible for the situation and, at the same time, guilty, and this is reinforced by social condemnation and stigmatization. They are afraid of being bad parents in the eyes of the public environment for supporting the child's gender nonconformity instead of adapting it to social gender norms. Conflicts in families are a common situation. At the same time, mothers are more likely to accept a position based on unconditional love, while fathers are more likely to deal with security issues. In general, parents often lack professional support and the ability to communicate with other families in similar situations to better cope with them.

If the studies mentioned above explicitly focused on the transition process and its impact on the child, now let's look at the social status of trans children in their daily lives.

One such study from the 2018 **Health and Well-Being of Cisgender, Transgender and Non-Binary Young People** [was conducted](#) in Spain – it, however, covered not only minors but a wider range of transgender and non-binary youth aged 14 to 25 years. Its results showed that trans teenagers are more likely than cis ones to be verbally assaulted both in and out of school, as well as physically assaulted at school. Also, non-binary youth are more likely to become victims of cyberbullying. In addition, the study looked at cases of discrimination at work – although this applies to older youth, we note that in this area, the indicators for trans people are particularly worse than for cis people.

The researchers also looked at factors that contribute to support. It turned out that non-binary teenagers are less likely to participate in extracurricular activities - even in the LGBT community - and also receive less support from family and friends.

All this has consequences such as feelings of isolation and suicidal thoughts – almost twice as often as among cisgender youth – and less often moments of happiness.

At the same time, it is noted that the contacts of participants in this study were obtained through the LGBT Association, which may affect the results. For people who do not have access to the community, the outcomes might have been even worse.

In the previously mentioned [study](#) by **the European Union Agency for Fundamental Rights** conducted in 2012 in EU countries, the survey was conducted among trans adults. However, they were also asked about their school experience under the age of 18. The following data was received:

- 78% did not disclose their trans status at school, with trans girls and gender-variant children being the least open;
- 35% rate the school atmosphere as generally negative towards LGBT, 24% as positive, and others as somewhat mixed. At the same time, the worst indicators are in countries such as Greece, Portugal, Italy, Great Britain, Croatia, and the best - in Latvia, Denmark, and the Czech Republic;
- 38% received negative comments at school, with trans boys and queer people more than others (the latter are also the most open group).

Based on the methodology of this part of the study, it is worth noting that these data relate to the prior period from 10 years to decades ago so the current data could differ.

The **U.S. Transgender Survey** of 2015, which covered more than 27,000 trans people, [provides](#) the following data on their school experience:

- 54% were verbally harassed;
- 52% were not allowed to dress in a way that fit their gender identity or expression;
- 24% were physically attacked;
- 17% left a school because the mistreatment was so bad, 6% were expelled from school;
- 13% were sexually assaulted;
- 77% overall had some negative experience because of their trans status.

Finally, in 2017, **the Human Rights Campaign** (HRC), with support from the University of Connecticut, surveyed LGBTQ teenagers that included 5,600 trans and gender-expansive youth. Data on them [were published](#) in a separate Gender-Expansive Youth Report. Among the main results obtained, the researchers cite the following:

- 23% of youth feel like they can definitely be themselves at home, 22% - at school;
- 72% hear their parents make negative comments about LGBTQ people;
- 85% rate their average stress level as "5" or higher on a 1 to 10 scale;
- 69% have received unwanted sexual comments, jokes, and gestures in the past year;
- 16% (twice as many as cisgender peers) were victims of sexual violence;
- 16% feel safe at school;
- 84% have experienced verbal threats because of their actual or perceived LGBTQ identity, 42% have received physical threats;
- 51% never use the restroom at school that aligns with their identity because they don't feel safe using them, or don't know if they're allowed to use them;
- 22% are out to all of their parents regarding their gender identity, 10% to teachers and school staff, and 13% to classmates.

So what ultimately creates more problems for children – their gender non-conformity or the way the environment treats it? If you keep in mind the preliminary data and look at these, the answer seems obvious.

From all the data provided, there is at least a straightforward conclusion: trans children have the least problems when they receive the most support. Therefore, when it comes to the "best interests of the child," it should be borne in mind that their achievement is not limited to answers to questions about what to do with the child and their trans features, but also requires working with the social environment in which this child lives.

What trans children say

"Bullying is already an enormous problem for high school aged youth, and especially transgender youth. To hear adults of my community treat me as if I was a creature for their ridicule and observation, or some oddity on a stage was incredibly dehumanizing to an extent I could not possibly convey" (Gavin, USA).

"I hope they [the audience] understand the importance of unconditional love. That's always been the core of my family's message. You just have to love and appreciate all people for who they are, including our differences. We're all beautiful and unique and we just have to learn to embrace that" (Jazz, USA).

"The biggest issue I really had was around toilets. I definitely didn't want to use the girls' toilets and I didn't feel comfortable using the boys knowing that most of the people in there knew I was trans. I was given permission to use either of the two accessible toilets but was often questioned by staff and students whenever I was spotted leaving them, which further illustrated the feeling that I shouldn't be using them as I'm not disabled" (trans teen, UK).

"The doctor keeps on asking me if I am ok about my body. If you ask someone enough times, you start thinking you are not" (David, Belgium).

"I have been taught to believe my whole life by my parents that being LGBTQA+ is a sin and should be hidden. I wouldn't want to discuss such matters with the fear of having my parents find out anything" (trans teen, USA).

"I've always been a girl. ... Everybody told me, 'No. Get in the line for boys.' I didn't listen" (Luana, Argentina).

"My message to other transgender children is to brave, even when it feels hard, because there is light at the end of the tunnel. My experience since transitioning has been very good; a lot of people have accepted me and I am very happy that it has gone really well" (Willa, Malta).

"It makes me feel happy that I'm now living as the person I always wanted to be. I want my dad's body with a six pack. Before I was thinking I just really want to be this person. Will my parents say yes? I thought God didn't love me. I now know that God loves me no matter what and accepts me for who I am" (Jack, Australia).

"All we are asking for is a little respect. Respect not to misgender me. Respect to not think my sexuality is fair game for intrusive questions. There is not enough respect in the world in general - but I think to focus on that it is a good start" (Jamie, Ireland).

Summary

Key points

- ☐ The possibility of legal gender recognition for minors is still rather an exception. However, in recent years the number of countries where it is available is growing, as the support for this at the international level.
- ☐ Medical standards for minors usually provide that no medical interventions are performed before puberty. When puberty begins, it is possible to use sex hormone blockers and further switch to hormone replacement therapy, if trans identity is stable.
- ☐ In adolescence, hormonal medical interventions are an area that requires further research, particularly long-term, but the impact of such interventions on improving the psychological state is well proven.
- ☐ The lack of gender recognition by the state does not preclude the introduction of trans-inclusive policies in educational institutions that promote children's socialization in accordance with their gender identity.
- ☐ Having support, especially in the family, improves the psychological state and overall well-being of trans children. Their development with such support does not differ from the development of cis children. When there is no support, but there are insults, attacks, or forced concealment of their own identity, this worsens the condition and generates suicidal moods.
- ☐ In any case, putting the "best interests of the child" first, you should not forget to take into account the child's thoughts and feelings.

Recommendations to the Ukrainian state:

- ☐ Improve the procedure for legal gender recognition so that it is available to minors under explicitly prescribed conditions.
- ☐ Consider not specifying the child's gender at birth in the documents at the request of the parents.
- ☐ Prohibit discrimination based on gender identity in education.
- ☐ Develop recommendations for educational institutions on the treatment of trans students in accordance with their gender identity, as well as the inclusion of gender identity issues before curricula.

- ☐ Include trans issues in training programs for health care professionals who work with children and adolescents.

Afterword

Any social change must begin with an awareness of the situation by getting proper information about it. This material was intended to collect comprehensive information on the topic of trans families. Of course, it could not cover all the details and nuances – especially since some of them are still waiting for their researchers. But we hope that it has at least achieved its main goal – filling the gap that exists around this topic.

Trans people who are married, have children or are themselves someone else's children – all in one way or another strive to arrange their family life the best they can, taking into account their trans status, and everyone has the right to do so. But they are unlikely to succeed on their own, as long as society treats them with misunderstanding and caution, and the state also hinders them.

Therefore, when the international community and progressive countries gradually accept trans families as a full part of society with their own features that require attention, Ukraine should not remain on the sidelines. Trans people live here, just like in other countries, and create families in the same way. They deserve to be noticed, recognized, and fully included in public life.

Therefore, if someone having read this text got at least new information for reflection, this is already a step towards changes. To a society in which people and families of all gender expressions and identities can find a worthy place.