

Transgender and Gender Diverse Adolescents' Fertility and Parenthood Goals in the Context of Family Pressure and Gender Affirmation

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Background

❖ **One- to two-thirds of transgender and gender diverse (TGD) youth desire children in the future,** and the tensions among fertility preservation invasiveness, expense, gender dysphoria, and prioritization of gender affirmation therapy shape family building plans.¹

❖ Less is known about the effects of familial pressure to preserve fertility and have biological children on TGD youths' fertility goals.

Objectives

- 1) To clarify fertility goals of TGD youth.
- 2) To quantify and describe family pressure and the impact of prioritizing gender affirmation on TGD youths' decisions about fertility preservation.

Methods

- 1) Demographics of TGD adolescent participants (n=29) are displayed in **Figure 1**. Participants were recruited through the **Trans Teen and Family Narratives Project** at Boston Children's Hospital.
- 2) Mixed methods data were collected through **semi-structured interviews** and the **Transgender Youth Fertility Attitudes Questionnaire (TYFAQ)**.²
- 3) Three independent coders used Dedoose software to analyze qualitative data, and a **thematic analysis** approach was used to identify major themes.³
- 4) Responses to select TYFAQ questions pertaining to fertility goals and related family pressure were analyzed using descriptive statistics.

Results

TGD youth often desire parenthood. Data from the TYFAQ (**Figure 2**) show that on average, TGD youth responded either "Agree" or "I don't know" to a question assessing desire to have children someday.

TGD youth are open to alternative family building methods. Four agreed and one strongly agreed that having biological children is important. Two participants described pressure from caregivers to have biological children, but most participants disagreed or strongly disagreed that they felt such pressure. In interviews, most TGD youth favored adoption and/or partner pregnancy with biological children.

A minority of participants chose fertility preservation. Two trans girls underwent fertility preservation (sperm banking), but neither experienced familial pressure to do so. There was less consensus in the sample regarding desire for fertility preservation.

TGD youth face barriers to parenthood. Some TGD youth who wanted biological children cited barriers of cost, gender dysphoria, and inconsistency between parenthood and their TGD identities.

Figure 1. Demographic table for 29 TGD youth participants

Age in years (M, SD)	
All	17.3 (1.2) range 15-20
Race/Ethnicity (n, %)	
White	22 (76.5)
Person of Color	7 (24.5)
American Indian or Alaska Native	1 (3.5)
Asian	2 (7.0)
Black or African American	0 (0)
Hispanic or Latinx	1 (3.5)
Native Hawaiian or Pacific Islander	0 (0)
More than one race	3 (10.5)
Gender Identity (n, %)	
Trans girl	10 (34.5)
Trans boy	12 (41.4)
Nonbinary, assigned female at birth	6 (20.7)
Nonbinary, assigned male at birth	1 (3.4)
Sexual Orientation Identity (n, %)	
Lesbian, Gay, Bisexual, Queer	21 (72.4)
Heterosexual	8 (27.6)

Conclusions

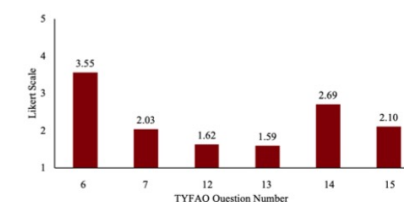
❖ Most TGD participants desire parenthood.

❖ Participants favor adoption or co-parenting with partners who can biologically carry. A minority of participants endorsed family pressure to have biological children and preserve fertility.

❖ Barriers to fertility preservation, including gender dysphoria, expense, and the physical experience of gamete collection should be explored further.

❖ Developing fertility technology to inexpensively and non-invasively collect gametes and tissues will be important to help TGD youth and their families navigate fertility goals and gender affirmation. Until then, streamlining pathways to adoption both socio-politically and financially will allow TGD youth to achieve their stated parenthood goals.

Figure 2. Transgender Youth Fertility Attitudes Questionnaire (TYFAQ) responses to selected questions.



Likert Scale:
5 = Strongly Agree
4 = Agree
3 = I Don't Know
2 = Disagree
1 = Strongly Disagree

Selected TYFAQ Questions:

6. I want to have kids someday.
7. If I have kids, it would be important to me that they are my biological kids.
12. I feel pressured by my family to have my own biological child someday.
13. I would feel that I'm disappointing my family if I could not have my own biological child.
14. I would consider medical procedures that would allow me to preserve my eggs or sperm to be able to have my own biological children in the future.
15. My family wants me to preserve my eggs or sperm.

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