Transgender children whose families support their social transition have low levels depression and only slightly elevated anxiety, according to a new study.

“These data suggest at least the possibility that being transgender is not synonymous with, nor the direct result of, psychopathology in childhood,” researchers said in the study “Mental Health of Transgender Children Who are Supported in Their Identities” (Olson KR, et al. Pediatrics. Feb. 26, 2016, http://pediatrics.aappublications.org/content/early/2016/02/24/peds.2015-3223).

Transgender children whose families support their social transition have low levels depression and only slightly elevated anxiety. Previous studies of transgender adolescents and adults found high levels of anxiety and depression, as did studies of children diagnosed with gender identity disorder (GID), which now is called gender dysphoria. However, the latter studies were not limited to transgender children and were conducted at a time when parental support was more uncommon.

In the current study, researchers from the University of Washington looked specifically at children ages 3 to 12 who identified as the gender opposite of their sex at birth and were living as that gender through non-medical interventions like clothing, hair length and name. Using parental surveys, they studied 73 transgender children and compared them to 49 of their siblings as well as 73 unrelated non-transgender children of the same age.

The study found the transgender children had typical rates of depression and only slightly elevated anxiety rates. Internalizing symptoms were “well below even the pre-clinical range” and were substantially lower than in previous studies on children with GID.
“These findings suggest that familial support in general, or specifically via the decision to allow their children to socially transition may be associated with better mental health outcomes amongst transgender children,” researchers said.

They attributed the slightly elevated anxiety to the likelihood the children may have been victimized by peers.

The authors noted the study cannot make predictions about children who identify as both genders and that the children involved in the study transitioned earlier than most transgender adults. They also looked at possible alternative explanations for the findings, including that parental support was an indirect rather than direct factor or that children who convince their parents to allow them to transition have a unique quality that boosts their mental health.

Despite the positive findings, they said parents and clinicians should watch for changes in mental health as their transgender children enter puberty since changes in their bodies and related social pressures could cause anxiety.

“Transgender adolescents, whether they do or do not delay puberty through medical intervention, often experience body dysphoria … making sex and relationships even more worrisome than amongst their non-transgender peers,” the study said.

In a related commentary, Ilana Sherer, M.D., FAAP, a member of the AAP Section on Lesbian, Gay, Bisexual and Transgender Health and Wellness, called the finding of low depression and anxiety “truly stunning.”

“Although it does not establish a causal relationship, this finding is crucially important to professionals who work with these children, as well as their families, in showing us that they are not likely to suffer any additional harm and may benefit by early social transition,” she wrote.

Resources
- AAP policy “Office-Based Care for Lesbian, Gay, Bisexual, Transgender, and Questioning Youth”
- AAP Section on Lesbian, Gay, Bisexual and Transgender Health and Wellness
- Information for parents on transgender children
- Pediatrics in Review article “Approach to Children and Adolescents with Gender Dysphoria”
- Pediatrics in Review article “Trans Teen Shares Her Story”
- AAP blog post “The Secret Identity of Transgender Youth”

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