

PARENTS OF TRANSGENDER, NON-BINARY, AND GENDER-EXPANSIVE STUDENTS RESPOND TO THE CDC'S LATEST YOUTH RISK BEHAVIOR SURVEILLANCE DATA WITH CALL TO ACTION

It is often the case that we are not moved to action until we see and experience the human face of tragedy.

In the data collected in U.S. high schools by the Centers for Disease Control and Prevention (CDC) in 2019's Youth Risk Behavior Surveillance, there is a clear and growing tragedy unfolding, borne out in the daily experiences of hundreds of thousands of American families with transgender, non-binary and gender-expansive children.

It is important to preface that science-based knowledge of human biology leads all major health organizations worldwide — from the American Medical Association and the American Academy of Pediatrics to the World Health Organization — to unite in agreement that being transgender is neither a choice, nor a “mental illness,” but rather, like sexual orientation, a normal and innate variation of human experience. This has led the world's major professional medical associations to declare that transgender youth, like transgender adults, should be supported and affirmed in their identities.

With support and affirmation in homes, schools and communities, transgender and gender-expansive children can and do lead happy, healthy and safe childhoods, and continue to thrive in adulthood. We know from our own lived experience as parents of transgender, nonbinary, and gender-expansive children that a solid foundation of family acceptance and a safe, inclusive school environment are essential ingredients for children's wellbeing.

Despite this, recently released YRBS data shows that the experiences of transgender and gender-expansive children in our nation's schools has not, overall, been positive. Transgender and gender-expansive children experience all forms of harassment and bullying in our schools and communities, in far greater numbers than their cisgender peers. Cisgender is a term used to describe a person whose gender identity aligns with those typically associated with the sex assigned to them at birth.

Transgender and gender-expansive youth report being afraid to go to school, resulting in poorer grades and narrower opportunities after high school. They report hostile school environments and higher levels of substance abuse. They even report elevated symptoms of depression and suicidality, which they experience at 4 times the rate of their cisgender peers. Shockingly, in Human Rights Campaign (HRC) Foundation's analysis of the 2019 YRBS, 29% of transgender youth reported attempting suicide at least once in their life, over four times the national average.

Lack of support and affirmation at home can be an even higher risk factor for transgender and gender-expansive youth, and corresponds with their high rate of housing instability.

While the YRBS captures data from high school students, transgender and gender-expansive students of all grades experience bullying and its consequences. On paper, these numbers are horrific enough, but as experienced through the eyes and in the hearts of parents of these children, they embody the sum of all parental fears - that our children will not survive, intact, into adulthood.

WHO ARE TRANSGENDER, NON-BINARY AND GENDER-EXPANSIVE CHILDREN?

Transgender children are those whose gender identity or expression is different from cultural expectations based on the sex they were assigned at birth. The term 'gender-expansive' includes those children whose understanding or expression of their gender does not fit their society's stereotypical or historical understanding or expression of gender. The term non-binary describes a young person who does not exclusively identify as male or female, or may fall completely outside of these categories; many non-binary people also identify as transgender, but not all non-binary people do. Young people may also identify as bigender, genderqueer or gender-fluid. These identities may overlap and there is no single term to best describe how young people experience their gender; our terminology in this document is meant to be as inclusive as possible.

While it is difficult to track the actual number of transgender and gender-expansive children in our nation's schools, YRBS data collected by the CDC allows us to estimate that roughly 2% of our nation's high school students had identified as transgender.

The YRBS also asked high school students about their *sexual orientation*, that is, about whether they identified as straight, gay or lesbian or bisexual. It is important to understand that being transgender does not imply any specific sexual orientation. Whereas gender identity refers to one's sense of self, sexual orientation is an inherent or immutable enduring emotional, romantic or sexual attraction to other people. Therefore, transgender people may identify as straight, gay, lesbian, bisexual, etc.

OUR KIDS ARE NOT "ALRIGHT"

According to 2019 YRBS data, huge disparities exist between the experiences of transgender high school students and their cisgender schoolmates, in peer-to-peer interactions, in relationships and in their experience of health risk factors such as substance abuse and poor mental health. These numbers are, in large part, echoed in the experiences of transgender and gender-expansive youth in earlier grades as well.

Peer-to-peer bullying and violence directed at transgender students:

- + **43% of transgender students** were bullied on school property at three times the rate of their cisgender peers (YRBS, 2019, notably, a 16% increase from the 2017 numbers).
- + In 2019, **29% of transgender students** reported being threatened or injured with a weapon on school property, compared to 7% of their cisgender peers.
- + In 2019, **35% of transgender students** reported skipping school due to fear for their safety, compared to 9% of cisgender students.
- + Cyberbullying by peers, either on or off of school property, disproportionately affects **transgender students at a rate of 34% to 13%** respectively.
- + **33% of transgender high school students** reported experiencing sexual violence and 28% reported being raped. These numbers diverge significantly from those of cisgender youth, at three to four times.

In addition to harassment from peers, a study conducted in 2018 by the Human Rights Campaign Foundation found that only 23% of transgender and gender-expansive youth reported being fully supported at home. Hostility, violence and lack of support from peers, family and community contribute to high risk factors for transgender and gender-expansive youth:

- + **61% of transgender and gender-expansive students** reported experiencing symptoms of depression — twice the rate of their cisgender LGBTQ peers.
- + **29% of transgender and gender-expansive students** reported a suicide attempt in 2019, over four times the rate of their cisgender LGBTQ peers.
- + **39% of transgender and gender-expansive youth** reported using alcohol, as opposed to 26% of their cisgender LGBTQ peers, and 33% reported the use of illicit drugs - five times the rate of their cisgender LGBTQ peers.

WHAT DO THE YRBS NUMBERS TELL US?

Transgender and gender-expansive youth continue to be unsafe in our nation's schools and experience violence and discrimination at far higher rates than their cisgender peers. Rates in several key statistics such as bullying on school property and cyber-bullying have risen between the 2017 and 2019 survey. This mirrors an increase in violence against transgender and gender non-conforming people nationwide.

Students of all ages cannot learn and thrive in hostile environments. Data about the negative experiences of transgender and gender-expansive students in schools underscores the importance of parent/caregiver and family support to ensure a safe harbor at home, and to advocate for their child at school. There are many [resources](#) available to help guide parents/caregivers on their journey to accept, affirm, and advocate on behalf of their transgender children.

It is not, however, enough for only parents and caregivers of transgender and gender-expansive students to support their child. We ask that parents of peers recognize the need for education on gender diversity and to provide messages of inclusion that celebrate our children's diversity in their homes. We ask that they join us in requiring that schools across our nation to create and implement inclusive policies so that *all our children* can have equal access to education.

We ask that schools provide resources that reflect our children's lived experiences, and that they create and uphold anti-bullying and privacy measures aimed at protecting the lives and dignity of transgender and gender-expansive people. We ask that they train their teachers, staff and students to respect and celebrate gender diversity in the understanding that our children are normal and deserve support. The [Schools in Transition Guide](#), and a myriad of resources from HRC's [Welcoming Schools](#) program can provide concrete guidance for educators, school counselors, and other key K-12 personnel.

We ask that school-based health centers and individual health care providers — school nurses, social workers, psychologists, and health educators, follow the standards of gender-affirming care for transgender and gender-expansive children, so that they can not only survive, but flourish, despite the challenges of their environment.

Together, parents, educators and medical professionals each have a critical role to play in ensuring that future statistics on the experiences of our children reflect a growth in acceptance and physical and emotional well-being.

STORIES OF HEARTACHE AND HOPE

These numbers are hard enough to read without feeling a deep sadness. They represent the lived experience of many of our transgender and gender-expansive youth and their families. Some share their stories of heartache and hope here:

"The harassment began when my son's classmate discovered an old yearbook photo and realized that my son was transgender. He began to follow him around and ask him when he was going to tell everyone he was trans. Eventually the comments became sexual in nature. He told my son he was going to be raped and that he was going to touch him sexually. Eventually he did. It took awhile for my son to tell us what was wrong. He had become so anxious, and withdrew from some of his friends. He became afraid to go to school and began to miss days, until he was close to failing the year. His grades fell. I could see physical signs of stress on him. The school took a long time to come to the conclusion that my son was sexually harassed. We felt that they looked at this case differently, because my son was transgender."

LG, mom of transgender boy, AZ

"My child's high school experience was very difficult. They have shared with us that teachers frequently refused to call them by their preferred name while readily using nicknames for other students. They were challenged by cisgender males to fights and were bullied for the way they looked and dressed. Because they joined our Governor's anti-bullying task force and became involved in advocacy, they were very aware of how badly other transgender kids were being treated and they lost friends to suicide. Our child suffered from bouts of depression and thoughts of suicide throughout high school."

E, mother of a non-binary child, Minnesota

"My daughter was afraid to come out at school, that she wouldn't be accepted as a girl, and shied away from transitioning for over a year. During that time I could see she was uncomfortable in her own skin. She would hold in her emotions at school and lash out at home. Eventually she couldn't deal with the pressure of living one life at school and another at home. We were so happy with how her friends and the school dealt with it. Everyone was super supportive and protective of her. They scheduled meetings with my daughter and her teachers and closest friends so that she would have allies on that first day she came to school as who she really was."

J, mother of a transgender daughter, greater NYC



My child was profoundly isolated in high school. They started having panic attacks and self-harming. They became dangerously depressed, and finally, after intense agonizing and triage with their therapist, we decided to try medication. They were improving, and just when I was beginning to recognize my beautiful child again, they had a massive reaction to the antidepressant. They spiraled into suicidal ideation with graphic images of self-harm. There are no words to convey the sense of devastation, horror, and helplessness that I felt as a parent. NO parent should ever have to go through this."

M, parent of a nonbinary child, Northeast OH

"For the first few months of 2nd grade, my kid had several vague/unverifiable illnesses (stomach aches, headaches, etc.). I was constantly getting calls from the school nurse to come pick her up. However, she would "miraculously" feel better as soon as we got home. I missed lots of work and she missed lots of school before I could finally get her to reveal she was avoiding school because of a bully. Aside from the usual verbal taunts, she had been depantsed in front of other students on different occasions and physically attacked on the playground until she vomited. She had told trusted teachers at school, but each one thought it was an isolated incident and didn't communicate with me or other staff members to understand the cumulative sum of all the bullying. Needless to say, that was a rough time for my child."

J, mother of 12 year old transgender daughter Portland, OR

Although my son was proud to be a transgender advocate, he worried incessantly that friends would 'dump him' when they found out, which he saw as a matter of 'when,' not 'if.' The feared event finally happened when my son was in 4th grade. The news quickly went around his circle of friends. I connected with the mother of his best friend (who knew my son was trans) and asked how her son was reacting to the news. I was clearly shaken. She said, "Oh no, don't worry at all, he's fine with it. We've been talking for years about what it means to be transgender and that he might know a transgender person and he shouldn't treat or think about them any differently. He loves your son for who he is. That doesn't change." I started to sob. I couldn't believe this mother had paved the way for my child's acceptance in such a thoughtful, easy way. I don't think she could ever know how grateful I am. I wish all parents were like her. My son is no longer anxious about his friends knowing he is transgender. He has blossomed."

M, mother of a transgender son, MA

“While our family’s story is unique in some ways, it is very similar to others in most ways. My child is nonbinary and struggles with anxiety and depression caused by gender dysphoria. The last few years have not been easy by any means. However, we have had positive experiences along the way. My child and other transgender students were avoiding using bathrooms at a school for some time. When my child took Basic Strength Training, they decided to explore alternatives to the girl’s locker room and gendered bathrooms. After numerous conversations with principals and teachers, my child convinced the school to turn one of the staff bathrooms into a non-gender restroom. It is only one in a large building, but it is progress and allows many to use the restroom more comfortably. We are so proud of our child’s advocacy and willingness to be open and honest about their struggles.”

K-South Dakota, mother of a nonbinary teen

A PLEA FROM PARENTS

Most parents and guardians speak a common language of hope and fear for their children — something which unites us across race, religion and political affiliation. It is the universality of parental love that gives us, parents of transgender, non-binary and gender-expansive children, a measure of hope in our children’s future. If parents and educators across this country could hear our voices and share our stories, they too would demand that their schools and communities keep transgender and gender-expansive children safe. They would speak up in the belief that *all children deserve to live and learn in a safe environment*. **This is what we ask of you, quite simply, to see the humanity, the beauty, the potential in our children and to help create a world in which each child — including transgender and gender-expansive children, can thrive.**

Mimi Lemay, author, advocate and member Human Rights Foundation’s Parents for Transgender Equality National Council

METHODOLOGY FOR DESCRIPTIVE ANALYSIS OF YRBS DATA

The YRBS (Youth Risk Behavior Surveillance) is a system of surveys that monitors various health trends among youth primarily in public high schools across the United States. Only the most recent data from 2019 are used in this report. Every release of the YRBS includes publicly available files in which sexual orientation and gender identity data are accessible. It is important to note that not every state that does collect sexual orientation and gender identity data provides the CDC permission to make its data [publicly available](#). In 2017, a total of 29 states made sexual orientation data publicly available for 162,200 students and 9 states made gender identity data publicly available for 93,500 students. In 2019, a total of 34 states made sexual orientation data publicly available for 161,000 students and 14 states made gender identity data publicly available for 107,500 students. This analysis uses nonresponse weights provided by the CDC to ensure national representation of the descriptive results. YRBS data only measures “transgender” as an identity in its survey, meaning it is not possible to talk about the results for all gender diverse youth, including non-binary and genderfluid youth.

