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The couple and family in transition

Damian McCann*

Summary

This paper provides an overview of the particular challenges couples and families face when a partner or parent decides to transition. It examines the complexities relating to gender and sexuality and the ways in which these are played out within couple and family relationships in the context of transitioning. Factors which enable partners to transition together and those which result in the breakdown of the couple relationship will be explored. Specific developmental challenges for families navigating their way through the complexities relating to a family members decision to transition will be highlighted. The importance of partners and families accepting and supporting a loved one through the transitioning process is emphasised. The paper also addresses the important contribution that couple and family psychoanalysts can make in helping those struggling with the transition to find a more considered outcome.

Keywords: trans, transitioning, developmental challenges, couple and family psychoanalysis.

Résumé. *Le couple et la famille en transition*

Cet article donne un aperçu des défis spécifiques que les couples et les familles affrontent

* Couple psychoanalytic psychotherapist & consultant family & systemic psychotherapist.
dmccann@tavistockrelationships.org

lorsqu'un des partenaires ou parents décide de transitionner. Il examine les complexités liées au sexe de l'individu, sa sexualité et à la manière dont ils rentrent en jeu dans le contexte de la transition. Les facteurs qui permettent aux partenaires de se transitionner ensemble et ceux qui entraînent la rupture de la relation couple seront explorés. Les défis de développement spécifiques aux familles qui naviguent à travers la complexité d'une décision de transition d'un membre de la famille seront mis en évidence. L'importance des partenaires et des familles d'accepter et de soutenir un bien aimé dans le processus de transition est soulignée. Le document aborde également la contribution importante que les psychanalystes de couples et de familles peuvent faire en aidant ceux qui luttent avec la transition pour trouver un résultat plus pondéré.

Mots-clés: trans, en transition, défis développementaux, psychanalyse de couple et de famille.

Resumen. *La pareja y la familia en transición*

Este documento ofrece una visión general de los desafíos específicos de las parejas y las familias cuando un de las parejas o padres decide de transicionar. Examina las complejidades relacionadas con el género, su sexualidad y las formas en que se realizan en el contexto de la transición. Se explorarán los factores que posibilitan la transición juntos y los que resultan en la ruptura de la relación de la pareja. Se destacarán los desafíos específicos de desarrollo para las familias que navegan a través de las complejidades de la decisión de transición del miembro de la familia. Se enfatiza la importancia de los socios y las familias en el proceso de transición. El artículo también aborda la importante contribución que los psicoanalistas de parejas y familiares pueden hacer para ayudar a aquellos que luchan con la transición a encontrar un resultado más considerado.

Palabras clave: trans, en transición, desafíos de desarrollo, psicoanálisis de parejas y familias.

Introduction

It is generally recognized that there is a dearth of research and theory relating specifically to the intimate partner relationships of *trans* people. In this paper I will attempt to provide something of an overview of the particular challenges couples and families face when a partner or parent decides to transition. I will also consider the clinical implications when working with such couples and families as well as examining the ways in which the theory underpinning couple psychoanalytic psychotherapy may be applied to our work with couples in transition.

Transgender experience, according to Carroll (2006) refers to the many different ways in which individuals experience their gender identity outside the simple male and female binary. Gender dysphoria and gender identity disorder, as we know, are terms used to label and define those with a persistent cross gender identification, or discomfort with

one's sex, often accompanied by a desire to make one's body congruent with their preferred sex. However, the danger in reducing and applying such labels to *trans* experience is that it effectively shuts down the space available to navigate between that which is considered pathological and, that, which falls into the area of difference. Indeed, transgender couples are believed to be pioneers in the navigation of intimacy, stability and excitement outside the heteronormative gender binary.

In order to honor and reflect this expanded frame of reference, I will utilize the broader definition of *trans* as an umbrella term that includes all gender non-conforming people, although I recognize that many transgender and transsexual people may not be comfortable placed under this more inclusive *trans* umbrella. Nevertheless, my motivation for moving in this direction is to counter the tendency within our own profession to push towards the center at the cost of privileging difference, confusion and uncertainty. Indeed, it is as if psychotherapists themselves share the same anxiety as some of our patients who struggle to stay within and manage the site of discomfort, confusion and uncertainty without the tendency to foreclose. In that regard, I am reminded of a young trans man who I saw some years ago in the context of his family who were struggling to manage his transition. However, the young man's wish to transition totally dominated the sessions to the extent that it was not possible to question or tolerate any uncertainty about the process at hand. It was as if we had all been taken hostage by the force and speed of the young man's need to transition so that attempts by me to allow other voices into his narrative only served to reinforce his determination. Paradoxically, it was only when he had everyone on the same page that he could then allow himself to really take in the meaning of his decision. This then provoked a psychic collapse that allowed for a more integrated transition. To some extent, we as therapists are on the same journey towards tolerating and welcoming difference in our consulting rooms and into our thinking, so that we may be better placed to serve our gender variant and gender non-conforming individuals, as well as being responsive to their partners and families, who themselves may be struggling to manage and contain the transition.

The Couple in Transition

Social and familial challenges related to transitioning can cause great strain in people's lives, especially in interpersonal relationships. Lev and Sennott (2013), for instance, believe that it is not necessarily the transition itself that is challenging for partners and families but rather the immense discrimination and social stigma related to being differently gendered. A further challenge that some couples face is that related to the spectrum of gender mobility and the definition used, i.e. gender fluid, gender queer, or trans, etc. Partners may struggle to understand and accept the spectrum of gender expression ranging from; those who mix or blend gender, those who oscillate or move back and forth from one gender to another, and those who feel that some form or even substantial body alteration is necessary to align inner experience and identity with outward appearance (Ekins & King, 2007). In other words, for a number of individuals

who identify as trans, sexual reassignment surgery will not necessarily become the end goal in their journey towards transition. Moreover, taken from the perspective of a couple relationship the journey stops being about the individual's needs in isolation but rather about how the couple as dyad face the transition together and how the transition is managed within the context of the family.

Furthermore, the twinning of gender and sexuality adds yet another layer of complexity for couples and practitioners alike. Currah (2001), states that the term sexual orientation remains largely intelligible only if sex and gender remain relatively stable categories. This is because those identifying as *transgender* appear to disrupt the boundary that enshrines gender and sexual orientation, a kind of transgressive sexuality. Anxieties are therefore raised when individuals and couples present with complex issues and questions concerning one's gender, one's sexuality and of course the linking of the two. A question that seems to arise is that relating to an individual's sexual orientation following transition and how this is managed within the couple relationship. According to Israel (2005), 75% of *trans* individuals will re-examine and explore their sexual orientation during transition and, of those who do, at least half will redefine their sexual orientation within the first few years of transitioning – defined as the wild card of transitioning. These shifts in sexual orientation will inevitably impact the identity of both partners as well as raising questions concerning levels of intimacy. Bockting *et al.* (2006) underscoring this point suggest that *trans* specific concerns include; managing gender dysphoria within an intimate or sexual relationship, concerns related to erotic cross-dressing, shifts in sexual orientation or sexual preferences as part of gender exploration or gender transition as well as the specific impact of hormonal or surgical feminization or masculinization of sexual desire and sexual functioning.

For Diane and Jacob (nee Suzy), Diane says «*Jacob and I discussed what it meant to be a man... I was trying to control what kind of a man Jacob would become. Eventually it became obvious that I was trying to wrest some kind of control in a situation where I was afraid I had none. Especially after Jacob started testosterone treatment, I worried that runaway masculinity would change him so much I'd lost the person I loved*» (Anderson-Minshall, 2014, p. 59).

Diane continues to speak about the impact her partner's transition was having on her identity by imagining what might happen if she was at the grocery store and the clerk complimented her on her lovely handbag – she replies: «*Thanks, my husband gave it to me. Except, he used to be a woman. He used to be my wife. He had a sex change. But I am still a lesbian*» (Anderson-Minshall, 2014, p. 75).

This innocent enough quote brings into sharp relief, the two separate individual identities brought together inside the couple relationship and the relationship of this to a potentially hostile and unaccepting outside world. This can undoubtedly be a developmentally stressful time for the individual's and the couple concerned and it is worth reminding our selves that the rate of suicide for *trans* people is three times the national average. Minority stress, as we know, is corrosive and is responsible for increased rates of anxiety, depression, alcohol and substance misuse, risks with one's sexual health and of course suicidal ideation.

Yet, Diane and Jacob were able to transition together whereas a number of couples are not. It seems that in the past the dominant belief that couples were not expected to stay together, may continue, consciously or unconsciously, to exert an influence on couples themselves where one of the partners discloses that they are questioning of their gender. A big part of being able to travel the route together seems to depend on whether the non-transitioning partner can manage and work with the impact of their partner's identity change on them. Fox & O'Keefe (2008) believe that partners who are able to remain accepting and flexible are better positioned to cope with and continue their relationship with their *trans* partner. It has been suggested that those who identify as bisexual may be more able to tolerate and work through the challenges. Conversely, those who react only with shock, denial and anger may have a much harder time making the journey or being able to grieve the loss of the partner with whom they originally fell in love in his or her new gender.

Diane says *«It took a long time. She approached it slowly, like navigating a labyrinth, spiraling closer and closer to the truth in the center. For 15 years the love of my life had been a girl named Suzy. Then she said the words that I had been dreading and just like that she was gone. I still see her sometimes, brief glimpses of what once was. I used to occasionally tear up. The truth is a small part of me misses her. A part of me always will»* (Anderson-Minshall, 2014, p. 21).

Although Diane and Jacob worked hard to hold their connection through the process of transitioning, Jacob's surgery provided a particular point of reference for the shared anxiety to emerge.

Jacob recalls: *«The night before my chest surgery, Diane and I had one of our worst fights ever. It was a jumble of fears, blame throwing, anxiety and terror of the unknown beast I'd unleashed into the once safe and still forest of our relationship. She was afraid I might not wake up from the surgery. She was afraid I would abandon her. And I was afraid Diane would leave me»* (Anderson-Minshall, 2014, p. 81).

And Diane says: *«And, as regards the chest, one I didn't recognize, one that wasn't quite done because it needed weeks to recover, I put on a positive face because he was so excited about getting one step closer to a body, and a life that finally felt right»* (Anderson-Minshall, 2014, p. 81).

Although Diane was very much engaged in the process, the questions that arise for the non-transitioning partner are in some ways similar to the "coming out" literature relating to gay, lesbian or bisexual partners disclosing their sexual orientation within the context of a marriage or a long-term relationship. For example, the non-transitioning partner may ask:

- Why didn't my partner disclose gender issues sooner.
- Was he or she lying all those years.
- Is my husband really gay or my wife really lesbian.
- Does my partner's trans identity suddenly invalidate the experiences we shared.
- Is there something I have done that is wrong and is it my fault.
- Can we continue to parent together or will doing so harm our children.

Providing a safe space within the therapeutic encounter to explore the answers to some of these questions seems particularly important for the wellbeing and development of the individuals concerned and their couple relationship. At the same time, one might also suppose that at an unconscious level, themes of sameness and difference would also pervade the transitioning process. In the case of Diane and Jacob, it is noticeable how in one of the quotes Diane speaks of a nameless dread, as if part of her knew that although she had chosen Suzy as her partner, that perhaps one day she would end up living with a man. And, in another quote, Diane spells out the depth of her confusion to the grocery clerk, as if she were trying to take in the meaning of Jacob's new identity for her and for them as a couple. Lemma (2013) in her work with an individual transsexual, suggests that if one's bodily experience can be represented in the mind of the other, then this will make a difference to the development of a coherent sense of self rooted in the body. Thinking further about this, I wonder if what Diane is attempting to communicate to the grocery clerk is the struggle to develop a coherent sense of self rooted in the body of the shared couple relationship. By the same token, Suzy may have unconsciously chosen Diane because at some level she believed that Diane would be open to partnering her through the transition process and that they could successfully remain a couple.

The Family in transition

It should be clear by now that gender variant experience is not simply an internal psychological process which belongs entirely to the individual concerned, but a process that impacts family members in numerous ways (Lev, 2004). It has been suggested that parents, siblings and extended family members all struggle with trying to make sense of and for coming to terms with a loved one's decision to transition. For instance, Wren (2002) in her research of parents managing a child or young person's decision to transition says «Families with a transgender child may feel that they are managing an experience that can barely be spoken about. This is not just because the experience is perceived as shameful and perverse, but also because our thinking here, at times operates at the limits of language» (p. 377). Parents must therefore try to protect the child from intense stigmatization whilst at the same time facing up to their own sense of guilt, shame or even revulsion. Similarly, having a parent go from being a father to being a mother can be equally confusing for children. Lev (2004) conceptualizes the process in terms of what she describes as a *family emergence model*, which depicts the developmental processes of the family as a whole. She draws an important distinction between engaging in one's own transgender emergence related to an inner pull to live more authentically, whilst at the same time being "forced" to cope with another person's emergent transgender feelings involving resistance, avoidance and denial, as well as rejection. Within this staged model it seems that partners and other family members may react to the news that a loved one is questioning of or wishing to change their gender with feelings of shock and betrayal. This is often followed by turmoil in which there are high levels of stress and conflict as the

family as a whole attempt to take in and manage the disclosure. Lev (2004) reminds us that other unresolved issues within the family, i.e. financial problems, health issues, past extra-marital affairs or parental disagreements may also begin to emerge. However, as with the research concerning a parent's disclosure of their lesbian or gay identity within the context of heterosexual marriage, the timing, motivation and manner of the disclosure are all influential in the process of acceptance (McCann, 2010). Furthermore, in situations where there is a willingness to engage with the challenge of negotiating a way forward, it is possible to integrate the transgender partner or family member back into the couple and family system. Lev (2004) believes that clinicians must believe that families can successfully negotiate these changes in order to assist partners and family members make their own transition.

However it is worth reminding ourselves of additional complicating and confounding factors for trans men and trans women facing the challenges of transition within the family. For instance, *trans* parents who are in the process of transitioning have been shown to be particularly vulnerable in family court proceedings. In a recent newspaper article (Sherwood, 2017) entitled "*Clash of two minorities as ultra-orthodox family is split by transgender case ruling*", a trans woman with five children, post operatively seeks contact with her children in the context of a community's threat to ostracize the family if that contact is permitted. In the ruling Mr. Justice Peter Jackson believed that it was not in the best interests of the children for them to have contact. Yet, research shows that the vast majority of transgender parents report that their relationship with their children is either good or generally positive (Grant *et al.*, 2011; White & Ettner, 2007). Furthermore, the stress experienced by children within the context of a parent transitioning seems to be more related to tensions within and between their parents own relationship as they struggle to make the adjustment.

Indeed, it has been suggested that those holding rigid gender boundaries and beliefs are more likely to struggle to manage the transition of a partner from one gender to another. Furthermore a joint report from the National Centre for Transgender Equality & the National Gay & Lesbian Task Force (Grant *et al.*, 2011) found that *trans* men were more likely to retain their relationship than are *trans* women. One possible explanation for this is that a strong percentage of *trans* men were partnered with queer women, who may have found adjusting to a *trans* partner easier than it would have been for a straight woman. The suggestion is that straight women tend to have definite perspectives on masculinity and, because of this, struggle much more than bisexual, lesbian, or sexually fluid women to manage the transition. However, when Suzy through transitioning became Jacob, Diane found herself in an awkward position, as a supposedly straight woman who identified as lesbian, particularly as she was very active within the lesbian movement. And the struggle and anxieties did not end there as Jacob asks: «*After being in an intimate relationship in which you saw my naked body and you looked upon me as a female, can you really truly see me as the male I now identify?*» (Anderson-Minshall, 2014, p. 142-143).

And to what extent does a partner's identity or gender expression determine how the other identifies? Jacob reminds us that «*Diane is a lesbian (or bi – or queer) because she*

identifies as one, and she'll remain a lesbian as long as she continues to identify as such, regardless of who she's actually sleeping with. And regardless of whether her partner's identity has changed» (Anderson-Minshall, 2014, p. 163).

It is not hard to see, from these quotations, some of the complexities that couples who transition together face as they work through the multiple layers of relating pre and post transitioning and taking on aspects of the new gender. This is further compounded when children and extended family members are also involved and themselves are struggling in their own right to make sense of the transition. This is especially important given that we know that relationship commitment can serve as an important coping mechanism when dealing with the complex feelings concerning gender identity (Hines, 2006) and Boenke (2003), reminds us of the supportive role that siblings can also play in the process of transitioning.

Koken *et al.* (2009) suggests that therapists' awareness of the impact of stigmatization and the need to help the individual or couple tap into sources of support within the family network is essential for optimal development and adjustment of the *trans* identity. Yet, despite the important role that therapists play in the lives of *transgender and transsexuals*, there is more than a suggestion that the field continues to practice selective mutism rather than effective practice. In that regard, we might characterize our own profession as being in something of a transition, although a number of couple and family psychoanalysts appear to be working with trans individuals, couples and families and I imagine that their work in this area will in time also contribute to the development of theory and practice.

The couple psychoanalytic perspective

Psychoanalytic theories have voiced an almost complete opposition to gender reassignment surgery, historically comparing it to psychosurgery. Yet, at the same time psychoanalytic thinking and practice has provided important developments to our understanding of complex intra-psychic phenomenon that is often rooted in human suffering. Part of the translation from individual to couple therapy lies in the therapist being able to hold what Morgan (2005) refers to as "a couple state of mind", since the couple therapist will inevitably be searching for some preliminary understanding of the area in which the couple's shared anxieties and unconscious phantasies lie. Within this endeavour, the couple is encouraged to consider underlying behaviours in an effort to help them move from a place of judgement and reaction towards understanding. Utilizing the application of this thinking, I will explore the presentation of a couple struggling to manage the disclosure of a partner's gender transition and reassignment in the context of their relationship.

Jamie aged 24 years old and Eleanor aged 26 years old met by chance on a retreat. Eleanor was attracted to Jamie's sensitivity and warmth and Jamie found Eleanor accepting and understanding. During the retreat they spent a lot of time in each other's company and both were keen to develop things further. In terms of background history, Eleanor is the eldest of two

siblings and at the age of 14 learned that her father was in fact her stepfather and that her brother was in fact her half brother. This had a profound effect on her sense of identity and security within the family and she often found herself wondering about her birth father. Jamie is also one of two siblings with a sister 2 years older than him. As a child Jamie, who was called Katie, often found that she cross-dressed and she eschewed most things feminine. Although she persistently told her parents that she was a boy this was not accepted within her immediate family and for most of her life Katie felt an outsider. Because of Katie's struggle to find and assert her true identity it wasn't until after university that she completely felt able to begin the process of transitioning. At the point that Jamie met Eleanor he was seriously considering phalloplasty, although he was anxious about the procedure and wasn't at all convinced that it would be the success he hoped.

The couple presented for therapy a few weeks into the relationship following Jamie's disclosure to Eleanor of his *trans* identity. Eleanor was initially shocked and then furious that Jamie had, as she saw it, betrayed her trust in him. Jamie was remorseful but was also desperate to hold onto Eleanor, the first real love of his life. However, at the point that the couple presented for therapy Eleanor was virtually mute and Jamie was highly anxious and despairing. During the initial assessment, the therapist attempted to understand the nature of the couple's internal representation, or, more precisely the meaning of the unconscious couple fit. This is seen as crucial to gaining an understanding of why the couple is together and why it is they are seeking help at this particular point in time. For all intents and purposes, Eleanor who felt a certain sense of betrayal in her own family of origin is now experiencing the same feelings of betrayal with Jamie, who, like her mother, had concealed a crucial fact of life. Jamie, who longed for acceptance and mirroring of his authentic self is now once again on the receiving end of a loved one turning away. Dynamically speaking each of the partners are in touch with themes of betrayal and rejection and although these appear to represent a split within the couple, in reality they speak to a shared experience of being rejected by a loved one and both have had the experience of being left feeling compromised. In a situation like this, the therapist attempts to speak to the split in order to help the couple become more aware of the shared nature of their struggle. The aim of this is to help them reflect on the meaning of their connection so that they can begin the process of speaking to the fears and anxieties that are endangering their relationship. Essentially both partners are fearful of revealing their vulnerabilities to each other especially since their shared history is that of having to manage things alone rather than being able to make use of their respective family's support. Furthermore, the therapist also speaks to the projective system, since it would appear that Eleanor is projecting her own feelings of rejection into Jamie and he is projecting his doubts and fears into Eleanor. Over time and with the therapist's help, it is possible for couples to withdraw the projections and to speak more honestly to their own anxieties and fears.

However, it is also possible that the therapist's own struggle to manage his or her transferences to the material in hand is equally important in the working relationship that develops between the therapist and the couple. Lemma (2013), for instance, reminds us that the *transsexual* confronts the analyst with a disturbing otherness. She says: «How that otherness is understood, that is, how the analyst "looks" at the patient through her distinctive theoretical lens impacts, in turn, on the patient's experience and what transpires between them» (p. 277).

Although Lemma is speaking about her work with an individual, her comments are relevant to our couple in question, since it is possible that the therapist, like Eleanor, struggles to fully accept Jamie's otherness and Jamie is again left with an alien rather than an acceptable self that can be brought into his relationship with Eleanor and into the therapy. On the other hand, it is possible that the therapist is also in touch with strong countertransferential material regarding the split in which one identity is privileged over another. Can the therapist help this couple stay with the struggle to find a true meeting point where the phallus comes to represent the potential for development rather than the representation of the failure about which they are both anxious and from which they must retreat. For this couple the struggle proved too much and Eleanor refused to continue attending therapy. Although Jamie did attend, this was to be the final session during which he spoke of his deep distress of Eleanor's rejection of him and his own concern about completing his transition. The therapist was left wondering about the outcome and reflected on the fact that the couple had met during a retreat, perhaps suggesting a wish to get away from their particular challenges rather than a shared wish to face into these.

Conclusion

By way of concluding this paper, it seems timely and necessary that the field of psychoanalysis and couple psychoanalytic psychotherapy is beginning like the couples we work with to confront the loosening of the stranglehold that gender and sexuality has exerted over so many years and the way in which it has influenced theory and practice. In my work with children and young people, so many of them are questioning their gender and sexuality, so it behooves us as therapists to make our own journey through this profoundly complex and at times disturbing terrain in order to appropriately accompany these children, young people and adults on their own journey from one gender to another. By the same token it is also important to properly understand the nature of the struggle partners and family members encounter as they too, within the context of a partner or loved one transitioning from one gender to another, work towards acceptance and integration. This is important, since family members and partners have the potential to mediate the stress and disturbance that often accompany a loved one making this transition. Sadly, for some, they have to make the journey alone, but therapists also hold the key to reaching out and helping these individuals find real acceptance with self and other.

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