
Trans and nonbinary parenting

Authors:

Trish Hafford-Letchfield, EdD, MA, BA, University of Strathclyde, UK

Christine Cocker: BSW (hons), MTh (Dist), PG Cert HSSM, PhD. University of East Anglia, UK

Rebecca Manning, BSc, Research Associate, Middlesex University, UK

Keira McCormack, Dip Psychology, Research Associate, Middlesex University, UK
Abstract:

This chapter focuses on the practices and meanings given to ‘parenting,’ ‘caring,’ and ‘family’ when working with transgender or nonbinary (TNB) people within social work. It is written in the context of legislative and policy changes and in response to political, cultural, and social contexts particularly in the UK where the authors are based. These have implications for practitioners in public sector services who need to ensure that such transformations towards equality for TNB populations directly benefit the individuals and families involved. This chapter integrates research evidence on TNB parenting by firstly drawing on selected findings from a systematic review of the international, empirical literature on TNB parenting (Hafford-Letchfield et al., 2019) combined with the authors’ own experiences as trans activists and social work professionals with research, practice, and personal experience in lesbian, gay and bisexual (LGB) family care. We highlight the relevance of these findings through a legal case study in the UK and conclude with pointers on how these offer a critical lens to further analyse practice which improves support to TNB families.
Biographies

Trish Hafford Letchfield
University of Strathclyde
Glasgow, Scotland
trish.hafford-letchfield@strath.ac.uk
ORCID: 0000-0003-0105-0678

Dr Trish Hafford-Letchfield is Professor of Social Work at the University of Strathclyde, Scotland. Her main research interests lie in the experience of ageing in marginalised communities. Trish is a founder member of the International Social Work and Sexuality Network. Her research is applied and draws on co-production methods often using the arts and other collaborative techniques. Trish has written several key educational textbooks on management, leadership and organisational development in social work and social care. She has also published widely on practice issues in social work and social care which impact on gender and sexual minority communities experiences of services.

Christine Cocker
University of East Anglia,
Norwich, England
christine.cocker@uea.ac.uk
ORCID: 0000-0002-4188-2316

Dr Christine Cocker, PhD, is a Senior Lecturer/Associate Professor in Social Work at the University of East Anglia. Christine researches and writes about social work and sexuality, and social work with looked after children and has published numerous books and journal articles on these topics. Amongst her many publications are: ‘Social Work with Lesbians and Gay Men’ (2011), with Dr Helen Cosis Brown, published by Sage; ‘Rethinking Anti-Discriminatory and Anti-Oppressive Theories for Social Work Practice’ (2014), with Dr Trish Hafford-Letchfield, published with Palgrave; and ‘Social Work with Looked After Children (3rd edition)’ (2019), with Dr Lucille Allain, published by Sage.

Rebecca Manning

Rebecca Manning is registered mental health nurse and manages mental health services in an NHS Trust. She is also a specialist advisor for the Care Quality Commission. She is currently completing an MBA and has won awards for her social enterprise designed to
support TNB communities. Rebecca has an interest in research in relation to mental health, TNB students in higher education and older people.

**Keira McCormack**

Keira is an independent domestic violence advisor for a large national charity and an experience counsellor and counselling co-ordinator. She has a long history as an LGBT activist and advocate specialising in domestic violence, rape and sexual abuse in England and Northern Ireland and is the project manager for Gender Essence, a specialist counselling and support organisation that promotes awareness, offers therapeutic support and training to those from the TNB, Gender Variant and Intersex community.
Introduction

This chapter focuses on the practices and meanings given to ‘parenting,’ ‘caring,’ and ‘family’ when working with transgender or nonbinary (TNB) people within social work. Our understanding of gender identities has increased exponentially through legislative and policy changes, and in response to political, cultural, and social contexts (Council of Europe, 2015). These changes require practitioners in public sector services to take an active role in acquiring knowledge and skills to ensure that these transformations towards equality for TNB populations directly benefit the individuals and families involved. Despite this changing context, TNB issues remain relatively under-explored within social work, and TNB rights are marginalised within mainstream professional practice (Hudson-Sharpe, 2018; McPhail, 2004; Siverskog, 2014). The experience of gender transition can have a profound impact on the lives of individuals and their family members (Dierckx & Platero, 2018). Integrating research findings and reaching out to those impacted, combined with the use of critical reflection should ensure that decision making and support for families is underpinned by the best practice possible.

This chapter integrates selected evidence on TNB parenting from a published systematic review of the international, empirical literature on TNB parenting (Hafford-Letchfield et al., 2019) combined with the authors’ own experiences as trans activists and social work professionals with research, practice, and personal experience in LGB family care (Cocker 2011; Hafford-Letchfield et al., 2016; Cocker, Hafford-Letchfield, Ryan, & Barran, 2018). We draw on this evidence to aid understanding of some of the challenges arising in practice. Furthermore, we have highlighted a legal case study from the UK in order to illustrate some of the practical implications of working with families with parents that
identify as gender diverse. We conclude with pointers on how to best support TNB families using a critical lens to analyse practice.

**Background**

International collaborations to improve recognition of lesbian, gay, bisexual, transgender, and queer (LGBTQ) families have influenced efforts to eliminate discrimination in law, policies, and practices relating to forms of partnership or parenting (including marriage, partnership, reproductive rights, adoption, and parental responsibility) (ILGA, 2015). Some of these collaborations have focused on the elimination of restrictions on the rights and responsibilities of parents based on their sexual orientation, gender identity, and gender expression. The rights of the child remain a core and guiding principle in this recognition.

The developing body of literature on lesbian and gay parenting (Cocker, 2011; Golombok et al., 2014; Golombok & Tasker, 1996) has taken a social constructionist position to challenge heteronormative parenting. Social constructionism sees knowledge and meaning as socially created and located within particular historical and cultural contexts. Therefore meaning is not fixed, rather it is constructed using dominant discourses. Using a social constructionist position has provided positive research evidence on outcomes for children, familial, and social relationships (Hicks, 2011) and the quality of parenting in families of choice (Hicks, 2011; Hicks & McDermott, 2018). In contrast, research on TNB parenting is scarce and often subsumed with the LGBTQ parenting with significantly less or, at times, no discussion or identification of the ‘B,’ ‘Q,’ or ‘T’ in this acronym (Hines, 2017). Failure to adequately differentiate the ‘T’ in research reinforces the invisibility of gendered experiences (Lane & Seelman, 2018; Siverskog, 2014).
In addition, support to manage the intersection of TNB identity and parenting requires intentional services that are rare (Haines, Ajayi, & Boyd, 2014), given the multiple stressors resulting from transphobia (Pyne et al., 2015). There may also be stress personally for parents who are searching for their authentic selves (Veldorale-Griffin & Darling, 2016). These differentiations remain marginal to social work, despite discourses on sexuality and gender politics in families having attracted academic debate and theorising of queer parenting (Hicks, 2011). Whilst changing concepts of family forms can affirm those seen as ‘relationship innovators,’ families with individuals identifying as TNB still experience a hostile environment. Further, due to conceptual and practical issues surrounding the collection of data on gender identities, there are currently no official estimates of the size or growth of the TNB population. This is true for the UK (Office for National Statistics, 2017) where there are few examples of robust evidence on TNB experiences (see reviews by Mitchell & Howarth, 2009; Communities Analytical Review, 2013; Hudson-Sharp & Metcalf, 2016), as well as the United States, where the census does not collect gender identity.

Evidence from a report commissioned by the British Government (House of Commons Women and Equalities Committee, 2016) on TNB equality confirmed significant levels of inequality across a wide range of policy areas and in the provision of public services. This included discrimination and transphobia in schools, social services, the National Health Service (NHS), prisons and probation services, and the police. A subsequent rapid evidence review and limited empirical work (Hudson-Sharpe, 2018) sought to ascertain the adequacy and consistency of child and family social work education in regard to gender identities. Findings revealed a significant lack of TNB-specific social work research on this topic, resulting in poor experiences of TNB individuals and families within social work and
social care settings, as well as everyday discrimination and gaps in services (Alleyne & Jones, 2010; Government Equalities Office, 2016). Very few social workers receive specific education or training in relation to TNB issues, at qualifying BA/MA or MSW or post-qualifying/post MA/MSW levels. This lack of specificity and inclusivity for families with TNB individuals, and the tendency to work with deficit models are further undermined by a lack of resources regarding TNB issues and the lack of networking by TNB families or practitioners working with TNB families. The presence of TNB service users actively campaigning for better services; and the potential for social work researchers and practitioners with particular expertise in LGBQ and/or TNB equality have also been noted (Miles, 2018).

What do we know about trans and nonbinary parenting?

Our previous systematic review on the empirical evidence on TNB parenting (Hafford-Letchfield et al., 2019) sought to: 1) evaluate existing findings how TNB people negotiate their relationships with partners, children, and grandchildren following transition, across the life course; and, 2) consider the implications for professional practice with TNB people in relation to how best to support TNB individuals with their family caring roles. These questions were addressed through a synthesis of the findings of twenty-six existing studies conducted between 1990-2017, with the goal of assessing the strength of the reported evidence, making it available to inform social workers, and helping to identify future research, education, and practice priorities in this area. Taking a life course approach by including grandparenting acknowledges the tendency of individuals to come out or transition in later life, many of whom are more likely to already be in parenting roles (Pyne, Bauer, & Bradley, 2015; Rosser, Oakes, Bockting, & Miner, 2007; Stotzer, Herman, & Hasenbush, 2014; Tornello, Riskind, & Babic, 2019).
Pyne and colleagues (2015) highlighted that whilst the majority of TNB parents might be biological parents to their children, a sizable minority can be step-parents or partners of biological parents, or intentional non-biological parents, indicating that they were parents to their child(ren) since birth, yet not through biological relationships. This points to the diversity of TNB parenting. It also includes Indigenous or First Nation perspectives (Evans-Campbell, Fredriksen-Goldsen, Walters, & Stately, 2007) such as the special role that ‘Two-Spirit’ people play in their communities as caregivers. Consideration also needs to be given to those who aspire or wish to be parents through family planning (Pyne et al., 2015), fertility choices (Ellis et al., 2015; von Doussa et al., 2015; Riggs & Batholomaeus, 2018), assisted reproduction (James-Abra et al., 2015), and other pathways to parenthood (Riggs, Fraser, Taylor, Signal, & Donovan, 2016).

The summative findings from this review demonstrate that people who identify as TNB are as invested and committed to their loved ones as any other persons, but fear that knowledge of their authentic selves may alienate and destroy their familial bonds (Hafford-Letchfield et al., 2019). Findings confirmed that ongoing barriers, both personal, interfamilial, and systemic in the lives of TNB parents are reinforced through a transphobic context, and a lack of appropriate services, targeted support, and advocacy. The literature confirmed that TNB experiences are indeed distinct from LGB experiences, and in the ways in which TNB parents reconcile their parenting. Further, people with TNB identities may be best conceptualized within an intersectional framework, which explores how multiple axes of identity or social location interact to influence peoples’ experiences, perceptions, and enactments of self in different contexts. Participants in many of the research studies demonstrate heightened degrees of personal agency, which helped to create equitable and caring social networks within their patterns of partnering and parenting. Parents and carers
identifying as TNB were highly excluded from mainstream as well as same sex-specific parenting resources. Given that TNB parents tend to transition within the community where they are already living, with the goal of retaining all that is good in their lives, their transition has to be reflexively negotiated alongside complex commitments to family and work.

Selected themes from the review relevant to social work

We expand on two themes from the systematic review to elaborate on findings specifically relevant for social work. Firstly, the impact on family members where a parent transitions; and secondly, what is needed from professionals who are in a position to support them.

Impact on or within the family

TNB parents were more concerned about what being a good parent entailed and its relational aspects, than they were about their gender or their parenting capabilities during or following transition. In a study of fathers, trans parents tied their role closely to the love they had for their children and less to how they functioned as a parent within their couple relationship (Faccio, Bordin, & Cipolletta, 2013). When talking about themselves as parents, for example, they focussed on their individual qualities, rather than on any specific gendered ones (Walls, Katuri & DeChants, 2018).

Other findings revealed that there are many ways in which families responded to parental disclosure, and many of these can be positive (Dierck & Platero, 2018). Whilst there may be conflict within family relationships in the short term, the effect on a child depends on a range of variables such as how each parent or carer copes with the situation and the age and gender of the child. Adolescents whose own sexual development can predispose them to being hypersensitive can be exceptionally challenging (Valdorale-Griffin, 2014). White and Ettner (2004) suggested that pre-adolescents and young adult sons may have an easier time...
adjusting to their parent’s transition. In one study (Pyne, Bauer & Bradley, 2015), just under half of survey participants indicated that they had strong support from their children towards their gender identity. However, Haines et al. (2014) found that disclosure to children may also invite increased parent–child conflict. The processes related to transition may force members of the family to confront complex emotions and issues previously unsurfaced within their familial relationships.

There are a number of risk and protective factors for children with a parent undergoing a gender transition. Risk factors included abrupt separation from either parent, extreme opposition from partners and parental conflict, and poor mental health in either the transitioning or non-transitioning parent (White & Etten, 2007). Protective factors include close emotional ties for the child to either parent, support from extended family, and cooperation and ongoing contact with both parents (White & Etten, 2007). For some children, resulting family conflict outweighed the stress of having a parent transition although there was some evidence that children may hide their feelings. Haines et al.’s (2014) findings echoed many of these themes of high levels of family and relationship conflict in TNB households. Increased level of conflict between parents was associated with increased level of conflict between the trans parent and the child (White & Etten, 2007).

For many of Haines, Ajayi & Boyd’s participants, the conflict between partners/former partners was a result of the shift in gender roles and partnering dynamics that transition necessitates (2014). Many reported that their co-parents (usually, former partners) could not handle the transition and this served as the basis of irresolvable differences that often lead to relationship dissolution (Walls, Kattari, Speer & Kinney, 2019). Clarke and Demetriou’s small study reported how one ‘dad’ experienced major long-lasting depression and came out after his wife left the marital home (2016). Children in their study drew on normalising
discourses to minimise the differences associated with their trans parents within their LGT participant sample. They went to great lengths to neutralise insinuations of 'parental selfishness' by giving accounts that were both protective of their parents and which challenged heterosexist, homophobic, and transphobic assumptions about their families. Their research aimed to show how shifting focus on the damaging effects of transphobia should be a key focus in concerns for children’s wellbeing, rather than having a non-traditional family structure. These effects of transphobia are compounded further by the negative social and cultural associations that TNB parents experience, with no positive images to counter these negatives (Faccio et al., 2013).

Hines’ (2006) study also revealed how TNB parents often reflexively negotiated their transition alongside commitments to family and work, and how this negotiation involved complex navigation around timing of disclosure to maximise emotional care for children. One parent reported de-transitioning specifically and temporarily for the sake of their family (Haines et al., 2014). Openness, honesty, and trust were cited as key values in enabling children to understand and adapt to the changes including explaining procedures involved in gender reassignment. Having an open dialogue allowed parents and children to emotionally support each other. Transitioning after becoming a parent was seen as a risk to maintaining positive relationships with their children or losing them. In contrast, Evans-Campbell et al.’s (2007) study of Native caregiving in the two-spirit community found that there were many benefits to transitioning, because these changes were contextualised within cultural norms and cultural values. Here, community-based parenting in and with communities overrode any perspectives about the individuals’ own lives. Barnes et al.’s (2006) wider study of trans and two-spirit people in Canada, conversely, described people having hidden their trans identity out of fear of losing access to the children in their lives.
Von Doussa and colleagues speak to the positive influence family and friends can have on how adults who identified themselves as trans with one participant as intersex considered possibilities for parenthood (2015). Questions like, ‘When are you going to start a family?’, or ‘You’d be great with kids’, enabled trans adults to see beyond their own internalised transphobia around parenting and consider this as an option for their future. For some significant others/partners, transition can challenge the non-transitioning partner’s perceptions of their own sexual orientation: “their perceived sexual orientation was relationally connected to their partner’s transgender status” (Whitely, 2013, p. 608). Some identified a fear of community rejection and talked about other family members questioning why they decided to stay in a relationship with their partner during and after transition. Other influences, such as religion also have a part to play in how the ‘undoing’ and ‘redoing’ influences decision-making. For some individuals, a religious identity is important and can be a source of support and strength.

One study suggested that for parents of young children, the school environment and particularly the reaction of teachers, parents, and other children, were important factors that impacted a child’s adaptation to parental gender transition (Hines, 2006). One parent reported how the head teacher played a significant role in addressing schoolchildren when people had started questioning that parent’s identity, which made it easier for the family.

*What is needed from professionals?*

Themes from the review demonstrated a range of needs that TNB parents may have in accessing professional support in both the short and long-term. Besides issues associated with increased family conflict, having to manage and balance ones’ own needs with those of others can be compounded and clouded by discrimination and disadvantage faced by TNB parents (Walls, Kattari, Speer & Kinney, 2019), notwithstanding managing their own internal
oppression and self-censorship. Some gave highly detailed descriptions of other people’s opinions and included terms such as ‘perversion’ and ‘paedophilia’ to describe other people’s opinions about their identities (Faccio et al., 2013). Moreover, they were aware that they were considered ‘sick,’ ‘crazy,’ ‘confused,’ and ‘incapable of raising a child’ by others, which reflects their feelings of social marginalisation. This requires extreme sensitivity in offering support and balancing the needs of the individuals involved in a family.

Gender identity and presentation are often used against parents in child custody proceedings (Green, 2007), and courts are more likely to be involved in Black, Asian, and Multiracial families than in White families. There are distressing implications for those who require costly legal counsel during child custody disputes for those living in poverty (Pyne, 2012). Cumulative losses through family rejection and loss of friends, community relationships, and contacts were a large concern for people (Valdorale-Griffin, 2014). Many studies confirm that TNB identifying parents have limited contact with their children (Grant et al., 2011). Living with the fear of transphobia led some parents to avoid public spaces or travel (Pyne et al., 2015). Some parents were anxious about being turned down for a job, or losing employment. One study found that respondents were more likely to be living in poverty or near-poverty; often unemployed, underemployed, or unhappy employed where they were unable to be their authentic self in the workplace (Barnes et al, 2006). Many participants gave up their jobs in order to transition, and others were restricted in their employment opportunities, particularly where there was a complete absence of guidance on employment rights. These findings highlight many issues for social workers in supporting families.

Children may also experience TNB-related bullying. Parents in one study identified three major ways of managing transphobia and bullying experiences: by discussing them with
authorities; by processing these situations directly with their children and; through discussion of how the family managed disclosure as a preventative strategy (Haines et al., 2014). TNB parents conveyed a sense of carefully judging whether it was wise to be out in particular parenting settings but took on transphobia and bullying directly and immediately if it occurred. This is another area relevant to social work intervention and support.

Having access to therapy and support groups was beneficial (Valdorale-Griffin, 2014). Adult children said that individual therapy was also useful (just under half the sample had used therapeutic services and reported positive experiences), but they did not have access to support groups, and adult children reported that these groups might have been useful. Online information, including YouTube videos, was seen as enabling for transgender parents to talk with and hear stories about other parents. Ensuring that therapists were TNB friendly and knowledgeable was also important.

Valdorale-Griffin and Darling suggest that therapists and other human service professionals need to have good skills in being helping parents to prepare for disclosing their TNB status to their families, in particular to their children (2016). Discussing feelings of loss related to parental gender transition is also important in terms of the impact this may have on family roles and the family system as a whole, and in so doing, to lessen the ‘boundary ambiguity’ experienced by the transgender parent. Their research suggests that assisting the parent’s sense of coherence serves as a protective factor for the TNB individual, but developing ways of evaluating this in practice is required. The role of a therapist in this process could potentially be supportive/transformative, with a considerable number of parents and adult children commenting that therapy was useful to them.

The probable lack of education and understanding of service providers is also an issue in relation to caring practices and cultures in Indigenous communities (Evans-Campbell, et al,
2007). This is about the role of the organisation in terms of the values it should have, for example, carer support and implications for alternative family care which is usually limited to those who are caring for relations, rather than other community members.

**What can we learn?**

These findings bring into clear focus the pervasiveness and overwhelming collective weight of discrimination that TNB people endure and how these can negatively impact families in so many different ways (Grant et al., 2011; Hafford-Letchfield et al., 2019). Yet professionals are woefully ill-equipped to provide services due to lack of training, skills and potential biases to advocate for equitable treatment of TNB members in their communities. Access and availability of appropriate, sensitive services are yet to be developed in many places, particularly those which enable family members to receive psychosocial support and strengthen the resilience and self-worth among TNB parents (Pyne, 2012). Evans-Campbell and colleagues further suggest that service providers need to be cognisant of the cultural diversity reflected in some populations, particularly around help-seeking where there are may be intercultural differences (2007).

There are gaps in the literature; for example, the scholarship on domestic abuse in families has a dominant narrative which focuses solely on heterosexual, cisgender men and women leaving service providers ill-equipped to provide inclusive services (Donavan & Hester, 2010). Amongst TNB people, high levels of intimate partner violence and other forms of abuse in families are routinely reported with dire consequences (Riggs et al., 2016; Seelman, 2015). TNB individuals may also experience threats to out them to other families or friends, or threats and/or the actual withholding of medicine and/or money to pay for transition related medicines or surgery. One study reminds us that it is paramount that services acknowledge the different array of potential abuses that sit alongside abuses more
traditionally conceived (Riggs et al., 2016). Another study reports experiences of TNB people who experienced IPV who found their gender identity being problematized by practitioners, rather than focusing on the abuse they had experienced within their intimate relationships (Rogers, 2016).

A further gap in the literature is the absence of research into the experiences of TNB grandparenting, which potentially reflects ageism in TNB lives (Siverskog, 2014). For social workers, an effective service needs to be able to work with all parties involved, to understand their different perspectives and to broker negotiations which keep the interests of children at the forefront of any decision making and support (Freeman et al., 2002). Service providers need to consider the implications for involvement of any new partners, step-siblings, and/or half-siblings who may be on the margins of the family.

**Transgender parenting and religion: A case study from UK case law**

We illustrate some contemporary issues for good practice through a legal case study in the UK. Over the past few years, there have been a small number of cases involving TNB parents that have made their way through the British legal system to the higher courts. Cases have involved TNB parents’ gender status on their children’s birth certificates, and issues of contact between TNB parents and their children. These cases have generated debates about TNB people’s rights and women’s rights that raise fundamental questions about transphobia, sex, gender, and gender identity, as well as the need for urgent legislative review (Government Equalities Office, 2016).

One legal case, *Re M (Children) [2017] EWCA Civ 2164*, involved a judge from the Appeals Court overturning a decision made by a judge sitting at a lesser court, where direct contact had been originally refused between a transgender woman and her five children, from an ultra-orthodox Jewish community. The original private law proceedings were between the
father and the mother of five children, aged between three and 13 years old. The father had left the family home to live as a woman. She was shunned by the Charedi Jewish community in which the children had always been brought up, and the children faced ostracism by the community if they had direct contact with her. The reason given by the judge for his original decision was that despite there being many reasons in favour of direct contact, the risk of psychological harm to the children was considered too great as contact with their transgender parent ran the risk of ostracising the children from their community.

Upon review, the Court of Appeal found for the transgender woman, on the basis that the original judge had failed to:

(i) Ask a number of important questions about how his conclusion could follow from his role as a judicial responsible parent applying the standards of reasonable men and women in 2017, in circumstances where the community focus was as much on itself and the adults as it was on concern for the children [77].

(ii) Suitably deal with the children's and parent's human rights [78].

(iii) Provide clear reasons for preferring indirect contact over direct contact, in circumstances where the concern was the role of the community.

(iv) Grapple with all efforts to make contact work.

In the Court of Appeal judgement, the court emphasised that:

"[T]he judge in a case like this is to act as the 'judicial reasonable parent', judging the child's welfare by the standards of reasonable men and women today, 2017, having regard to ever changing nature of our world including, crucially for present purposes, changes in social attitudes, and always remembering that the reasonable man or woman is receptive to change, broadminded, tolerant, easy going and slow to
condemn. We live or strive to live, in a tolerant society. We live in a democratic society subject to the rule of law. We live in a society whose law requires people to be treated equally and their human rights are respected. We live in a plural society, in which the family takes many forms, some of which would have thought inconceivable well within living memory.” (p. 60)

In stating that direct contact was in the children's best interests the Court of Appeal concluded:

“[I]n our judgment the best interests of these children seen in the medium to longer term is in more contact with their father if that can be achieved. So strong are the interests of the children in the eyes of the law that the court must, with respect to the learned judge, persevere. As the law says in other contexts, "never say never". To repeat, the doors should not be closed at this early stage in their lives.” (p. 138)

Critical commentary

This case study is complex because it involves the issue of contact between a parent identifying as transgender and their children from an orthodox religious community. The Court of Appeal’s interpretation of the paramountcy of the children in decision-making to have an ongoing direct relationship with their transgender parent, even with the challenges that this would mean for the mother and the children within their closed community, was significant in their decision to overturn the decision of the previous judge. It asserts the role that religious belief, practice, or observance should have in influencing the decisions of the courts. The Court of Appeal also commented that it was unfortunate that the judge had not addressed the plain human rights issues and issues of discrimination arising in this case. In this complex intersectional situation, it is the children’s needs that are paramount. A child
needs to know both their parents when possible and not experience significant harm in the doing.

Questions
1. If you were the social worker for these children, how would you approach this situation?
2. What about if you were the social worker for the transgender woman? What issues would need to be taken into consideration?
3. In what way do these positions differ from each other? Why?
4. How could policies be changed to support children’s and parents’ rights in situations like the one described?

Our commentary also draws on lived experiences from within our authorship. The judges remind us of the creativity required to support family relationships. Further, the whole process for parents achieving their authentic selves involves a lot of different aspects at different times. There may be a natural grieving process for the individual, their family, and close networks, thus adding more emotion to an already emotional situation. Further, the transition process will likely continue throughout life. People may, however, feel punished for asserting their own needs, be seen as selfish for persevering against all odds particularly during any experimental phase, be blamed for losing compassion, or be accused of not giving priority to their family members. Not only can this be unsettling but may involve having to stop caring what other people think, so as to survive the process. Many will have fought hard to meet their needs and desires and when this is realised, may find that transition was not a single event, but requires insight into a longer-term future. The parent’s journey to be their true selves can be used as a weapon against them, which mirrors battles between society, the
larger community, their family, and their internal narrative. These are important aspects that can be missed or misinterpreted by professionals who need to appreciate the whole picture and not make judgements or assumptions on engagement.

**Promoting affirming practice with TNB parents and carers**

There are several points from the evidence reviewed that can be used to improve social work and social care practice. Further, Lane and Seelman (2018) argue that the identity categories we address or neglect in our work, and the ways in which we analyze social problems, can potentially reinforce hegemonic discourses that maintain exploitative, oppressive, social relationships. They suggest that our professional voice has an influence on this process. Social workers can highlight and utilise an analysis of exploitation and identity construction through critical theoretical lenses that help us assess our profession in a way that problematizes and denaturalizes how we speak or do not speak about the families and individuals we work with. There is a need to address TNB-supportive practices, staff training, and guidance in the caring professions. These need to include improving the capabilities of social work with gender-diverse populations, and provide accessible evidence-based practice guidelines on legal, ethical, and human rights issues impacting the community.

We are reminded that the social work profession has potential to impact provision, but without a sophisticated understanding of identity and its work, will continue to contribute to the exploitation of service users and overlook practice areas in need of intervention (Lane and Seelman, 2018). There needs to be greater engagement with critical theory in social work practice, research, and education to counteract this and make good social work’s commitment to social justice as a key tenet of the profession.

Social workers need to take responsibility for making themselves aware of the debates on gender diversity, and have a nuanced understanding of LGBTQ+ oppression as part of...
their practice. Through education and training, they need opportunities to develop the confidence to challenge gender-normative and hetero-normative assumptions and prejudices, such as the widespread assumption of binary gender ‘normality’ (Miles, 2018). A survey of 311 transgender and gender nonbinary parents about how they became parents (Tornello et al., 2019) found that pathways to parenthood are very diverse within marginalized gender groups, further highlighting the need for individualized advice and support. Having a nuanced and ethical understanding of the associations between the different factors impacting on different parents and carers, and understanding their experiences can help professionals and support staff to work more effectively and in serving TNB parents, prospective parents and their families.

There are several practice pointers emerging from the literature (see Valdorale-Griffin, 2014; White & Ettner, 2004). The emphasis for the social worker is on the potential complexity of support that individual family members may require around parental transition, and the impact of this for individual family members and on family dynamics as a whole. These may involve expressed or unexpressed feelings of grief and loss for both parents and their children or partners. Working with family members to strengthen and support relationships where this is possible, is of course paramount, but there may well be issues and challenges where strong emotions are expressed and need to be aired, recognising that these feelings can and will change over time. The research suggests that it is the strength of the parents’ relationship that is key and critical to positive outcomes for children, and for the mental health of parents themselves, who may experience many challenges in relation to their feelings of self-worth and self-esteem. Acrimonious parental relationships can be harmful for children, so working with parents to minimise this is important.
Practical support for children and families is also important, including issues like what children should call their transitioning parent in public and private. Social workers have the skills to be able to offer an environment where these conversations can occur. Creating a non-judgemental and safe environment in which these conversations can take place is key and critical. Adolescents may require additional support and group work with other young people may be a strategy to help children experiencing similar changes in their families. Finally, it is essential to be able to recognise and actively address transphobia alongside the provision of advocacy to promote the human rights of people being impacted by it and helping them deal with and combat discrimination. This suggests that professionals are in a strong position to use their roles, own agency and place of employment to be an ally and to promote TNB awareness and equality.

Conclusion

This chapter has provided some insights into some of the complex issues involved in working with families with gender diverse parents or carers. By drawing on a combination of selected evidence from a systematic review, current research, and from a legal case study and scoping report on practice issues from the UK, we were able to demonstrate several key issues. People who are TNB are as invested and committed to their loved ones as any other persons, but many fear that knowledge of their authentic selves may alienate and destroy their familial bonds. Ongoing barriers, both personal, interfamilial and systemic in the lives of trans parents are reinforced through a transphobic context, and a lack of appropriate services, targeted support and advocacy. Whilst LGBQ families have pioneered new family forms, this emerging body of literature reveals that the TNB experience is distinct from the LGBQ experience, and there are differences in how parents who are TNB reconcile their parenting (Tornello et al, 2019). Many parents and carers who are TNB are also excluded from existing
mainstream and LGBQ parenting resources, furthering the need for resources specifically tailored to their experiences.

Social work professionals should provide support and advocacy to LGBTQA+ families in the same way they provide support to all families - focussing on human rights, tailoring work to the specific needs of individuals and families, and affirming the diversity of family life. They have a responsibility and accountability in educating themselves and others on these rights and to reach out to the community to include them in improving services as well as being active in their own organisations to ensure these are inclusive and responsive.

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**Resources**

CORAMBAAF [https://corambaaf.org.uk/](https://corambaaf.org.uk/) is an independent membership organisation for professionals, foster carers and adopters, and anyone else working with or looking after children in or from care, or adults who have been affected by adoption. They have produced a Practice Note to assist practitioners who are assessing transgender applicants in the UK who wish to foster or adopt, and to help fostering services and adoption agencies to work in a way that encourages and values applications from this group of people.

Gender Essence Support Services [https://www.genderessence.org.uk/](https://www.genderessence.org.uk/) - a specialist professional counselling organisation, aimed at providing emotional and therapeutic support to those who identify within the Trans* spectrum, including Gender Fluid, Non-binary, Intersex, Asexual.

Gender Identity Research & Education Society (GIRES) [https://www.gires.org.uk/](https://www.gires.org.uk/) - a UK wide organisation whose purpose is to improve the lives of trans and gender non-conforming people of all ages, including those who are non-binary and non-gender.

Gendered Intelligence [http://genderedintelligence.co.uk/](http://genderedintelligence.co.uk/) - a charity whose mission is to increase understandings of gender diversity and particularly specialise in supporting young trans people.


Stonewall [https://www.stonewall.org.uk/search/Trans](https://www.stonewall.org.uk/search/Trans) – a national campaigning organisation which works with institutions to create inclusive and accepting cultures and to empower LGBT people as advocates and agents of change in wider society.

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