

A Parent's Guide to Misinformation

This short guide offers accurate information to debunk and educate around common misconceptions and disinformation, with references.

Misinformation: *There are only two genders in all of history.*

Accurate Information: A strict two-gender system (aka “gender binary”) is an incredibly recent idea that has taken a great deal of violence to enforce. Most human cultures have more complex systems than a man/woman binary. European colonialism directly targeted and suppressed many cultures that aren’t based in two genders, including Indigenous peoples throughout the Americas. The narrow view of gender is ethnocentric: it takes one culture’s idea and universalizes it to all human experience.

Sources: Qwo-Li Driksill, [Asegi Stories: Cherokee Queer and Two-Spirit Memory](#) (University of Arizona Press, 2016); Deborah A. Miranda, [“Extermination of the Joyas: Gendercide in Spanish California.”](#) *GLQ: A Journal of Lesbian and Gay Studies* 16, no. 1 (2010): pp 253–84.

Misinformation: *There’s only XY & XX chromosomes, so women are women and men are men.*

Accurate Information: There is a high variability of chromosomal combinations in humans, far beyond XX and XY. More importantly, chromosomes have *no* predictive value. XX and XY don’t cleanly correlate to female and male. And other chromosomal combinations don’t predictively equal male or female, either. Since their discovery, chromosomes have never been considered deterministic by scientists: they do not “cause” someone’s sex; no single component of sex is deterministic. Finally, practically no one knows their own karyotype (individual chromosome combination), so chromosomes have never been used as a basis for social or legal recognition.

Sources: Sarah S. Richardson, [Sex Itself: The Search for Male and Female in the Human Genome](#) (University of Chicago Press, 2015); Rebecca Jordon-Young, [Brain Storm: The Flaws in the Science of Sex Differences](#) (Harvard University Press, 2011); Rebecca Jordan-Young and Katrinza Karkazis, [Testosterone: An Unauthorized Biography](#) (Harvard University Press, 2019).

Misinformation: *Trans youth are products of peer pressure, or a trend.*

Accurate Information: The idea of a generational “social contagion” corrupting young people has taken many forms over the last century, from rock n’ roll to being gay and lesbian. This trans misinformation was invented in a 2018 study by social scientist Lisa Littman, who coined a pseudoscientific term “rapid onset gender dysphoria” by recruiting parents for a questionnaire from an anti-trans website. The study had to be corrected by the journal that published it and has been debunked by peer reviewed scientists and social scientists. Trans youth existed long before social media, YouTube, or even the original telephone—there is nothing trendy about that. If there are more young people willing to share their identity as trans today, it’s because their generation is less afraid of stigma and have found some acceptance close to home.

Source: Florence Ashley, [“A Critical Commentary on ‘rapid onset gender dysphoria,’](#)” *The Sociological Review* vol 68, no 4 (2020).

Misinformation: *Trans affirming care for minors is child abuse.*

Accurate Information: This talking point originates in far right extremist groups and was adapted in late 2020, when election deniers, white supremacists, and political conspiracy theorists rapidly adopted anti-trans causes. The language was handed to state legislators and incorporated into legislation and state policies (especially in Texas). Gender affirming care requires informed consent, including for minors, which protects them from abuse. It's a bizarre and alarming denial of reality to pretend that conventional medical care is abusive.

Sources: Melissa Gira Grant, "[Texas's Attorney General is Laying the Groundwork to Separate Trans Kids from Their Families](#)," *The New Republic*, Feb 23, 2022; Jules Gill-Peterson, "[From Gender Critical to QAnon: Anti-Trans Politics and the Laundering of Conspiracy](#)," *The New Inquiry*, Sept 13, 2021; Jae A. Puckett, Emmie Matsuno, Christina Dyar, Brian Mustanski, and Michael E. Newcomb, "[Mental Health and Resilience in Transgender Individuals: What Type of Support Makes a Difference?](#)," *Journal of Family Psychology* 33, no. 8 (2019): pp 954–64.

Misinformation: *Medical transition is mutilation.*

Accurate Information: This is an intentionally dehumanizing talking point designed to endanger trans people. All of the medical care that goes into transition is routinely given to non-trans people (think of hormone medications given during menopause, or for PCOS; puberty blockers for precocious puberty; or chest surgery for boys with gynecomastia). There is no magical difference that makes medical transition less natural. Human sex differences are rooted in the same organs and systems in every body. Medical transition is so well received because we carry the genetic capacity to transition if we change our hormonal inputs and access competent surgeries. The regret rate for medical transition is tiny—as low as 1%—*much* lower than most common surgeries and other medically necessary procedures. (For comparison, [regret rates for knee surgery](#) are 6-30%.)

Sources: Chantal M. Wiepjes, Nienke M. Nota, Christel J. M. de Blok, Maartje Klaver, Annelou L. C. de Vries, S. Annelijn Wensing-Kruger, Renate T. de Jongh, et al., "[The Amsterdam Cohort of Gender Dysphoria Study \(1972–2015\): Trends in Prevalence, Treatment, and Regrets.](#)" *Journal of Sexual Medicine* 15, no. 4 (2018): pp 582–90.

Misinformation: *A child cannot be trusted with knowing that they are not their assigned gender.*

Accurate Information: This is a cultural stigma that makes children *more* vulnerable by dismissing them out of hand as inferior. The scientific consensus corroborates that children can be capable of understanding and expressing both discomfort with an assigned gender, and a positive sense of who they are, from a young age. There is no risk in simply listening to children, but there can be massive consequences in refusing to listen, punishing, or neglecting children for expressing themselves.

Sources: Diane N. Ruble, Lisa J. Taylor, Lisa Cyphers, Faith K. Greulich, Leah E. Lurye, and Patrick E. Shrout, "[The Role of Gender Constancy in Early Gender Development](#)," *Child Development* 78, no. 4 (2007): pp 1121–36; Vanessa Lobue, "[When Do Children Develop Their Gender Identity?](#)" *The Conversation*, March 29, 2016.

Misinformation: *Being transgender is a mental illness.*

Accurate Information: No US medical body, including the American Psychiatric Association, considers being transgender a mental illness or disorder. Neither does the International Classification of Diseases system used worldwide. "Gender dysphoria" and "gender incongruence," the common diagnoses trans people are forced to acquire for insurance coverage or legal recognition, are not diagnoses of being transgender. They indicate the

distress that arises from being gendered incorrectly in the world. Still, there is nothing wrong or bad about experiencing mental illness; no one's health care should be taken away because they are stigmatized.

Sources: American Psychiatric Association, "[What is Gender Dysphoria?](#)" Physician reviewed, August 2022; World Health Organization, "[Gender incongruence and transgender health in the ICD](#)," 2020.

Misinformation: *Being transgender leads to an unhappy life.*

Accurate Information: Transphobia and discrimination cause documented stress for anyone who experiences them, as do racism and sexism. Trans people have been represented in the media as isolated and unhappy, but there is nothing inherently negative about being trans, or transitioning. Trans people have long standing, vibrant communities. We come from every single walk of life, live in every community, and flourish when free from attack and stigma. Trans people have no disadvantage in dating, falling in love, or sex. Reputable studies concur that when allowed to access competent healthcare and free from attack, trans people's well-being and happiness is equal to non-trans people.

Sources: Anthony Almazan and Alex Keuroghlian, "[Association Between Gender-Affirming Surgeries and Mental Health Outcomes](#)," *Journal of the American Medical Association* vol 156, no 7 (2021) pp 611-618; here is [an overview of the study](#) from Fenway Health.

Misinformation: *Gender is an ideology trying to replace sex.*

Accurate Information: In English, what we distinguish as "sex" and "gender" were lumped together under "sex" until the 1950s. "Gender" was not invented by feminists, gays and lesbians, or trans people. It was invented by psychologists to describe the internal sense of being a man, a woman, or neither. The idea of "sex based rights" or "biological sex" under the law have no roots in English common law or American law. They don't appear *until 2016*, when an anti-trans "bathroom bill" was introduced in North Carolina.

Sources: Jules Gill-Peterson, [Histories of the Transgender Child](#) (University of Minnesota Press, 2018), pp 97-128; Christopher Hutton, "[Legal Sex, Self-Classification and Gender Self-Determination](#)," *Law and Humanities* 11, no. 1: pp 64–81;