A study with 32 transgender children, ages 5 to 12, indicates that the gender identity of these children is deeply held and is not the result of confusion about gender identity or pretense. The study, led by psychological scientist Kristina Olson of the University of Washington, is one of the first to explore gender identity in transgender children using implicit measures that operate outside conscious awareness and are, therefore, less susceptible to modification than self-report measures.

The findings will be published in *Psychological Science*, a journal of the [Association for Psychological Science](http://www.apa.org/). Olson started the research project, partly out of her interest in how children think about social groups, but also because she’d witnessed the challenges of a close friend with a transgender child.

“Seeing how little scientific information there was, basically nothing for parents, was hard to watch,” Olson said. “Doctors were saying, ‘We just don’t know,’ so the parents have to make these really big decisions: Should I let my kid go to school as a girl, or should I make my kid go to school as a boy? Should my child be in therapy to try to change what she says she is, or should she be supported?”
The idea that young children, who haven’t gone through puberty, can truly be transgender has met with public skepticism and some experts believe the best approach is to encourage “gender-variant” children to be comfortable with their biological gender. In recent years, however, more doctors, parents, and mental health professionals have begun to advocate for allowing children to live as their identified gender.

Olson wanted to better understand gender identity in transgender children, taking a scientific approach to investigating whether their gender identity is deeply held, confused, or simply pretense, as some have argued.

Olson and co-authors Nicholas Eaton at Stony Brook University and Aidan Key of Gender Diversity, a Seattle organization that provides training and runs support groups for families of gender-nonconforming children, specifically focused their study on transgender children who were living as their identified gender in all aspects of their lives, who came from supportive home environments, and who had not yet reached puberty. The participants and their cisgender (non-transgender) siblings were recruited through support groups, conferences, and word of mouth.

Finally, the researchers recruited cisgender children from a database of families interested in participating in developmental psychology research studies. These cisgender children were age-matched to the transgender participants for analytical comparisons.

To get a comprehensive sense of the children’s gender identity, Olson and colleagues used self-report measures that asked children to reflect on aspects of their gender in combination with implicit measures designed to gauge the strength of the children’s more automatic gender associations.

For example, one of the implicit measures, based on the commonly used Implicit Association Test (IAT), assessed the speed with which they associated gender — male and female — with descriptors related to the concepts of “me” and “not me.” The test is based on the theory that people are faster to respond to pairings that are more strongly associated in memory. The IAT has been used in many studies to investigate implicit attitudes related to various attributes, including gender and race, and brief versions of the IAT that use pictures instead of words have been validated for use with children.

Overall, data from the various measures indicated that transgender children’s responses were indistinguishable from those of two groups of cisgender children.

On the IAT measuring children’s gender identity, transgender children showed a strong implicit identification with their expressed gender. When the researchers looked at the data according to the children’s expressed gender, they saw that the data from transgender girls showed the same pattern as the data from cisgender girls and the data from transgender boys showed the same pattern as data from cisgender boys.

And Olson and colleague saw the exact same pattern of findings when they looked at data from an IAT test that tapped into the children’s gender preferences.

Transgender children also showed the same pattern of results as cisgender children on the explicit measures included in the study. For example, transgender girls, just like cisgender girls, preferred to be
friends with other girls and they tended to prefer toys and foods that other girls liked.

“While future studies are always needed, our results support the notion that transgender children are not confused, delayed, showing gender-atypical responding, pretending, or oppositional — they instead show responses entirely typical and expected for children with their gender identity,” the researchers write.

“The data reported in this paper should serve as further evidence that transgender children do indeed exist and that this identity is a deeply held one,” they conclude.

Olson hopes to recruit up to 100 additional transgender children and follow them into adulthood to observe how the support they have received influences their development and whether it translates into more positive outcomes than in today’s transgender adults, launching the first large-scale, nationwide, longitudinal study of transgender children in the United States.

“We have absolutely no idea what their lives will look like, because there are very few transgender adults today who lived as young kids expressing their gender identity,” Olson said. “That’s all the more reason why this particular generation is important to study. They’re the pioneers.”