

## **Not a Diagnosis: The Facts about “rapid onset gender dysphoria”**

In a recent pushback against affirmative therapy for transgender and gender expansive youth, the term “rapid onset gender dysphoria” has emerged. It is important for parents and providers to be aware this is not a DSM V diagnosis. Instead, it is a phrase coined by individuals who oppose social transition for transgender youth.

These individuals suggest the increased visibility of transgender youth who want to transition and live in their authentic gender is the result of “social contagion,” meaning that adolescents come out as transgender because they have peers who identify as transgender (Littman, 2018). Their opposition to transgender youth being allowed to socially transition is rooted in now debunked older studies that indicated high rates of gender non-conforming children not identifying as transgender once they moved into their adult lives. One of the major methodological flaws in older studies was their failure to differentiate between children whose gender expression was diverse (not conforming to societally expected norms) and children who asserted a gender other than the sex assigned at birth or a transgender identity (Olson, 2016; Pyne, 2014; Steensma, McGuire, Kreukels, Beekman, & Cohen-Kettenis, 2013; Nealy, 2019, ch. 2).

There is no reputable research to support a claim of social contagion as a precipitant for transgender identity. The single published study (Littman, 2018) has serious methodological problems, including a biased sample comprised solely of parents who disbelieve or oppose their adolescents’ trans identity, data collection from these parents alone and not transgender youth themselves, blurring the distinctions between onset of gender dysphoria and the emergence of trans identity and coming out to others, and equating parental awareness of their teen’s transgender identity (when the teen came out to their parents) with the young person’s onset of gender dysphoria (Jones, 2018; Serrano, 2018; Tannehill, 2018).

As a result, the study cannot be assumed valid or reliable in supporting the claim that social contagion is responsible for the growing visibility of transgender youth. In fact, the journal itself, PLoS One, issued a follow up statement ten days after publishing Littman’s article acknowledging they were aware of the concerns about the study’s content and methodology and committed to *“seek further expert assessment on the study’s methodology and analyses... and provide a further update once we have completed our assessment and discussions”* (PLoS One Staff, 2018). Similarly, Brown University which initially published a press release about the study, released a statement five days later stating, *“In light of questions raised about research design and data collection related to Lisa Littman’s study on “rapid-onset gender dysphoria,” Brown determined that removing the article from news distribution is the most responsible course of action”* (News from Brown, 2018).

In reality, the increased number of children and adolescents coming out as transgender and seeking to live in their authentic gender (transition) reflects a greater awareness of gender identity and trans identities that enables gender diverse youth to name who they are earlier than previous generations of transgender people could, and an increased societal acceptance of transgender people, creating greater support and safety for transgender people to live rich, meaningful lives in their authentic gender (Nealy, 2019, chapter 6).



A growing body of methodologically sound and well-substantiated research documents no difference between trans and cisgender preschool children in the development of gender constancy, the understanding that gender is a stable and consistent aspect of our identity (Fast & Olson, 2018; Olson & Gülöz, 2018). More recent research indicates that children and teens who come out as transgender and socially transition continue to identify as transgender as they mature (Steensma, et al, 2013). Numerous studies indicate transgender children who socially transition with parental support are mentally, emotionally and socially healthy and experience no greater degree of mental health challenges than do their cisgender counterparts (Becerra-Culqui, Liu, Nash, Cromwell et al, 2018; Durwood, McLaughlin, & Olson, 2017; Olson, Durwood, DeMeules, & McLaughlin, 2016).

For more information see, *The Gender Dysphoria Affirmative Working Group*, <https://www.gdaworkinggroup.com/>

### Citations

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