

# What might cause Rapid-Onset Gender Dysphoria?

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*Carys Moseley looks in detail at a new study of rapid onset gender dysphoria, in cases where teens suddenly express the belief that they are transgendered.*

Last week, **new research**<sup>1</sup> was published based on interviews of parents of teens in the UK and the USA who have suddenly developed gender dysphoria. The author of the research was Dr. Lisa Littman at the Department of Behavioral and Social Sciences, Brown University School of Public Health. This research has already received extensive attention from interested parties, and should be read by anybody concerned about this social trend.

The sample was a self-selecting one in that it consisted of parents (mostly mothers) recruited from two websites – 4thWaveNow in the USA and Transgender Trend in the UK – that regularly publishing material critical of the current transgender craze among teenagers. Despite the limitations of such sampling, the results still shed a unique light on the condition in question. This is because there has been relatively little research on parents' attitudes towards adolescent gender dysphoria. The author notes that there is little specifically on adolescents whose gender dysphoria only emerged during adolescence, as opposed to those who already had childhood problems.

## **Social contagion and influence of friendship groups**

It is good to see research that focuses exclusively on adolescence, rather than simply assimilating it to adulthood. This is because there is an international push to lower the age of gender recognition and gender reassignment – a trend irresponsibly pushed within the UK government as well. The study's exclusive focus on adolescence enables the researcher to make meaningful comparisons with research on young anorexic girls, showing how both anorexia and Rapid-Onset Gender Dysphoria can develop via social contagion and 'deviancy training'.

The research considered in detail challenges such as:

- the friend-groups of the teens (as perceived by their parents)

- how they suddenly came out as transgendered after spending far more time on social media
- how their behaviours often changed for the worse in other ways. One of these was children deeming parents 'transphobic', and another was estrangement.

It was particularly concerning that nearly two thirds (63.8%) of the parents had been called 'transphobic' by their children, most commonly because they disagreed with the child's claim to be transgendered. Over a third were called this for continuing to use the same pronouns as they had always used for them and calling them by their birth name. Most of the small number of cases of estrangement were cases of children running away, moving out or refusing contact. In one case, the parent threw the child out because the child threatened violence to the parent.

## **Are children of highly educated parents at greater risk?**

The parents interviewed are unusually homogeneous demographically. Nearly all are female and white, and many have been through higher education.[i]

Here are some demographic facts about the children:

"Nearly half (47.4%) of the AYAs had been formally diagnosed as academically gifted, 4.3% had a learning disability, 10.7% were both gifted and learning disabled, and 37.5% were neither."

This is significant, because much has been made by critics of the transgender craze of the problem of children, particularly girls, on the autistic spectrum, being drawn into a transgender identity. However here it seems that far more adolescents were academically gifted. The question that needs to be asked here is, why are academically gifted girls overrepresented? It is a cliché that highly intelligent people may suffer more from anxiety and neurotic disorders. This points to the need for vigilance about education policies, seeing as 'gender identity' is an ideology that has become deeply embedded within the education sector now, and as such any highly

intelligent person who wants to be considered intelligent in the system has to pass exams and job interviews which reflect compliance with this ideology.

### **Are children of pro-LGBT parents at greater risk?**

An overwhelming majority of these parents say that they are socially liberal, supporting same-sex 'marriage' (85.9%) and transgender rights. This is probably higher than the percentage of parents in the general population who do so in both cases. However, a major claim advanced by the feminists who support these blogs is that most girls who develop ROGD would become lesbians weren't it for ROGD. For example, journalist Janice Turner in her **recent article in the Times on this research**<sup>2</sup> says this:

"The vast majority of these cases involve lesbians, whose same-sex attractions are seldom clarified until late teens."

This is simply not what this research actually found. The research paper says the following about the reported sexual orientation of the teens:

"Overall, 41% of the AYAs expressed a non-heterosexual sexual orientation prior to disclosing a transgender-identification."

Here is the complete breakdown of sexual orientations for girls from Table 2:

Asexual – 8.5%,  
bisexual or pansexual – 36.8%  
gay or lesbian – 27.4%  
straight (heterosexual) – 35.4%  
did not express – 26.9%.

Just over a quarter were already lesbians. There are no grounds for saying that 'the vast majority' of the group as a whole will mostly become lesbians. Indeed if we count bisexuals with heterosexuals for obvious reasons, both groups combined turn out to be 72.4% of the sample – nearly three quarters!

This really needs saying because so many feminists say that if only homosexuality were completely accepted and gender reassignment were discouraged, these girls would embrace lesbianism. Clearly, many are never going to.

The real question then is why are so many feminists, indeed several of the mothers, continuing to say this? Why, in particular, are they further cementing their stance by attacking gender reassignment for adolescents as an alleged form of 'conversion therapy', as **Janice Turner does in her Times article**?<sup>3</sup> Is there a fundamental problem with being heterosexual? It isn't enough here to state that liberals are embarrassed by the fact that **the Memorandum of Understanding against Conversion Therapy**<sup>4</sup> bans both therapy for homosexuality and for transgender identification, thus lumping liberals with conservatives. Something else may be at play.

### **Don't ignore the boys**

In all the debate and publicity that the problems adolescent girls have experienced, it is easy to forget the fact that up until ROGD burst out a few years ago, gender identity disorders in childhood and adolescence were more common among boys. There are questions to be asked here as to why these problems have not elicited the same criticism and protest. Is western society complacent about them?

The current article lists the reported sexual orientation of boys in the sample as follows:

Asexual – 9.1%, bisexual or pansexual – 11.4%, gay – 11.4%, straight (heterosexual) – 56.8%, did not express – 25%

Again, the liberal cliché is that most boys (and men) with gender dysphoria are really gays, and that gender reassignment for males is just a physiological form of 'conversion therapy', thus transgender activists are secretly aligned with conservatives who oppose all of this. This sample contradicts the first claim. As for the second, it simply has no objective evidence. Nobody I know with a conservative approach to this topic is aligning himself or herself with transgender activists!

### **Is ROGD a way of avoiding the sexual chaos of secularism?**

The existing debate on ROGD is shaped by polarisation between transgender activists on the one hand and liberal feminists, among whom there are many lesbian and bisexual women, on the other. This reflects the acrimonious debates within adult LGBT subcultures concerning who is really a woman. For research to improve in quality and to ask

new questions it must move away from this dynamic.

A disproportionate percentage of adolescents of both sexes in the research were reported to be asexual, which is relevant, but also the combination of heterosexual and bisexual formed the majority. Also, several had not disclosed a sexual orientation, but this may be because they had not yet undergone puberty (which the study should have made clearer).

There is evidence that young adults who are 'asexual' are stigmatised by their straight peers, because they are not interested in sex at all. It is interesting that the recently published UK government LGBT Survey Research Report reveals 'asexual' as a 'sexual orientation' (ironically). This shows what has been happening quietly for some time now, which is that some people within the LGBT subculture are not same-sex attracted or transgendered at all. Transgender people are also more likely than the general population to say they are 'asexual'.

Taking all these factors together, and taking the form of the human body as male and female as itself the focus of the anxiety behind

ROGD, it is time to reframe the debate. Is ROGD mostly an escape-valve for teenagers of both sexes, in particular girls at the moment, who do not feel ready for sexual relationships with the opposite sex for whatever reason? Or who find the sexual attitudes and behaviours which they encounter in their lives as unacceptable and impossible to cope with? Asking such a question opens up many possibilities for deeper understanding. For it requires looking at the long-term effects of the sexual revolution, which coincided with the opening of Britain's first gender identity clinic at Charing Cross Hospital in 1966. To what extent have gender identity clinics historically taken advantage of vulnerable, susceptible adults with psychological histories not dissimilar to those adolescents now developing 'Rapid-Onset Gender Dysphoria'?

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[i]There are some things that could have been more clearly indicated in this research. Given that the two websites were in the UK and the USA, it appears that the samples of parents were merged. They should have been kept distinct because of cultural differences in relevant fields such as healthcare.

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<sup>1</sup> <http://journals.plos.org/plosone/article?id=10.1371/journal.pone.0202330>

<sup>2</sup> <https://www.thetimes.co.uk/article/trans-teenagers-have-become-an-experiment-87vn5m8fw>

<sup>3</sup> <https://www.thetimes.co.uk/article/trans-teenagers-have-become-an-experiment-87vn5m8fw>

<sup>4</sup> <https://www.psychotherapy.org.uk/wp-content/uploads/2017/10/UKCP-Memorandum-of-Understanding-on-Conversion-Therapy-in-the-UK.pdf>