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A Narrative Approach to Helping Families and Their Children Who Identify as Transgender or Gender Nonconforming

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Abstract
Counselors can help families of transgender or gender nonconforming youth adjust after a child or adolescent expresses differences in gender identity. We propose a community-based narrative group therapy which may increase family cohesion and acceptance within the changing family dynamic. The program is psychoeducational and experiential, lasting eight sessions, and begins with psychoeducation about transgender individuals and heteronormative societies. It culminates in re-authoring and witnessing the family’s story in a manner which honors the youth’s gender identity. We propose this program as a strategy for helping practitioners connect diverse LGBTQ+ families with other families experiencing similar transitions.

Introduction
The Williams Institute at the University of California - Los Angeles’ (2016) statistics indicated 16 million individuals, or approximately 0.6 percent of United States’ population, identified as transgender, with younger individuals (ages 18-24) representing the largest portion of the demographic by age. With more individuals identifying as transgender at younger ages, it is important to possess accurate information about this population. As counselors and counselor educators, it is imperative to be prepared to work with, support, and advocate for transgender individuals and their families, particularly as they encounter resistance and discrimination from the political, social, and cultural systems within which they live, study, and work. Anti-transgender bias significantly and pervasively impacts the lives of transgender and nonconforming individuals. Together, the National Center for Transgender Equality and the National Gay and Lesbian Taskforce (2011) conducted a National Transgender Discrimination Survey and discovered pervasive experiences with disenfranchisement and discrimination, noting that respondents consistently experienced harassment, had double the rates of unemployment, significantly higher rates of homelessness, lived in extreme poverty, and even experienced frequent discrimination such as service refusal from public service officials and healthcare workers, including counselors. These statistics are increasingly disturbing when considering that over half of all LGBT homicide victims were transgender, with transgender women of color disproportionately represented among victims (National Coalition of Anti-Violence Programs, 2014).

When differences in gender identity coincide with race, ethnicity, ability status, and socioeconomic class,
the intersection of these aspects of identity may leave transgender or gender nonconforming individuals particularly vulnerable. Transgender individuals are those with a gender identity, or gender expression, that differs from their assigned sex, while gender nonconforming individuals choose to express their gender in a manner which does not conform to prevailing cultural or societal expectations about what is appropriate to their gender. These two terms are sometimes used interchangeably and may also denote individuals who are gender fluid or nonbinary, meaning they experience gender along a continuum or do not fit a prevailing category established by cultural or societal norms. Of individuals who responded to the National Transgender Discrimination Survey, 41% reported attempting suicide, with higher rates among those who experienced job loss due to bias (55%), harassment in school (51%), poverty and economic instability (61%), or were the victim of physical violence (61%) or sexual violence (64%). Despite these challenges, transgender individuals persevere and access support, love, and kindness from peers, groups and agencies, and their family members. Transgender and gender nonconforming individuals who experience family acceptance are protected against many institutional and societal threats to well-being. Those who do not experience family acceptance may be more likely to experience homelessness, incarceration, poverty, suicidal ideation, and substance use and abuse at significantly higher rates (Grant, Mottet, & Tanis, 2011).

**Transgender Youth and Families**

Pollock and Eyre (2012) created a grounded theory with three stages to describe the process which young people begin to identify as transgender. First, youth experience a growing sense of gender awareness as they are exposed to individuals outside the family system. For many youth, this gender awareness develops as they begin to interact with peers in school, enter puberty, and begin experiencing normal sexual impulses associated with this stage of development. This expanding knowledge impacts each young person’s sense of their own gender identity. During the next stage, youth begin to experience discomfort and feelings of incongruence with the gender they were assigned at birth, beginning to recognize themselves as transgender or gender nonconforming. The final stage of development occurs as the youth begin to integrate their new gender identity, adapting to life as male, female, or nonconforming, sometimes described as gender fluid or nonbinary. We encourage practitioners to recognize gender as existing along a continuum, as even individuals who identify with their assigned male or female gender may lean towards a more masculine or feminine gender expression. This concept is defined as the way in which an individual manifests masculinity or femininity and is communicated by an individual’s appearance, mannerisms, and mode of dress.

Families whose children identify as transgender or gender nonconforming experience a wide range of emotions after becoming aware that a member of the family is in transition. Qualitative research inquiries with parents of transgender youth yields
important information about these families (Dierckx, Motmans, Mortelman, & T’sjoen, 2016). Families with transgender youth may experience stages of grief, feelings of shame due to changes in social integration, and difficulties in family functioning (Dierckx et al., 2016). We encourage practitioners to review Dierckx et al., (2016) for a review of how family members may react and respond to having an individual who identifies as transgender or gender nonconforming. Additionally, Bernal and Coolhart’s (2012) article provides an overview of treatment strategies and ethical considerations which must be considered when working with transgender children and youth in family therapy.

**Program Overview**

Because of the unique needs of this population, this program is intended to support adjustment in families and their children who identify as transgender or gender nonconforming. This program is conceptual in nature, as the approach is newly created and untested. The program is founded in theoretical principles related to narrative therapy, particularly social constructionism, or the notion that reality is constructed via interactions among and between people and the societal systems that surround them (Burr, 2013; Freedman & Combs, 1996). The program encompasses eight sessions, is progressive in nature, and becomes a closed group after the enrollment period and initial intake process. Sessions last approximately two hours to allow each member of each family sufficient time to express themselves, complete in-group activities, process those activities, and plan for between-session homework.

Before families begin the program, they go through an intake process to gather demographic information, determine where the family and transgender youth are in terms of gender transition, and complete two quantitative assessments to gather baseline data before the program begins. Because of the nature of the group, amount of recommended discussion, and variability in terms of family sizes, we recommend limiting program participation to no more than ten participants per session. If there are more than ten participants, groups can be split accordingly so that each group as no more than ten participants, with a minimum of four participants (Thomas & Pender, 2008). If multiple groups are needed, they could be run concurrently in separate rooms or on different days/times, depending on facilitator and family availability. While each family member need not attend to be considered for participation, we encourage families to bring all members who have significant contact and influence the transgender or gender nonconforming youth’s life. Group participants should be provided with consent and assent forms, and group facilitators should review the limitations of confidentiality, provide background information about their qualifications, and discuss expectations of participation as part of the informed consent process (Thomas & Pender, 2008). If participants express the need to further process and work on changes made throughout the group, facilitators may offer referrals for individual therapy if requested.

During the screening process, each family member is given the Brief
Family Relationship Scale (BFRS), which measures a person’s perception of the quality of their family relationship functioning. The BFRS consists of three subscales: Cohesion, Expressiveness, and Conflict, each containing 9 items which collectively investigate individual family members’ perceptions of support, the degree to which they express themselves with other family members, and the degree of conflict they perceive in their families (Ting Fok, Allen, Henry, & The People Awakening Team, 2014). Transgender or gender nonconforming youth are also given an additional instrument to complete, the Perceived Acceptance Scale (PAS; Brock, Sarason, Sanghvi, & Gurung, 1998). The PAS measures an individual’s perceptions of acceptance within specific relationships, where acceptance is defined as how others care for and value one unconditionally (Brock et al., 1998). The PAS may provide separate scores for perceived level of acceptance by different family members such as an individual’s mother, father, other family members, and friends (Brock et al., 1998).

Program facilitators should be licensed mental health professionals who have experience working with transgender individuals as well as families and systems. We recommend facilitators read Bernal and Collhart’s (2012) article discussing treatment and ethical considerations with transgender children and youth in family therapy prior to facilitating the group. Facilitators should also have working knowledge of narrative therapy concepts. Facilitators should prepare for their first group session by reviewing Dierckx et al. (2016). This article outlines ways in which one’s family may impact the process of making a gender transition and illuminates the experiences of parents whose children are gender variant by identifying the specific challenges they may face when parenting transgender children.

**Session One: Psychoeducation About Transgender Individuals & Heteronormative Societies**

In this session, the facilitator begins by helping the group participants introduce themselves and providing a general overview of the group. As the facilitator discusses the group’s content and process, family members are encouraged to ask questions to clarify any misconceptions or confusion about the purpose of the group. The facilitator should be receptive to these questions and address any concerns in a non-shaming way. Moreover, facilitators should not be surprised if one or more family members are hesitant or resistant to discussing differences in gender identity and expression in a non-pathological, accepting manner. We encourage facilitators to view any potential negative reactions as expected and normative, particularly in relationship to dominant cultural narratives about transgender and gender nonconforming individuals. Facilitators should respond supportively and empathically, while simultaneously encouraging individuals or families to be open and willing to engage in the discussion.

Session content begins with the facilitator discussing what it means to be transgender or gender non-conforming while living in a society where individuals are usually placed in distinct categories as male or female. These conversations should be non-
stigmatizing and non-pathologizing and should encourage discussions that normalize the transgender population. The facilitator should ensure that each family member has an opportunity to share about their individual experience. Next, the facilitator discusses the process of being transgender or gender nonconforming, and how the struggle to feel comfortable with and accepted in within one’s gender identity can be at cross purposes with heteronormative societies. Family members are invited to ask questions throughout the session and to consider how each family member has dealt with changes in the youth’s gender identity or expression. The facilitator should use words and handouts that explain transgender identity in layman’s terms without minimizing the experiences of the family members. We recommend using The Genderbread Person exercise, which assists facilitators in explaining the interaction between gender identity, gender expression, biological sex, and sexual and romantic attraction (Brown, 2016). It is also important for the facilitator to discuss how victimization may arise as a result of living in a heteronormative society and how families are impacted as a result, empathizing with the challenges that families face when their child/teen identifies as transgender. This session concludes with the facilitator answering any questions from the family members and providing an outline for the rest of the program.

Session Two: Understanding Cultural Narratives About Families

This session begins with the facilitator clarifying information provided from the previous session and responding to any questions individuals or families may have. Next, the facilitator engages participants in a discussion about the cultural narratives which influence and impact the way they perceive and understand their own families. The facilitator invites group members to discuss these ideas using the following questions:

- What does society say healthy families “should” look like?
- What role does culture play in shaping these ideas?
- What story does society dictate for the roles of each family member?
- What story does society dictate about particular genders?
- What story does society dictate about individuals who are transgender or gender nonconforming?
- What does your family look like, in relationship to these societal and cultural stories?
- How does your family feel about that?

During this discussion, the facilitator’s role is to ensure that each member of the family is emotionally safe while validating the comments from others. It is important for the facilitator to be aware that not all family members may be supportive of this transition and therefore may have strong feelings about what a “normal” family and family roles should look like.
Next, the participants discuss what it means, in their individual roles, to be connected to someone who is transgender or gender nonconforming. The facilitator should give parents, children, siblings, aunts, uncles, grandparents, and other family members ample time to share their thoughts. The facilitator’s role is crucial, and they should look out for opportunities for clarification and empathy when the discussion may become shaming or confrontational. In order to facilitate this discussion, the facilitator might incorporate the following questions:

- What stories have you heard about the parents of transgender or gender nonconforming children?
- What has it been like for you to learn about the child/teen’s gender identity?
- What reactions did you experience when you first found out? What reactions do you have now?

The facilitator engages the transgender youth so that they may discuss what it means to be transgender in the context of being a child, sibling, or other relative. The youth are encouraged to share their stories without personal judgment, and the facilitator may help youth by asking the following questions:

- What was it like for you to realize you did not identify with the gender assigned to you at birth?
- What have you heard about transgender or gender nonconforming people?

- What role does your gender identity play in terms of your family relationships?
- What is it like for you to be surrounded by your family and/or other youth like yourself who identify as either transgender or gender nonconforming?

To end this session, the facilitator engages in discussion about what it is like to hear from others who have family members who identify as either transgender or gender nonconforming.

Session Three: Honoring Experiences of Individual Family Members

This session begins with a recap of the previous session and an opportunity for participants to ask questions. The facilitator allows all family members to share their thoughts and feelings. Although the participants might have shared only a little about their experiences during the previous session, they are given the opportunity to explore their feelings and thoughts regarding the changes that they have experienced in depth. The facilitator’s role is to ask questions that encourage the participants to explore the meaning behind their current role within their respective families, as this will help the facilitator to determine narratives which exist within each family member and for the family as a whole. Some questions facilitators may ask to prompt discussion include the following:

- What meaning do you make out of being the parent of a
What does it mean to you to be a young transgender or gender nonconforming person?

What story do you tell about this process? How did you create this story?

What stories do your family members tell about this process? How do your individual stories come together to form a family narrative?

These questions may evoke strong emotional responses, and therefore the facilitator should be attentive to responses (verbal and nonverbal) from the participants. The facilitator should keep the transgender youth safe in terms of monitoring the conversations and ensuring they do not become blaming, shaming, or stigmatizing. This is especially important as participants share individual stories with the hope of understanding each other. After participants share stories, the facilitator introduces the concept of acceptance in terms of how each participant defines self and other members of their family. The facilitator defines the meaning of acceptance and relates the concept to self and others to help participants redefine themselves and their view of others. The facilitator then introduces the practice of loving-kindness meditation to teach the concept of acceptance. Through the act of loving-kindness, individuals learn how to flourish from within. When individuals learn to acknowledge their own loveliness and that of others, there is a natural reward that follows (Salzberg, 2002). The facilitator’s role while teaching loving-kindness is to reinforce the intentions behind it for increasing self-acceptance and acceptance of others, in addition to personal awareness and wellbeing. The facilitator then leads the group through a guided loving-kindness meditation and provides the family with a short script to take home with them. As homework, family members are invited to practice a loving-kindness meditation for five minutes daily, using the script provided by the facilitator.

Session Four: Authoring Family Stories

This session opens with the facilitator reviewing information covered in the previous session, including concepts of acceptance, mindfulness, and loving-kindness meditation. Participants are encouraged to share their experiences with these practices over the past week.

The facilitator should encourage participants to discuss their experiences having used meditation to foster feelings of love and acceptance within themselves. If some participants had trouble with the practice, the facilitator may create linking conversations with participants who shared about having experienced positive effects to help those who may have struggled to gain clarification and refine their meditation. After this conversation, the facilitator guides the discussion into one related to understanding and recognizing aspects of the loving-kindness meditation that may have been difficult because of the stories families have heard about themselves and continued to perpetuate within their families throughout the transitional process, both positive/negative and helpful/unhelpful.
Facilitators may use the following questions to stimulate group discussion:

- What story does society tell about families who have a transgender or gender nonconforming member?

- How did your family come to believe this story? How did you come to reject it?

- What story does your family tell about gender identity and expression? How has this story changed since learning about the child/adolescent’s gender identity?

- What meaning do you make out of being a family with a transgender member?

- Does your family’s current story support your family’s hopes, dreams, and intentions?

The facilitator discusses the process of weaving individual stories into an overall family story which shapes the way the family lives and operates, feels about themselves, and relates to the broader sociocultural context within they live, study, and work. The facilitator engages families in awareness-building conversations related to narratives which are unhelpful for their social and emotional adjustment, particularly when those narratives reinforce heteronormative societal ideals which are inherently incompatible with having a member who identifies as transgender or gender nonconforming. The facilitator’s role is to recognize when participants may share a particular narrative, link them to other participants who share similar narratives, and help those participants begin to consider how and under which circumstances they formed those narratives. Families are invited to consider the possibility of having alternative stories, especially when their current, dominant narratives are unhelpful or no longer fit the family’s structure as they learn to redefine their roles and identities in terms of having a member who is transgender or gender nonconforming.

For homework, families are asked to think about times in which they have recently found their family to be strong, cohesive, loving, functional, etc. Families are encouraged to think about and discuss alternative, positive, and helpful family stories with individual family members and as a family unit. The facilitator reminds each family that there is no one “right” way to be a family, and that each family will display unique strengths, even though they each share a common transitional phase at this time. At the end of the session, each family member is asked to complete the Brief Family Relationship Scale (BFRS; Ting Fok, et al., 2014) to monitor and determine if there are have been changes in terms of cohesion, support, and conflict within the family as they have participated in the group thus far. The transgender child or teen completes the Perceived Acceptance Scale (PAS) in addition to the BFRS.

Session Five: Thickening Helpful Family Narratives

Session five begins with the facilitator reviewing information related to family narratives discussed in the previous group meeting. Participants are invited to discuss and process through
any reactions they may have had to last week’s group, and the facilitator’s role is to validate and honor each family’s perspective, especially in terms of negative experiences related to heteronormative societal expectations. Families are invited to discuss the positive, hopeful stories they noticed about themselves over the past week. The facilitator’s role is to elicit aspects of the families’ recent experiences which were positive and left them feeling as though they were a cohesive, well-functioning unit. The facilitator invites families to discuss the process of making these narratives “preferred narratives” by using language which describes their family in positive terms, and choosing to focus on these hopeful stories in times of distress and conflict.

Some questions to stimulate discussion include:

- What was it like to notice alternative stories about your family over the past week?
- Did anything change in terms of how you felt or acted towards a specific family member?
- What would it be like to notice these positive qualities in your family more often?
- Would anything change in how you are functioning together now?
- How about in terms of how you treat one another?

After discussing the process of noticing hopeful, positive, alternative stories about the family as a unit, the facilitator guides participants through the process of helping each family notice and discuss aspects of how they functioned well in the past (pre-transition or pre-discussion of gender nonconformity on the youth’s behalf), recognizing that these positive qualities do not change with a person’s gender identity. Individuals within each family are invited to find preferred narratives about the members of their families. The facilitator helps each family discuss the process of noticing these positive aspects in order to strengthen hopeful views of each member. After each family has identified at least one positive, hopeful narrative about each member, families are invited to discuss how the positive aspects of each member contribute to their overall family functioning and wellbeing, especially in terms of cohesiveness, supportiveness, and conflict resolution.

Family members are also asked to recognize how these positive qualities may help the family through their transitional phase. For example, a family member who has been described as a hopeful, positive individual may serve the role of helping the transgender or gender nonconforming youth maintain a hopeful outlook in the face of adversity experienced at school or in the community. Transgender youth who are described as unique may be viewed as helping the family form a strong, exceptional identity and as a source of inspiration for other family members who may be struggling to be themselves (e.g., younger siblings). For homework, families are invited to continue to mindfully notice these preferred stories in relationship to each member of their family.
Session Six: Authoring Family Stories using the Tree of Life

The facilitator begins this session by reviewing each family’s experience mindfully noticing preferred stories about individual family members and about their families as a whole. The facilitator also elicits thoughts, feelings, and behaviors which may have changed or come to light in response to last week’s homework. After discussing the ongoing process of noticing preferred narratives to thicken hopeful, helpful stories about families and individual members, the facilitator relates this process to creating and recreating narratives within the family to reflect how the family has changed (and may continue to change) as they redefine their roles in terms of their relationships. The facilitator may use the following questions to help each family discuss this process:

- What, if anything, has changed about how you think, feel, and act towards your family since you’ve begun telling these new stories?
- What, if anything, has changed about the story you tell about being a family in transition?
- What other stories would you need to thicken to help your family and its individual members with this transition?
- What do you want others to know about your family’s past, present, and future?

After families have an opportunity to discuss this last talking point, the facilitator introduces the concept of the Narrative Tree of Life and provides instructions for completing the exercise. Families are given a large piece of white butcher paper and markers/other art supplies to decorate and work on their trees and invited to create the tree with these guidelines in mind, adapted from Ncube’s (2006) original guidelines for creating Trees of Life with African children who had lost their parents to HIV/AIDS.

Families are instructed to begin by creating the roots of their trees using their social and cultural histories, family origins, and spiritual or religious roots, if applicable. Next, families are invited to create the ground above the roots using aspects of their current lives, including where they currently live, what each family member is doing, and what it is like to “break new ground” in terms of helping the youth and family adjust to transgender or gender nonconforming identities. Each family creates the trunk of their tree using the strengths, resources, and abilities of each member, making sure to tell stories about how and under which circumstances these positive qualities developed. Finally, the family creates the leaves of the tree by identifying their hopes and dreams for the family’s future, gifts the family has received in terms of their unique history and development, and important individuals who will continue helping the family grow their tree, both as they adjust to new roles and relationships in terms of having a transgender or gender nonconforming individual and the direction they see themselves moving towards together in the future. After each family has completed their Tree of Life, the facilitator leads the group through a processing discussion. Some salient questions include:
• What was it like to complete the Tree of Life with your family?

• How does your family’s tree reflect your past, present, and future together?

• How will the aspects of the tree help your family manage this transition?

For homework, families are invited to take their Trees of Life home and hang them in a place of honor. The facilitator encourages each family to reflect on what it means to be a family in transition.

Session Seven: Witnessing

The seventh session honors the social constructionist idea that identity is social and is essentially “produced and authenticated as others witness our lives,” giving substance to an alternative, preferred narrative (Crocket, 2013, p. 475). Families are given the opportunity to tell their re-authored stories, discussing their family in transition in positive terms and as a cohesive unit which is adjusting to different roles. In keeping with narrative therapy’s tradition of engaging in celebrations to signify victory and achievement in constructing a preferred reality, we suggest extending the length of this group to 2.5 hours and inviting families to bring food to engage in a celebratory potluck. Each family is invited to elect a speaker or may take turns discussing their narratives with the group. Each family in the group serves as a witness for the other families as they share their new, preferred narrative. The facilitator’s role is to help witnesses shape their responses and may provide these guidelines to group members:

• While you were listening to the family’s story, what did you hear that you were most drawn to?

• What kinds of changes did you hear the family make? What about the parents? Siblings? The transgender youth?

• How do you suppose they made these changes? What has helped them form this new, preferred story?

• Having heard this story, what ideas do you think you can take to help your own family in transition?

In addition to helping families share their stories and helping witnesses shape their responses, the group facilitator serves to keep the family safe in terms of monitoring and possibly disrupting shaming or unhelpful conversations that may arise. Otherwise, the facilitator continues the group process.

Session Eight: Resources Wrap Up

This final session begins with a general recap of the past seven weeks. The facilitator processes the experience of participating in the group with family members and the transgender or gender nonconforming youth. Families are invited to discuss their redefined, preferred narrative about how they see themselves and their families. The facilitator will also share additional resources for family members which are available within their communities,
including scripts for loving-kindness meditation practices, contact information for transgender and LGBT support groups, and online resources such as GLAAD and the Trans Youth Equality Foundation (TYEF). As a post-assessment, the Brief Family Functioning Scale (BFRS; Ting Fok, et al., 2014) will be re-administered to individual family members to reassess their perceptions of support, the degree of conflict they perceive among family members, and the degree to which they express themselves with their family members. The transgender or gender nonconforming youth completes a final assessment using the Perceived Acceptance Scale (PAS) in addition to the BFRS.

**Program Evaluation Plan**

The program evaluation includes both quantitative and qualitative methods. As previously mentioned, the Perceived Acceptance Scale (Brock et al., 1998) for transgender youth and the Brief Family Relationships Scale (BFRS; Ting Fok, et al., 2014) are each administered at intake, at the fourth session, and after the group has ended in order to determine whether the transgender or gender nonconforming youth has experienced any changes in terms of perceived acceptance and to determine whether any changes have occurred in terms of each family member’s perceptions of their cohesiveness, expressiveness, and experiences with conflict. These two quantitative instruments provide measurable outcome data regarding the experiences of the transgender youth and their family members in terms of acceptance and the functionality of family relationships.

Aside from these quantitative measures, we recommend sending out a survey six weeks after the group has ended to obtain additional qualitative data regarding participants’ perceptions of the usefulness of the group, their perceptions of whether anything has changed in terms of their family functioning since the group ended, and any recommendations for making groups more helpful or supportive. Sample questions to include on a follow up survey are as follows:

- What was it like for your family to participate in this group?
- What, if anything, changed about your family’s story as a result?
- What, if anything, has changed about your family’s ability to appreciate one another?
- What, if anything, have you noticed about your family’s acceptance of transgender or gender nonconforming individuals?
- If you could share the information you learned with other families in transition, what would be the most important thing for them to know?
- If you could change anything about this group, what would it be?

**Recommendations for Counselors**

Transgender or gender nonconforming youth and their families face real and crucial issues for counselors
to explore. These issues arise due to the various personal, interpersonal, and societal effects of gender change (Norwood, 2012). By gathering quantitative and qualitative data after completing the program described above, we can learn about the experiences of transgender youth and their family members, and the impact that this transition had on them individually and collectively as a family unit. The program evaluation plan is designed to address the goals of this program and is based on sound evaluation principles. This program also clearly states a rationale that provides context for the presentation of this material based on current social, political, multicultural, or other significant factors as noted in the literature.

We recommend that counselors carefully consider the material presented, as the information participants may learn from this program can help parents and siblings adjust to having a transgender relative. In addition, the structure of this program can assist counselors in learning about how personal perceptions are impacted by societal norms. Counselors are encouraged to support the discourse between the transgender youth and their families, especially parents or primary caregivers, to facilitate increased parental understanding and acceptance. Increased acceptance and understanding may lead to the transgender youth experiencing improved mental and physical health. This discourse is important for the transgender population due to the distinct differences between sexual orientation and gender identity, which may be a topic of contention for family members (Bernal & Coolhart, 2012). Counselors are recommended to refer to the ACA Code of Ethics and the ALGBTIC Counseling Competencies to be sure they maintain best practices as they work with transgender youth and their families.

References


