IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF NEW MEXICO

JEANETTE MARTINEZ,
Plaintiff,

v.

ALBUQUERQUE PUBLIC SCHOOLS, by and through the ALBUQUERQUE PUBLIC SCHOOLS BOARD OF EDUCATION,
Defendant.

Case No. 26-3098

COMPLAINT FOR DECLARATORY AND INJUNCTIVE RELIEF AND DAMAGES

Jury Trial Demanded

INTRODUCTION

1. This case asks a fundamental question under the First Amendment: may a public school compel its employees to deceive parents and conceal important information from them about their children? The answer is clear—it may not. Yet that is exactly what Albuquerque Public Schools ("APS") is doing.

2. Under Procedural Directive PJ30 ("PJ30"), APS requires its employees to honor students' requests to undergo a social transition at school. This means, among other things, that students who assert a non-conforming gender identity have the right to go by a new name and pronouns of their choosing at school.

3. Even though a social transition is a significant event in a child's life, fraught with risks and potential long-term implications, PJ30 generally forbids employees from telling parents that their child is undergoing a social transition unless the child consents to parental disclosure.

4. Worse, PJ30 requires employees to deceive the child's parents about the transition. While PJ30 requires employees to use a student's *new* name and pronouns at school, employees must generally use the student's *legal* name and *birth-sex* pronouns in communications with parents.

5. Ms. Martinez is a licensed clinical social worker. She works for APS providing social work and school support to special education high-school students on Individualized Education Programs ("IEPs"). Performing her job requires professional judgment, clear communication, and the trust of the students, parents, and colleagues she works with every day. It also requires her to communicate with parents regarding students' academic, social/emotional, behavioral, and special-education needs. In her role, Ms. Martinez cannot treat parents as strangers—much less enemies—to their own children.

6. Ms. Martinez is also a Christian. Her beliefs prohibit her from lying, engaging in deceptive or misleading communications, and concealing from parents the fact that their children are undergoing a social transition at school.

7. APS has placed Ms. Martinez in an impossible position. Under PJ30, she must deceive parents and conceal important information from them or risk investigation, discipline, and the loss of her job.

8. The First Amendment does not permit public schools to condition employment on an employee's willingness to deceive parents or conceal material information from them absent a valid legal basis, which PJ30 does not have. Ms. Martinez brings this action to stop APS from suppressing her truthful communications with parents in violation of her constitutional rights.

JURISDICTION AND VENUE

9. This action arises under the First and Fourteenth Amendments to the United States Constitution, 42 U.S.C. § 1983, and 28 U.S.C. §§ 2201 and 2202.

10. This Court has subject-matter jurisdiction under 28 U.S.C. §§ 1331 and 1343.

11. Venue is proper in this judicial district under 28 U.S.C. § 1391(b)(1)–(2) because APS resides in this district and a substantial part of the events giving rise to Ms. Martinez's claims

have occurred, are occurring, and will occur within this judicial district.

THE PARTIES

12. Plaintiff Jeanette Martinez is a resident of Bernalillo County, New Mexico. She is a licensed clinical social worker. She is employed by APS as a School Social Worker. She works at Atrisco Heritage Academy High School, an APS school with approximately 1,900 students, providing social work and school support to special education high-school students on IEPs.

13. Defendant Albuquerque Public Schools, by and through its Board of Education, is a public school district organized under the laws of the State of New Mexico. The Board of Education is the local school board for APS and has the capacity to sue and be sued on APS's behalf. *See* N.M. Stat. Ann. § 22-5-4(E). APS is responsible for adopting policies and practices that govern conduct at its 146 schools.

FACTUAL ALLEGATIONS

Background on Social Transition

14. Over the past several years, the debate over the best way to treat gender dysphoria in gender non-conforming youth has become one of the most widely discussed, legislated, and litigated issues in America.

15. So-called "gender affirming" care is one treatment paradigm. *See The Cass Review: Independent review of gender identity services for children and young people* (April 10, 2024) at 68–70, attached as Exhibit A.[1] In general, this treatment paradigm is based on the idea that the psychological distress that can sometimes be caused by having a gender non-conforming identity is best alleviated by affirming that identity. *Id.*

[1] The referenced pages of *The Cass Review* are attached as Exhibit A. The full report is available online at https://bit.ly/4AfRxye.

16. This form of care includes "affirming" psychological interventions, like social transitioning. *Id.* at 158; *see also* United States Department of Health and Human Services, *Treatment for Pediatric Gender Dysphoria: Review of Evidence and Best Practices* (November 19, 2025) ("The DHHS Report") at 89, attached as Exhibit B.[2]

17. A social transition occurs when a gender non-conforming individual begins expressing their gender identity outwardly. *The Cass Review* at 158. In the school setting, it includes things like going by a new name or pronouns, wearing different clothing, using new facilities (like bathrooms or locker rooms), or using programs (like extracurricular activities or sports teams), all consistent with the student's asserted gender identity. *Id.*

18. There are other treatment paradigms for treating gender dysphoria in minors. *Id.* at 70. These other paradigms recognize that most gender non-conforming minors ultimately desist—that is, lose their non-conforming gender identity—by adulthood. *Id.* at 41, 158; *see also* Zucker, Kenneth, *The myth of persistence: Response to "A critical commentary on follow-up studies and 'desistance' theories about transgender and gender nonconforming children,"* International Journal of Transgenderism (2018), attached as Exhibit C.[3] These treatment paradigms advocate for interventions—like psychotherapy—that do not risk solidifying the minor's non-conforming gender identity or otherwise give rise to potentially lifelong consequences. *The Cass Review* at 70, 93, 150.

19. A social transition is not necessarily the appropriate course of action for every minor who asserts a non-conforming gender identity and asks to undergo a transition. *Id.* at 164.

[2] The referenced page of The DHHS report is attached as Exhibit B. The full report is available at https://bit.ly/470w2DP.

[3] The Zucker article is also available online at https://bit.ly/46gJAej.

20. In determining whether a minor should undergo a social transition, "parents should be actively involved in decision making unless there are strong grounds to believe that this may put the [minor] at risk." *The Cass Review* at 164.

Procedural Directive PJ30

21. Under APS Procedural Directive PB1, "Development, Revision, and Adoption of Board Policies and Administrative Procedural Directives," APS policies are the responsibility of the APS Board of Education. *See* Exhibit D. By contrast, APS administrative procedures—the category that includes Procedural Directives such as PJ30—"are the responsibility of the superintendent or designee." *Id.*

22. Through Superintendent Dr. Duran Blakely or her designee, APS adopted and enforces Procedural Directive PJ30, titled "Non-Discrimination for Students: Gender Identity and Expression," which applies at all APS schools. *See* Exhibit E.[4]

23. PJ30 prohibits discrimination against "transgender and gender non-conforming student[s]." PJ30 defines a student's "gender identity" as an "internal sense of gender" that may differ from the student's biological sex.

24. Under PJ30, students may use restrooms, locker rooms, and other school programs consistent with their asserted gender identity.

25. PJ30 also imposes a comprehensive, mandatory framework governing how those in the school environment—administrators, staff, and other students—must speak about students' asserted gender identity.

[4] There may be other policies, practices, usages, procedural directives, or administrative regulations that contain the same or similar prohibitions/requirements as PJ30. Ms. Martinez thus uses the term "PJ30" to refer not only to PJ30 itself but also to all such policies, practices, usages, procedural directives, or administrative regulations, all of which she challenges by this lawsuit.

26. PJ30 mandates that "[s]tudents shall have the right to be addressed by a name and pronoun corresponding to their [asserted] gender identity," regardless of whether the student has undergone a legal name or sex change.

27. PJ30 requires that a student's preferred name and pronouns be entered into the student information system and that staff use that name and those pronouns in "all internal records, documents, and interactions," even when the student is not present and in communications the student will never see.

28. PJ30's interpretive guidance provides that APS must maintain separate "public" and "private" student records. *See* Exhibit F. A student's legal name and biological sex are hidden from most employees in the student information system while the student's preferred name and pronouns—reflected in the student information system—control day-to-day interactions.

29. While PJ30 exempts "inadvertent slips or honest mistakes" in students' preferred name and pronoun usage, it prohibits the "intentional and persistent refusal to respect a student's [asserted] gender identity."

30. PJ30 authorizes students to decide for themselves—without parental notice or involvement—whether to undergo a social transition at school.

31. PJ30 also dictates what employees may tell parents about their child's social transition. Under PJ30, students have "the right to discuss and express their gender identity and expression openly and to decide when, with whom, and how much to share private information," including their parents. In addition, while staff must use a student's preferred name and pronouns with the student and other school personnel, PJ30 provides that "[w]hen contacting the parent/guardian of a transgender student, school staff shall use the student's legal name and the pronoun corresponding to the student's gender assigned at birth unless the student or parent/legal

guardian [with independent knowledge of the student's social transition] has specified otherwise."

32. PJ30's interpretive guidance provides an exception to these requirements when (1) "the student has authorized [parental] disclosure" or (2) such disclosure is "legally required." *See* Exhibit F. Neither PJ30 nor its interpretive guidance identifies any federal or state law requiring disclosure of this information.

33. PJ30 has no exception from these requirements for the situation where parents ask APS personnel a direct question.

34. PJ30 thus generally requires APS staff to deceive parents and conceal the fact that their child is undergoing a social transition at school unless the student authorizes parental disclosure, even in response to a direct question from parents.

35. APS reinforces PJ30 through mandatory employee training. On April 21, 2026, APS's Office of Equity & Engagement required certain employees, including Ms. Martinez, to attend a training titled "Pronouns & Gender Neutral Language," presented by the Transgender Resource Center of New Mexico. *See* Exhibits G–J.

36. The training instructed employees that a person's asserted gender identity, not biological sex, "dictates the language" to be used to refer to the person, and that individuals are to be referred to according to that asserted identity "all the time, twenty-four hours a day." Exhibit H.

37. The training separately instructed employees to deceive parents about their child's social transition, explaining that if staff "don't know whether the parents are cool with [the transition] or not, don't call [the student by their new name and pronouns] in front of their parents." Exhibit H. According to the training, parental deception and concealment are necessary because some gender non-conforming students "are fearful of their parents for really good reason," warning

staff that "if the parent did find out this piece of information . . ., it could be very threatening" to the student. *See id*. In other words, PJ30's parental deception and concealment requirement is predicated on the idea that, because *some* parents might abuse their children, parental deception and concealment are required in *all* cases unless the student authorizes parental disclosure.

38. Although PJ30's text applies only to speech to or about students, the training made clear that PJ30 extends to speech to or about all "people," "individuals," "folks," or "anyone we meet"—which would include APS employees' interactions with other APS staff, among others. This extends PJ30's mandate to a school social worker's speech about individuals who are never the subject of her case notes, IEP documentation, or any other work product, including casual workplace conversation about a coworker, student, or third party that serves no job function.

39. APS investigates complaints alleging violations of PJ30 through APS's formal enforcement mechanisms.

40. APS's Employee Handbook states that "[v]iolation of any APS policy or Procedural Directive" is an "Unacceptable Activity" that "can result in disciplinary action, up to and including termination/discharge." *See* Exhibit K.[5] In addition, the Employee Handbook confirms APS may discharge an employee for "discrimination or other violations of APS policies." *Id.* Because PJ30 is an APS policy or Procedural Directive, violating it exposes an employee to that same discipline.

41. PJ30 designates the Chief Academic Officer as the responsible administrative position and the Director of Equal Opportunity Services/Title IX ("EOS")—a position that is currently held on an interim basis by Jennifer O'Connell—as the department director responsible for its implementation. *See* Exhibit E. Both positions are subordinate to, and accountable to, the

[5] The referenced pages of APS's Employee Handbook are attached as Exhibit K. The full handbook is available online at https://bit.ly/47ayuaV.

Superintendent as APS's chief executive officer. *Id.*; *see also* N.M. Stat. Ann. § 22-5-14(A)–(B).

42. PJ30 is not a neutral rule governing workplace civility or professional competence. Instead, it compels employee speech, dictates the content of employee speech on a contested matter of public debate, requires affirmation of a particular viewpoint, requires parental deception and concealment, and conditions continued employment on an employee's compliance.

Ms. Martinez is a Dedicated Social Worker With Deeply Held Religious Beliefs

43. Ms. Martinez was licensed as a master social worker in August 2014. In 2022, she received her license in clinical social work.

44. From November 2015 to August 2025, Ms. Martinez worked for APS as a Master and Clinical Social Worker providing social work and evaluation for children with special education IEPs.

45. From August 2025 to August 2026, Ms. Martinez was part of APS's Integrated Support Team ("IST"), which serves all APS schools. In that role, she participated in APS's Student Threat Assessment Process, a safety function that identifies, evaluates, and responds to potential threats of violence or harm within the school system. She worked directly with students, staff, and administrators to assess risk, de-escalate situations, and protect individual students and the broader school community.

46. In August 2026, APS reassigned Ms. Martinez to the role of School Social Worker at Atrisco Heritage Academy High School. In that role, her duties include participating in multidisciplinary special-education meetings, ensuring parent participation in educational placement, maintaining communication with parents regarding students' academic, social/emotional, and behavioral progress, providing school social-work assessments and counseling/interventions, and serving as a home-school-community liaison. Her job description

requires her to comply with state and federal law as well as APS board policies and administrative directives. *See* Exhibit L.

47. Ms. Martinez is a person of sincere religious belief. She is a practicing Christian, and her religious beliefs are central to her identity and daily life. She holds the religious beliefs that God created human beings as male and female, that the two sexes are fixed and complementary and reflect the image of God in each person, and that it would be morally wrong for her to affirm, through her own speech, that a person is a gender different from his or her sex. In other words, Ms. Martinez believes that when identifying or referring to a person by sex, pronouns, names, or other sex-based identifiers, she must do so truthfully and consistently with that person's biological sex.

48. She also holds the religious belief that it is morally wrong to lie, deceive, mislead, or conceal the truth from another.

49. Ms. Martinez does not seek to use her position to promote her religious beliefs to students, staff, parents, or others. Instead, she seeks only to be able to speak truthfully and avoid speaking in ways she believes are untrue, misleading, or wrong, while continuing to treat everyone with dignity, compassion, and respect.

50. PJ30 restricts Ms. Martinez's speech to and about students, staff, and others in a manner that violates these beliefs in two ways. First, PJ30 prohibits her from using biologically accurate pronouns and identifiers to refer to individuals truthfully and to convey that a person's sex is immutable. Second, PJ30 requires her to deceive parents and conceal the fact that their child is undergoing a social transition.

51. As discussed in more detail below, APS has given Ms. Martinez an accommodation from PJ30's requirement that she use preferred names and pronouns. Ms. Martinez does not concede that the accommodation is sufficient to satisfy either the Constitution or Title VII of the

Civil Rights Act of 1964. In fact, on September 17, 2026, Ms. Martinez filed a Charge of Discrimination with the EEOC alleging that APS discriminated against her based on religion by failing to grant her accommodation request in full. Currently, however, Ms. Martinez does not assert a claim in this lawsuit pertaining to PJ30's preferred name and pronoun requirement. She reserves the right to do so in the future.

52. By this lawsuit, Ms. Martinez does challenge PJ30's parental deception and concealment requirement.

53. In Ms. Martinez's professional judgment—supported by *The Cass Review*, The DHHS Report, and published research on desistance and persistence in childhood gender dysphoria, *see* Exhibits A–C—a social transition is not a neutral act and may carry significant psychological and developmental consequences for minors, including reinforcing a non-conforming gender identity that might not otherwise persist.

54. Ms. Martinez believes that minors do not have the capacity to understand the long-term consequences of the decision to undergo a social transition and that allowing them to make this decision on their own—without parental notice or involvement—can be harmful to them.

55. Ms. Martinez believes that her role as a school social worker is complementary to, not a substitute for, the role of parents. She believes parents should generally be provided with material information about their children, including whether they are undergoing a social transition at school and any other information that bears on the child's IEP, evaluation, placement, related services, behavioral supports, social/emotional progress, safety, or education records.

56. Ms. Martinez believes that parents must be involved in decisions regarding their minor child's social transition unless there are countervailing, case-by-case considerations for bypassing parental involvement, such as an individualized determination that the parents are

abusive or neglectful.

57. Although Ms. Martinez's job requires her to communicate with parents about their children, nothing in her assigned duties requires her to omit, obscure, conceal, or misstate a child's social transition at school. That specific restriction on the content of a parent communication is imposed by PJ30 in addition to, and in tension with, the accuracy and completeness her position otherwise requires.

APS is Enforcing, and Will Continue to Enforce, PJ30 Against Ms. Martinez

58. APS enforces PJ30 as a mandatory directive generally barring disclosure of a student's asserted gender identity to parents absent the student's authorization. Violations are treated as gender-identity discrimination or harassment, subject to investigation by APS's EOS office. Employees who do not comply with the directive face investigation, discipline, and job termination.

59. The conflict between PJ30 and Ms. Martinez's religious beliefs is actual, ongoing, and imminent. PJ30 applies to Ms. Martinez, and APS's job description requires her to comply with it. Atrisco Heritage Academy High School has students who assert a non-conforming gender identity and who go by a new name and pronouns. Ms. Martinez's school social-work duties require her to provide services, create documentation, participate in special-education processes, and communicate with parents in ways governed by PJ30.

60. On April 29, 2026, Ms. Martinez submitted a request for a religious accommodation from PJ30 to Shantail Miller (Student Threat Assessment and Integrated Support Director and Ms. Martinez's direct supervisor at that time), Teise Reiser (Assistant Superintendent for Special Education), and Todd Torgerson (Chief of Human Resources and Legal). *See* Exhibit M. Ms. Martinez asked to be: (1) excused from using a student's or staff's preferred name, pronouns, or

other gendered language inconsistent with that person's biological sex; (2) allowed to use the student's or staff's birth-sex pronouns instead; and (3) excused from concealing, hiding, or withholding material information from parents concerning the name, pronouns, or gender identity being used for their child at school. Ms. Martinez explained that PJ30's contrary requirements conflicted with her religious and moral beliefs. Ms. Martinez also made clear she remained committed to treating every student and staff member with dignity and was willing to discuss other reasonable accommodations.

61. On May 8, 2026, at Ms. Miller's request, Ms. Martinez met with Ms. Miller, Ms. O'Connell, and other APS personnel to discuss her accommodations request. Ms. Martinez conveyed the same requests that she had articulated in her April 29 letter.

62. On May 15, 2026, Heather Cowan, APS's former EOS Director, sent Ms. Martinez an email responding to her accommodations request. *See* Exhibit N. As to the pronoun request, Ms. Cowan stated that APS agreed Ms. Martinez would not be required to use preferred pronouns and could instead refer to a person by last name, title, an agreed-upon nickname, initials, or another moniker—such as "colleague," "student," or "friend"—but that she could not use any name or pronoun a person had asked not be used for them. As to the parental-disclosure request, Ms. Cowan did not respond directly. Instead, she stated only that "employees of APS will not lie to parents," while reminding Ms. Martinez of her separate confidentiality obligations as a social worker and her "duty to inform of potential harm or risk."

63. On May 28, 2026, Ms. Martinez replied to Ms. Cowan's email, asking APS to clarify three things: (1) whether the naming/pronoun restriction applied only in a student's or staff member's presence or extended to communications—like internal documentation, case notes, threat-assessment materials, *etc.*—where the person was not present; (2) whether she retained

professional discretion to not use a student's preferred name and pronouns in counseling contexts or whether affirmation of a student's asserted gender identity was required in every circumstance; and (3) whether APS was barring her from disclosing a student's preferred names, pronouns, or asserted gender identity to parents without the student's consent, and if so, under what specific authority. *See* Exhibit O.

64. On August 3, 2026, Ms. O'Connell responded to Ms. Martinez's May 28 letter. In that response, Ms. O'Connell stated that Ms. Martinez was "not required to use preferred pronouns" but that, while she may use alternatives such as last name, initials, title, or an agreed-upon nickname, she was "not to use names or pronouns for an individual which that individual has requested not be used for them." *See* Exhibit P. Ms. O'Connell also confirmed that the restriction applied whenever Ms. Martinez is speaking to or referring to a person—whether the person is present or not. *Id.* Ms. O'Connell stated that "inadvertent slips or mistakes" are not themselves grounds for discipline, but she also noted that "any individual in the APS community can initiate a complaint," and APS "cannot guarantee that slips or mistakes concerning names and pronouns will [not] lead to complaints and/or resulting investigations" by EOS. *Id*.

65. Ms. O'Connell did not directly respond to Ms. Martinez's request for clarification regarding whether she was required to conceal information from parents. Instead, Ms. O'Connell said only, "I refer you to your licensure, your supervisor, and APS's social work department for standards regarding confidentiality." *Id*.

66. On August 11, 2026, Ms. Martinez responded to Ms. O'Connell's August 3 email, summarizing her understanding of APS's position. *See* Exhibit Q. Ms. Martinez explained that her understanding was: (1) she was not required to use a person's preferred name or pronouns; (2) APS was not granting her request to use biologically accurate pronouns, legal names, or sex-based

terminology that the person had requested not be used in any circumstance; and (3) APS was not granting an accommodation exempting her from withholding a student's preferred name, pronouns, and asserted gender identity from parents absent the student's consent. *Id.* Ms. Martinez asked APS to correct anything inaccurate and expressly stated that she was not thereby conceding the accommodation resolved the conflict with her religious beliefs, and that she remained willing to continue the interactive process.

67. On August 17, 2026, Ms. O'Connell responded to Ms. Martinez's August 11 email, confirming Ms. Martinez's understanding regarding the use of preferred names and pronouns and the prohibition against the use of biologically accurate language. *See* Exhibit R. As to Ms. Martinez's understanding regarding parental disclosure, however, Ms. O'Connell referred Ms. Martinez back to APS's prior correspondence, stating that the accommodation "provides you a means . . . to perform your responsibilities without having to use preferred names or pronouns which are contrary to your sincerely held beliefs." *Id*.

68. In each of their communications to Ms. Martinez, Ms. Cowan and Ms. O'Connell copied APS's Human Resources personnel and Ms. Martinez's supervisory personnel, including individuals responsible for implementing or enforcing Ms. Martinez's accommodation in the workplace. *See* Exhibits N, P, R.

69. On September 3, 2026, Ms. O'Connell confirmed to Ms. Martinez by email that her reassignment to her new role did not alter any of APS's prior decisions regarding her religious accommodations.

70. In sum, APS has granted Ms. Martinez only a partial accommodation. Ms. Martinez may avoid using preferred names and pronouns in some circumstances, but she must not use biologically accurate names, identifiers, and pronouns that the individual has asked not to be used.

This restriction applies in every context—including counseling, documentation, internal communications, and other professional communications—regardless of whether the subject is present. APS has also not accommodated Ms. Martinez's request that she be excused from deceiving parents or concealing the fact that their child is undergoing a social transition at school.

71. Absent preliminary and permanent relief from this Court, Ms. Martinez must either comply with PJ30 in violation of her religious beliefs or risk investigation, discipline, or termination for refusing to do so.

CAUSES OF ACTION

COUNT ONE
42 U.S.C. § 1983—First and Fourteenth Amendments
(Right to Free Speech–Viewpoint Discrimination)

72. Ms. Martinez hereby incorporates by reference all other paragraphs of this Complaint as though fully set forth herein.

73. The speech in which Ms. Martinez wishes to engage is not within her official duties and is protected by the First Amendment.

74. The speech in which Ms. Martinez wishes to engage addresses a matter of public concern and is protected under the First Amendment.

75. PJ30 restricts what Ms. Martinez may tell parents based on the viewpoint of the communication. PJ30 generally requires APS staff to use language that affirms a student's asserted gender identity—the student's preferred name and pronouns—in conversations with the student and others at school but requires the opposite message—the student's legal name and birth-sex pronouns—in communications with a parent absent the student's consent. In addition, PJ30 forbids Ms. Martinez from disclosing a student's asserted gender identity, preferred name/pronouns, or social transition to that parent absent the student's consent.

76. PJ30 is not a neutral workplace rule; instead, it singles out one viewpoint on a

matter of public concern for suppression.

77. Because Ms. Martinez's speech is protected by the First Amendment and PJ30 targets speech based on its content or viewpoint, PJ30 is presumptively unconstitutional and subject to strict scrutiny.

78. APS cannot satisfy strict scrutiny. APS has no compelling interest in forcing Ms. Martinez to refrain from parental disclosure in every case. PJ30 is also not narrowly tailored. APS can accomplish its putative goals without forcing Ms. Martinez to violate her beliefs.

79. In the alternative, Ms. Martinez prevails because her First Amendment interests outweigh APS's asserted interests.

80. APS has caused, is causing, and will continue to cause Ms. Martinez irreparable harm for which she has no adequate remedy at law. She is entitled to declaratory relief, preliminary and permanent injunctive relief, nominal and compensatory damages, and attorneys' fees and costs pursuant to 42 U.S.C. §§ 1983 and 1988.

COUNT TWO
42 U.S.C. § 1983—First and Fourteenth Amendments
(Right to Free Speech–Compelled Speech)

81. Ms. Martinez hereby incorporates by reference all other paragraphs of this Complaint as though fully set forth herein.

82. The First Amendment prohibits the government from compelling individuals to engage in speech.

83. PJ30 compels parent-facing speech. It generally requires Ms. Martinez to use a student's legal name and birth-sex pronouns in communications with a parent absent the student's consent while requiring different language with the student and others at school. In that way, PJ30 compels Ms. Martinez to speak in a manner designed to keep parents uninformed about their own

children. This constitutes compelled speech on a matter of public concern.

84. Because PJ30 compels Ms. Martinez to conform her own speech to serve APS's goal of deceiving parents and concealing critical information from them about their child outside any role as APS's spokesperson on that subject, strict scrutiny applies.

85. APS cannot satisfy strict scrutiny. It has no compelling interest in requiring parental deception in every case. The policy is also not narrowly tailored. APS can accomplish its putative goals without forcing Ms. Martinez to violate her beliefs.

86. In the alternative, Ms. Martinez prevails because her First Amendment interests outweigh APS's asserted interests.

87. APS's actions have caused, are causing, and will continue to cause Ms. Martinez irreparable harm for which she has no adequate remedy at law. She is entitled to declaratory relief, preliminary and permanent injunctive relief, nominal and compensatory damages, and attorneys' fees and costs pursuant to 42 U.S.C. §§ 1983 and 1988.

COUNT THREE
42 U.S.C. § 1983—First and Fourteenth Amendments
(Right to Free Exercise of Religion)

88. Ms. Martinez hereby incorporates by reference all other paragraphs of this Complaint as though fully set forth herein.

89. The Free Exercise Clause prohibits APS from imposing an especially egregious burden on Ms. Martinez's religious exercise unless it satisfies strict scrutiny.

90. PJ30 creates an especially egregious burden on Ms. Martinez's religious exercise.

91. The Free Exercise Clause prohibits APS from burdening Ms. Martinez's religious exercise through policies or practices that are not neutral and generally applicable unless those policies and practices satisfy strict scrutiny.

92. PJ30 is neither neutral nor generally applicable. As for neutrality, in its real operation, PJ30 singles out religious exercise. As for general applicability, PJ30 permits departures from APS's disclosure requirements for secular reasons. In addition, PJ30 operates through individualized, case-specific decision-making.

93. APS cannot satisfy strict scrutiny. It has no compelling interest in forcing Ms. Martinez to violate her religious beliefs when she can perform the essential functions of her job while communicating truthfully with parents when consistent with law. PJ30 is also not narrowly tailored. APS can accomplish its putative goals without forcing Ms. Martinez to violate her beliefs.

94. Even if strict scrutiny does not apply, PJ30 has no rational relation to any legitimate government interest.

95. APS may not condition Ms. Martinez's continued public employment on surrendering her rights under the Free Exercise Clause. Yet that is what APS's policies and practices do by placing her under an immediate and ongoing threat of investigation, discipline, or loss of employment unless she violates her sincerely held religious beliefs.

96. APS's actions have caused, are causing, and will continue to cause Ms. Martinez irreparable harm by depriving her of her rights under the Free Exercise Clause.

97. Ms. Martinez has no adequate remedy at law and is entitled to declaratory relief, preliminary and permanent injunctive relief, nominal and compensatory damages, and attorneys' fees and costs pursuant to 42 U.S.C. §§ 1983 and 1988.

PRAYER FOR RELIEF

WHEREFORE, Ms. Martinez requests the following relief:

1. Declare that PJ30's parental deception and concealment requirement violates the First and Fourteenth Amendments both facially and as applied to Ms. Martinez;

2. Declare that APS may not enforce PJ30's parental deception and concealment requirement against Ms. Martinez to prohibit her from communicating fully and truthfully with parents regarding their child's social transition in every case;

3. Preliminarily and permanently enjoin APS, its officers, agents, employees, attorneys, successors, and all persons acting in concert with them from enforcing PJ30's parental deception and concealment requirement both facially and as applied to Ms. Martinez;

4. Preliminarily and permanently enjoin APS, its officers, agents, employees, attorneys, successors, and all persons acting in concert with them from enforcing PJ30's parental deception and concealment requirement by disciplining, investigating, terminating, suspending, reprimanding, retaliating against, or otherwise taking adverse action against Ms. Martinez;

5. Award Ms. Martinez her reasonable attorneys' fees, costs, and expenses pursuant to 42 U.S.C. § 1988 and any other applicable law;

6. A trial by jury on all claims so triable;

7. Award Ms. Martinez nominal and compensatory damages for injuries proven at trial;

8. Award pre-judgment and post-judgment interest as permitted by law;

9. Retain jurisdiction to enforce the Court's orders; and

10. All other relief the Court deems just and proper.

Dated: September 17, 2026

/s/ Courtney Corbello

JOSHUA W. DIXON*
COURTNEY CORBELLO
NMDC Bar ID: 26-316
CENTER FOR AMERICAN LIBERTY
2145 14th Avenue, Ste 8
Vero Beach, FL 32960
(703) 687-6200
jdixon@libertycenter.org
ccorbello@libertycenter.org

Attorneys for Jeanette Martinez

*Application for Admission Pending

JS 44 (Rev. 03/24)

CIVIL COVER SHEET

The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. *(SEE INSTRUCTIONS ON NEXT PAGE OF THIS FORM.)*

I. (a) PLAINTIFFS

Jeanette Martinez

(b) County of Residence of First Listed Plaintiff Bernalillo
(EXCEPT IN U.S. PLAINTIFF CASES)

(c) Attorneys *(Firm Name, Address, and Telephone Number)*

Josh Dixon, Courtney Corbello, Center for American Liberty, 2145 14th Ave, Ste 8, Vero Beach, FL 32960

DEFENDANTS

Albuquerque Public Schools, by and through the Albuquerque Public Schools Board of Education

County of Residence of First Listed Defendant Bernalillo
(IN U.S. PLAINTIFF CASES ONLY)

NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED.

Attorneys *(If Known)*

II. BASIS OF JURISDICTION *(Place an "X" in One Box Only)*

- ☐ 1 U.S. Government Plaintiff
- ☒ 3 Federal Question *(U.S. Government Not a Party)*
- ☐ 2 U.S. Government Defendant
- ☐ 4 Diversity *(Indicate Citizenship of Parties in Item III)*

III. CITIZENSHIP OF PRINCIPAL PARTIES *(Place an "X" in One Box for Plaintiff and One Box for Defendant)*

(For Diversity Cases Only)

	PTF	DEF		PTF	DEF
Citizen of This State	☐ 1	☐ 1	Incorporated *or* Principal Place of Business In This State	☐ 4	☐ 4
Citizen of Another State	☐ 2	☐ 2	Incorporated *and* Principal Place of Business In Another State	☐ 5	☐ 5
Citizen or Subject of a Foreign Country	☐ 3	☐ 3	Foreign Nation	☐ 6	☐ 6

IV. NATURE OF SUIT *(Place an "X" in One Box Only)*

Click here for: Nature of Suit Code Descriptions.

CONTRACT
- ☐ 110 Insurance
- ☐ 120 Marine
- ☐ 130 Miller Act
- ☐ 140 Negotiable Instrument
- ☐ 150 Recovery of Overpayment & Enforcement of Judgment
- ☐ 151 Medicare Act
- ☐ 152 Recovery of Defaulted Student Loans (Excludes Veterans)
- ☐ 153 Recovery of Overpayment of Veteran's Benefits
- ☐ 160 Stockholders' Suits
- ☐ 190 Other Contract
- ☐ 195 Contract Product Liability
- ☐ 196 Franchise

REAL PROPERTY
- ☐ 210 Land Condemnation
- ☐ 220 Foreclosure
- ☐ 230 Rent Lease & Ejectment
- ☐ 240 Torts to Land
- ☐ 245 Tort Product Liability
- ☐ 290 All Other Real Property

TORTS

PERSONAL INJURY
- ☐ 310 Airplane
- ☐ 315 Airplane Product Liability
- ☐ 320 Assault, Libel & Slander
- ☐ 330 Federal Employers' Liability
- ☐ 340 Marine
- ☐ 345 Marine Product Liability
- ☐ 350 Motor Vehicle
- ☐ 355 Motor Vehicle Product Liability
- ☐ 360 Other Personal Injury
- ☐ 362 Personal Injury - Medical Malpractice

PERSONAL INJURY
- ☐ 365 Personal Injury - Product Liability
- ☐ 367 Health Care/ Pharmaceutical Personal Injury Product Liability
- ☐ 368 Asbestos Personal Injury Product Liability

PERSONAL PROPERTY
- ☐ 370 Other Fraud
- ☐ 371 Truth in Lending
- ☐ 380 Other Personal Property Damage
- ☐ 385 Property Damage Product Liability

CIVIL RIGHTS
- ☒ 440 Other Civil Rights
- ☐ 441 Voting
- ☐ 442 Employment
- ☐ 443 Housing/ Accommodations
- ☐ 445 Amer. w/Disabilities - Employment
- ☐ 446 Amer. w/Disabilities - Other
- ☐ 448 Education

PRISONER PETITIONS

Habeas Corpus:
- ☐ 463 Alien Detainee
- ☐ 510 Motions to Vacate Sentence
- ☐ 530 General
- ☐ 535 Death Penalty

Other:
- ☐ 540 Mandamus & Other
- ☐ 550 Civil Rights
- ☐ 555 Prison Condition
- ☐ 560 Civil Detainee - Conditions of Confinement

FORFEITURE/PENALTY
- ☐ 625 Drug Related Seizure of Property 21 USC 881
- ☐ 690 Other

LABOR
- ☐ 710 Fair Labor Standards Act
- ☐ 720 Labor/Management Relations
- ☐ 740 Railway Labor Act
- ☐ 751 Family and Medical Leave Act
- ☐ 790 Other Labor Litigation
- ☐ 791 Employee Retirement Income Security Act

IMMIGRATION
- ☐ 462 Naturalization Application
- ☐ 465 Other Immigration Actions

BANKRUPTCY
- ☐ 422 Appeal 28 USC 158
- ☐ 423 Withdrawal 28 USC 157

INTELLECTUAL PROPERTY RIGHTS
- ☐ 820 Copyrights
- ☐ 830 Patent
- ☐ 835 Patent - Abbreviated New Drug Application
- ☐ 840 Trademark
- ☐ 880 Defend Trade Secrets Act of 2016

SOCIAL SECURITY
- ☐ 861 HIA (1395ff)
- ☐ 862 Black Lung (923)
- ☐ 863 DIWC/DIWW (405(g))
- ☐ 864 SSID Title XVI
- ☐ 865 RSI (405(g))

FEDERAL TAX SUITS
- ☐ 870 Taxes (U.S. Plaintiff or Defendant)
- ☐ 871 IRS—Third Party 26 USC 7609

OTHER STATUTES
- ☐ 375 False Claims Act
- ☐ 376 Qui Tam (31 USC 3729(a))
- ☐ 400 State Reapportionment
- ☐ 410 Antitrust
- ☐ 430 Banks and Banking
- ☐ 450 Commerce
- ☐ 460 Deportation
- ☐ 470 Racketeer Influenced and Corrupt Organizations
- ☐ 480 Consumer Credit (15 USC 1681 or 1692)
- ☐ 485 Telephone Consumer Protection Act
- ☐ 490 Cable/Sat TV
- ☐ 850 Securities/Commodities/ Exchange
- ☐ 890 Other Statutory Actions
- ☐ 891 Agricultural Acts
- ☐ 893 Environmental Matters
- ☐ 895 Freedom of Information Act
- ☐ 896 Arbitration
- ☐ 899 Administrative Procedure Act/Review or Appeal of Agency Decision
- ☐ 950 Constitutionality of State Statutes

V. ORIGIN *(Place an "X" in One Box Only)*

- ☒ 1 Original Proceeding
- ☐ 2 Removed from State Court
- ☐ 3 Remanded from Appellate Court
- ☐ 4 Reinstated or Reopened
- ☐ 5 Transferred from Another District *(specify)*
- ☐ 6 Multidistrict Litigation - Transfer
- ☐ 8 Multidistrict Litigation - Direct File

VI. CAUSE OF ACTION

Cite the U.S. Civil Statute under which you are filing ***(Do not cite jurisdictional statutes unless diversity)***:
42 USC 1983

Brief description of cause:
First Amendment lawsuit challenging parental non-disclosure policy for violation of free speech and free exercise rights

VII. REQUESTED IN COMPLAINT:

☐ CHECK IF THIS IS A **CLASS ACTION** UNDER RULE 23, F.R.Cv.P.

DEMAND $

CHECK YES only if demanded in complaint:

JURY DEMAND: ☒ Yes ☐ No

VIII. RELATED CASE(S) IF ANY

(See instructions): JUDGE _____ DOCKET NUMBER _____

DATE
Sept. 17, 2026

SIGNATURE OF ATTORNEY OF RECORD
s/ Courtney Corbello

FOR OFFICE USE ONLY

RECEIPT # _____ AMOUNT _____ APPLYING IFP _____ JUDGE _____ MAG. JUDGE _____

INSTRUCTIONS FOR ATTORNEYS COMPLETING CIVIL COVER SHEET FORM JS 44

Authority For Civil Cover Sheet

The JS 44 civil cover sheet and the information contained herein neither replaces nor supplements the filings and service of pleading or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. Consequently, a civil cover sheet is submitted to the Clerk of Court for each civil complaint filed. The attorney filing a case should complete the form as follows:

I.(a) Plaintiffs-Defendants. Enter names (last, first, middle initial) of plaintiff and defendant. If the plaintiff or defendant is a government agency, use only the full name or standard abbreviations. If the plaintiff or defendant is an official within a government agency, identify first the agency and then the official, giving both name and title.

(b) County of Residence. For each civil case filed, except U.S. plaintiff cases, enter the name of the county where the first listed plaintiff resides at the time of filing. In U.S. plaintiff cases, enter the name of the county in which the first listed defendant resides at the time of filing. (NOTE: In land condemnation cases, the county of residence of the "defendant" is the location of the tract of land involved.)

(c) Attorneys. Enter the firm name, address, telephone number, and attorney of record. If there are several attorneys, list them on an attachment, noting in this section "(see attachment)".

II. Jurisdiction. The basis of jurisdiction is set forth under Rule 8(a), F.R.Cv.P., which requires that jurisdictions be shown in pleadings. Place an "X" in one of the boxes. If there is more than one basis of jurisdiction, precedence is given in the order shown below.
United States plaintiff. (1) Jurisdiction based on 28 U.S.C. 1345 and 1348. Suits by agencies and officers of the United States are included here.
United States defendant. (2) When the plaintiff is suing the United States, its officers or agencies, place an "X" in this box.
Federal question. (3) This refers to suits under 28 U.S.C. 1331, where jurisdiction arises under the Constitution of the United States, an amendment to the Constitution, an act of Congress or a treaty of the United States. In cases where the U.S. is a party, the U.S. plaintiff or defendant code takes precedence, and box 1 or 2 should be marked.
Diversity of citizenship. (4) This refers to suits under 28 U.S.C. 1332, where parties are citizens of different states. When Box 4 is checked, the citizenship of the different parties must be checked. (See Section III below**; NOTE: federal question actions take precedence over diversity cases.**)

III. Residence (citizenship) of Principal Parties. This section of the JS 44 is to be completed if diversity of citizenship was indicated above. Mark this section for each principal party.

IV. Nature of Suit. Place an "X" in the appropriate box. If there are multiple nature of suit codes associated with the case, pick the nature of suit code that is most applicable. Click here for: Nature of Suit Code Descriptions.

V. Origin. Place an "X" in one of the seven boxes.
Original Proceedings. (1) Cases which originate in the United States district courts.
Removed from State Court. (2) Proceedings initiated in state courts may be removed to the district courts under Title 28 U.S.C., Section 1441.
Remanded from Appellate Court. (3) Check this box for cases remanded to the district court for further action. Use the date of remand as the filing date.
Reinstated or Reopened. (4) Check this box for cases reinstated or reopened in the district court. Use the reopening date as the filing date.
Transferred from Another District. (5) For cases transferred under Title 28 U.S.C. Section 1404(a). Do not use this for within district transfers or multidistrict litigation transfers.
Multidistrict Litigation – Transfer. (6) Check this box when a multidistrict case is transferred into the district under authority of Title 28 U.S.C. Section 1407.
Multidistrict Litigation – Direct File. (8) Check this box when a multidistrict case is filed in the same district as the Master MDL docket.
PLEASE NOTE THAT THERE IS NOT AN ORIGIN CODE 7. Origin Code 7 was used for historical records and is no longer relevant due to changes in statute.

VI. Cause of Action. Report the civil statute directly related to the cause of action and give a brief description of the cause. **Do not cite jurisdictional statutes unless diversity.** Example: U.S. Civil Statute: 47 USC 553 Brief Description: Unauthorized reception of cable service.

VII. Requested in Complaint. Class Action. Place an "X" in this box if you are filing a class action under Rule 23, F.R.Cv.P.
Demand. In this space enter the actual dollar amount being demanded or indicate other demand, such as a preliminary injunction.
Jury Demand. Check the appropriate box to indicate whether or not a jury is being demanded.

VIII. Related Cases. This section of the JS 44 is used to reference related cases, if any. If there are related cases, insert the docket numbers and the corresponding judge names for such cases.

Date and Attorney Signature. Date and sign the civil cover sheet.

Exhibit A

The Cass Review: Independent review of gender identity services for children and young people (April 10, 2024)

The Cass Review

Independent review of gender identity services for children and young people

Independent review of gender identity services for children and young people: Final report

April 2024

First edition published April 2024.

Updated December 2024 for minor amendments and accessibility.

All images sourced from Adobe Stock and include some AI images.

Reference as:

Cass, H. (2024). Independent review of gender identity services for children and young people: Final report. **https://cass.independent-review.uk/home/publications/final-report/**

Recommendation 21:

To ensure that services are operating to the highest standards of evidence the National Institute for Health and Care Research (NIHR) should commission a living systematic review to inform the evolving clinical approach.

Pathways

138. Clear criteria are needed for referral to services along the pathway from primary to tertiary care so that gender-questioning children and young people who seek help from the NHS have equitable access to services.

139. When the Review commenced, access to the specialist GIDS service was unusual in that the service accepted referrals directly from primary care (a GP) and from non-healthcare professionals including teachers and youth workers.

140. NHS England has since consulted on a proposal for all referrals to come via secondary care and the Review supports this approach.

141. This report sets out the different roles and responsibilities within the Review's proposed service delivery model; from primary through to tertiary care and discharge and how the network should ensure that children and young people are appropriately engaged within the health system.

Pathways within the service

142. Discussions with clinicians highlighted the importance of differentiating the subgroups within the referred population who may be at risk and/or need more urgent support, assessment or intervention; there may also be subgroups for whom early advice to parents or school staff may be a more appropriate first step.

143. Children and young people should be able to move flexibly between different elements of the service in a step-up or step-down model, allowing them and their parents/carers to make decisions at their own pace without requiring rereferral into the system.

144. The current evidence base suggests that children who present with gender incongruence at a young age are most likely to desist before puberty, although for a small number the incongruence will persist. Parents and families need support and advice about how best to support their children in a balanced and non-judgemental way. Helping parents and families to ensure that options remain open and flexible for the child, whilst ensuring that the child is able to function well in school and socially is an important aspect of care provision and there should be no lower age limit for accessing such help and support.

Recommendation 22:

Within each regional network, a separate pathway should be established for pre-pubertal children and their families. Providers should ensure that pre-pubertal children and their parents/carers are prioritised for early discussion with a professional with relevant experience.

Emergence of the Dutch protocol

2.7 The approach to treatment changed with the emergence of 'the Dutch protocol', which was developed by Dr Peggy Cohen-Kettenis founder of the Utrecht clinic. One of the drivers for developing gender care services for children was the recognition of poor mental health outcomes for the adult transgender population, much of which was attributed to minority stress and difficulty "passing" in their expressed gender (Cohen-Kettenis & Van Goozen, 1998).

2.8 In 1998, a single case study (Cohen-Kettenis & Van Goozen, 1998) described a female to male transition where puberty blockers were started at age 13. The rationale for the approach was two-fold; to support the diagnostic procedure by buying time to think and to improve the longer-term ability to pass in the preferred gender.

2.9 The Dutch protocol was further elaborated in an article in 2006 (Delemarre-van de Waal & Cohen-Kettenis, 2006) by which time 54 patients were being treated, and in 2011 the Dutch team published a prospective study (de Vries et al., 2011b) of 70 patients who had received early treatment with puberty blockers between 2000 and 2008. Inclusion criteria were that the patients had to be minimum age 12, have suffered from life-long gender dysphoria that had increased around puberty, be psychologically stable without serious comorbid psychiatric disorders that might interfere with the diagnostic process, and have family support. The authors discussed the challenge in adolescents with an autistic spectrum disorder (ASD) of disentangling "whether gender dysphoria evolves from a general feeling of being just "different" or whether a true "core" cross-gender identity exists".

2.10 The 70 patients in the study (de Vries et al., 2011b) were a subset of a larger group of 111 cases consecutively referred for puberty blockers; the 70 were selected because they were the first ones ready to start the next stage of treatment - masculinising or feminising hormones. Of the 70 patients, 89% were same-sex attracted to their birth-registered sex, with most of the rest being bisexual. Only one patient was exclusively heterosexual. The outcomes for the remaining 41 cases were not reported.

2.11 During puberty suppression, there was no change in body dysphoria, but behavioural and emotional problems decreased, and general functioning improved. However, not all participants (59-73% on the various measures) completed questionnaires after treatment, a potential source of bias, making it difficult to draw conclusions from the results.

2.12 A confounding factor was that all patients in the Dutch service were seen regularly by their psychiatrist or psychologist whilst on puberty blockers, so it is difficult to separate the therapeutic effects of these sessions from the role of puberty blockers alone.

Explanatory Box 4:

Dutch protocol:

Minimum age 12, life-long gender dysphoria increased around puberty, psychologically stable without serious comorbid psychiatric disorders that might interfere with the diagnostic process and family support.

Move to an affirmative model

2.13 In 2007 Norman Spack established a clinic in Boston, USA modelled on the Dutch protocol and began prescribing puberty blockers from early puberty (Tanner stage 2).

2.14 Practice in the USA began to diverge from the models of care in Canada and the Netherlands, following instead a gender affirmative model advocated by Diane Ehrensaft (Ehrensaft, 2017).

She described the three approaches as follows (Ehrensaft, 2017):

"The first model, represented in the work of Drs Susan Bradley and Ken Zucker [Canada], assumes that young children have malleable gender brains, so to speak, and that treatment goals can include helping a young child accept the gender that matches the sex assigned to them at birth.

The second model, represented in the work of practitioners in the Netherlands, allows that a child may have knowledge of their gender identity at a young age, but should wait until the advent of adolescence before engaging in any full transition from one gender to another.

The third model, represented in the work of an international consortium of gender affirmative theoreticians and practitioners, allows that a child of any age may be cognizant of their authentic identity and will benefit from a social transition at any stage of development."

2.15 The third model - the 'affirmative model' - has subsequently become dominant in many countries. As a result, some gender services have moved away from a more exploratory approach, and this is seen by some advocacy and support groups as a move to 'gatekeeping' model.

2.16 It is important to note that staff at GIDS have told us that in their practice an affirmative model can encompass respecting the young person's experience and sense of self whilst still exploring the meaning of that experience in a non-directive therapeutic relationship.

Use of puberty blockers in the UK

2.17 The 'watchful waiting' approach continued in the UK until 2011, when puberty blockers were trialled under a research protocol; the 'early intervention study'. This was an uncontrolled study with inclusion criteria in line with the original Dutch protocol, and similar outcome measures. It is unfortunate that a controlled study was not conducted by the UK team, given that this was the only formal attempt to replicate the Dutch approach using directly comparable outcome measures. Using the same methods as the Dutch observational study meant that the same limitations apply; that is, confounding of endocrine and psychological interventions and significant attrition at follow-up.

Early intervention study

2.18 Between 2011 to 2014, 44 patients aged 12-15 were recruited to the 'early intervention study' and preliminary results were reported to The Tavistock and Portman NHS Foundation Trust Board in 2015 (Tavistock and Portman NHS Foundation Trust Board papers, 2015), at which point patients had received at least one year of treatment, and at the 2016 World Professional Association for Transgender Health (WPATH) conference when all patients had been followed up for at least two years (https://www.youtube.com/watch?v=8HQBfuV3V98).

2.19 In contrast to the Dutch group, the UK's preliminary findings did not demonstrate improvement in psychological wellbeing, and in fact some birth-registered females had a worsening of 'internalising' problems (depression, anxiety) based on parental report. In response to the Youth Self Report Scale, there was a significant increase after one

5.39 The distressing symptoms that occur in these 'body and mind' conditions are real, and like pain or discomfort that arises from other causes can be addressed and helped with psychological interventions. It is very important that gender-questioning young people are able to access these evidence-based treatments alongside any other clinically appropriate interventions to support their gender care.

Neurodiversity

5.40 Table 3 shows synthesised summary data on prevalence of ASD and ADHD where this was available in the papers included in the systematic review.

5.41 Some research studies have suggested that transgender and gender diverse individuals are three to six times more likely to be autistic than cisgender individuals, after controlling for age and educational attainment (Warrier et al., 2020).

5.42 These findings are echoed by clinicians who report seeing teenage girls who have good cognitive ability and are articulate, but are struggling with gender identity, suicidal ideation and self-harm. In some of these young people the common denominator is undiagnosed autism, which is often missed in adolescent girls. Others may go on to receive a diagnosis of emotionally unstable personality disorder (EUPD) when they enter adult services.

5.43 Despite often being highly articulate, intelligent and skilled in many areas, autistic young people have difficulties with social communication and peer relationships, which may make it difficult for them to feel accepted and 'fit in'.

5.44 Difficulties with interoception (making sense of what is going on in their bodies) and alexithymia (recognising and expressing their emotions) can sometimes make it hard for these young people to express how they are feeling about their internal sensations, their gender identity and their sexual identity.

Table 3: Synthesised data on neurodiversity in the gender clinic referred population

DIAGNOSIS	COUNTRIES INCLUDED	DATE RANGE	% REFERRED CYP	95% CI	RANGE (%)
ASD	9	1998-2019	9	6-11	0-26
ADHD	9	1998-2021	10	7-13	2.5-27

Source: Taylor et al: Patient characteristics

NB: A patient population (country) may have had multiple study reports over time. In which case, data, from the study over the longest time period or that was most representative of the population was selected.

CYP: Children and young people; CI: confidence interval; ASD: Autistic Spectrum Disorder; ADHD: Attention Deficit Hyperactivity Disorder

11. Psychological and psychosocial interventions

11.1 There are many different ways of helping gender-questioning young people improve their health and wellbeing, regardless of their longer-term decisions about medical or social transition.

11.2 Part 3 described the wide range of associated conditions that may be part of a picture of gender related distress. A holistic package of care to address these issues may involve a broad range of options such as:

- supporting a young person to get back into school
- diagnosing autism or ADHD
- supportive group sessions
- psychological interventions to help anxiety, depression or trauma
- building resilience
- working with the whole family to address breakdowns in relationships
- providing more information about gender expressions and the range of possible interventions.

11.3 The terms psychological therapies, psychotherapy, psychosocial interventions and talking therapies are often used interchangeably in everyday settings. Strictly speaking, psychological interventions refer to treatments based on a theory of psychological functioning, while the term psychosocial interventions is less specific and is used to describe a wide range of supportive approaches to improving mental health, wellbeing and functioning.

11.4 The role of psychological therapies in supporting children and young people with gender incongruence or distress has been overshadowed by an unhelpfully polarised debate around conversion practices. Terms such as ‘affirmative’ and ‘exploratory’ approaches have been weaponised to the extent that it is difficult to find any neutral terminology. This has given the impression that a young person can have either therapeutic interventions or a medical pathway.

11.5 Whilst the Review’s terms of reference do not include consideration of the proposed legislation to ban conversion practices, it believes that no LGBTQ+ group should be subjected to conversion practice. It also maintains the position that children and young people with gender dysphoria may have a range of complex psychosocial challenges and/or mental health problems impacting on their gender-related distress. Exploration of these issues is essential to provide diagnosis, clinical support and appropriate intervention.

11.6 The intent of psychological intervention is not to change the person’s perception of who they are but to work with them to explore their concerns and experiences and help alleviate their distress, regardless of whether they pursue a medical pathway or not. It is harmful to equate this approach to conversion therapy as it may prevent young people from getting the emotional support they deserve.

12. Social transition

12.1 Through discussions with stakeholders, it is clear that social transition is a cause of concern for many people, and our remarks about social transition were some of the most quoted parts of the Review's interim report.

12.2 The approach taken to social transition is very individual but it is broadly understood to refer to social changes to live as a different gender such as altering hair or clothing, name change and/or use of different pronouns. There is a spectrum from relatively limited gender non-conforming changes in appearance in adolescence to young people who may have fully socially transitioned from an early age and be 'living in stealth' (that is, school friends/staff may be unaware of their birth-registered sex).

12.3 There are different views on the benefits versus the harms of early social transition. Some consider that it may improve mental health and social and educational participation for children experiencing gender-related distress. Others consider that a child who might have desisted at puberty is more likely to have an altered trajectory, culminating in medical intervention which will have life-long implications.

12.4 One key difference between children and adolescents is that parental/carer attitude and beliefs will have an impact on a child's ability to socially transition, whereas adolescents have more personal agency.

12.5 Social transition may not be thought of as an intervention or treatment, because it is not something that happens in a healthcare setting and it is within the agency of an adolescent to do for themselves. However, in an NHS setting it is important to view it as an active intervention because it may have significant effects on the child or young person in terms of their psychological functioning and longer-term outcomes.

12.6 Although the focus of the Review is on support from point of entry to the NHS, no individual journey begins at the front door of the NHS, rather in the child's home, family and school environment. The importance of what happens in school cannot be under-estimated; this applies to all aspects of children's health and wellbeing. Schools have been grappling with how they should respond when a pupil says that they want to socially transition in the school setting. For this reason, it is important that school guidance is able to utilise some of the principles and evidence from the Review.

International practice

12.7 The University of York's review of international guidelines (Taylor et al: Guidelines 2: Synthesis) found that most guidelines recommend providing information about the benefits and risks of social transition but vary in whether the recommendations apply to both children and adolescents or just to children.

12.8 WPATH 8 guidance has moved from a 'watchful waiting' approach for children to a position of advocating for social transition as a way to improve children's mental health.

12.9 Several guidelines recommend that social transition should be framed in a way that ensures children can reconsider or reconceptualise their gender feelings as they grow older.

12.10 Several guidelines discuss education about the risks and benefits of binders and packers, and safe use as appropriate.

12.36 The information above demonstrates that there is no clear evidence that social transition in childhood has positive or negative mental health outcomes. There is relatively weak evidence for any effect in adolescence. However, sex of rearing seems to have some influence on eventual gender outcome, and it is possible that social transition in childhood may change the trajectory of gender identity development for children with early gender incongruence. For this reason, a more cautious approach needs to be taken for children than for adolescents:

Children:

- Parents should be encouraged to seek clinical help and advice in deciding how to support a child with gender incongruence and should be prioritised on the waiting list for early consultation on this issue.
- Clinical involvement in the decision-making process should include advising on the risks and benefits of social transition as a planned intervention, referencing best available evidence. This is not a role that can be taken by staff without appropriate clinical training.
- It is important to ensure that the voice of the child is heard in any decision making and that parents are not unconsciously influencing the child's gender expression.
- For those going down a social transition pathway, maintaining flexibility and keeping options open by helping the child to understand their body as well as their feelings is likely to be advantageous. Partial rather than full transition may be a way of ensuring flexibility, particularly given the MPRG report which highlighted that being in stealth from early childhood may add to the stress of impending puberty and the sense of urgency to enter a medical

Adolescents:

- For adolescents, exploration is a normal process, and rigid binary gender stereotypes can be unhelpful. Many adolescents will go through a period of gender non-conformity in terms of hairstyle, make-up, clothing and behaviours. They also have greater agency in how they present themselves and their decision-making.
- For those considering full social transition, the current long waiting lists make it unlikely that a formal clinical assessment will be available in a timely manner. However, it is important to try and ensure that those already actively involved in their welfare (parents/carers, any involved clinical staff such as their GP, school staff or counsellors) provide support in decision making and plans to ensure that the young person is protected from bullying and has a trusted source of support.

For both children and adolescents:

- Outcomes for children and adolescents are best if they are in a supportive relationship with their family. For this reason parents should be actively involved in decision making unless there are strong grounds to believe that this may put the child or young person at risk.
- Help may be needed if a child/young person wishes to reverse their decision on transitioning, which can be a difficult step to take.

Exhibit B

United States Department of Health and Human Services, *Treatment for Pediatric Gender Dysphoria: Review of Evidence and Best Practices* (Nov. 19, 2025)

Treatment for Pediatric Gender Dysphoria

Review of Evidence and Best Practices

Department of Health and Human Services

November 19, 2025

Treatment for Pediatric Gender Dysphoria

Review of Evidence and Best Practices

Department of Health and Human Services

November 19, 2025

5.2 Outcomes of social transition

Social transition involves changing one or more aspects of one's presentation or expression, such as name, appearance, or behavior, with the goal of being perceived and treated as a member of the other sex, or to avoid being perceived and treated as a member of one's own sex. As noted in the Cass Review, even though social transition is undertaken outside healthcare settings, "it is important to view [social transition] as an active intervention because it may have significant effects on the child or young person in terms of their psychological functioning and longer-term outcomes."[26]

This overview identified two SRs evaluating the impact of social transition. Both are assessed at low risk of bias.[27] The results suggest that the impact of social transition on long-term GD, psychological outcomes and well-being, and future treatment decisions such as hormones or surgeries remains poorly understood. Evidence on regret associated with social transition is extremely limited. The certainty of evidence for these outcomes is very low.

Significant evidence gaps remain in the evaluation of social transition as an intervention for children and adolescents with GD. Most available studies are cross-sectional and there are no prospective longitudinal studies with appropriate comparison groups, making it unclear whether observed associations reflect the effects of social transition or other underlying factors. Additionally, published studies often do not disentangle the effects of social transition from concurrent interventions such as psychotherapy or medical treatments, further complicating interpretation.

5.3 Outcomes of puberty blockers

Gonadotropin-releasing hormone agonists (GnRHa), known as "puberty blockers" (PBs), are used to prevent or arrest the development of sex characteristics in

[26] Cass (2024, p. 158). Social transition may also involve breast binding for females or "tucking" (moving the testes into the inguinal canals and positioning the penis and scrotum in the perineal region) for males. This is a (non-medical) physical intervention with potentially adverse health effects, unlike haircuts or clothing changes. As a recent review puts it, "For chest binding, a significant number of negative health implications have been reported, with rates as high as 97.2%" (Bumphenkiatikul, 2025, p. 5). This review did not attempt to synthesize the quality of the evidence for either harms or benefits, however.
[27] Dopp et al. (2024); Hall et al. (2024).

Exhibit C

Zucker, Kenneth, *The myth of persistence: Response to "A critical commentary on follow-up studies and 'desistance' theories about transgender and gender nonconforming children,"* International Journal of Transgenderism (2018)

International Journal of Transgenderism

ISSN: (Print) (Online) Journal homepage: https://www.tandfonline.com/loi/wijt20

The myth of persistence: Response to "A critical commentary on follow-up studies and 'desistance' theories about transgender and gender non-conforming children" by Temple Newhook et al. (2018)

Kenneth J. Zucker

To cite this article: Kenneth J. Zucker (2018) The myth of persistence: Response to "A critical commentary on follow-up studies and 'desistance' theories about transgender and gender non-conforming children" by Temple Newhook et al. (2018), International Journal of Transgenderism, 19:2, 231-245, DOI: 10.1080/15532739.2018.1468293

To link to this article: https://doi.org/10.1080/15532739.2018.1468293

INTERNATIONAL JOURNAL OF TRANSGENDERISM
2018, VOL. 19, NO. 2, 231–245
https://doi.org/10.1080/15532739.2018.1468293

Taylor & Francis
Taylor & Francis Group

The myth of persistence: Response to "A critical commentary on follow-up studies and 'desistance' theories about transgender and gender non-conforming children" by Temple Newhook et al. (2018)

Kenneth J. Zucker

Department of Psychiatry, University of Toronto, Toronto, Ontario, Canada

ABSTRACT
Temple Newhook et al. (2018) provide a critique of recent follow-up studies of children referred to specialized gender identity clinics, organized around rates of persistence and desistance. The critical gaze of Temple Newhook et al. examined three primary issues: (1) the terms persistence and desistance in their own right; (2) methodology of the follow-up studies and interpretation of the data; and (3) ethical matters. In this response, I interrogate the critique of Temple Newhook et al. (2018).

KEYWORDS
Desistance; developmental psychiatry; DSM-5; gender dysphoria; gender identity disorder; persistence; transgender

Prolegomenon

As Temple Newhook et al. (2018) noted in the Introduction to their critical essay, they focused on "…the four most recent follow-up studies…which are most often cited as evidence for desistance theories" with regard to children variously labeled as "transgender," "gender non-conforming," etc.[1]

Four thoughts: (1) From an historical perspective, are Temple Newhook et al., in fact, "systematically [not] engaging scholarly literature" by eliding a critical discussion of the earlier studies, particularly the follow-up by Green (1987) (for references to the other "early" studies, see Ristori and Steensma [2016, Table 1])? In my view, this is a form of empirical and intellectual erasure, which should be problematized. (2) With regard to the analysis of persistence vs. desistance rates, I would not have included the study by Steensma, Biemond, de Boer, and Cohen-Kettenis (2011), since it was an intentionally selective sample and not representative of the potential pool of clients seen at the Amsterdam clinic between the years 2000 and 2007. Perhaps even more importantly, some of the participants in Steensma et al. (2011) were part of the earlier study by Wallien and Cohen-Kettenis (2008) (T. D. Steensma, personal communication, March 29, 2018); hence, Temple Newhook et al. in their Table 1 are doing a partial "duplicate" counting of the follow-up data from the Dutch clinic. (3) I think that Temple Newhook et al. should have included the follow-up study by Singh (2012), since it contains the largest number of children ($n = 139$ birth-assigned males[2]) among the recent follow-up studies (and, for that matter, any follow-up study). Temple Newhook et al. appear to implicitly devalue the Singh study (which they do not even reference) because it has not yet been published in a peer-reviewed journal.[3] However, a doctoral dissertation approved by a decent university with three Ph.D. committee members and an external Ph.D. examiner should not be ignored. (4) Temple Newhook et al. used the phrase "desistance theories," which is a bit odd. The first step is to summarize the data on persistence and desistance. The second step would be to theorize or hypothesize not only why desistance occurs when it does, but also to theorize or hypothesize why persistence occurs when it does. In my view, this is no trivial matter because, as I will discuss below, there might be very good reasons to–predict that, in at least some subgroups of contemporary transgender children (or as Meadow [in press] calls them, "trans kids"), the rate of persistence is going to be much higher than reported in the follow-up studies to date.

CONTACT Kenneth J. Zucker ken.zucker@utoronto.ca Department of Psychiatry, University of Toronto, Toronto, Ontario, M5T 1R8, Canada.

On the terms persistence and desistance

Temple Newhook et al. (2018) offer up a brief discussion of the etymology of the word desistance, which I appreciated. Here, I will offer up how I think the terms persistence and desistance became part of the linguistic landscape with regard to children with a diagnosis of gender identity disorder/gender dysphoria.[4] At the 2003 meeting of the Harry Benjamin International Gender Dysphoria Association (now the World Professional Association for Transgender Health) in Gent, Belgium, I was a Discussant in a symposium and the title of my talk was "Persistence and desistance of gender identity disorder in children" (Zucker, 2003). As far as I can remember, I stumbled across the terms persistence and desistance after reading a paper by August, Realmuto, Joyce, and Hektner (1999), who reported on the rates of persistence and desistance of oppositional defiant disorder in a community sample of children with a diagnosis of attention-deficit hyperactivity disorder. At the time, the terms sounded pretty cool to me and they have been used for a long time now in clinical developmental child and adolescent psychology/psychiatry research (e.g., Farrington, 1991; Simonoff et al., 2013; Verhulst & Althaus, 1988).

For scholars writing about gender dysphoria, the terms caught on. Of course, there is no law that says these terms should be privileged. One could use alternative terms like continuation vs. discontinuation (persistence and desistance have fewer syllables), continuation vs. "in remission," etc. "In remission" is a bit too medical for my taste, but it is not necessarily an incorrect term. One could even add the term "recurrence" for those children and adolescents where gender dysphoria desists but then recurs. In any case, the "real" objection to the term "desistance" is that some clinicians, some researchers, and some activists simply don't like the empirical fact that there are some children who received the DSM-5 diagnosis of gender dysphoria (or its predecessor DSM-III/DSM-IV labels gender identity disorder of childhood or gender identity disorder) who do not continue to have "it" when they are older. That is really the crux of the discourse implicit in Temple Newhook et al.'s attempt to "reconstruct" the extant empirical literature, which the most ardent critics like to call "junk science" (e.g., Ford, 2017; Tannehill, 2016).

The data

Temple Newhook et al. (2018) use an 80% desistance rate "from a prior transgender identity" as the launching pad for their critique of the literature. I have two problems with this: one that is perhaps semantics; the other is empirical.

The term "transgender identity" is hardly an objective label for a child's gendered subjectivity. It is a label imposed by Temple Newhook et al. Of course, there may have been some children in the reviewed follow-up studies who self-identified as "trans" or "transgender" (in childhood) but I suspect that they constituted a (small) minority. And, of course, there are, no doubt, many children nowadays who would meet the DSM-5 diagnostic criteria for gender dysphoria and who self-identify as "trans" or whose parents label them as "trans" or whose clinician labels them as "trans." But a transgender identity is not isomorphic with a mental health diagnosis of gender dysphoria or even the alternative label of gender incongruence proposed for the forthcoming ICD-11 (Drescher, Cohen-Kettenis, & Reed, 2016). One could use alternative wording to summarize the data, at least as how Temple Newhook et al. see them: Of X children referred to specialized gender identity clinics at one of two academic health science centers, the majority of whom met DSM criteria for gender identity disorder of childhood or gender identity disorder, "[a]n oft-accepted interpretation of [the] findings is that approximately 80%" did not appear to have, at the time of follow-up, the developmentally equivalent adolescence or adulthood diagnosis.

Temple Newhook et al. could have done a bit of a better job in summarizing the Wallien and Cohen-Kettenis (2008) and Steensma, McGuire, Kreukels, Beekman, and Cohen-Kettenis (2013a) data by providing separate percentages by birth-assigned sex in Row 13 ("Reported desistance rate") of Table 1. In Wallien and Cohen-Kettenis, the persistence rate for birth-assigned males was 20.3% and for birth-assigned females was 50.0%. In Steensma et al., the corresponding percentages were 29.1% and 50.0%, respectively. Singh (2012), who used a methodology very similar to Drummond, Bradley, Peterson-Badali, and Zucker (2008), found a persistence rate of 12.2%. Green's (1987) study, which is arguably the most important of the "earlier" follow-up studies, found a persistence rate of 2.2% (see, for example, Zucker and Bradley [1995, pp. 283–287]). In the two Dutch studies, the

persistence rate for birth-assigned females was 2.46 and 1.71 times more likely than it was for birth-assigned males. In contrast, in the two Toronto studies, the persistence rate was similar for birth-assigned females and males. These variations deserve scrutiny and thought.

These follow-up studies were the ones used by the Gender Identity Disorders Subworkgroup to summarize the extant follow-up data in the DSM-5, where it was asserted that the "Rates of persistence of gender dysphoria from childhood into adolescence or adulthood vary. In natal males, persistence has ranged from 2.2% to 30.0%. In natal females, persistence has ranged from 12% to 50%" (American Psychiatric Association, 2013, p. 455). I would have preferred that Temple Newhook et al. relied on this statement rather than make vague reference to "…the media…[the] lay public, and in [unnamed] medical and scientific journals" or they could have referenced the summary article by Ristori and Steensma (2016).

I must confess having some trouble in understanding Row 7 (T1-desistant/N) in Temple Newhook et al.'s Table 1. For example, in Row 7 for Drummond et al. (2008), they give a figure of 59%. This appears to have been derived by counting the 22 participants seen for follow-up who were classified as desisters and dividing by 37 (the total number of eligible participants, of whom 12 were not part of the follow-up study because they could not be traced, their parents did not want them to take part in the study, etc.: 22/37 = 59% instead of 22/25 = 88% (as reported in Row 13).[5] The 59% figure could be interpreted as implying that as many as 41% of the potential participants could have been persisters, which is an absurd inference with no empirical basis.

Methodological and interpretive issues

Sampling

Temple Newhook et al. (2018) expressed concern about the "broad inclusion criteria" in the follow-up studies and that they were not "a representative group of transgender children." That is true. Until there is a formal epidemiological, population-based study of children who meet diagnostic criteria for gender dysphoria, it would be prudent to limit any claims about generalizability to clinic-referred samples seen during the same period of time during which the extant follow-up studies were conducted (cf. Steensma, van der Ende, Verhulst, & Cohen-Kettenis, 2013b). One could say the very same thing about contemporary samples of trans children recruited via support groups, conferences, word of mouth, etc., as in the recent studies by Olson's research group (e.g., Durwood, McLaughlin, & Olson, 2017; Olson, Durwood, DeMeules, & McLaughlin, 2016; see also Kuvalanka, Weiner, Munroe, Goldberg, & Gardner, 2017; Meadow, 2011).

Temple Newhook et al. (2018) also asserted the following:

> …this research was limited to children whose parents chose to bring them to a clinic for diagnosis and treatment and thus may have believed the child's difference was a problem, and one that required psychological treatment. Children whose parents affirmed their gender (or who did not wish to…access clinical treatment for any reason) were likely not included in these studies.

Ok, well Temple Newhook et al. (2018) were not entirely sure about this ("may have believed…likely not included…"). In Toronto, there is no question that some parents/many parents were concerned about their child's gender identity development. Others were not sure how they felt – they wanted professional advice. Others were not concerned at all but brought their child anyway (for different reasons). It would certainly be important in future studies to see how parental attitudes about their child's gender-variant behavior/gender dysphoria are associated with long-term developmental outcomes. In Steensma et al. (2013a), Temple Newhook et al. are, in my view, wrong about their "affirmation" argument because some of the children in that study "socially transitioned" from one gender to another prior to puberty, which one can only assume occurred in the context of "supportive" parents. One definition of "supportive" in the *Oxford Dictionary of Current English* (Soares, 2001) is "encouraging."

Changes in diagnostic criteria

A second issue noted by Temple Newhook et al. (2018) is that diagnostic criteria have changed over time, between the DSM-III in 1980 and the DSM-5 in 2013. That is true. Indeed, Temple Newhook et al. state that "…these studies included children who, by current DSM-5 standards, would not likely have been categorized as transgender (i.e., they would not meet

the criteria for gender dysphoria) and therefore…it is not surprising that they would not identify as transgender at follow-up." There is a lot to unpack in this statement. First, even using the earlier criteria for the diagnosis of gender identity disorder of childhood/gender identity disorder, not all of the referred children were threshold for the diagnosis (see below). Second, it is an empirical question about what the degree of overlap would be if one used DSM-III, DSM-III-R, DSM-IV, and DSM-5 criteria to classify children referred for possible gender dysphoria. I doubt that anyone will ever do such a study, so it is not worth ruminating about it. It is my clinical opinion that the similarities across the various iterations of the DSM are far greater than the differences (Zucker, 2010) and, as part of the work done by the Subcommittee on Gender Identity Disorders for the DSM-IV, provided one example of this (Zucker et al., 1998).

One minor point about changes in the diagnostic criteria: Temple Newhook et al. stated that "Evidence of the actual distress of gender dysphoria…was dropped as a requirement for [Gender Identity Disorder] in the DSM-IV…" This is wrong. Criterion D reads as follows: "The disturbance causes clinically significant distress or impairment in social, occupational, or other important areas of functioning" (American Psychiatric Association, 1994, p. 538). Of course, how exactly one operationalizes distress is a complex matter, as I have discussed elsewhere (e.g., Zucker, 1992, 2005).

Predictors of developmental psychosexual trajectories

An important point discussed by Temple Newhook et al. (2018) is that not all children seen in the follow-up studies were threshold for the DSM diagnosis in childhood (see also Olson, 2016). Indeed, they quoted from Drummond et al. (2008) the following:

> …40% of the girls were not judged to have met the complete DSM criteria for GID [Gender Identity Disorder] at the time of childhood assessment…it could be argued that if some of the girls were subthreshold for GID in childhood, then one might assume that they would not be at risk for GID in adolescence or adulthood. (p. 42)

Since I was a co-author of Drummond et al., how could I disagree with this statement?

Ten years later, here is how. On the one hand, the clinical reality is more complicated than this statement suggests. For example, there is ample contemporary clinical experience that there are many adolescents who come in the front-door for evaluation who meet the diagnostic criteria for gender dysphoria, but, retrospectively, would not have met the complete DSM-5 criteria in childhood (either by their own self-report, by their parent's perspective, or both). Some of these adolescents would not have met any of the criteria. Other adolescents (particularly birth-assigned females in my opinion) had some degree of gender-variant behavior during childhood (sometimes markedly so), but not at the level where they would have been threshold for the diagnosis because they did not express the desire to be of the other gender or some alternative gender different from their assigned gender. Thus, I would argue that degree of gender-variant behavior in childhood (with or without the presence of gender dysphoria per see) is a potential predictor of gender dysphoria in adolescence or adulthood that should not be too readily dismissed (see, e.g., Scholinski, 1997; https://dylanscholinski.weebly.com/bioinfocv.html).

On the other hand, what can we learn about the predictive value of the childhood diagnosis with regard to persistence? Table 1 shows the percentage of children classified as persisters or desisters from four follow-up studies as a function of whether or not they were threshold or subthreshold for the diagnosis in childhood. Of the 127 children who were subthreshold for the diagnosis, only 9 (7.1%) were classified as persisters. Of the 241 children who were threshold for the diagnosis, 79 (32.8%) were classified as persisters. This yields a sensitivity rate of 89.7%, which is pretty good, but a specificity rate of 42.1%, which is not so good. In absolute terms, that 7% of the subthreshold cases were classified as "persisters" at follow-up is low; nonetheless, a 7% "prevalence" rate would be substantially higher than the base rate in the general population, if, for example, one relies on some recent epidemiological studies of high-school students or

Table 1. Gender dysphoria ("persistence") at follow-up as a function of diagnostic status in childhood.

		Persistence	
		Yes	No
DSM diagnosis in childhood	Yes	79 (32.8%)	162 (67.2%)
	No	9 (7.1%)	118 (92.9%)

Note. Data from Drummond et al. (2008), Singh (2012), Steensma et al. (2013a), and Wallien and Cohen-Kettenis (2008). DSM diagnosis in childhood: Yes = threshold for the diagnosis of gender identity disorder of childhood/gender identity disorder in DSM-III, DSM-III-R, or DSM-IV. No = subthreshold.

adults who self-identify as transgender (Clark et al., 2014; Eisenberg et al., 2017; Guss, Williams, Reisner, Austin, & Katz-Wise, 2017; Wilson, Choi, Herman, Becker, & Conron, 2017). The relatively low specificity rate challenges the "No True Scotsman" argument (https://en.wikipedia.org/wiki/No_true_Scotsman), namely that desisters were not truly gender-dysphoric to begin with, so there was nothing to desist from. Only persisters were truly gender-dysphoric in childhood. But unless one wants to completely dismiss the validity of the childhood criteria, one must contemplate the fact that 67% of children who met the criteria in childhood were classified as desisters at follow-up.

In this regard, I would like to make one additional point about the Steensma et al. (2013a) study, which Temple Newhook et al. did not appreciate. Because Steensma et al. conducted what might be characterized as a relatively short-term follow-up study, they had to select from their patient pool those who were, at the time of the initial assessment, relatively old (M age, 9.15 years). Indeed, when compared to the other three follow-up studies, their probands were, on average, the oldest at the time of the childhood assessment. In other words, patients seen in the clinic at relatively younger ages were not yet old enough to be eligible to participate in the follow-up study. It is conceivable that children seen at a relatively younger age might be more likely to desist than children seen at a relatively older age.

It should, of course, be recognized that the use of the DSM diagnosis as a categorical metric (unless one does a symptom count, which no one has done) has its limitations. Accordingly, both Steensma et al. (2013a) and Singh (2012) also used dimensional metrics as predictors of persistence vs. desistance, including a childhood measure of gender identity (Wallien et al., 2009; Zucker et al., 1993), consistent with Temple Newhook et al.'s incisive reference to Schreier and Ehrensaft (2016): "Want to know a child's gender? Ask." Indeed, I have been asking for a long time (per Wallien et al., 2009 and Zucker et al., 1993).

In Singh (2012; see also Zucker, 2017), three demographic variables (age at assessment, IQ, and parent's social class background) and a composite measure of gender behavior from the childhood assessment were used in a multinomial logistic regression to predict persistence at the time of follow-up. In Table 2, the persisters (all of whom were classified as biphilic or androphilic in their sexual orientation) were compared to the desisters who were classified as (cisgender) biphilic or androphilic in their sexual orientation. It can be seen that age at assessment (older) was weakly related to prediction of persistence ($p = .09$), but that social class (lower social class background) and degree of gender-variant behavior in childhood were both significant predictors of persistence ($p < .001$ and .02, respectively). In Steensma et al. (2013a), for birth-assigned males, age at the time of assessment (older), several measures of gender-variant behavior, and whether or not the child was classified as having either a partial or complete gender role social transition prior to puberty significantly predicted persistence. For birth-assigned females, two measures of gender-variant behavior, but not age at the time of assessment or classification as having either a partial or complete gender role social transition, predicted persistence.

These studies suggest that dimensional measurement of gender-variant behavior, including measures of the child's self-reported gender identity/gender dysphoria, within a population of clinic-referred children, has the potential to predict persistence, albeit imperfectly. The data also have therapeutic implications, which I will discuss further below.

Age at the time of follow-up

I have no quarrel with Temple Newhook et al.'s (2018) cautionary remark about the relatively young age at the time of follow-up in the four core studies (in Drummond et al., 2008: M age, 23.24 years; range, 15–36; in Wallien and Cohen-Kettenis, 2008: M age, 18.9 years; range, 16–28; Singh, 2012: M age, 20.5 years; range, 13–39; Steensma et al., 2013a: M age, 16.14 years; range, 15–19). In Green's (1987) earlier follow-up study, the mean age at follow-up was 19 years (range, 14–24). However, to my knowledge, no serious

Table 2. Demographic and gender behavior predictors: multinomial logistic regression for the bisexual/androphilic persisters.

Predictor	β	SE	Wald	p	Exp (B)
Age	.26	.16	2.90	.09	1.30
IQ	.02	.03	.58	ns	1.02
Social class	−.12	.03	13.28	<.001	.89
Gender z-score	1.32	.55	5.82	.02	3.74

Note. Reference group was the bisexual/androphilic desisters ($n = 16$). For the bisexual/androphilic persisters, $n = 66$. Data from Singh (2012; see also Zucker, 2017). Social Class was measured with the Hollingshead (1975) Four-Factor Index of Social Status (absolute range, 8–66). The Gender metric was a combination of several dimensional measures administered at the baseline assessment in childhood. Exp (B), sometimes written e^B, is the multiplicative change in the odds of membership in the persister group for a one-unit increase in the corresponding predictor; thus, $100 \times (e^B - 1)$ represents the percentage change in the odds for a one-unit increase in that predictor.

scholar has claimed that "by default" it can be assumed that the desisters have been "…'correctly' categorized as cisgender for their lifetime." That is an empirical question. I certainly have seen some adolescent patients who, for example, "fluctuate" between self-identification as transgender vs. gay. For example, one young birth-assigned male with whom I worked self-identified as trans at the age of 13 but by age 15 self-identified as gay, stating "I was having a hard time accepting myself as a gay boy…I wanted to be normal" (i.e., a girl who was sexually attracted to boys); or some adolescents who initially self-identify as gay and later on shift to a transgender identity; or some adolescents who initially identify as cisgender heterosexual and then shift to cisgender gay. Temple Newhook et al., however, then go on to cite Reed, Rhodes, Schofield, and Wylie (2009): "Research has found that many trans-identified individuals come out or transition later in adulthood."

On this point, I am not sure if Temple Newhook et al. are being intentionally deceptive or do not fully appreciate that we have known for a long time that, among birth-assigned males, there are two developmental pathways leading to gender dysphoria in adulthood: early-onset (the object of this exercise) and late-onset (e.g., Blanchard, 1989, 1991; Blanchard, Clemmensen, & Steiner, 1987; Lawrence, 2010, 2017).[6] Using late-onset patients as an argument for the possibility that early-onset patients will only come out or transition in adulthood does not strike me as particularly compelling – it borders on pure sophistry, mixing apples with oranges. Nonetheless, I have no problem with the suggestion that longer term follow-up studies would be worthwhile.

Patients "lost" to follow-up

Temple Newhook et al. (2018) worry about the significance of patients lost to follow-up. Agreed. In Drummond et al. (2008; see also Drummond, 2006) and Singh (2012), an effort was made to evaluate the "internal validity" (Campbell & Stanley, 1969) of the samples by comparing those who participated in the follow-up study with those who did not on a number of demographic variables, a general measure of behavioral and emotional problems, and measures of gender-variant behavior at the time of the assessment in childhood. The data strongly suggested that there were minimal differences between those who participated in the study and those who did not. This is important. For example, suppose that the patients not seen at the time of follow-up had significantly more gender-variant behavior or were disproportionately more likely to meet the full criteria for a DSM diagnosis in childhood. Then one would indeed be worried that the followed-up sample was not representative of the entire pool of patients; it would threaten the internal validity of the sample. But this was not the case.

Authentic identities

Temple Newhook et al. (2018) make the argument that "Assertion of a cisgender identity at any point in the life cycle is often assumed to be valid and invalidates any previous assertion of transgender identity…a transgender identity is only viewed as valid if it is static and unwavering throughout the life course…" This is an absurd claim – one that is not even referenced. Who exactly makes this assertion? Who exactly is doing the invalidating? I don't think that any of the authors of the four core studies have ever made this type of assertion. Identity is a subjective construction (Zucker & VanderLaan, 2016). Of course, some "identities" are more stable and "authentic" than others (consider, for example, the chaotic subjectivities of some people with a diagnosis of borderline personality disorder [e.g., Jørgenson, 2006, 2010]). One birth-assigned male who I assessed at the age of 7 had transitioned socially around a year prior, in a sort of passive way. This child's mother asked: "So, do you want to be a boy or a girl?" The child's response was "What do you want me to be?" In my view, exploration of this child's "true" or authentic self could be explored in a psychotherapeutic safe space.

Conflation of gender identity and sexual orientation

Temple Newhook et al. (2018) argued that the follow-up studies "conflate" gender identity and sexual orientation, citing Drescher and Pula (2014) as guilty of making this conflation. This is a ridiculous assertion. In the four core follow-up studies, gender identity/gender dysphoria and sexual orientation (in relation to natal sex) were assessed with distinct measures. I am really baffled why Temple Newhook et al. make this claim. Temple Newhook et al. also suggested that the follow-up studies were too binary in their evaluations. If one makes a DSM diagnostic judgment of

gender dysphoria (present vs. absent), then, yes, one has made a binary diagnostic decision (that is the way the DSM rocks and rolls for all diagnoses). However, for many years now, I have, with colleagues, used a dimensional measure of gender identity/gender dysphoria (Deogracias et al., 2007; Singh et al., 2010), which can, in principle, capture gendered shades of grey. However, in using a binary cut-off score of caseness (cf. Wing, Bebbington, & Robins, 1981), sensitivity and specificity were shown to be quite high when comparing adolescents and adults seen in specialized gender identity clinics vs. comparison groups (Deogracias et al., 2007; Singh et al., 2010; see also Singh, McMain, & Zucker, 2011). Given the apparent increase of patients who self-identify as "non-binary" (e.g., Beek, Kruekels, Cohen-Kettenis, & Steensma, 2015; Koehler, Eyssel, & Nieder, 2018; Richards et al., 2016), employing dimensional measures of gender identity/gender dysphoria should always accompany the use of a binary diagnostic system, such as the DSM-5.

Generalization to contemporary samples of transgender children

It is not clear to me if there will be any additional follow-up studies from other specialized gender identity clinics who assessed children during a similar period of time as the four core studies, where the year of initial assessment ranged from 1975 to 2008 (the Gender Identity Development Service in London or the patients seen in-person or via internet consultation at the Children's National Medical Center in Washington, DC come to mind as having samples where such a follow-up study could be done).

The recent proliferation of gender identity clinics in North America, Europe, and elsewhere should, in theory, allow for new follow-up studies of contemporary samples (Hsieh & Leinger, 2014), along with samples obtained from outside clinical settings, as in the studies by Olson's research group (op. cit.). With the emergence in the last 10–15 years of a pre-pubertal gender social transition as a type of psychosocial treatment – initiated by parents on their own (without formal clinical consultation) or with the support/advice of professional input (e.g., Ehrensaft, 2014; Vanderburgh, 2009; Wong & Drake, 2017) – it is not clear if the desistance rates reported in the four core studies will be "replicated" in contemporary samples. Indeed, the data for birth-assigned males in Steensma et al. (2013a) already suggest this: of the 23 birth-assigned males classified as persisters, 10 (43%) had made a partial or complete social transition prior to puberty compared to only 2 (3.6%) of the 56 birth-assigned males classified as desisters. Thus, I would hypothesize that when more follow-up data of children who socially transition prior to puberty become available, the persistence rate will be extremely high. This is not a value judgment – it is simply an empirical prediction. Just like Temple Newhook et al. (2018) argue that some of the children in the four follow-up studies included those who may have received treatment "to lower the odds" of persistence, I would argue that parents who support, implement, or encourage a gender social transition (and clinicians who recommend one) are implementing a psychosocial treatment that will increase the odds of long-term persistence.

Meditations on ethics

Do contextual effects matter?

Temple Newhook et al. (2018) identified putative ethical concerns about the reviewed follow-up studies. They begin with the rhetorical statement that "research itself is an intervention." I am not quite sure what Temple Newhook et al. mean. The *Oxford Dictionary of Current English* (Soares, 2001) defines intervention as an "action…to improve or control a situation." In developmental clinical psychology and psychiatry, there are, of course, hundreds of research studies in which patients are assigned to a treatment group and some type of control group (e.g., a sham psychosocial treatment, placebo, wait-list, etc.), but the core follow-up studies were not part of any formal therapeutic (an "intervention") protocol. Now, of course, it could be argued that participation in a research study per se might have an effect on an individual and that is why ethics protocols must weigh the benefits and risks of participation. Suppose one is conducting a survey on suicidality among adolescents from the general population. It is conceivable that answering questions about suicidal thoughts might cause distress, so it is common that the protocol would give the adolescent options as to whom they could talk to about such feelings.

Temple Newhook et al. (2018) then drill down and assert that "These studies took place in the context of gender clinics in which children were put through a

substantial degree of testing over periods of months or years." I can't speak for my Dutch colleagues, but, with regard to the Toronto follow-studies, on what basis do Temple Newhook et al. make this claim? Zucker, Wood, Singh, and Bradley (2012, Tables 1 and 2) provided a summary of their clinical assessment protocol, at least around the time that their article was published. It included a family assessment interview (3 hours), an individual interview with the child (1 hour), and psychological testing (4 hours). A feedback session, often with parents alone, was estimated at 1–2 hours. I view this protocol as comprehensive and thorough, yet Temple Newhook et al. write as if it was some kind of psychological waterboarding. The "testing" hardly took place over periods of months or years.[7] Other than to imply some kind of clinical malevolence, I really don't understand what Temple Newhook et al. are trying to say. As far as I know, there is no "gold standard" for what constitutes a clinically sound assessment for children referred for gender dysphoria. If Temple Newhook et al. want to bid for an assessment hegemony, they should propose one and open it up to debate.

With regard to the children who participated in the follow-up studies, I can say this. Some of these children and their families were seen for an assessment and never seen again until the family was contacted for the follow-up (in Drummond et al., 2008, the mean interval between the baseline assessment and follow-up was 14.34 years; in Singh [2012], the mean interval was 12.88 years). Other children (and their parents) were seen for a long time in therapy (sometimes in the clinic; sometimes with clinicians in the community) because they needed it. But, to be clear, there was a lot of variability in how much clinical contact there was with families between the time of the assessment in childhood and the follow-up.

Temple Newhook et al. (2018) stated that there was "…an absence of information about whether research participation was optional and if steps were taken to ensure that children could decline research consent while continuing to received needed services." In the Toronto follow-up studies, I will make it perfectly clear the answer to this query. Yes, participation in the follow-up studies was optional and, yes, patients could decline to participate. Of the 25 participants in Drummond et al. (2008) at the time of follow-up, none were in treatment in the clinic. The one exception was an adolescent who returned to the clinic for reasons unrelated to gender identity and, at the time, was enrolled in the study. To be transparent, both studies were approved by the Institutional Review Boards at the Centre for Addiction and Mental Health and the University of Toronto. The consent form for the Drummond et al. (2008) study can be found in Drummond (2006, Appendix C); for the Singh (2012) study, Appendix F.

Do therapeutic models matter?

> …we cannot rule out the possibility that early successful treatment of childhood GID [Gender Identity Disorder] will diminish the role of a continuation of GID into adulthood. If so, successful treatment would also reduce the need for the long and difficult process of sex reassignment which includes hormonal and surgical procedures with substantial medical risks and complications. (Meyer-Bahlburg, 2002, p. 362)

> Relatively little dispute exists regarding the prevention of transsexualism, though evidence about the effectiveness of treatment in preventing adult transsexualism is also virtually nonexistent. (Cohen-Kettenis & Pfäfflin, 2003, p. 120)

> Over the last decade, we have seen a sea change in approach to pediatric transgender care, with the gender affirmative model now widely adopted as a preferred practice… (Chen, Edwards-Leeper, Stancin, & Tishelman, 2018, p. 74)

Temple Newhook et al. (2018) critique the follow-up studies in relation to therapeutic models that have been described in some detail elsewhere (deVries & Cohen-Kettenis, 2012; Zucker et al., 2012). Therapeutic models, one would hope, are informed by a conceptual/theoretical formulation about gender identity development, which, in turn, might be applied to help children, one way or the other, reduce their gender dysphoria (see also Ehrensaft, 2012, 2014; Menvielle, 2012; Pyne, 2014; Turban & Ehrensaft, 2017). A very significant problem in the field is that there are no randomized control trials (RCT) with regard to treatment of children with gender dysphoria, as has been noted in several authoritative reviews (American Academy of Child and Adolescent Psychiatry, 2012; American Psychological Association, 2015; Byne et al., 2012; see also Dreger, 2009; Edwards-Leeper, Leibowitz, & Sangganjanavanich, 2016; Green, 2017). And there won't be, because many, if not most, parents would refuse to have their children randomized into

different treatment arms (and, quite frankly, I don't blame them). A parent who would like their child's gender dysphoria reduced via psychotherapeutic methods would refuse to allow their child assigned to a gender social transition treatment approach. A parent who would like their child's gender dysphoria reduced via a gender social transition would refuse to have their child assigned to a psychotherapeutic approach. It is possible that some parents would agree to randomize their child to a "wait-and-see" (Menvielle, Tuerk, & Perrin, 2005) or "watchful waiting" (Zucker, 2008) approach as opposed to their preferred therapeutic approach, but, to my knowledge, no one has attempted such a partial RCT.

Now, of course, it would not come as a surprise if Temple Newhook et al. (2018) took umbrage at the mere idea of a treatment arm designed to reduce a child's gender dysphoria via psychotherapeutic methods. They might, for example, offer up the following from the seventh edition of the Standards of Care:

> Treatment aimed at trying to change a person's gender identity…to become more congruent with sex assigned at birth has been attempted in the past without success (Gelder & Marks, 1969; Greenson, 1964)….Such treatment is no longer considered ethical." (Coleman et al., 2011, p. 175)

Yet, on the very same page of the Standards, one finds the following: "Psychotherapy should focus on reducing a child's…distress related to the gender dysphoria…" (p. 175) or "Mental health professionals…. should give ample room for clients to explore different options for gender expression" (p. 175). The lack of internal consistency between the first statement and the second and third statements is rather astonishing. Moreover, the "without success" remark offers up two citations as authoritative proof. One was a reference to a 5-year-old boy seen by a psychoanalyst in Beverly Hills, California (see also Greenson, 1966) and other was a reference to the use of faradic aversion treatments on birth-assigned male adults said to be "transvestites with moderate transsexualism" (Gelder & Marks, 1969, p. 394). Personally, I prefer the following summary statements about therapeutics with regard to children with gender dysphoria:

> Different clinical approaches have been advocated for childhood gender discordance….There have been no randomized controlled trials of any treatment….the proposed benefits of treatment to eliminate gender discordance…must be carefully weighed against… possible deleterious effects. (American Academy of Child and Adolescent Psychiatry, 2012, pp. 968–969)

> Very few studies have systematically researched any given mode of intervention with respect to an outcome variable in GID and no studies have systematically compared results of different interventions….In light of the limited empirical evidence and disagreements…among experts in the field…recommendations supported by the available literature are largely limited to the areas [reviewed] and would be in the form of general suggestions and cautions… (Byne et al., 2012, p. 772)

> …because no approach to working with [transgender and gender nonconforming] children has been adequately, empirically validated, consensus does not exist regarding best practice with pre-pubertal children. Lack of consensus about the preferred approach to treatment may be due, in part, to divergent ideas regarding what constitutes optimal treatment outcomes… (American Psychological Association, 2015, p. 842)

In the Drummond et al. (2008) study, no effort was made to attempt a link between therapeutic intervention and outcome:

> It [was] beyond the scope of this report to describe the types of therapies (as well as their frequency and duration) that the girls and/or their parents may have received between the assessment in childhood and the follow-up (e.g., by a therapist within the Gender Identity Service at the Centre for Addiction and Mental Health or in the community). From the participants' clinic files, 13 of the 25 girls had at least some contact with our clinic during the interval between assessment and follow-up (e.g., as therapy clients or for a reassessment). Of the 25 girls and/or their parents, 18 had been in some type of therapy or counseling during the interval between assessment and follow-up; of these, 5 were patients of staff within the Gender Identity Service, and the remainder were seen by a professional in the community. (p. 36)

The same could be said for Singh's (2012) sample and, to my knowledge, the Dutch group as well.

Temple Newhook et al. (2018) go on to state that "It is important to acknowledge that discouraging social transition [with reference to the Dutch team's putative therapeutic approach] is itself an intervention with the potential to impact research findings…" Fair enough. But Temple Newhook et al. (2018) curiously suppress the inverse: encouraging social transition is itself an intervention with the potential to impact findings. I find this omission astonishing.

Harm, harm, and more harm

Temple Newhook et al. (2018) argue that attempts to delay or defer a gender social transition may cause harm and that such harm has been underestimated. Much of what it is argued here is, shall we say, "anecdotal" with the use of brief clinical clips. Fine. One has to start somewhere with an argument. Deep into this section, Temple Newhook et al. cite the work of Olson and her research group (op. cit.), stating that:

> Emergent research on the health and well-being of trans children who are affirmed in their gender identity… indicates mental health outcomes equivalent with cisgender peers….this is in stark contrast to the high levels of psychological distress and behavioral problems documented among children who were discouraged from asserting their identities in childhood.

This is a gross oversimplification, an oversimplification that Temple Newhook et al. require in order to assimilate their interpretation of the data into their theoretical/ethical argumentation. Disclosure: I think that the work of Olson's research group is excellent, including the studies that have assessed various parameters of gender development (e.g., Dunham & Olson, 2016; Fast & Olson, 2018; Olson & Enright, 2017; Olson & Gülgöz, 2017; Olson, Key, & Eaton, 2015). However, the Olson et al. (2016) study on mental health measurement has serious methodological flaws, which affect the interpretation of the data (cf. Turban, 2017). First, as noted earlier, the sample was not representative of socially transitioned children in general. Second, the mental health outcome data were assayed at some unspecified time interval after the social transition had occurred. Thus, although the children had, on average, scores in the nonclinical range, it is completely unclear if they would have had similar scores prior to the social transition. In other words, Olson et al. had "post-treatment" data, but no "pre-treatment" data.

The reference to the high levels of distress among children who were discouraged from "asserting their identities in childhood" is without any empirical documentation. For example, the reference to the study by Cohen-Kettenis, Owen, Kaijser, Bradley, and Zucker (2003) did not measure whether or not parents (or others) encouraged, discouraged, or were neutral with regard to the gender-variant behavior/gender dysphoria of their children. Cohen-Kettenis et al. (2003) examined other correlates of behavioral and emotional problems, but not the one that Temple Newhook et al. (2018) assert. So, here, Temple Newhook et al. have defaulted to rhetoric and dogma. In my own research over the years in which I have measured behavioral and emotional problems among children referred for gender dysphoria, I have always noted that there is a great deal of variability in clinical range problems. Gender-referred children under the age of 6 years, for example, do not show, on average, a great deal of behavioral and emotional problems (see, e.g., Zucker & Bradley, 1995, pp. 79–103; Singh, Bradley, & Zucker, 2011; for review, see Zucker, Wood, & VanderLaan, 2014). The determinants of mental health issues in children with gender dysphoria are multifactorial and should not be reduced to the simple narrative of parental support.

In general, it is of course extremely important to have systematic longer-term follow-up data on children with gender dysphoria with regard to their general well-being and psychosocial adaptation, not just information about rates of persistence vs. desistance. So, on this point, I agree with Temple Newhook et al. (2018). Drummond, Bradley, Peterson-Badali, VanderLaan, and Zucker (2018) evaluated the presence of clinical range behavioral/emotional problems and psychiatric diagnoses in the Drummond et al. (2008) cohort. Using the Child Behavior Checklist or Adult Behavior Checklist as rated by their mothers, 39.1% had clinical range scores; on the Youth Self-Report or the Adult Self-Report, 33.3% had clinical range scores. On either the Diagnostic Interview for Children and Adolescents (DICA) or the Diagnostic Interview Schedule (DIS), the participants had, on average, 2.67 diagnoses (range, 0–10). On the one hand, 33% did not meet criteria for any diagnosis; on the other hand, 46% met criteria for three or more diagnoses. (Of the three participants classified as persisters at follow-up, they had 0, 3, and 5 DICA/DIS diagnoses, respectively.) From the childhood assessment, five variables were significantly associated with a composite Psychopathology Index (PI) at follow-up: a lower IQ, living in a non-two-parent or reconstituted family, a composite behavior problem index, and poor peer relations. At follow-up, degree of concurrent homoeroticism (in relation to birth sex) and a composite index of gender dysphoria were both associated with the composite PI. Drummond et al. (2018) summarized their data as follows:

> …girls referred for gender dysphoria show, on average, a general psychiatric vulnerability as they grow up. It is,

> however, important to keep in mind that there [was] variability in this vulnerability and that not all gender-dysphoric girls manifest clinical range psychopathology, both at the time of assessment in childhood and at the time of follow-up….our data suggest that it is important to consider…an integrative, holistic approach in the clinical care of these patients, which not only tracks their long-term psychosexual development, but also their mental health in general. (p. 182)

At the end of their long ethical discourse about harm, Temple Newhook et al. (2018) conclude that "…longitudinal studies about identity 'desistance' or 'persistence' are not the best tools for understanding the needs of gender-nonconforming children." Although I agree it should not be the only metric for understanding the needs of children with a diagnosis of gender dysphoria, the implicit message is something like this: Research on persistence and desistance should be suppressed: it should just disappear without a trace. This is empirical and intellectual "no platforming" at its worst. I find this ominous, but not surprising.

Notes

1 I wrote the first draft of this essay "masked" to the identity of the authors. In the interest of transparency, now that I know who the authors are, two points: The second author, Tosh, has been no fan of mine, as exemplified in the scholarly title of an essay penned for the *Psychology of Women Section Review* of The British Psychological Society entitled "'Zuck off'! A commentary on the protest against Ken Zucker and his 'treatment' of childhood gender identity disorder" (Tosh, 2011). The fourth author, Pyne, has not exactly been a fan either. In March 2016, I filed a "statement of claim" (in plain English, a lawsuit) against Pyne and the *Toronto Star Newspapers* for a piece written by Pyne (2015). As noted in the *Toronto Star* on December 19, 2017, "This material was subject to legal complaint by Dr. Kenneth J. Zucker, which has been resolved" (https://www.thestar.com/opinion/commentary/2015/12/17/discredited-treatment-of-trans-kids-at-camh-shouldnt-shock-us.html).

2 Per Bouman et al. (2017), the term "birth assigned sex" was suggested as part of the language policy for the 2017 meeting of the European Professional Association for Transgender Health. It was recommended over the terms "natal male or natal female." Natal is defined as in "relation to the...time of one's birth" (Soares, 2001). In the *Diagnostic and Statistical Manual of Mental Disorders* (American Psychiatric Association, 2013), terms such as "natal girls" and "natal boys" were used. It seems to me that all of these options are reasonable.

3 If one googles "Devita Singh doctoral dissertation," the pdf of the dissertation is the first entry (see also https://search.library.utoronto.ca/details?9017513).

4 I use the diagnostic term "gender identity disorder," along with the diagnostic term "gender dysphoria" because the former was the diagnostic label at the time of the follow-up studies that are reviewed.

5 The ethics protocol was such that parents were contacted first to let them know about the study and if they were willing to let us talk to the potential participants. In part, this was because we had no way or knowing if all of the adolescents or adults would have even remembered having been seen in the clinic as a child.

6 Late-onset birth-assigned females with gender dysphoria have, in recent years, become a very salient part of the clinical landscape, particularly among adolescents (see, e.g., Littman, 2017). They are not, however, exactly parallel with some aspects of the gender developmental histories of late-onset birth-assigned males.

7 It is true, however, that, several decades ago, we did a study in which 44 children referred to the clinic and their siblings were seen for psychological testing at a one-year follow-up (median interval, 371 days) that evaluated the evidence for stability and change in gender-typed behavior (Zucker, Bradley, Doering, & Lozinski, 1985). So what? It is common in specialized clinical programs at academic health science centers to conduct such types of follow-ups. Over the subsequent years, some children might have been seen for follow-up assessment, including psychological testing, on an as needed basis for clinical reasons. At times, such a re-assessment may have been for reasons completely unrelated to the child's gender identity (e.g., a learning disability, a psychopharmacology consult, etc.). So what? This is nothing more than being clinically responsible for the well-being of one's clients.

References

American Academy of Child and Adolescent Psychiatry. (2012). Practice parameter on gay, lesbian, or bisexual sexual orientation, gender nonconformity, and gender discordance in children and adolescents. *Journal of the American Academy of Child and Adolescent Psychiatry, 51*, 957–974. doi:10.1016/j.jaac.2012.07.004

American Psychiatric Association. (1994). *Diagnostic and statistical manual of mental disorders* (4th ed.). Washington, DC: Author.

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). Arlington, VA: American Psychiatric Press.

American Psychological Association. (2015). Guidelines for psychological practice with transgender and gender nonconforming people. *American Psychologist, 70*, 832–864. doi:10.1037/a0039906

August, G. J., Realmuto, G. M., Joyce, T., & Hektner, J. M. (1999). Persistence and desistance of oppositional defiant

disorder in a community sample of children with ADHD. *Journal of the American Academy of Child and Adolescent Psychiatry, 38*, 1262–1270. doi:10.1097/00004583-199910000-00015

Beek, T. F., Kruekels, B. P. C., Cohen-Kettenis, P. T., & Steensma, T. D. (2015). Partial treatment requests and underlying motives of applications for gender affirming interventions. *Journal of Sexual Medicine, 12*, 2201–2205. doi:10.1111/jsm.13033

Blanchard, R. (1989). The classification and labeling of nonhomosexual gender dysphorias. *Archives of Sexual Behavior, 18*, 315–334. doi:10.1007/BF01541951

Blanchard, R. (1991). Clinical observations and systematic studies of autogynephilia. *Journal of Sex & Marital Therapy, 17*, 235–251. doi:10.1080/00926239108404348

Blanchard, R., Clemmensen, L. H., & Steiner, B. W. (1987). Heterosexual and homosexual gender dysphoria. *Archives of Sexual Behavior, 16*, 139–152. doi:10.1007/BF01542067

Bouman, W. P., Schwend, A. S., Motmans, J., Smiley, A., Safter, J. D., Deutsch, M. B., … Winter, S. (2017). Language and trans health [Editorial]. *International Journal of Transgenderism, 18*, 1–6. doi:10.1080/15532739.2016.1262127

Byne, W., Bradley, S. J., Coleman, E., Eyler, A. E., Green, R., Menvielle, E. J., … Tompkins, D. A. (2012). Report of the American Psychiatric Association task force on treatment of gender identity disorder. *Archives of Sexual Behavior, 41*, 759–796. doi:10.1007/s10508-012-9975-x

Campbell, D. T., & Stanley, J. C. (1969). *Experimental and quasi-experimental designs for research*. Chicago, IL: Rand McNally & Company.

Chen, D., Edwards-Leeper, L., Stancin, T., & Tishelman, A. (2018). Advancing the practice of pediatric psychology with transgender youth: State of the science, ongoing controversies, and future directions. *Clinical Practice in Pediatric Psychology, 6*, 73–83. doi:10.1037/cpp0000229

Clark, T. C., Lucassen, M. F. G., Bullen, P., Denny, S. J., Fleming, T. M., Robinson, E. M., & Rossen, F. V. (2014). The health and well-being of transgender high school students: Results from the New Zealand adolescent health survey (Youth'12). *Journal of Adolescent Health, 55*, 93–99. doi:10.1016/j.jadohealth.2013.11.008

Cohen-Kettenis, P. T., Owen, A., Kaijser, V. G., Bradley, S. J., & Zucker, K. J. (2003). Demographic characteristics, social competence, and behavior problems in children with gender identity disorder: A cross-national, cross-clinic comparative analysis. *Journal of Abnormal Child Psychology, 31*, 41–53. doi:10.1023/A:1021769215342

Cohen-Kettenis, P. T., & Pfäfflin, F. (2003). *Transgenderism and intersexuality in childhood and adolescence: Making choices*. Thousand Oaks, CA: Sage Publications.

Coleman, E., Bockting, W., Botzer, M., Cohen-Kettenis, P., DeCuypere, G., Feldman, J., … Zucker, K. (2011). Standards of care for the health of transsexual, transgender, and gender-nonconforming people, version 7. *International Journal of Transgenderism, 13*, 165–232. doi:10.1080/15532739.2011.700873

Deogracias, J. J., Johnson, L. L., Meyer-Bahlburg, H. F. L., Kessler, S. J., Schober, J. M., & Zucker, K. J. (2007). The Gender Identity/Gender Dysphoria Questionnaire for Adolescents and Adults. *Journal of Sex Research, 44*, 370–379. doi:10.1080/00224490701586730

de Vries, A. L. C., & Cohen-Kettenis, P. T. (2012). Clinical management of gender dysphoria in children and adolescents: The Dutch approach. *Journal of Homosexuality, 59*, 301–320. doi:10.1080/00918369.2012.653300

Dreger, A. (2009). Gender identity disorder in childhood: Inconclusive advice to parents. *Hastings Center Report, 39*, 26–29.

Drescher, J., Cohen-Kettenis, P. T., & Reed, G. M. (2016). Gender incongruence of childhood in the ICD-11: Controversies, proposal, and rationale. *Lancet Psychiatry, 3*, 297–304. doi:10.1016/S2215-0366(15)00586-6

Drescher, J., & Pula, J. (2014). Ethical issues raised by the treatment of gender-variant prepubescent children. *Hastings Center Report, 44*(Suppl. 4), S17–S22.

Drummond, K. D. (2006). *A follow-up study of girls with gender identity disorder* (Unpublished Master's thesis). Ontario Institute for Studies in Education of the University of Toronto, Toronto, Ontario, Canada.

Drummond, K. D., Bradley, S. J., Peterson-Badali, M., VanderLaan, D. P., & Zucker, K. J. (2018). Behavior problems and psychiatric diagnoses in girls with gender identity disorder: A follow-up study. *Journal of Sex & Marital Therapy, 42*, 172–187. doi:10.1080/0092623X.2017.1340382

Drummond, K. D., Bradley, S. J., Peterson-Badali, M., & Zucker, K. J. (2008). A follow-up study of girls with gender identity disorder. *Developmental Psychology, 44*, 34–45. doi:10.1037/0012-1649.44.1.34

Dunham, Y., & Olson, K. R. (2016). Beyond discrete categories: Studying multiracial, intersex, and transgender children will strengthen basic developmental science. *Journal of Cognition and Development, 17*, 642–665. doi:10.1080/15248372.2016.1195388

Durwood, L., McLaughlin, K. A., & Olson, K. R. (2017). Mental health and self-worth in socially transitioned transgender youth. *Journal of the American Academy of Child and Adolescent Psychiatry, 56*, 116–123. doi:10.1016/j.jaac.2016.10.016

Edwards-Leeper, L., Leibowitz, S., & Sangganjanavanich, V. F. (2016). Affirmative practice with transgender and gender nonconforming youth: Expanding the model. *Psychology of Sexual Orientation and Gender Diversity, 3*, 165–172. doi:10.1037/sgd0000167

Ehrensaft, D. (2012). From gender identity disorder to gender identity creativity: True gender self child therapy. *Journal of Homosexuality, 59*, 337–356. doi:10.1080/00918369.2012.653303

Ehrensaft, D. (2014). Found in transition: Our littlest transgender people. *Contemporary Psychoanalysis, 50*, 571–592. doi:10.1080/00107530.2014.942591

Eisenberg, M. E., Gower, A. L., McMorris, B. J., Rider, G. N., Shea, G., & Coleman, E. (2017). Risk and protective factors in the lives of transgender/gender nonconforming

adolescents. *Journal of Adolescent Health, 61*, 521–526. doi:10.1016/j.jadohealth.2017.04.014

Farrington, D. P. (1991). Longitudinal research strategies: Advantages, problems, and prospects. *Journal of the American Academy of Child and Adolescent Psychiatry, 30*, 369–374. doi:10.1097/00004583-199105000-00003

Fast, A. A., & Olson, K. R. (2018). Gender development in transgender preschool children. *Child Development, 89*, 620–637. doi:10.1111/cdev.12758

Ford, Z. (2017). The pernicious junk science stalking trans kids. *ThinkProgress*. Retrieved from https://thinkprogress.org/transgender-children-desistance-a5caf61fc5c6/

Gelder, M. G., & Marks, I. M. (1969). Aversion treatment in transvestism and transsexualism. In R. Green & J. Money (Eds.), *Transsexualism and sex reassignment* (pp. 383–413). Baltimore, MD: The Johns Hopkins Press.

Green, R. (1987). *The "sissy boy syndrome" and the development of homosexuality*. New Haven, CT: Yale University Press.

Green, R. (2017). To transition or not to transition? That is the question. *Current Sexual Health Reports, 9*, 79–83. doi:10.1007/s11930-017-0106-5

Greenson, R. R. (1964). On homosexuality and gender identity. *International Journal of Psycho-Analysis, 45*, 217–219.

Greenson, R. R. (1966). A transvestite boy and a hypothesis. *International Journal of Psychoanalysis, 47*, 396–403.

Guss, C. E., Williams, D. N., Reisner, S. L., Austin, S. B., & Katz-Wise, S. L. (2017). Disordered weight management behaviors, nonprescription steroid use, and weight perception in transgender youth. *Journal of Adolescent Health, 60*, 17–22. doi:10.1016/j.jadohealth.2016.08.027

Hollingshead, A. B. (1975). *Four factor index of social status* (Unpublished manuscript). Department of Sociology, Yale University, New Haven, CT.

Hsieh, S., & Leininger, J. (2014). Resource list: Clinical care programs for gender-nonconforming children and adolescents. *Pediatric Annals, 43*, 238–244. doi:10.3928/00904481-20140522-11

Jørgenson, C. R. (2006). Disturbed sense of identity in borderline personality disorder. *Journal of Personality Disorders, 20*, 618–644. doi:10.1521/pedi.2006.20.6.618

Jørgenson, C. R. (2010). Identity and borderline personality disorder. *Journal of Personality Disorders, 24*, 344–364. doi:10.1521/pedi.2010.24.3.344

Koehler, A., Eyssel, J., & Nieder, T. O. (2018). Genders and individual treatment progress in (non-)binary trans individuals. *Journal of Sexual Medicine, 15*, 102–113. doi:10.1016/j.jsxm.2017.11.007

Kuvalanka, K. A., Weiner, J. L., Munroe, C., Goldberg, A. E., & Gardner, M. (2017). Trans and gender-nonconforming children and their caregivers: Gender presentations, peer relations, and well-being at baseline. *Journal of Family Psychology, 31*, 889–899. doi:10.1037/fam0000338

Lawrence, A. A. (2010). Sexual orientation versus age of onset as bases for typologies (subtypes) for gender identity disorder in adolescents and adults. *Archives of Sexual Behavior, 39*, 514–545. doi:10.1007/s10508-009-9594-3

Lawrence, A. A. (2017). Autogynephilia and the typology of male-to-female transsexualism: Concepts and controversies. *European Psychologist, 22*, 39–54. doi:10.1027/1016-9040/a000276

Littman, L. (2017). Rapid onset gender dysphoria in adolescents and young adults: A study of parental reports. Manuscript submitted for publication.

Meadow, T. (2011). 'Deep down where the music plays': How parents account for childhood gender variances. *Sexualities, 14*, 725–747. doi:10.1177/1363460711420463

Meadow, T. (in press). *Trans kids: Being gendered in the twenty-first century*. Berkeley, CA: University of California Press.

Menvielle, E. (2012). A comprehensive program for children with gender variant behaviors and gender identity disorders. *Journal of Homosexuality, 59*, 357–368. doi:10.1080/00918369.2012.653305

Menvielle, E., Tuerk, C., & Perrin, E. C. (2005). To the beat of a different drummer: The gender-variant child. *Contemporary Pediatrics, 22*(2), 38–39, 41, 43, 45–46.

Meyer-Bahlburg, H. F. L. (2002). Gender identity disorder in young boys: A parent- and peer-based treatment protocol. *Clinical Child Psychology and Psychiatry, 7*, 360–376. doi:10.1177/1359104502007003005

Olson, K. R. (2016). Prepubescent transgender children: What we do and do not know. *Journal of the American Academy of Child and Adolescent Psychiatry, 55*, 155–156. doi:10.1016/j.jaac.2015.11.015

Olson, K. R., Durwood, L., DeMeules, M., & McLaughlin, K. A. (2016). Mental health of transgender children who are supported in their identities. *Pediatrics, 137*(3), e20153223. doi:10.1542/peds.2015-3223

Olson, K. R., & Enright, E. A. (2017). Do transgender children (gender) stereotype less than their peers and siblings? *Developmental Science*. doi:10.1111/desc.12606.

Olson, K. R., & Gülgöz, S. (2017). Early findings from the transyouth project: Gender development in transgender children. *Child Development Perspectives*. doi:10.1111/cdep.12268.

Olson, K. R., Key, A. C., & Eaton, N. R. (2015). Gender cognition in transgender children. *Psychological Science, 26*, 467–474. doi:10.1177/0956797614568156

Pyne, J. (2014). The governance of gender non-conforming children: A dangerous enclosure. *Annual Review of Critical Psychology, 11*, 80–96.

Pyne, J. (2015, December 17). Discredited treatment of trans kids at CAMH shouldn't shock us. Toronto Star. Retrieved from https://www.thestar.com/opinion/commentary/2015/12/17/discredited-treatment-of-trans-kids-at-camh-shouldnt-shock-us.html

Reed, B., Rhodes, S., Schofield, P., & Wylie, K. (2009). *Gender variance in the UK. Prevalence, incidence, growth and geographic distribution*. London, UK: GIRESB the Gender Identity Research and Education Society. Retrieved from http://www.gires.org.uk/assets/Medpro-Assets/GenderVarianceUK-report.pdf

Richards, C., Bouman, W. P., Seal, L., Barker, M. J., Nieder, T. O., & T'Sjoen, G. (2016). Non-binary or genderqueer

genders. *International Review of Psychiatry, 28*, 95–102. doi:10.3109/09540261.2015.1106446

Ristori, J., & Steensma, T. D. (2016). Gender dysphoria in childhood. *International Review of Psychiatry, 28*, 13–20. doi:10.3109/09540261.2015.1115754

Scholinski, D. (1997). *The last time I wore a dress: A memoir*. New York, NY: Riverhead Books.

Schreier, H., & Ehrensaft, D. (2016). Want to know a child's gender? Ask. *San Francisco Gate*. Retrieved from http://www.sfgate.com/opinion/article/Want-to-know-a-child-s-gender-Ask-6843665.php

Simonoff, E., Jones, C. R., Baird, G., Pickles, A., Happé, F., & Charman, T. (2013). The persistence and stability of psychiatric problems in adolescents with autism spectrum disorders. *Journal of Child Psychology and Psychiatry, 54*, 186–194. doi:10.1111/j.1469-7610.2012.02606.x

Singh, D. (2012). *A follow-up study of boys with gender identity disorder* (Unpublished doctoral dissertation). Ontario Institute for Studies in Education of the University of Toronto, Toronto, Ontario, Canada.

Singh, D., Bradley, S. J., & Zucker, K. J. (2011). Commentary on "an affirmative intervention for families with gender variant children: Parental ratings of child mental health and gender" by Hill, Menvielle, Sica, and Johnson (2010). *Journal of Sex & Marital Therapy, 37*, 151–157. doi:10.1080/0092623X.2011.547362

Singh, D., Deogracias, J. J., Johnson, L. L., Bradley, S. J., Kibblewhite, S. J., Owen-Anderson, A., … Zucker, K. J. (2010). The Gender Identity/Gender Dysphoria Questionnaire for Adolescents and Adults: Further validity evidence. *Journal of Sex Research, 47*, 49–58. doi:10.1080/00224490902898728

Singh, D., McMain, S., & Zucker, K. J. (2011). Gender identity and sexual orientation in women with borderline personality disorder. *Journal of Sexual Medicine, 8*, 447–454. doi:10.1111/j.1743-6109.2010.02086.x

Soares, C. (Ed.). (2001). *The Oxford dictionary of current English* (3rd ed.). Oxford, UK: Oxford University Press.

Steensma, T. D., Biemond, R., de Boer, F., & Cohen-Kettenis, P. T. (2011). Desisting and persisting gender dysphoria after childhood: A qualitative follow-up study. *Clinical Child Psychology and Psychiatry, 16*, 499–516. doi:10.1177/1359104510378303

Steensma, T. D., McGuire, J. K., Kreukels, B. P. C., Beekman, A. J., & Cohen-Kettenis, P. T. (2013a). Factors associated with desistence and persistence of childhood gender dysphoria: A quantitative follow-up study. *Journal of the American Academy of Child and Adolescent Psychiatry, 52*, 582–590. doi:10.1016/j.jaac.2013.03.016

Steensma, T. D., van der Ende, J., Verhulst, F. C., & Cohen-Kettenis, P. T. (2013b). Gender variance in childhood and sexual orientation in adulthood: A prospective study. *Journal of Sexual Medicine, 10*, 2723–2733. doi:10.1111/j.1743-6109.2012.02701.x

Tannehill, B. (2016). The end of the desistance myth. *Huffpost*. Retrieved from https://www.huffingtonpost.com/brynn-tannehill/the-end-of-the-desistance_b_8903690.html

Temple Newhook, J., Tosh, J., Winters, K., Pyne, J., Feder, S., Holmes, C., … Jamieson, A. (2018). A critical commentary on follow-up studies and "desistance" theories about transgender and gender non-conforming children. *International Journal of Transgenderism*, *19*(2). doi:10.1080/15532739.2018.1456390

Tosh, J. (2011). 'Zuck off'! A commentary on the protest against Ken Zucker and his 'treatment' of childhood gender identity disorder. *Psychology of Women Section Review, 13*(1), 10–16.

Turban, J. L. (2017). Transgender youth: The building evidence base for early social transition [Editorial]. *Journal of the American Academy of Child and Adolescent Psychiatry, 56*, 101–102.

Turban, J. L., & Ehrensaft, D. (2017). Gender identity in youth: Treatment paradigms and controversies. *Journal of Child Psychology and Psychiatry*. doi:10.1111/jcpp.12833.

Vanderburgh, R. (2009). Appropriate therapeutic care for families with pre-pubescent transgender/gender-dissonant children. *Child and Adolescent Social Work Journal, 26*, 135–154. doi:10.1007/s10560-008-0158-5

Verhulst, F. C., & Althaus, M. (1988). Persistence and change in behavioral/emotional problems reported by parents of children aged 4–14: An epidemiological study. *Acta Psychiatrica Scandinavia, 339*(Suppl.), 1–28. doi:10.1111/j.1600-0447.1988.tb10567.x

Wallien, M. S. C., & Cohen-Kettenis, P. T. (2008). Psychosexual outcome of gender dysphoric children. *Journal of the American Academy of Child and Adolescent Psychiatry, 47*, 1413–1423. doi:10.1097/CHI.0b013e31818956b9

Wallien, M. S. C., Quilty, L. C., Steensma, T. D., Singh, D., Lambert, S. L., Leroux, A., … Zucker, K. J. (2009). Cross-national replication of the Gender Identity Interview for Children. *Journal of Personality Assessment, 91*, 545–552. doi:10.1080/00223890903228463

Wilson, B. D. M., Choi, S. K., Herman, J. L., Becker, T. L., & Conron, K. J. (2017). *Characteristics and mental health of gender nonconforming adolescents in California*: *Findings from the 2015–2016 California Health Interview Survey*. Los Angeles, CA: The Williams Institute and UCLA Center for Health Policy Research. Retrieved from https://www.scribd.com/document/367202210/CHIS-Transgender-Teens-FINAL

Wing, J. K., Bebbington, P., & Robins, L. N. (Eds.) (1981). *What is a case? The problem of definition in psychiatric community surveys*. London: Grant McIntyre.

Wong, W., & Drake, S. J. (2017). A qualitative study of transgender children with early social transition: Parent perspectives and clinical implications. *PEOPLE: International Journal of Social Sciences, 3*, 1970–1985.

Zucker, K. J. (1992). Gender identity disorder. In S. R. Hooper, G. W. Hynd, & R. E. Mattison (Eds.), *Child psychopathology: Diagnostic criteria and clinical assessment* (pp. 305–342). Hillsdale, NJ: Erlbaum.

Zucker, K. J. (2003, September). *Persistence and desistance of gender identity disorder in children* [Discussant]. Paper presented at the meeting of the Harry Benjamin International Gender Dysphoria Association, Gent, Belgium.

Zucker, K. J. (2005). Gender identity disorder in children and adolescents. *Annual Review of Clinical Psychology, 1*, 467–492. doi:10.1146/annurev.clinpsy.1.102803.144050

Zucker, K. J. (2008). On the "natural history" of gender identity disorder in children [Editorial]. *Journal of the American Academy of Child and Adolescent Psychiatry, 47*, 1361–1363. doi:10.1097/CHI.0b013e31818960cf

Zucker, K. J. (2010). The DSM diagnostic criteria for gender identity disorder in children. *Archives of Sexual Behavior, 39*, 477–498. doi:10.1007/s10508-009-9540-4

Zucker, K. J. (2017, February). Gender variations during childhood. In *Development of gender variations: Features and factors* (Chair: H. F. L. Meyer-Bahlburg). Symposium conducted at the meeting of the U.S. Professional Association of Transgender Health, Los Angeles, CA.

Zucker, K. J., & Bradley, S. J. (1995). *Gender identity disorder and psychosexual problems in children and adolescents*. New York, NY. Guilford Press.

Zucker, K. J., Bradley, S. J., Doering, R. W., & Lozinski, J. A. (1985). Sex-typed behavior in cross-gender-identified children: Stability and change at a one-year follow-up. *Journal of the American Academy of Child Psychiatry, 24*, 710–719. doi:10.1016/S0002-7138(10)60114-8

Zucker, K. J., Bradley, S. J., Lowry Sullivan, C. B., Kuksis, M., Birkenfeld-Adams, A., & Mitchell, J. N. (1993). A gender identity interview for children. *Journal of Personality Assessment, 61*, 443–456. doi:10.1207/s15327752jpa6103_2

Zucker, K. J., Green, R., Bradley, S. J., Williams, K., Rebach, H. M., & Hood, J. E. (1998). Gender identity disorder of childhood: Diagnostic issues. In T. A. Widiger, A. J. Frances, H. A. Pincus, R. Ross, M. B. First, W. Davis, & M. Kline (Eds.), *DSM-IV sourcebook* (Vol. 4) (pp. 503–512). Washington, DC: American Psychiatric Association.

Zucker, K. J., & VanderLaan, D. P. (2016). The self in gender dysphoria: A developmental perspective. In M. Kyrios, R. Moulding, G. Doron, S. S. Bhar, M. Nedeljkovic, & M. Mikulincer (Eds.), *The self in understanding and treating psychological disorders* (pp. 222–232). Cambridge, UK: Cambridge University Press.

Zucker, K. J., Wood, H., Singh, D., & Bradley, S. J. (2012). A developmental, biopsychosocial model for thetreatment of children with gender identity disorder. *Journal of Homosexuality, 59*, 369–397. doi:10.1080/00918369.2012.653309

Zucker, K. J., Wood, H., & VanderLaan, D. P. (2014). Models of psychopathology in children and adolescents with gender dysphoria. In B. P. C. Kreukels, T. D. Steensma, & A. L. C. de Vries (Eds.), *Gender dysphoria and disorders of sex development: Progress in care and knowledge* (pp. 171–192). New York, NY: Springer.

Exhibit D

APS Procedural Directive PB1, *"Development, Revision, and Adoption of Board Policies and Administrative Procedural Directives"*

Albuquerque Public Schools

PB1 Development, Revision, and Adoption of Board Policies and Administrative Procedures

Old version: **Administration, Development and Revision of Board Policies and Administrative Procedural Directives** < https://www.aps.edu/about-us/policies-and-procedures/procedural-directives/b.-school-board-governance-and-operations/administration-development-and-revision-of-board-policies-and-administrative-procedural-directives>

Policies are the responsibility of the Board of Education. Creating and adopting district policies are among the primary powers and duties of the board.

Administrative procedures (formerly called procedural directives) are the responsibility of the superintendent or designee. They outline the operational processes required to implement district policies. Administrative procedures require approval from the superintendent in consultation with senior leadership.

Developing or Making Significant Changes to a Policy or Procedure

When an issue prompts the need for a new policy or procedure, the superintendent will assign an administrative leader to oversee its development. If an existing policy or procedure needs significant changes, the leader whose position is listed on the policy or procedure will oversee the changes.

The administrative leader or designee will work with the policy analyst to research the topic and identify existing district documentation, relevant federal and state laws, and state rules and regulations. The policy analyst may also refer to the National School Boards Association and New Mexico School Boards Association for suggested language.

The administrative leader or designee will form a committee, inviting those in the district and/or community with expertise in the matter to serve along with the policy analyst. The committee will use research, analysis, and data to formulate ways to address the issue. The policy analyst will act as a liaison with district leadership, department directors, and/or school leaders who may be affected by the policy or procedure, bringing suggestions and concerns to the committee.

The administrative leader or designee and the policy analyst will draft the policy or procedure based on input from the committee. The policy analyst will research all cross-references and check language for legal concerns, working with legal counsel when necessary. The committee will review, discuss, and possibly revise the draft.

All written policies and procedures will include:

- Title
- Narrative
- Administrative position responsible for the policy or procedure
- Department director(s) affected
- Legal, board policy, administrative procedure, and district forms cross-references
- National School Boards Association Classification
- Approval, review, and revision dates

Once the committee agrees on a draft policy or procedure, it will be posted on the APS website for public comment. Comments may be emailed to the policy analyst, who will review feedback from staff, students, families, and the community. The leader and policy analyst will determine the length of time for

public comment. Feedback will be considered but may not be reflected in the final version of the policy or procedure.

The administrative leader and policy analyst will take the final committee draft of the policy or procedure to the superintendent and cabinet for review, possible revisions, and approval. The policy analyst is responsible for making changes agreed upon by cabinet. The policy or procedure may be returned to the committee for additional review if deemed necessary.

Once the superintendent and cabinet approve a policy or procedure, the policy analyst will submit it to legal counsel for review. Should the attorney suggest changes, the policy or procedure will again go before the superintendent and cabinet for review and approval.

Once a procedure is approved by the superintendent, cabinet, and legal counsel, it will be posted to the APS website and shared with those affected by it. The Board Services Office will maintain digital copies of any relevant documentation.

Procedures do not need board approval.

Policy Adoption Process

Once the final draft of a new or significantly changed policy has been approved by the superintendent, cabinet, and legal counsel, the policy analyst will work

with the chair of the Board of Education Policy Committee on adding it to a meeting agenda.

New or significantly changed policies go through the approval process outlined in the **APS Board of Education's Governance Manual, Section 4J: Board Policy Scope and Development.** < https://www.aps.edu/about-us/policies-and-procedures/policies/b.-board-of-education-governance-and-operations/aps-board-of-education-governance-manual>

Once a new policy is approved, the administrative leader and policy analyst will work on creating a related procedure. Once a significantly changed policy is approved, the administrative leader and policy analyst will work on updating the related procedure. New and updated procedures must go to the superintendent and cabinet for final approval.

The final policy and related procedures will be posted on the APS website. The Board Services Office will maintain digital copies of any relevant documentation.

When necessary due to an emergency, and after consultation with the leadership team, the superintendent has the right to operate outside of this procedure.

Administrative Position:

Superintendent

Board of Education Services Office Executive Director

References:

Legal Cross Reference:

§22-5-4 NMSA 1978

Board Policy Cross Reference:

The related board policy (**BG Board of Education Policy Development, Adoption, Revision and Revocation** < https://www.aps.edu/about-us/policies-and-procedures/policies/b.-board-of-education-governance-and-operations/bg-board-of-education-policy-development-adoption-revision-and-revocation>) was archived with the adoption of the Albuquerque Public Schools Board of Education Governance Manual

NSBA/NEPN Classification: BD

Introduced: March 12, 2010
Reviewed: May 14, 2010
Approved: June 25, 2010
Reviewed: November 11, 2015
Revised: **November 18, 2015**
< https://www.aps.edu/about-us/old-policies-and-procedural-directives/old-procedural-directives/c-general-school-administration/copy_of_development-and-revision-of-board-policies-and-administrative-procedural-directives-Septebmer-2018-Revision> Reviewed: September 12, 2018
Revised: **September 19, 2018**

< https://www.aps.edu/about-us/old-policies-and-procedural-directives/old-procedural-directives/b-school-board-governance-and-operations/administration-development-and-revision-of-board-policies-and-administrative-procedural-directives-september-2018-revision> Reviewed: July 7, 2022
Revised: July 20, 2022

Reviewed: February 23, 2024

Revised: March 5, 2024

Exhibit E

Procedural Directive PJ30*, titled "Non-Discrimination for Students: Gender Identity and Expression,"*

Albuquerque Public Schools

PJ30 Non-Discrimination for Students: Gender Identity and Expression

General Provisions

This procedural directive is meant to advise school site staff and administration regarding transgender and gender non-conforming student concerns to create a safe learning environment for all students and to ensure that every student has equal access to all components of their education programs and activities.

Gender Identity Policy and Procedural Directive

- Questions and Answers (PDF)

The student shall be treated the same as all other students in the group of his or her affirmed gender in all respects of the education programs and activities offered by the Albuquerque Public Schools.

Definitions

For purposes of this procedural directive, “gender expression” refers to external cues that one uses to represent or communicate one’s gender to others, such as behavior, clothing, hairstyles, activities, voice, mannerisms, or body characteristics.

For purposes of this procedural directive, “gender identity” refers to one’s internal sense of gender, which may be different from one’s assigned sex at birth, and which is consistently asserted, or for which there is other evidence that the gender identity is sincerely held as part of the student’s core identity.

For purposes of this procedural directive, “gender non-conformity” refers to one’s gender expression, gender characteristics, or gender identity that does not conform to gender stereotypes.

For purposes of this procedural directive, “gender stereotypes” refers to stereotypical notions of masculinity and femininity, including expectations of how boys or girls represent or communicate one’s gender to others, such as behavior, clothing, hairstyles, activities, voice, mannerisms, or body characteristics.

For purposes of this procedural directive, “gender transition” refers to the experience by which a transgender person goes from living and identifying as one’s assigned sex to living and identifying as the sex consistent with one’s gender identity. A gender transition often includes a “social transition,” during which an individual begins to live and identify as the gender consistent with

the individual's gender identity, with or without certain medical treatments or procedures.

For purposes of this procedural directive, "gender-based discrimination" is a form of sex discrimination, and refers to differential treatment or harassment of a student based on the student's sex, including gender identity, gender expression, and gender nonconformity with gender stereotypes that result in the denial or limitation of education services, benefits, or opportunities. Conduct may constitute gender-based discrimination regardless of the actual or perceived sex, gender identity, or sexual orientation of the persons experiencing or engaging in the conduct.

For purposes of this procedural directive, "gender-specific facilities" refers to facilities and accommodations used by students at school or during school-sponsored activities and trips, and include, but are not limited to, restrooms, locker rooms, and overnight facilities.

For purposes of this procedural directive, "sex assigned at birth" or "assigned sex" refers to the gender designation listed on one's original birth certificate.

For purposes of this procedural directive, "transgender" describes an individual whose gender identity is different from the individual's assigned sex at birth. For example, "Transgender boy" and "transgender male" refer to an individual assigned the female sex at birth who has a male gender identity. An individual can express or assert a transgender gender identity in a variety of ways, which may but do not always include specific medical treatments or procedures. Medical treatments or procedures are not considered a prerequisite for transgender recognition. For purposes of this policy, a "transgender student" is a student who consistently asserts a gender identity different from the student's assigned sex at birth or for which there is

documented legal or medical evidence that the gender identity is sincerely held as part of the student's core identity.

Prohibition on Gender-Based Discrimination and Harassment

According to Department of Education guidance, transgender students shall be protected from discrimination and harassment under Title IX. It specifically states "Title IX's sex discrimination prohibition extends to claims of discrimination based on gender identity or failure to conform to stereotypical notions of masculinity or femininity, and the Office of Civil Rights accepts such complaints for investigation."

State statute prohibits employers from discriminating based on gender identity.

Board of Education policy prohibits discrimination based on gender identity.

These prohibitions affirm that transgender students shall be protected from discrimination and harassment in the public school system. District employees shall respond appropriately to ensure that schools are free from any such discrimination or harassment.

Each school and the district shall ensure that students who are transgender and gender nonconforming have a safe school environment. This includes ensuring that any incident of discrimination, harassment, or violence is given

immediate attention, including investigating the incident, taking appropriate corrective action, and providing students and staff with appropriate resources. Complaints alleging discrimination or harassment based on a person's actual or perceived transgender status or gender nonconformity shall to be handled in the same manner as other discrimination or harassment complaints through the Equal Opportunity Services Office and the district support team.

Student Transfers

The goal shall be to maintain the continuity of the student's education in a safe learning environment. In general, schools shall aim to keep students who are transgender and gender nonconforming at the original school site. Administrative transfers shall not be a school's first response to harassment and shall be considered only when necessary for the protection or personal welfare of the transferred student or when requested by the student or the student's parent/legal guardian and approved by a member of the superintendent's leadership team pursuant to the administrative procedure. The student or the student's parent/legal guardian shall consent to any such transfer prior to an administrative transfer taking place.

Names, Pronouns, and Official Records

Names/Pronouns

Students shall have the right to be addressed by a name and pronoun corresponding to their gender identity that is asserted at school. Students shall not be required to obtain a court-ordered name, a gender change, or to change their official records before they may be addressed by the name and pronoun that corresponds to their gender identity. This procedural directive may not prohibit inadvertent slips or honest mistakes, but it shall apply to an intentional and persistent refusal to respect a student's gender identity.

The requested name and gender identity shall be included in the student information system, in addition to the student's legal name and sex assigned at birth, to inform teachers of the name and pronoun to use when addressing the student.

Transgender and gender non-conforming students shall have the right to discuss and express their gender identity and expression openly and to decide when, with whom, and how much to share private information. The fact that a student chooses to disclose his or her transgender status to staff or other students shall not authorize school staff to disclose other medical information about the student. When contacting the parent/legal guardian of a transgender student, school staff shall use the student's legal name and the pronoun corresponding to the student's gender assigned at birth unless the student or parent/ legal guardian has specified otherwise.

Official Records

Pursuant to state statute and regulation, Albuquerque Public Schools is required to maintain a mandatory permanent student record that includes the name of the student, as well as the student's sex.

School staff or administrators are required by law to use students' legal name and gender in state academic records, such as standardized testing, but school staff and administrators shall use students' preferred name and gender in all internal records, documents, and interactions.

Albuquerque Public Schools shall change a student's official records to reflect a change in legal name or gender only upon receipt of documentation (court order or birth certificate) that such legal name and/or gender have been changed pursuant to New Mexico legal requirements.

Albuquerque Public Schools shall ensure that any school records containing the student's birth name or reflecting the student's assigned sex, if any, are treated as confidential, personally identifiable information; are maintained separately from the student's records; and are not disclosed to any district employees, students, or others without the express written consent of the student's parent/legal guardian or the student after the student turns eighteen (18) or is emancipated.

In situations where school staff or administrators are required by law to use or to report the legal name or biological sex of a student who is transgender but whose official record has not been amended, such as for purposes of standardized testing, school staff and administrators shall adopt practices to avoid the inadvertent disclosure of such confidential information.

Access to Gender-Segregated Activities and Areas

General Statement on Facilities

The student shall be provided access to designated gender-specific facilities at school at all district-sponsored activities, including overnight events and extracurricular activities on and off campus, consistent with the student's gender identity. The student, however, may request access to private facilities based on privacy, safety, or other concerns.

Restroom Accessibility

Students shall have access to the restroom that corresponds to their gender identity at school. Where available, a single-stall bathroom may be used by any student who desires increased privacy, regardless of the underlying reason. The use of such a single-stall bathroom shall be a matter of choice for a student, and no student shall be compelled to use such bathroom.

Locker Room Accessibility

Transgender students shall have access to the locker room of their gender identity and shall not be forced to use the locker room corresponding to their sex assigned at birth. In locker rooms that involve undressing in front of others, transgender students who want to use the locker room corresponding

to their gender identity shall be provided with the best possible available accommodation. Based on availability and appropriateness to address privacy concerns, such accommodations could include, but are not limited to:

- Use of a private area in the public area (e.g., a bathroom stall with a door, an area separated by a curtain, a PE instructor's office in the locker room);
- A separate changing schedule (either utilizing the locker room before or after the other students);
- Use of a nearby private area (e.g., a nearby restroom a nurse's office).

Physical Education Classes and Intramural and Interscholastic Athletics

All students shall be permitted to participate in physical education classes and intramural sports in a manner consistent with their gender identity. Furthermore, unless precluded by state interscholastic association policies, all students shall be permitted to participate in interscholastic athletics in a manner consistent with their gender identity.

Gender Segregation in Other Areas

Generally, schools should evaluate all gender-based activities, rules, policies, and practices — including, but not limited to, classroom activities, school

ceremonies, and school photos — and maintain only those with a clear and sound pedagogical purpose. Students shall be permitted to participate in any such activities or conform to any such rule, policy, or practice consistent with their gender identity.

As a general rule, in any other circumstances where students are separated by gender in school activities (e.g., class discussions, field trips), students shall be permitted to participate in accordance with their gender identity.

Dress Codes

Schools may enforce dress codes pursuant to administrative procedures. Students shall have the right to dress in accordance with their gender identity within the constraints of the dress codes adopted by the district and the school. School staff shall not enforce a school's dress code more strictly against transgender and gender non-conforming students than other students.

Professional Development

Albuquerque Public Schools shall train all certified district-level and school-based administrators regarding the district's obligations to prevent and address gender-based discrimination and implement the policies, procedures, regulations, and best practices for creating a nondiscriminatory school environment for transgender students. Throughout each school year, site

administrators shall provide this information to all faculty and staff during existing trainings, meetings, and other appropriate opportunities.

Bullying Prevention and Sexual Harassment Programs

The district will provide age-appropriate instruction to all students on gender-based discrimination and will provide examples of prohibited conduct, including harassment, in various school-related contexts, including the types of conduct prohibited with respect to sex-specific facilities and elsewhere at school as part of its bullying prevention and sexual harassment programs.

Individual Support Plan Meeting

Albuquerque Public Schools shall notify the student and his/her parents that they may, at any point during the student's enrollment in the Albuquerque Public Schools, request through the Equal Opportunity Services Office an individual support plan meeting to ensure the student has access and opportunity to participate in all programs and activities and is otherwise

protected from gender-based discrimination at school. If the district receives such a request, it will convene a support team that will:

- Include, at a minimum, the student, his/her parents, the principal, counselor, District Title IX Director, if requested, an advocate or representative of the parents' choice (if any), a medical professional of the parents' choice (if any), personnel familiar with the issues (as needed), and relevant site personnel familiar with the student;

- Develop a student-specific support plan to provide the student with safe and equitable access to all school and Albuquerque Public Schools facilities and activities, addressing any particular issues raised by the student or his/her parents;

- Document its meetings, recommendations, and decisions, including, but not limited to, the date and location of each meeting, the names and positions of all participants, the basis for its recommendations and decisions, and supporting third-party opinions and information considered and/or relied upon in the meeting; and

- At least once each school year and at any time upon the request of the student or his/her parents, review the student's particularized circumstances to determine whether existing arrangements related to the student's gender identity, gender transition, or transgender status are meeting his/her educational needs and ensuring that the student has equal access to and equal opportunity to participate in the district's education programs and activities. Once constituted,

the individual support plan shall be in place for the remainder of the student's enrollment in the district or until his/her parents request in writing that it be terminated.

Administrative Position:

- Chief Academic Officer

Department Director:

- Director of Equity/Equal Opportunity Services Office

References:

Legal Cross Ref.:

- §28-1-7 NMSA 1978
- NMAC 1.20.2.108

Board Policy Cross Ref.:

- **AC Nondiscrimination** < https://www.aps.edu/about-us/policies-and-procedures/policies/a-foundations-and-basic-commitments/a.03-nondiscrimination>

Procedural Directive Cross Ref:

- Students Attending a School Outside Their Attendance Boundaries
- Student Dress

NSBA/NEPN Classification: ACA

Introduced: March 9, 2016
Reviewed: April 15, 2016
Reviewed: April 29, 2016
Adopted: May 16, 2016

Exhibit F

Gender Identity Policy and Procedural Directive

Gender Identity Policy and Procedural Directive

Questions and Answers

In order to ensure compliance with federal law, APS has implemented a procedural directive on gender identity and expression. The following information is provided as a summary of commonly asked questions regarding the APS policy and procedural directive on nondiscrimination based upon gender identity and expression. For more detailed information, please refer to the Non-Discrimination for Students: Gender Identity and Expression Procedural Directive.

Q Why is a policy and procedure on gender identity and expression needed?

A **Albuquerque Public Schools (APS) enrolls students who are transgender, as well as students who are gender non-conforming, and we need to ensure that the students are safe and respected and that we are following consistent practices (names, pronouns, records, etc.) across the District. National statistics show that transgender students are at a much greater risk of dropping out of school due to safety reasons than their peers.**

Q Why has it been decided that a policy and procedural directive is needed *now*?

A **The APS Board of Education added gender identity to its non-discrimination policy in 2005. However, procedures detailing how to ensure non-discrimination and harassment based on gender identity were not established, at that time. In 2014, the United States Department of Education expanded Title IX stating that "Title IX's sex discrimination prohibition extends to claims of discrimination based on gender identity or failure to conform to stereotypical notions of masculinity or femininity and the Office of Civil Rights accepts such complaints for investigation." Due to the expansion of Title IX, APS needs to have procedures in place to ensure consistency across the District and compliance with federal law.**

Q Why should transgender students have special rights?

A **Transgender students are not being given special rights. APS needs to ensure that transgender students are treated the same as all other students in the group of his or her affirmed gender in all respects of the education programs and activities offered by the Albuquerque Public Schools.**

Q What areas are covered in the procedural directive?

A **Definitions, names, pronouns, official records, gender segregated facilities, dress codes, bullying prevention and sexual harassment programs, and support team are the different topics addressed in the new procedural directive. You may view the procedural directive for additional information about each topic.**

Q Why should a transgender student be allowed to use the bathroom/locker room that doesn't align with the biological sex?

A **Transgender students are living as the gender with which they identify. This means that they are presenting and expressing themselves as the gender that doesn't correspond to their biological sex. Just as having a girl go into a boys' bathroom/locker room would be very disruptive, it would be disruptive for a transgender girl to go into a boys' bathroom as that person appears as, and lives as, a girl.**

Q Don't transgender students say they are transgender just so they can go into the other bathroom/locker room?

A **Absolutely not. Being forced to use the bathroom/locker room of their biological sex is anxiety provoking and traumatic as transgender students don't fit in there, and it is often a very unsafe place for them. It isn't unusual for transgender students not to use the bathroom all day and end up with urinary tract infections. Their goal is to go into a bathroom/locker room without drawing attention to themselves, use the facility, and get out safely.**

Q What happens if a student uses the bathroom/locker room that is not authorized?

A **Any student who enters a bathroom/locker room not authorized, willfully disregarding school rules, would be subject to disciplinary procedures.**

Q How do I find out if my school has any transgender students who are using the bathroom/locker room of the gender with which they identify?

A **Information about a student's gender status, legal name, or gender assigned at birth may constitute confidential medical or educational information. Disclosing this information to other students, their parents, or other third parties may violate privacy laws, such as the federal Family Education Rights and Privacy Act (FERPA). School employees may not disclose a student's transgender or gender nonconforming status to others unless the school is (1) legally required to do so or (2) the student has authorized such disclosure.**

Q How do I talk with my child about gender identity?

A **Parents/guardians can explain that some people are born with a strong realization that they are in a body that doesn't match who they are, meaning that they feel like a girl but have boy parts or vice versa. If someone consistently feels that way, that person might decide to start dressing and living the way they feel who they are inside. To learn more about people who are transgender or gender non-conforming, a helpful resource is the Transgender Resource Center of New Mexico (www.trgrcnm.org). You can check with TGRCNM about attending one of their trainings on gender identity. Online resources, such as www.genderspectrum.org, also provide valuable information about gender identity.**

Q If a parent or student is uncomfortable with their student sharing a bathroom with a transgender student, what should be done?

A **The student who is uncomfortable may be offered a single-stall, gender-neutral facility. Learning more about the issue can also take away fear or discomfort of the unknown.**

Q I'm a principal and I have a student who wants the name and gender identity to be entered into the Student Information System so that is how the student is known at school, but there has been no documentation for an official name change or change on the birth certificate. How should I handle that?

A **The Student Information Systems staff is currently working with Synergy to create a "public" screen (for employees) and a "private" screen (highly confidential and disclosed only with written consent). The official name and biological sex would be entered on the private screen and used in those situations required by law (such as standardized testing) whereas the public screen would be the one used in all other cases so that the student is being identified according to the gender identity.**

Exhibit G

"Pronouns & Gender Neutral Language" Training Slides

Please do not use our slides to educate others!

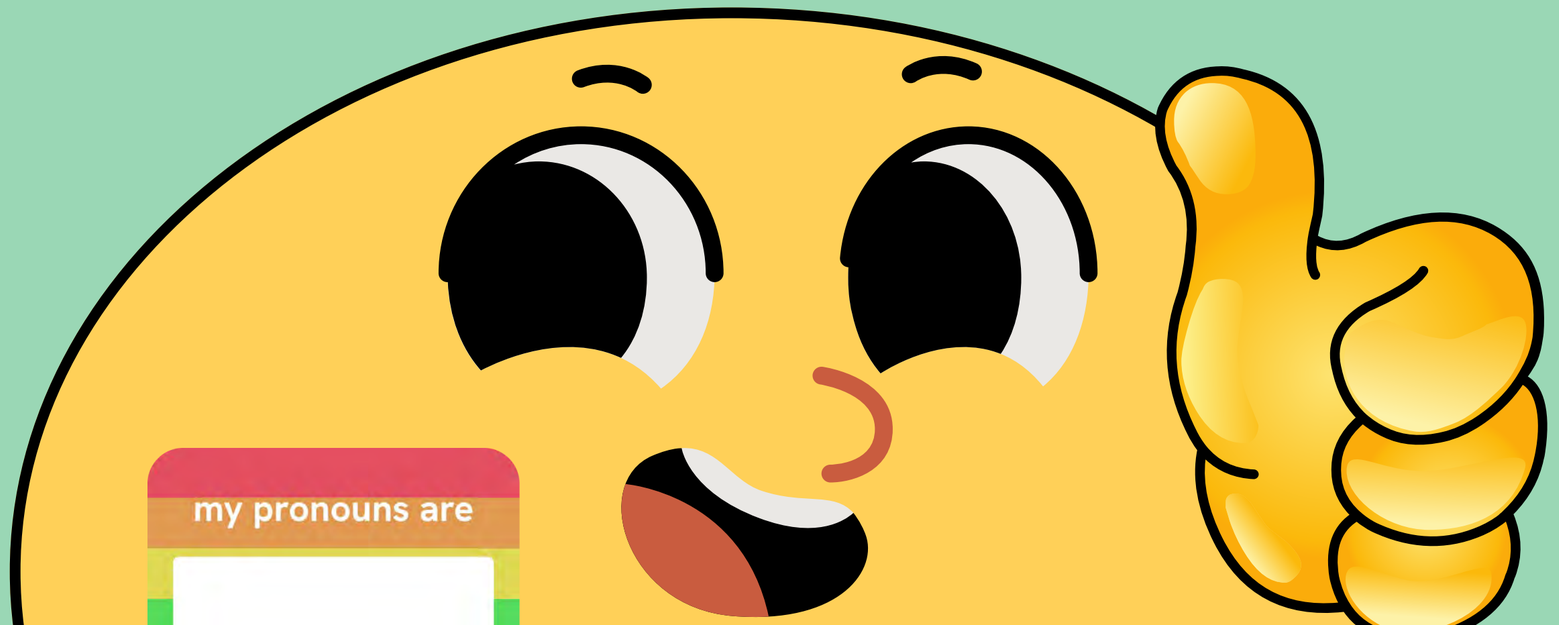
If you have a group that needs training reach out to education@tgrcnm.org


TGRC
NM
PRONOUNS & GENDER
NEUTRAL LANGUAGE

LEARNING OBJECTIVES

AS A RESULT OF ATTENDING THIS TRAINING, LEARNERS WILL BE ABLE TO...

- Define and provide examples of English pronouns.
- Summarize why and for whom sharing one's personal pronouns is beneficial.
- Develop comfortable ways to share your own personal pronouns.
- Discuss additional examples of how we gender individuals in English.
- Practice gender-neutral language and describing individuals with various personal pronouns.



ADRIEN LAWYER (HE/HIM)
Co-Director

ERIK WOLF (HE/HIM)
Co-Director

TRANSGENDER RESOURCE CENTER OF NEW MEXICO

Founded in 2007 to support, assist, educate, and advocate for the transgender & gender non-conforming people of New Mexico, and their families and loved ones.

SERVICES

STATEWIDE TRANS SERVICES
INPERSON OR VIRTUALLY

Support Groups
(x1 InPerson & x1 Virtual Monthly)
Name Change & Identity Documents
Emergency Financial Assistance
Case Navigation & Referrals
Jail & Prison Support
Trans Specific Items
Provider Directory
Counseling

ON SITE SERVICES FOR EVERYBODY

HIV Testing
Syphilis Testing
Needle Exchange
Harm Reduction
Narcan
Clothing
Food

YOUTH SERVICES

Case Navigation
Parent & Youth Support Groups
School Administration Support
Food
Clothing
Entertainment System & Library

ON SITE TRANS SERVICES

Food Pantry & Clothing Closet
Computer Lab & Library
Laundry & Shower Facilities
Transitional Housing
Mailing Address
Outside Orgs. Collaboration

OUTREACH

ADVOCACY

INDIVIDUAL AND COMMUNITY

Local Policy
Albuquerque Public Schools,
Bernalillo County YSC

Legislative
2019 Vital Records Modernization Act
2023 Name Change Modernization Act

4,000+ trainings since 2008

EDUCATION

TCF, TRANS 201, PRONOUNS & GENDER NEUTRAL LANGUAGE, ADVOCACY

- First responders
- Law enforcement
- Detention facilities
- FBI Albuquerque
- Public & private schools
- Businesses & faith communities
- Private & public health facilities

TRAININGS WE OFFER

TRANSGENDER CULTURAL FLUENCY

Our Transgender Cultural Fluency Training lays the foundation for participants to gain a better understanding of what it means to be transgender, clarify common misconceptions about transgender people, become familiar with the challenges transgender communities face, and learn ways to be a strong and engaged advocate for transgender people.

TRANS 201

Have you attended Transgender 101 with TGRCNM and want to learn more? Come join us for Transgender 201! We will do a very brief review of assigned sex, gender and sexual orientation. Then we will take a deeper dive into nonbinary people, intersectionality and how to be a good ally. We will even touch on folks who detransition, what it means, and why people make that choice.

PRONOUNS & GENDER NEUTRAL LANGUAGE

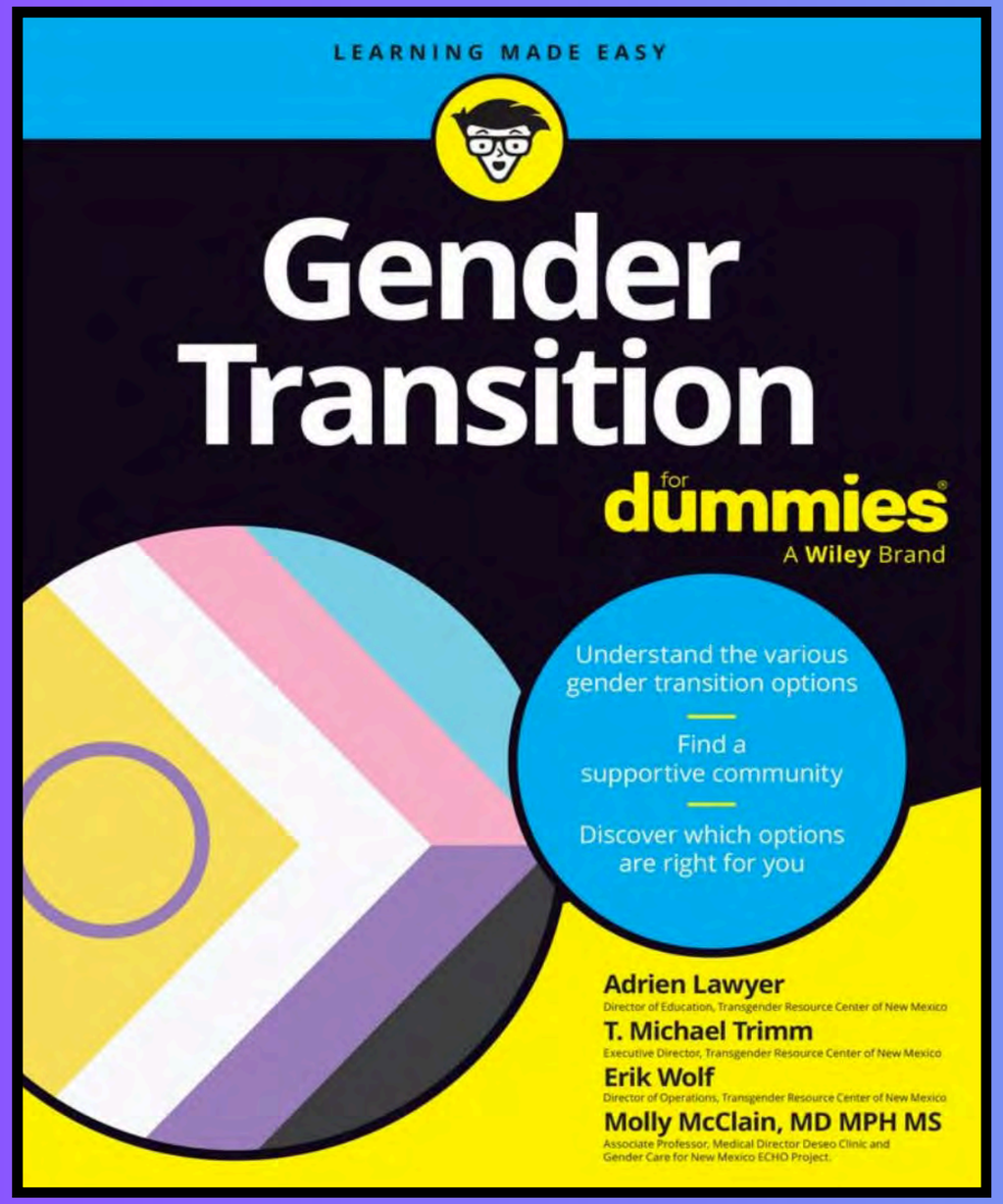
You have learned with us through our Transgender Cultural Fluency and Trans 201 training, now join us as we dive into pronouns and gender neutral language. We know that correct names and pronouns are actual suicide prevention with trans and non-binary people but we also know that this is a huge shift for most of us. We will talk about how to change our language and we'll even have time to practice together!

PANELS

Our volunteer presenters bureau will share their knowledge in a curated 90 minute Q&A format from their varied prespectives as transgender, non-binary, as parents of gender variant folks, or as partners. Particular topics of interest can be additionally specified to explore such as anti-bullying, instructional healthcare/interaction 'need to know' information, child rearing, parenting, employment, relationships, etc.

ADVOCACY TRAINING

'Train the People' will give participants an overview of various target demographics, their familiarity and support for trans people in New Mexico, instruction on how to most effectively relate with people and communicate message via storytelling and other frameworks as well as advice on how to deal with the media, what to do and what not to do, to be an advocate for trans rights.



WE'VE WRITTEN A BOOK!

- For ongoing questions
- Logistical help
- Advice
- History
- ...and more!

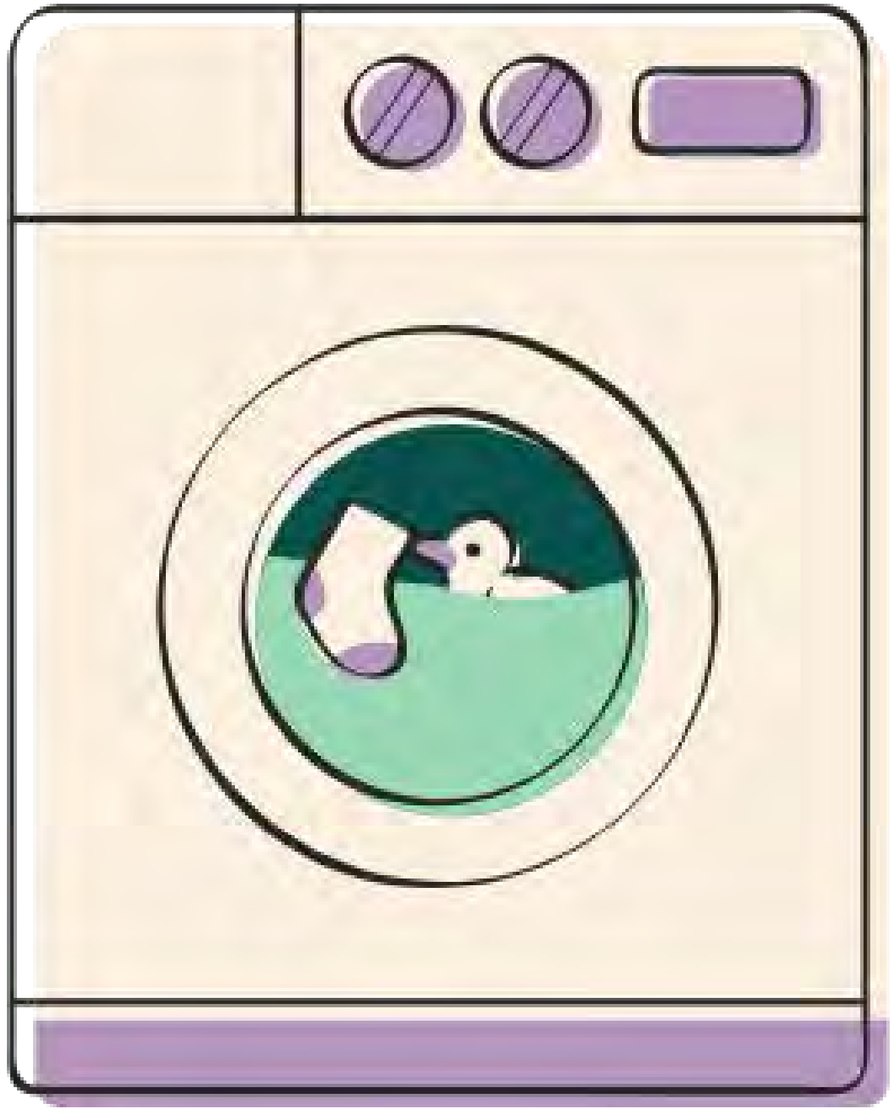
HOUSEKEEPING

There are no bad questions - This is about learning and doing better!

This training comes from real events in the trainers life or the lives of people they know.

There will be Genital Talk.

No scheduled break; please take care of your needs!



INTROS:

HELLO
my name is

ADRIEN LAWYER
PRONOUNS: HE/HIM/HIS
QUESTIONS: What are yours?

HELLO
my name is

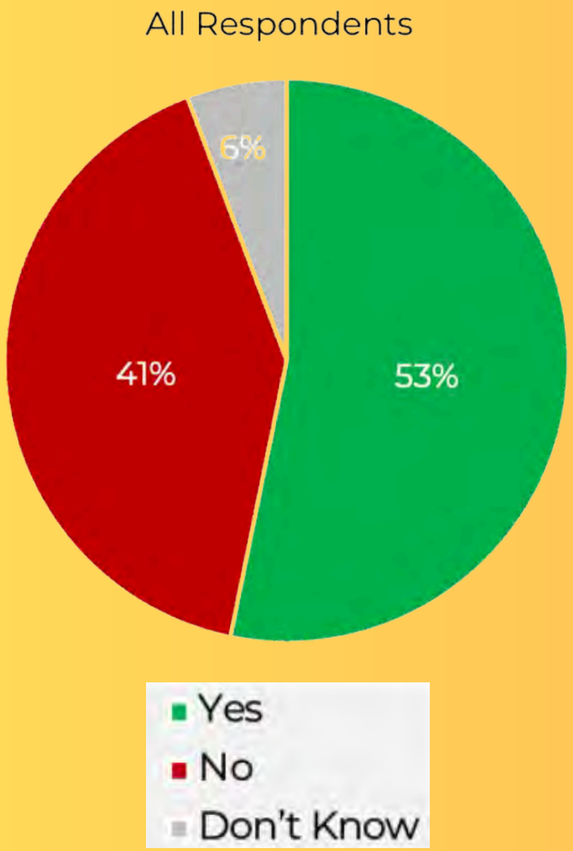
NAME: [Your Name]
PRONOUNS: [What you like to be called beside your name/nickname(s).]

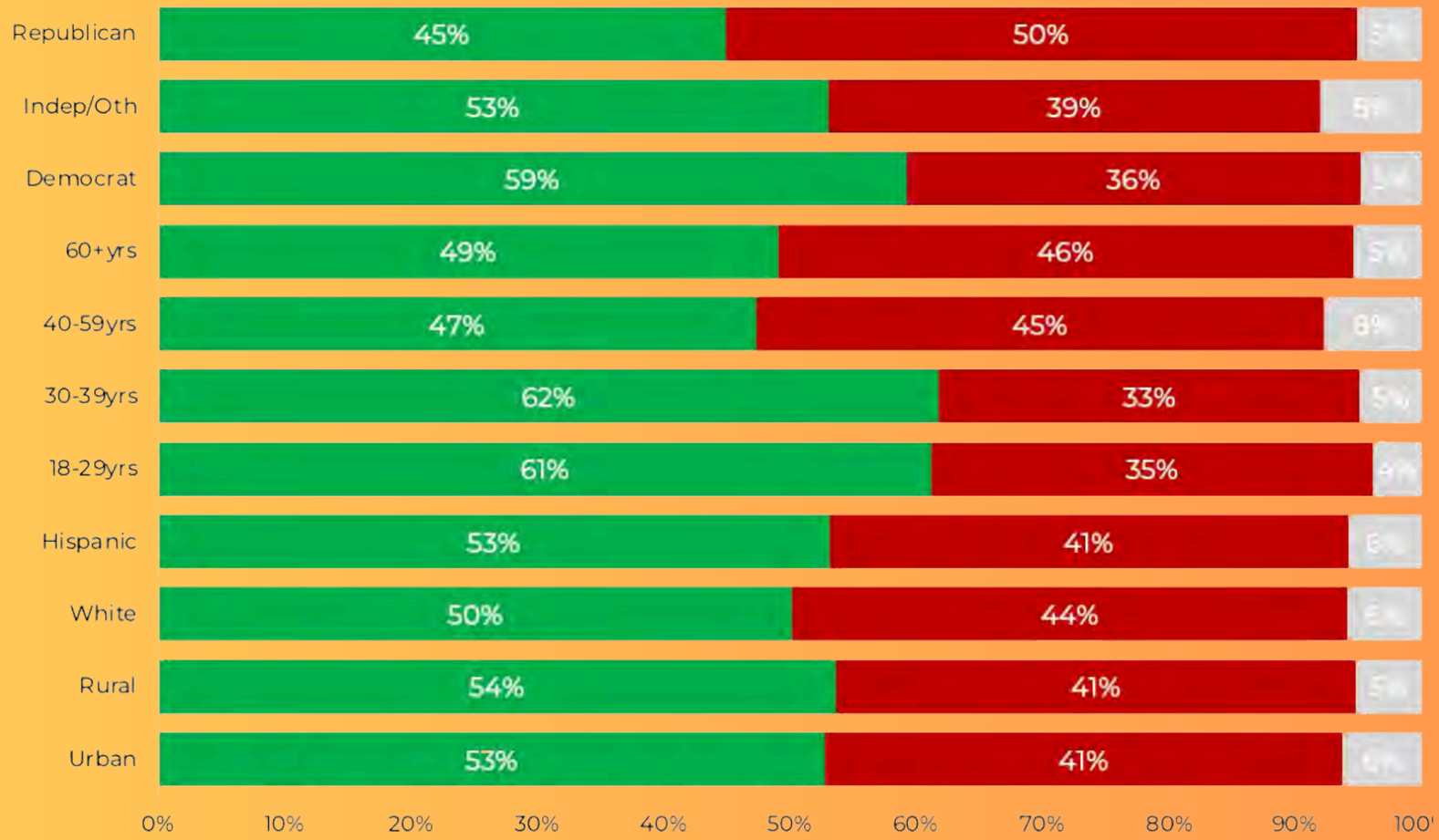
EXAMPLE - IF SOMEONE WAS TALKING ABOUT YOU WHAT WOULD YOU LIKE THEM TO SAY HERE: '__' SAID HELLO.]

- **SEX** is a label assigned at birth based on the appearance of your external genitalia.
- **GENDER** is your internal concept of self as a man, woman, or non-binary person.
- **GENDER EXPRESSION** is how you express your gender through clothing, behavior, and personal appearance.
- **ORIENTATION** refers to who you are attracted to sexually, emotionally, and/or romantically.

OVER HALF of New Mexicans know someone who is Transgender

Do you personally know anyone that identifies as transgender? This doesn't have to be a friend or family member; it could be someone that you know lives in or near your community.





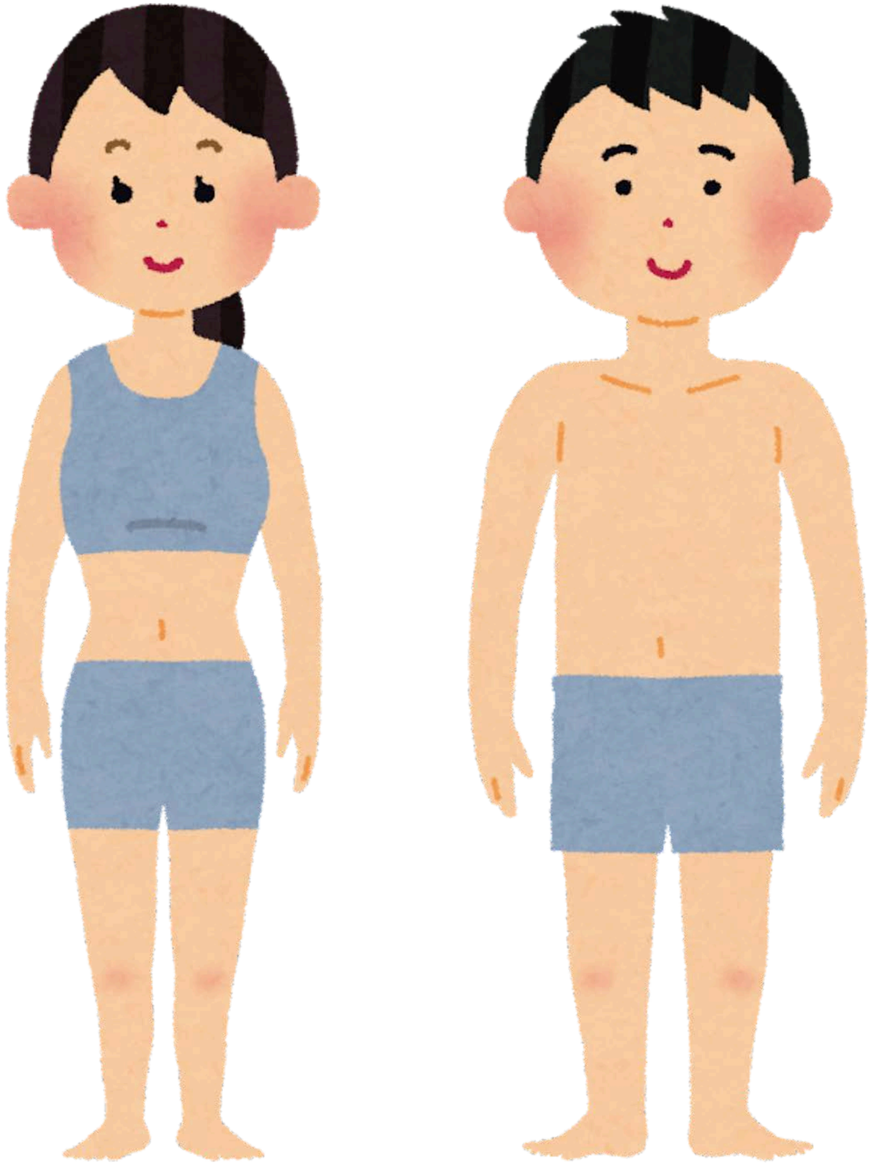
LET'S START WITH PRONOUNS!

- What are pronouns?
- Aren't people's pronouns obvious?
- Is this about being "PC (Politically Correct)?"
- Why does this matter?

WHAT ARE PRONOUNS?

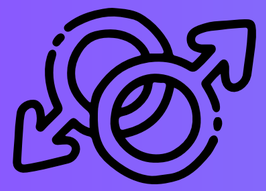
- Pronouns are short words that English speakers use instead of continually using someone's name.
- The most common pronouns are he/him/his and she/her/hers but there are many more!

WOMAN	MAN
MRS.	MR.
MA'AM	SIR
PRETTY	HANDSOME
BOSSY	DOMINANT
FRIDGID	STOIC
FRUMPY	UNKEMPT
WHINING	COMPLAINING
WORKING MOM	WORKING PROFESSIONAL
SHRILL	LOUD
PUSHY	AGGRESSIVE
HYSTERICAL	UPSET
BREATHLESS	FLUSTERED
WITCHY	JERK



AREN'T PEOPLE'S PRONOUNS OBVIOUS?

Peoples pronouns describe what they feel inside, not what they look like outside, so you won't know until they tell you!



SEX MAY INFLUENCE HOW YOUR BODY LOOKS.

GENDER EXPRESSION IS YOUR VISUAL ADORNMENT CHOICES.

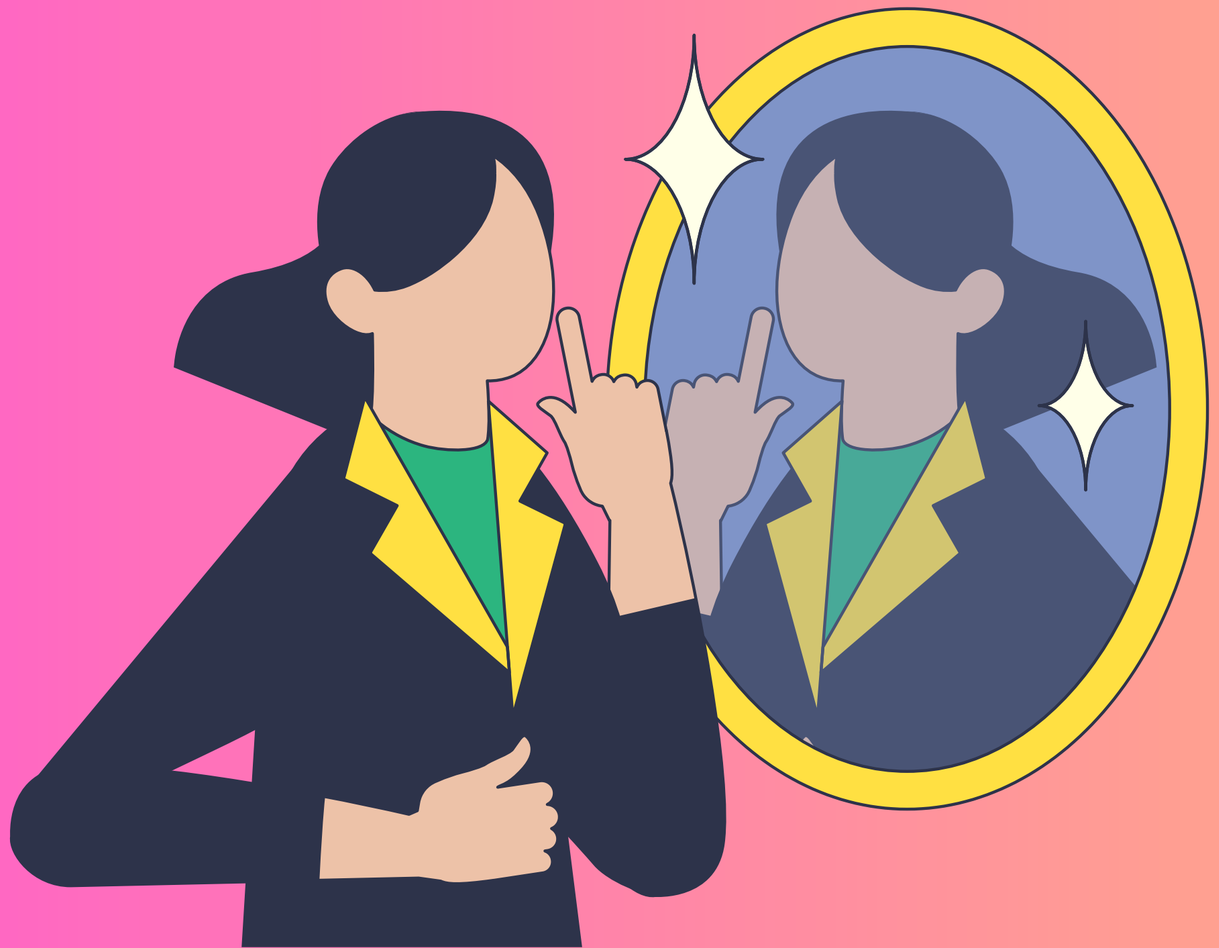
GENDER IS ABOUT WHAT YOU KNOW INTERNALLY.

PRONOUNS DESCRIBE A PERSON'S GENDER, NOT SEX OR LOOK!

BEHAVIOR * CLOTHING * HAIRSTYLE * VOICE * MAKEUP * JEWELRY * SPEECH * NAME

GENDER EXPRESSION

SO IS GENDER HOW WE DRESS?

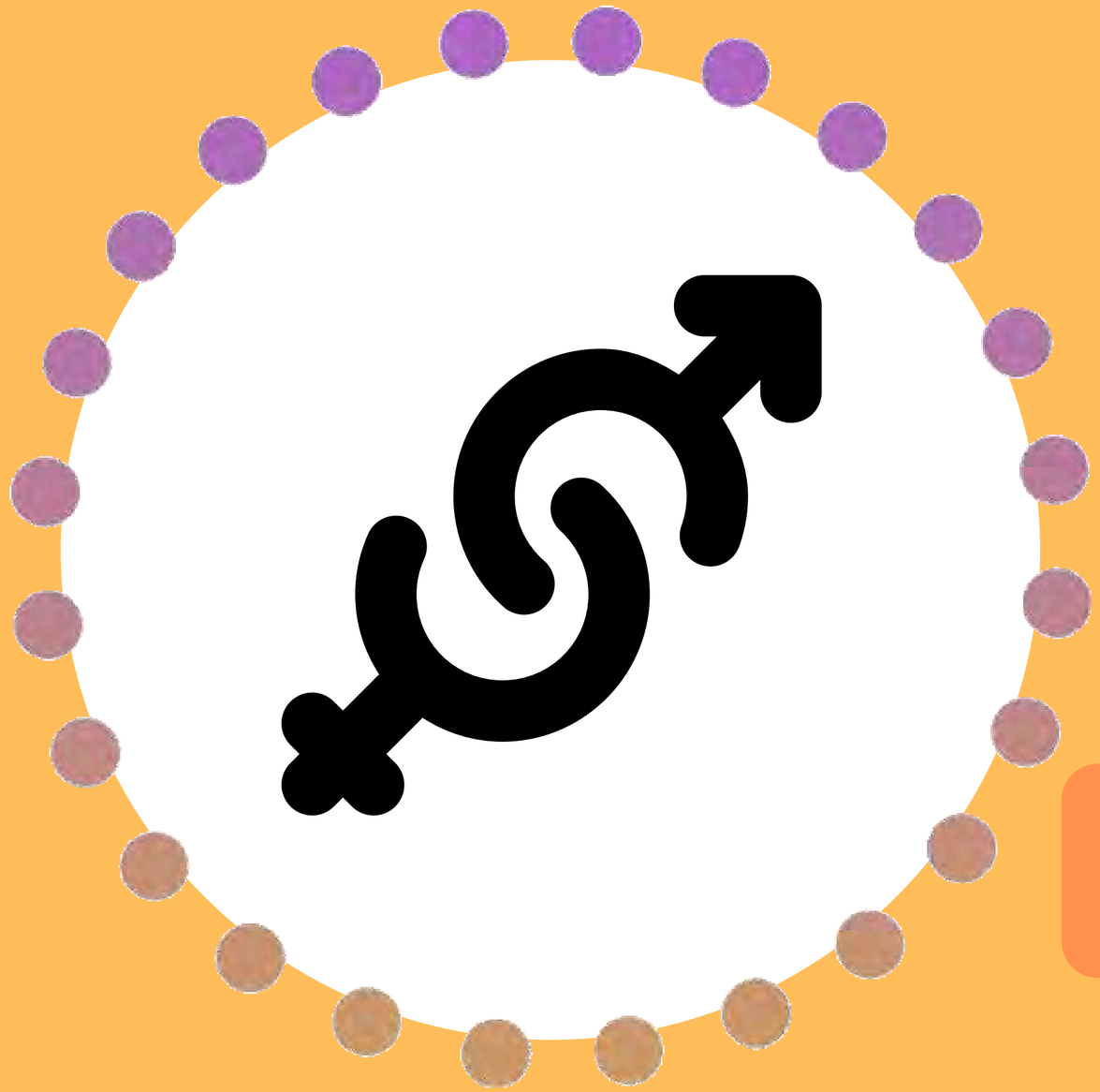


People may dress in accordance with what they feel inside/their gender but they may dress for other reasons as well.

People may also interpret dress differently depending on the individual and their culture.

Self adornment/dress is called Gender expression to acknowledge the existence of gender stereotypes and expectations but does not always tell us about a person's gender!

GENDER VS EXPRESSION - CISGENDER



CISGENDER

Describes people whose gender matches the sex they were designated at birth.

“Cisgender” can also be shortened to “cis,” e.g., cis man, cis woman.

If we have a word for transgender, we need a word for not being transgender

GENDER VS EXPRESSION - TRANSGENDER

TRANSGENDER

Describes people whose gender differs from the sex they were assigned at birth.

- “Transgender” is appropriate for non-transgender people to use.
- “Trans” is shorthand for “transgender.”



GENDER VS GENDER EXPRESSION - NON-BINARY



NON-BINARY

People who do not feel like a man or a woman. Any gender that is not always/only/at all man or woman.

- NB / Enby
- Genderqueer
- Genderfluid
- Two-Spirit
- Pangender
- Agender
- Etc

GENDER VS SELF EXPRESSION

So now we can see that pronouns are not as obvious as we thought! Anyone we meet could be non-binary, trans or cis and we won't know until they tell us.

IS THIS ABOUT BEING “POLITICALLY CORRECT?”

- People’s pronouns are words we use to refer to them, so just like any other label or nickname folks should get a say in how others address them - You too!
- Sex may influence how your body looks.
- Gender expression is your visual adornment choices.
- Gender is about what you know internally.

PRONOUNS DESCRIBE A PERSON’S GENDER, NOT SEX OR LOOK!

WHEN HAS SOMEONE DESCRIBED YOU IN A WAY THAT DIDN'T FEEL TRUE?

- Slurs
- 'Jokes'
- Offensive alternative labels (Disabled vs. R*tard, etc.)
- Personal Attacks (Lazy, Rude, Mean, etc.)
- Identity Attacks
- Misrepresentation/mislabeling of race, class, income, disability, etc.

DID YOU KNOW HOW TO STOP THAT PERSON FROM REPRESENTING YOU TO OTHERS THAT WAY AS WELL?

THE SCIENCE IS IN: IT MAKES A DIFFERENCE!

"THIS STUDY ADDS TO THE EVIDENCE SHOWING THAT WHEN WE USE LANGUAGE THAT ACTIVELY INCLUDES WOMEN AND LGBT PEOPLE, IT MAKES A REAL DIFFERENCE IN REDUCING GENDER STEREOTYPING. USING GENDER-NEUTRAL LANGUAGE IS A POSITIVE STEP TOWARDS CREATING A WORLD WHERE EVERYONE IS ACCEPTED WITHOUT EXCEPTION."

https://www.theguardian.com/science/2019/aug/05/he-she-or-gender-neutral-pronouns-reduce-biases-study

WHY DOES IT MATTER?

"THE LATEST SURVEY, WHICH REPRESENTS THE EXPERIENCES OF NEARLY 35,000 LGBTQ YOUTH AGES 13–24 ACROSS THE UNITED STATES, FOUND THAT TRANSGENDER AND NONBINARY YOUTH WHO REPORTED HAVING THEIR PRONOUNS RESPECTED BY ALL OF THE PEOPLE THEY LIVED WITH ATTEMPTED SUICIDE AT HALF THE RATE OF THOSE WHO DID NOT."

WE CAN SAVE LIVES!

https://www.thetrevorproject.org/survey-2021/

NM YOUTH RISK & RESILIENCY SURVEY

2023	**6.5% OF ALL STUDENTS POSITIVELY IDENTIFIED AS TRANSGENDER, GENDER FLUID, OR GENDERQUEER** **19.8%** of trans students attempted suicide vs. **7.0%** of cisgender students **50.6%** of trans students engaged in non-suicidal self injury vs. **17.2%** of cisgender students **20.3%** of trans students experienced sexual violence in the past 12 months vs. **8.7%** of cisgender students
2021	**5.8% OF ALL STUDENTS POSITIVELY IDENTIFIED AS TRANSGENDER, GENDER FLUID, OR GENDERQUEER - AN 81% INCREASE OVER 2019** An additional **4%** were unsure or questioning - a **43%** increase over **2019**
2019	**3.2% OF ALL STUDENTS POSITIVELY IDENTIFIED AS TRANSGENDER, GENDER FLUID, OR GENDERQUEER** An additional 2.8% were unsure or questioning
2017	**3.4% OF ALL STUDENTS POSITIVELY IDENTIFIED AS TRANSGENDER, GENDER FLUID, OR GENDERQUEER** An additional 2.9% were unsure or questioning

CISGENDER WOMAN

DESIGNATED SEX = FEMAL
GENDER = WOMAN
PRONOUNS = SHE/HER/HERS

CISGENDER MAN

DESIGNATED SEX = MALE
GENDER = MAN
PRONOUNS = HE/HIM/HIS

TRANSGENDER MAN

DESIGNATED SEX = FEMALE
GENDER = MAN
PRONOUNS = HE/HIM/HIS

TRANSGENDER WOMAN

DESIGNATED SEX = MALE
GENDER = WOMAN
PRONOUNS = SHE/HER/HERS

THE MOST COMMON ARE GENDER NEUTRAL (THEY/THEM/THEIRS) BUT FOLKS MAY ALSO CHOOSE TO USE HE OR SHE OR NEO PRONOUNS

NON-BINARY PERSON

DESIGNATED SEX = MALE

GENDER = NON-BINARY

PRONOUNS = ANY PRONOUNS

NON-BINARY PERSON

DESIGNATED SEX = FEMALE

GENDER = NON-BINARY

PRONOUNS = ANY PRONOUNS

Personal Pronouns in Modern English

Lingographics.com

	Person	Subject	Object	Dependent Possessive	Independent Possessive	Reflexive
Singular	1	I	me	my	mine	myself
	2	you	you	your	yours	yourself
	3	he	him	his	his	himself
		she	her	her	hers	herself
		it	it	its	its	itself
Plural	1	we	us	our	ours	ourselves
	2	you	you	your	yours	yourselves
	3	they	them	their	theirs	themselves

HOW TO USE GENDER NEUTRAL PRONOUNS?

ONE OF THE COOL THINGS ABOUT ENGLISH IS THAT MANY OF OUR PRONOUNS ALREADY ARE GENDER NEUTRAL:

SINGULAR THEY IS THE MOST COMMON CURRENTLY:

IS THIS GRAMMATICALLY INCORRECT (UNGRAMMATICAL)?

IT ISN'T!

USE OF THE SINGULAR THEY IN ENGLISH DATES BACK TO THE 1300S. FAMOUS AUTHORS LIKE SHAKESPEARE, JANE AUSTEN, F. SCOTT FITZGERALD, LEWIS CARROLL, OSCAR WILDE AND C.S. LEWIS USED IT IN THEIR WRITING.

IT WORKS JUST THE SAME WAY WE CURRENTLY USE “YOU!”

- Subject/Verb Agreement
- One or Many


Supply Chain | Indeed US
Copy link
Watch on YouTube

NEOPRONOUNS:

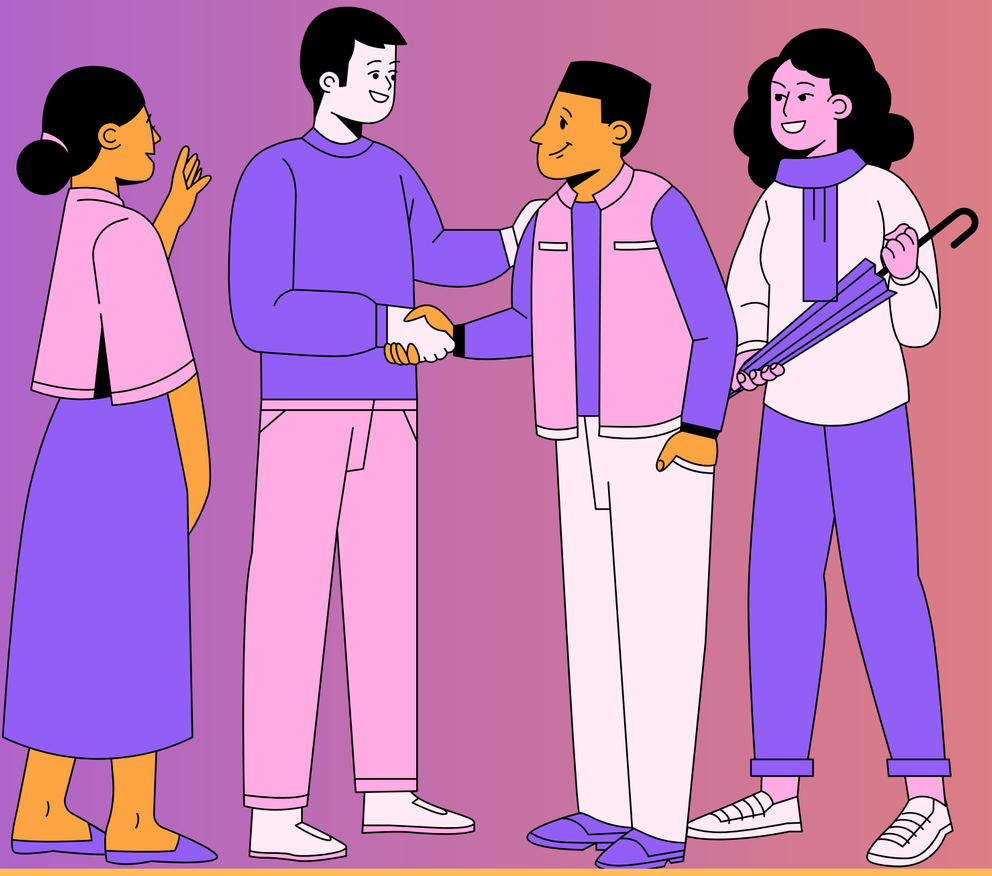
Pronoun Reference Sheet				
She	Her	Her	Hers	Herself
He	Him	His	His	Himself
They	Them	Their	Theirs	Themself
Ze	Zir	Zir	Zirs	Zirself
Xe	Xem	Xyr	Xyrself	Xemself
Ze	Hir	Hir	Hirs	Hirself
Per	Per	Per	Pers	Perself

What takes the place of he or she?

DON’T FORGET:

People don’t always use the same name and pronouns in every situation. Be mindful of the safety of any trans or non-binary folks who are out to you. Make sure you know when and where to use their chosen names and pronouns.

REMEMBER:



Cisgender folks also use names that are not their legal first names!

Do you know anyone like that?

HOW CAN WE SHARE OUR PRONOUNS?

- Verbal introductions
- Zoom labels
- Email signatures
- Business cards
- Nametags
- Pins/buttons
- Social Media

LET’S PRACTICE!

Practice introducing yourself with your name and pronouns out loud to yourself.

Enter how you would introduce yourself in the Q&A if you'd like to!

LET'S PRACTICE!

Click on the three little dots in the upper left corner of your own picture on Zoom and select "Rename." You can add your pronouns to your name field there.

LET'S PRACTICE!

Pick someone you know and describe them using they/Them pronouns.

ANOTHER GREAT PRACTICE TIP?

Use singular they as your default pronoun for anyone you don’t know! You may not realize it, but you probably do this sometimes already…

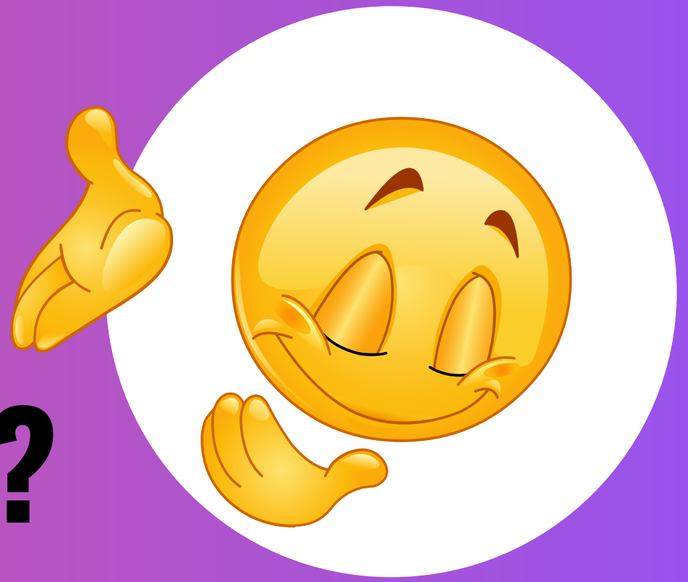
WHAT OTHER WAYS DOES GENDER SHOW UP IN OUR EVERYDAY LANGUAGE?

- HONORIFICS
- FAMILY LANGUAGE
- OCCUPATION LANGUAGE
- MASCULINE DEFAULT LANGUAGE

HONORIFICS

- LADIES AND GENTLEMEN
- MA'AM/SIR
- MR./MS
- OTHERS?

WHAT ABOUT GENDER NEUTRAL HONORIFICS?



Unfortunately since a gender neutral role in society is new to the US (though not to many cultures around the world) there isn't yet a consensus. Mx. to replace Ms./Mr. has been suggested but not everybody loves it.

HOW ABOUT "LADIES AND GENTLEMEN?" WHAT ARE SOME ALTERNATIVES YOU CAN THINK OF?

LUCKILY EVEN WITHOUT HONORIFIC ADDRESS WE CAN STILL CONVEY RESPECT

- YES, ABSOLUTELY. COMING RIGHT UP.
- COULD I HELP THE NEXT GUEST?
- HOW CAN I BE OF ASSISTANCE TODAY?
- YES, PLEASE.
- GOOD MORNING!
- THANK YOU VERY MUCH.
- IT'S A PLEASURE.

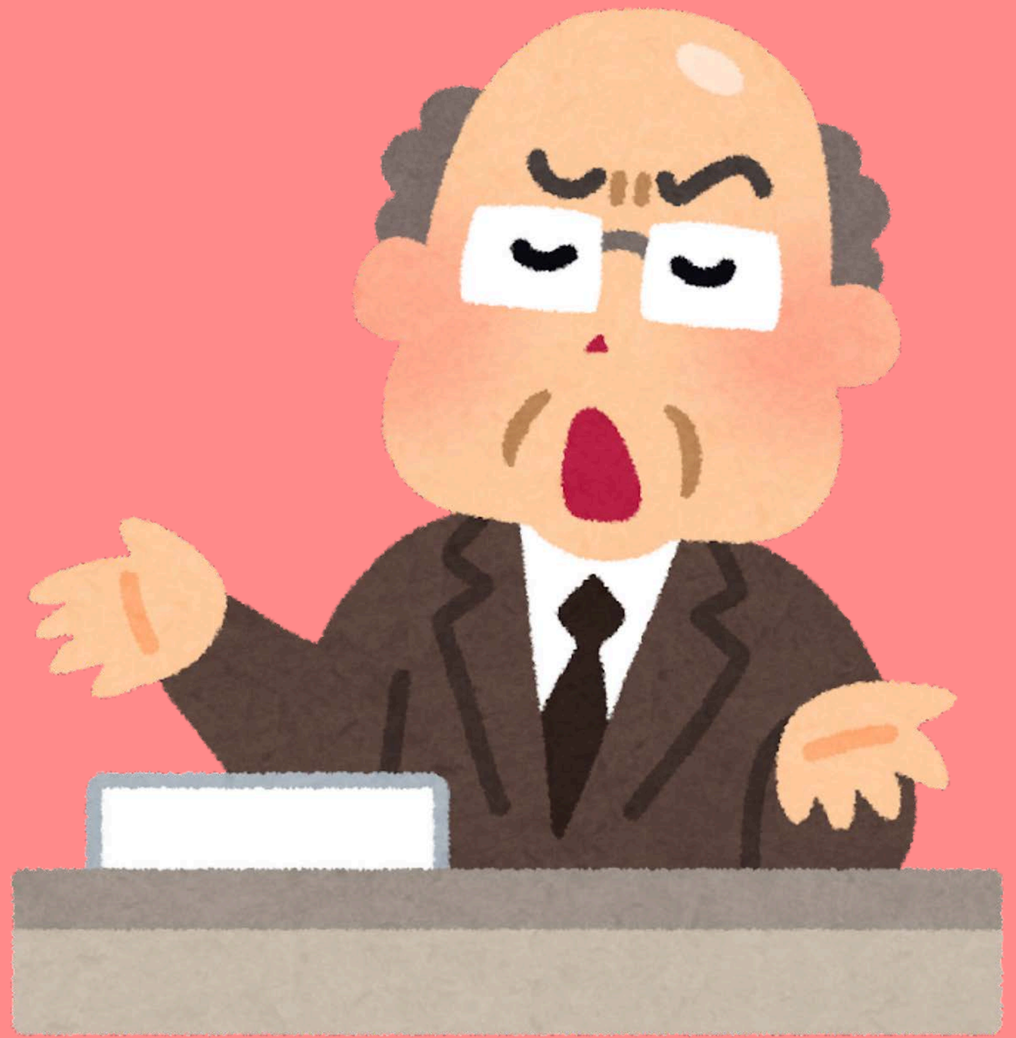
FAMILY LAGUAGE

- Grandmom/Grandad = Grandparent
- Mom/dad = Parent
- Son/daughter = kid, child, “[Age] year-old”
- Sister/brother = sibling
- Boyfriend/girlfriend = partner, significant other, etc.
- Niece/nephew = nibling!

OCCUPATION LANGUAGE

- Fireman = Firefighter
- Actress = Actor/Performer
- Hostess = Host/Attendant
- Cable guy = Technician

MASCULINE DEFAULT LANGUAGE



- Using he when describing a universal/hypothetical
- Assuming/referring to respect/high authority occupations with he pronouns
- Hey ‘guys’
- Doctors
- Chefs
- CEOs
- Etc.?

IMAGINE THIS IN REVERSE:

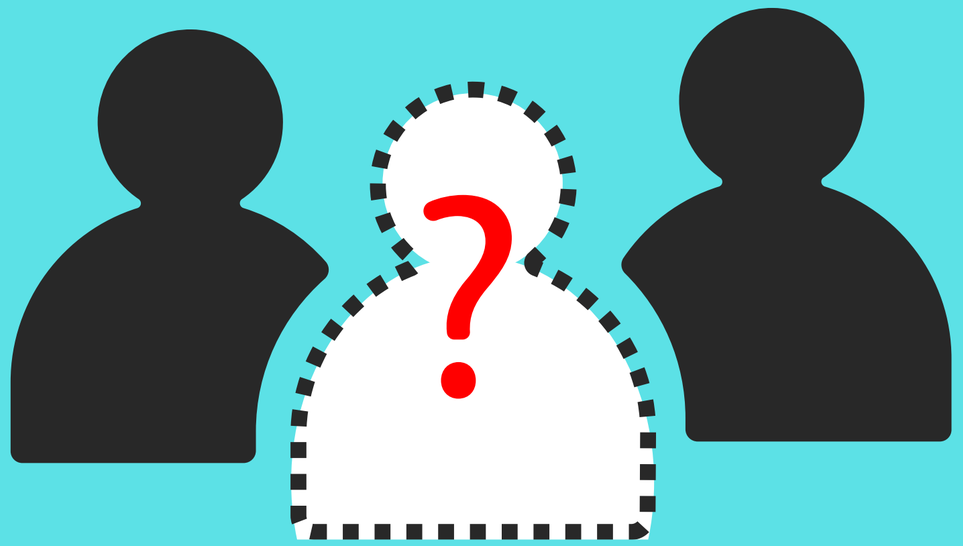
"Hey girls, what's everyone up to tonight?"
How about something like "the common woman" rather than "the common man?"
The assumption your medical attendant can't be the doctor because he is male?

WE EVEN USE "HE" PRONOUNS AS DEFAULTS FOR BABIES AND ANIMALS WE DON'T KNOW.

WHAT CAN WE SAY INSTEAD?

Freshman = **First-Year Student**
Waiter/Waitress = **Server**
Ladies & Gentlemen = **Everyone/Y’all/Folks**
Boy/Girl = **Child**
Manpower = **Workforce**
Landlord = **Owner**
Congressman = **Legislatore**
Maiden Name = **Family Name**
Fireman = **Firefighter**

DESCRIBING PEOPLE WE DON'T KNOW?



- Using "one" rather than "man/woman"
- Using "people" rather than "men/women"
- Visual descriptions of people
- Using the person's role to identify them
- Focus on the object rather than subject
- Use a plural noun rather than singular

WHAT CAN WE SAY INSTEAD?

Some guy asked for directions = **Someone asked for directions.**

These women are about to do yoga = **These people are about to do yoga.**

Does the guy in front have a question = **Does the person wearing (x) in front have a question?**

The cashier at the carwash gave me change = **The man at the carwash gave me change.**

That lady's dress is so pretty! = **That dress is so pretty!**

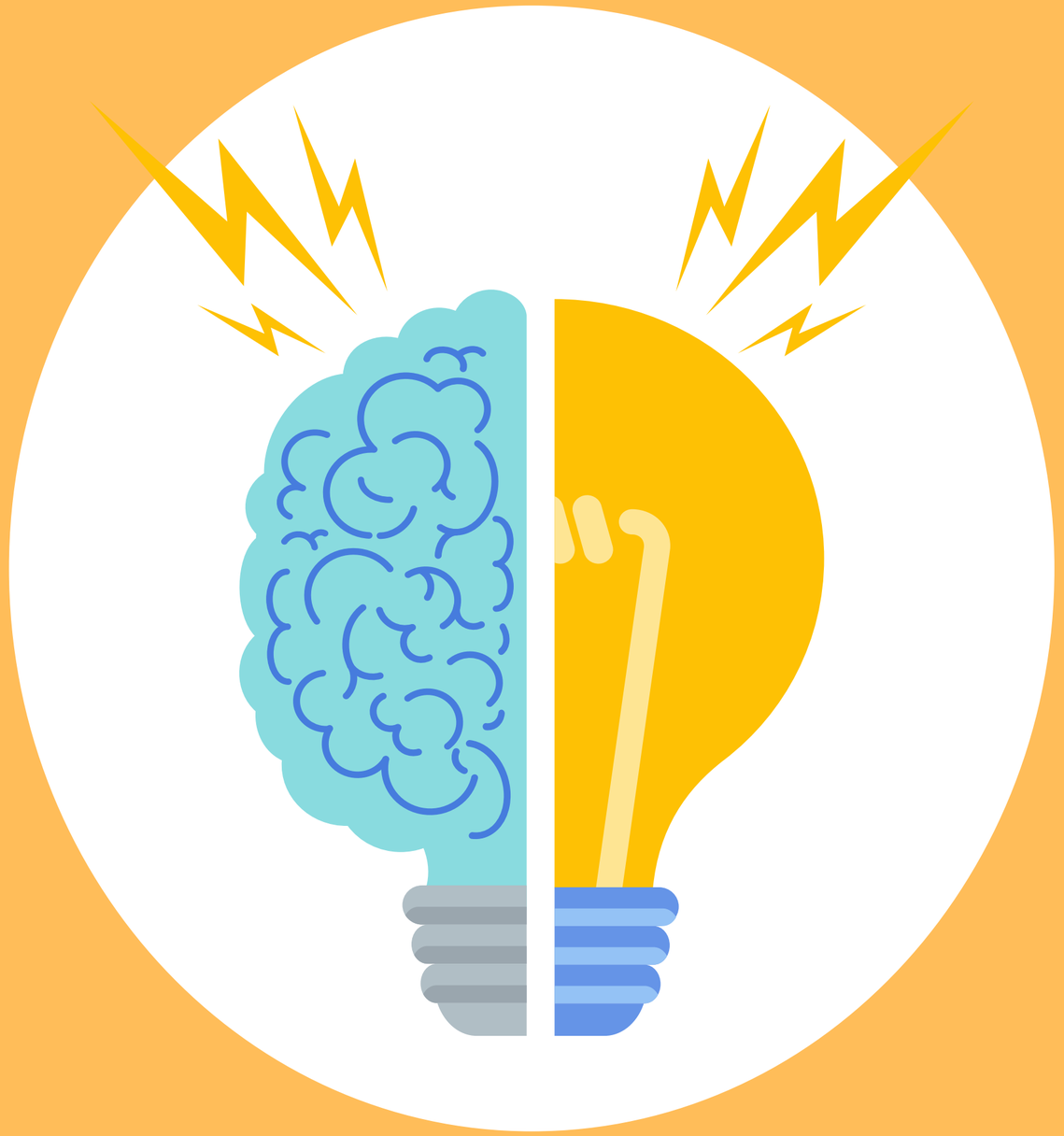
A student who loses sleep may struggle to focus on his/her exams = **A student who loses sleep may struggle to focus on their exams.**

LET’S PRACTICE!

Come up with alternatives to these sentences and enter how you would change them in Q&A

LET'S PRACTICE!

Let's get in groups of 2-4 and come up with some alternatives to these sentences.



LET'S PRACTICE!

"To a woman who possesses the necessary qualifications, nursing offers a life of unusual interest and usefulness. She will have limitless opportunities to improve herself and to help others."

LET'S PRACTICE!

"Do you have a boyfriend or girlfriend?"

LET'S PRACTICE!

"I will contact each student and tell him when to come for a conference."

LET'S PRACTICE!

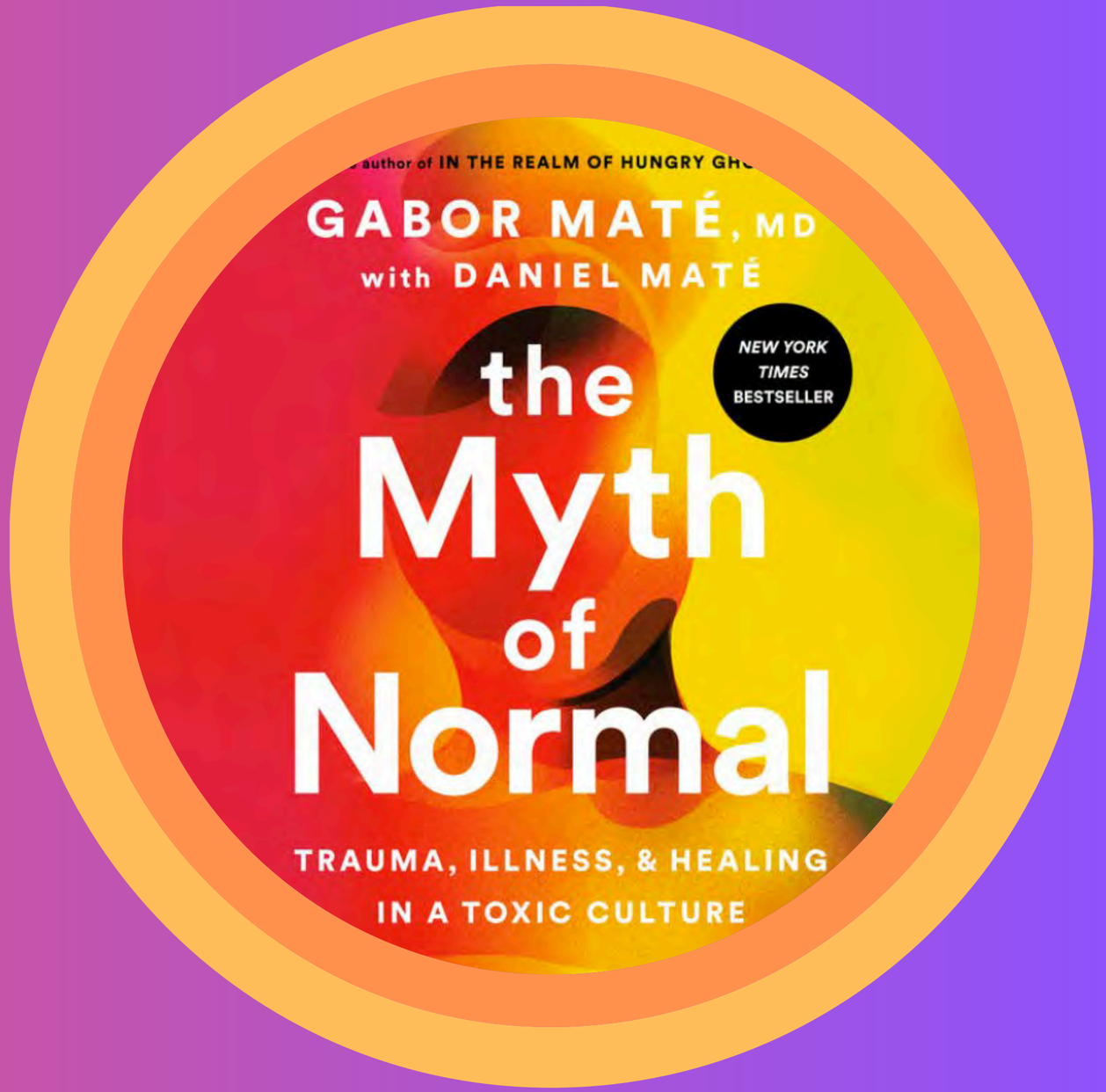
Let's take 8-10 minutes to work on the worksheets, then come back together as a group to debrief.

BE TRAUMA-INFORMED

Trauma-informed care: practices that promote a culture of safety, empowerment, and healing.

Many TGNB people have a history of trauma.

Trauma may be not just from past events, but from daily discrimination and microaggressions.



BANISHING BIAS IS A PROCESS, NOT A PROJECT.

- Push for support, inclusivity, and belonging, not simply tolerance.
- Speak out in support of transgender people and transgender rights.
- Be a visible advocate – stickers, posters, pronouns in tags.
- Continue to educate yourself.

DO THE INTERNAL WORK

Address your internal bias

Be kind: Shame is not a tool of social justice and transformation

The Three Peaces:
Make peace with not understanding
Make peace with difference
Make peace with your body

GIVE A LITTLE.
HELP A LOT!

TEXT TRANS101 TO 44321 AND MAKE A DIFFERENCE TODAY.

TGRCNM
1515 4TH ST NW,
ALBUQUERQUE, NM 87102
TGRCNM.ORG

ADRIEN LAWYER
CO-FOUNDER
CO-DIRECTOR
505-440-3402
ADRIEN@TGRCNM.ORG

https://linktr.ee/tgrced

PRONOUN REFERENCES

Info:
https://www.theatlantic.com/culture/archive/2021/06/gender-neutral-pronouns-arent-new/619092/
https://www.theguardian.com/science/2019/aug/05/he-she-or-gender-neutral-pronouns-reduce-biases-study

Whats Next?
https://www.un.org/en/gender-inclusive-language/
https://apastyle.apa.org/style-grammar-guidelines/bias-free-language
https://pronouns.org/inclusivelanguage
https://www.teachstarter.com/us/blog/gender-neutral-terms-teachers/

REFERENCES

Anti-Violence & Trans Equality Information

Impact of Gender Stereotypes Report

Biological Sex (Defined & Discussed)

Intersex (Defined & Discussed)

Declassification - Transgenderism

Youth Risk & Resiliency

2022 US Trans Survey

Every Body: Intersex Documentary

Trans Youth Homeless

Trans Unemployment

Anti-Trans Violence

WHAT'S NEXT?

Anti-Trans Legislation Tracker & Action Steps

Healthy Sexuality & Gender Development Policy

Gender Affirming Care Reduces Youth Suicidality

Protecting & Advancing Healthcare for Trans Adults

Anti-Trans Legislation Tracker

Book: The Body Is Not an Apology: The Power of Radical Self-Love by Sonya Renee Taylor

Exhibit H

Transcript of “Pronouns & Gender Neutral Language” Training

Pronouns workshop

Speaker And here we go. This is our pronoun workshop. So I think probably many of us have met before, but my name is Adrian Loyer. I use he pronouns, um, at the Transgender Resource Center of New Mexico, which is my organization. We have two executive directors instead of one. And my counterpart is Eric Wolf. So both of us together run TGRC, and we are a statewide organization. We exist to serve trans and non-binary folks and our families and loved ones through a very intentional combination of direct services, advocacy, and education. Sorry about the background noise, if you can hear it on my side. It's a busy morning at my house, obviously. So Direct services is the stuff on the screen right now When we talk about direct services and nonprofits, we're just talking about helping folks. And so these are some of the things that we do to help trans and non-binary people all over New Mexico. And that the heart there in the middle of the screen gives you a really good flavor for the stuff we can do for folks without them ever coming here. So we're really, um, we stress that a lot because of course in New Mexico, people don't really believe things are statewide because so much of the time they're really not. Things are really for the metro area or for the I-25 corridor. And we can help people with a ton of different case navigation wherever they are. Silver city, um, Alamogordo, Farmington. It doesn't matter. We can help you change your name. We can help you update your identity documents. We can help with emergency financial assistance. All eight of our support groups meet both in person and on Zoom every month. And all of our groups now have really increasingly active discord servers associated with them so that people are able to talk and communicate with each other all throughout the month and not just, um, not just at the, um, at the meeting time, at the specified meeting time. So people are asking questions, helping each other. Our youth program is popping off in discord. Um, our youth, uh, program coordinator does homework nights on discord, craft nights, movie night. They're doing a book club with the young adult group right now all on discord. So that means kids from Silver City can get on there and talk to kids in Albuquerque. Um, even if they are never able to come up here and check out our building. So really and truly, don't hesitate to refer people to us wherever they are. We can help them, um, here in the state. So we always just say if somebody is trans and they need help, they should just call us because we may not have on the screen exactly what that person is looking for, but we often have a referral if we don't do it And we do things that are not on the screen right now. So just get in touch with us and we're here to help. And we want to connect people to resources if we're not the resource. Um, we do have a building here in town. Um that's amazing. It's fourteen thousand square feet. It's downtown at fourth and Constitution and, um, we do a ton of stuff out of there. Again, our youth program, I always stress with educators because I know y'all work with young people, but, um, our youth program has its own space. It's my favorite room in the building actually. It's the most beautiful room with all the light coming in is our youth room and we, um, see youth and young adults there whenever we're open Monday, Wednesday and Friday from one to six. And our youth groups meet over there as well. And it's just really, really beautiful. We have now a clothing closet just for young people. We've separated their stuff out so the young folks can go through our donated clothing and pick out what they want, um, without having to mess around with the adults in the space. So, um, really, really a great space. If you haven't come and checked out our building, we'd love to give you a tour. So again, my contact info is in the

chat. Just reach out to me and we'll set up a time to do a tour. So then services are about helping people, which is kind of what got me into this biz in the first place, was just really wanting to help trans people, um, like me. But helping people in that way doesn't really shift the, the culture. It doesn't really change the structures and the systems that got us into this situation in the first place. And so the way you do that in the non-profit view is advocacy and education. So we do all of this, we do policy work, we do legislative work. We can just help people with their materials, just making things more inclusive. Um, people have asked us to come check out their website or their bathrooms or their intake forms or really just anything that you just want another set of eyes on. And it's not shameful. I don't know how to be very inclusive towards people who don't have traits that I that have traits that I don't have. You know, like as far as I can tell, I don't think I'm autistic, but a lot of trans people are autistic or a lot of autistic people are trans. We don't even know. We don't even know which one's the chocolate and which one's the peanut butter. But we know that there's a big overlap between autism, autism, and trans people. And so for them, sometimes an environment can feel not great, but I don't even know it myself because for me, it's working well enough, you know? So when people come into the center and they're like, hey, I'm autistic and I hate these lights in here and can we cut these lights down or make them less bright? It's like, oh, thank you for telling me that because I wouldn't have ever thought of that, you know? So that's the same thing. Asking for help on trans inclusion isn't a bad thing. It's a good thing because you can't see it unless you are it. You know, that's just typically the way it works. You have to be really up and close to, to notice these things. So we can just help you think through how to tweak stuff and make it feel better and feel more welcoming to gender variant people. And then training can also help with that. And we do lots and lots of training. Our main training is called Transcultural Fluency. That's the one we think we've done more than four thousand iterations of. Um, and also we do lots of other trainings in addition to that. We do a trans, the transcultural fluency is number one, but we do trans two hundred one, which is a deeper dive. We're doing the pronoun workshop this morning. So I'm super excited to get to do that with y'all. We have a group of panelists, about forty people who just come out and share their personal stories as part of the training efforts. So, um, we can bring a panel along as part of a training, or we can just set up a panel on its own, which is also really, really great. And then we do a training that's really just all about how to be a good advocate for trans people, how to, how to talk about this in a way that seems to work better, because people are talking about this a lot these days, but not always in an effective way. So if you care about trans people and want to be a good ally, then let me give you our advocacy training and teach you everything I know about how to bring people closer when you have this conversation. We do have a book out Gender Transition for dummies. I'm buying a copy of the book. The royalties go back to the center, which is a really cool agreement we have with Wiley. They agreed not to pay the authors, but to pay our nonprofit instead. So that's really exciting. And a lot of folks have looked at this book now and told me that they learned a ton about what trans people deal with and what we go through just by checking the book out. It's a reference book. If you haven't ever looked at a for dummies book, they're not like for reading, you know, you don't read it from the front page to the back page. It's sections with all this different information. So you just jump around and check out what you're interested in at the time. And I probably should stop saying this. I know Wiley would hate to hear me say it, but if you work with trans or non-binary

people, just getting one copy is enough because you can photocopy the pages that they're interested in, you know what I mean? It's a reference book, so it's not that everybody needs a whole fresh copy every time. It's that sometimes people just need to come in and check out the section on hormones, or just the section about how do you pick out new clothes when you're transitioning? You know, that can be a really hard thing. If nobody taught you how to dress stereotypically like a boy or a girl, then you. How do you know? How do you know what, what to try on or what to wear? And we have a whole section on that. So, um, you can just let people look at the book and take away what they need from it. And we always have copies for sale, but the book is for sale at any online facility. Um, I'm not, I don't do a break in my trainings, but if people need to step away from the training for any reason, um, just do so, you know, if something important comes up or if you get a phone call, I mean, you need to go out and take it. Just make sure you're on mute and do whatever you need to do. Okay. And then if there's any possibility of wrapping up early, I'll do that. But I, I don't stop in the middle because it's too hard to get everybody back, especially on Zoom. So you take care of yourselves. Go to the bathroom, eat, drink, stretch, do calisthenics, knit, if that helps you to pay attention. I don't really care. Like you know what to do for your brain. So just do it. And I'm gonna just carry on on my end until the end. Um, is there a genital talk? I hate to, I hate to promise y'all a good time and not deliver, but I'm not even sure if I talked that much about genitals in the pronoun training. But you know me, it'll probably come up a little, so we'll just get there if we get there. Biological sex is usually part of it before it's all over. Um, and no bad questions is very, very important to me. So really just ask whatever questions you have. You can private message me in the chat, usually on Zoom, you have my cell phone number in the chat right now so you can text me a question if you feel embarrassed about your question, just text me because all I'll get is a phone number associated with it. So, um, it's not I won't even know who it is. So just text me if you feel weird. Otherwise, just ask your question in the chat or in a group this small, especially just come off mute, you know, if you want to talk. I love that we're a small group. It may work out that we do a little small group discussion as part of this too. So don't be afraid to use your mic. I'd love to hear people's voices if you want to talk. Oh, see, I said no genitals. And then I flipped to this slide. Okay, so let's talk for a minute about these four things, because these four things are kind of the four things, in my opinion, that get in the way of us understanding trans and non-binary people. And I'm trans myself, I'm what's called a transgender man. My designated sex at birth was female, but I've known that I was a boy since I was a child pretty much as soon as I knew I was a person, I knew that I was a boy. My family dates it back to my being around two years old, when I started to kind of fight with my mom all the time about what I would wear and what kind of toys I wanted to play with. Now, of course, your toys and your clothes don't make you a boy, right? That's not what I'm saying is that I only wanted to wear boy things, and therefore I was a boy. That's not true. And certainly there are trans kiddos who cope with all of this by trying to blend in. You know, there are some guys like me who tried really hard to be girls when they were little, because everybody kept saying they were a girl and they wanted their moms to love them. And so they just put on the little dresses and dealt with it the best they could. But for me, knowing I was a boy meant that I glommed on to like, stereotypical boy things. I think in large part trying to just communicate that to the people around me, you know, trying to get them to see me for who I really was. So for me, I went towards these very stereotypical things, which Isn't what means I'm a boy, but does give

really strong clarity to my story. So my family can tell these things about me back from when I was way little, because they were kind of shocked at how adamant I was about what I would wear and what I would play with. It was really, really strong and really insistent. Um, even when I was super, super little. So I'm a transgender man. Um, and I was still raised like most of y'all were to think of these four things as like all one thing. You know, to think of them as all sort of glommed up together, um, to think of them as some of them causing or creating one another. And really the truth is these are four separate things. They come in every possible combination. And we should be expecting every possible combination instead of expecting everybody to always have the dominant combination. But when we meet new people, we use their gender expression, this third piece to guess about their internal gender, which we just assume matches with their biological sex. And that's not always true. These things come in every different possible combo. So let me just quickly break them down. Sex is the body. It's the physiology of all of this. It's in fact, what we know the most about in this equation. We know tons and tons about biological sex and the human body. So biological sex is the very complicated combination of chromosomes, hormones, genitals, gonads and gametes. Internal reproductive organs and sex cells are what gonads and gametes are. But that's not the same thing as what you're said to be when you're born, which we call your designated sex because it is simply based on your genitals. And not all of those five things put together. And the genitals don't always match the chromosomes, and the genitals don't always match the gonads. And we call that intersex and intersex people today are thought to be around one point seven percent of the human population. So when we talk about these things, we need to think about intersex people. But when I was being brought up, I wasn't even taught that there were intersex people or that humans are diverse in that way. And so we just say things like, if you have a penis, you're a boy. If you're a boy, you have a penis, right? And that's just not always true. Or that every single person is biologically male or biologically female. And that's not always true. So these things are diverse and they're complex, right? That's why we say designated sex instead of biological sex. The designated sex is the genitals you were born with. The biological sex is that system of all five of those ingredients. But all of that is sex, meaning the body, right? And that is separate from what we call gender right now. And this to me is a really hard thing as a teacher like this. I want there to be reference materials that I can give you to explain and understand gender. And there just aren't right now, because we've all been taught that you are a boy because you have a penis, right? And if we're taught that from the moment that we are born, then we just believe that genitals and gender are the same thing, that sex and gender aren't two things, but one. But as soon as we started to acknowledge that trans and non-binary people exist and have always existed, then we had to pull these apart. Sex and gender are two different things, as evidenced by somebody like me, for whom those two things don't match. My designated sex was female. My gender is man. Right? In fact, for me, we would almost call those things opposite, right? And I'm not the only person like myself. There are millions of people like me. So if there are millions of people who have a sex and gender that don't match, then sex and gender can't be the same thing, right? So the analogy that I always make is that sex and gender are like hair color and eye color. They match for a whole lot of people. Even in a room of seven like this. I wouldn't be surprised if more than fifty percent of y'all in this room have brown hair and brown eyes, because that is the most common combo anywhere you go in this world. Humans have brown and brown. Um, but when

we don't, it's okay and nobody freaks out. You know, my eyes are blue sometimes green or blue, but they're not brown at all, ever. And my hair is brown. So obviously my brown hair didn't make my eyes brown. That's not the way it works. And if you have brown eyes and blonde hair, then you can see that your brown eyes don't make your hair brown. So brown eyes and brown hair come together a lot all over the earth, but they don't make each other that way. It's not having one that makes the other. It's just that those things match for a whole lot of human beings. That's just the way the genetics work, right? So sex and gender, I think match for about ninety six percent of people. I think it's going to turn out to be about four percent of humans that are trans or non-binary. When we can really see the size of our group and our population, I think it's going to actually turn out to be something like four percent. But that means ninety six percent of people have matching sex and gender just the way a huge percentage of people have matching hair and eye color. So it's no wonder that we thought they were making each other. It makes sense to my mind when you're suppressing the existence of trans people and people don't know any trans people, then it really does look like everybody has matching, right? But as soon as trans people came out of the closet and forced the way we just did over the last twenty years, it's like, whoops, that's not really true though, right? That's just a mistaken impression we got by being in denial about this whole group of people. So now it's just time to readjust and realize these are two different things they may match. They're going to match for a lot of kids and babies, but there will always be that four percent that are being born with these things, not matching. So we have to stop being surprised by it and just kind of expect it. Right. So then gender expression. Oh, so what is gender? Gender. We're using that word to really just describe that deep belief that all of us have about being a man or a woman or a non-binary person. So you are one of those three and you just know that. You just know it with all your heart, right? It's a belief that you hold that is kind of an unshakable belief that you have about yourself. And that's true for me too, right? I've known I was a boy since I was two. It's never changed for me. It's one of the deepest things I've always known about myself. And no matter what anybody told me all these years, they could not change my mind about it. And that that is what we're describing when we use the word gender right now, right? This very deep conviction that most of us have about being one of those three things man, woman, or non-binary. And then gender expression, we're actually experimenting with calling this presentation right now in our editor department. Right? Because gender, gender expression makes it sound like it's how you express your gender. When what I'm about to tell you is it may not, it may not be the way you express your gender, right? So some people are dressing in a way that does line up with the way they feel inside while other people aren't right. Somebody could be dressed very stereotypically but not feel that gender. Yeah. Go ahead. Um, uh, we just had a question of, um, can you kind of go into. Yeah, yeah. Okay, cool. Quite, quite there, but I am, I see the question and I will for sure get to it, I promise. Okay. Um, Yeah. So presentation does or doesn't match that gender. But that is what we've been using all of our lives to guess people's gender, right? And that is the reason why some of us in the room have our pronouns. And our caption is because we've learned enough about this to realize that we can't be guessing about each other. And I'm going to use Heather just because we go way back. But if I looked at Heather, I would just think, Heather's a woman from my training all my life. Because exactly to me in the culture that I was raised in, even just a face picture of Heather has enough clues to me that there are stereotypically feminine parts of her

expression. So my brain would then just want to connect the dots and be like, well, then that must be a woman. And probably somewhere subconsciously I would just think, oh, and she's biologically female, right? So thinking all of these things align is a big problem because they don't always align. And when we assume that these things are aligning, we're assuming that the person has all dominant traits. And that's not true. And the issue with that is people who have minority traits already lack access and safety within most of our systems. And so when we when we assume that they're not there, it makes it even harder for them to gain access. So we've got to open our minds to realizing that the way somebody looks may not be really who they are, and that that could be true about us too, right? And that's why we put our pronouns in there, because nobody's pronouns are actually obvious. And we're going to talk about that a lot more today. So then orientation is just who you like, right? It's just attraction. These are the words we use to describe attraction, like gay or straight or lesbian or bisexual. And those words describe what kind of people you are attracted to, and they don't really connect to your gender in any way. As a transgender man myself, if I were attracted to other men, most people would call my orientation gay because I'm a man. And in that scenario, my romantic partners are also men. So Gay would be the label we would put on that. If I'm a transgender man and I'm attracted to women. Most people would call that straight because I am a man and my partners are women. Right. But I can be a transgender man and be either one of those things. Knowing that I'm trans doesn't tell you whether I'm gay or straight or bi or whatever, because those are separate things. So all four of these things are actually very separate things, and they come in every possible combo. So I think of all of this stuff. I think of being trans or non-binary as a minority trait or a minority characteristic, meaning that people have always been born trans. There's a small set percentage of people that have always been born trans, and that being trans is just a characteristic. It's not a disease. It's not a disorder. My being trans is not hurting me in any way, and it certainly is not hurting you in any way. So that is a minority trait. It's always existed. There's a set percentage of people that have it and it's benign, right? So I think of being trans then very much the way I think of being left handed or having red hair. Those things also have always existed. They're benign and there's a set prevalence for them. But we were also very mean to both of those groups of people. So when we encounter minority traits, we tend to start out with a misunderstanding that there's something wrong with that trait. And then over years, sometimes hundreds of years, we come to see it as just a normal human variation, which is actually what it is. Now, here's the good thing. We already know what helps us to change our minds about minority traits. And that's education and what's called personalization, right? So when we know that we know people with minority traits, we tend to be a lot better about accepting and understanding it. And we did this research in twenty twenty three, and we found out that fifty three percent of New Mexicans already know that they know a trans person. And look how this stayed pretty true across all these other demographics. This research project that we did, we did it in part to show that rural people and urban people don't have this huge divide in the way they think about this, right? So we were right. A lot of people across New Mexico already know a trans person, and that is from two years ago, two or three years ago, fifty three percent. So the higher this gets, the the more my training won't actually be necessary. Right? I think about if I had to go around the state training people about left handed cultural fluency and what a boring job that would be, and how nobody would ever show up to the training if I was there to teach people why it's normal to be left handed, and why you

should not be mean to left handed people. I think people would just be like, yeah, I know that. I know that already, you know? But if you go back to the seventies, when I was a kid, we people would tell you lefties were evil. They would tell you that a left handed person was possessed by a demon. And teachers like us, y'all in school would, quote unquote correct the left handedness by immobilizing the child's hand at the school to force them to use their right hand instead of their left hand. So it helps me to think about lefties because we really misunderstood that trait too. And these days we tend to just accommodate it and move on. It's no big deal. And if somebody tells me that their left handed, I don't then think I know something more about them because I don't. Right. There are people who are left handed, who are really cool people. There are left handed people who are really not cool people. There are some left handed people I would really want to be friends with, and others that I really would not want to be friends with. And that's not because they're left handed, right? So same thing with trans people. Being trans is just a characteristic that the character of the person is separate from them. So as I did when I did my intros, right, I said, hi, my name is Adrian Lawyer. I use he pronouns and I'm the co director at the Transgender Resource Center. So I really believe that is how we are going to introduce ourselves in the future. And it's not going to feel like a big deal right now. It feels really awkward to people to say their pronouns or use their pronouns, but it's just because we've been raised to think that pronouns are quote unquote obvious, and we're going to really take that apart today because they're never obvious. There's no such thing as obvious pronouns. And so really, we all need to just say our pronouns. And once we get used to that idea, it's going to become a no big deal. Part of how we do our intros and captions and email signatures and stuff like that right now, unfortunately, it's been linked to some type of political correctness, but really it's just about a culture learning about a group of people, trans and non-binary people that we really didn't know about before. Right? We started to learn about trans and non-binary people more in earnest in the eighties and 90s. We've been adjusting to it ever since. So saying our pronouns is just going to become, I think, a routine part of introducing ourselves. And there's no reason not to just start now. It's not a big deal, you know? So you don't have to say it out loud, but think of just think about how you would introduce yourself and say your pronouns. If you want to type it into the chat, you certainly can. That's a great place to introduce yourself, I think. I asked you to do that later too. Okay, so we're going to go over each one of these things. We're going to really talk about why this is not obvious and why it's not just political correctness and why does it even matter, right? Pronouns are part of the English language. They're not new. The discussion about pronouns is new, but we've all been using pronouns our whole lives. Pronouns are just words that we use to not have to say somebody's name over and over again when we talk about them, right? Teachers know this better than most. Pronouns are just a part of speech. That's all it is. He and she are definitely the most common, but there are other pronouns for sure. Now, is this obvious? Know your biological sex can have something to do with the way that you look. And I think about trans women who don't have access to puberty blockers, who become very tall during their first puberty, right? There are trans women who wish they were not that tall, but that is just their genetics and part of their biological sex. Some trans women are very petite, just the way some cisgender men are very small, right? But some trans women draw the unlucky cards of being very big or tall, and that means they stick out. And that's not because of being trans, it's because of the biological sex, of being male. Right. And the genetics. Um,

some trans women aren't able to get their beards removed. It's expensive and it's painful and it takes a lot of time. So some folks have stubble every day by the afternoon, and they feel that that prevents people from seeing them as the woman that they really are. So your sex can influence the way you look, the clothes you wear, the jewelry that you wear, the makeup that you wear or don't wear, those can affect the way you look to other people, right? But who you are is just what's inside of you. So those things may not match up. And when we use someone's pronouns, we're not using the pronouns to describe their presentation. We're using the pronouns to describe that knowledge they hold about themselves on the inside. So gender expression or presentation is what we call this outside piece. All of these ingredients, some behavior is part of expression, like gait. The way you walk is part of the way people perceive your gender from the outside. Your name. Right? I think about Zoom. Look how we have a couple of people who are off camera right now. And then the name is huge. The name is the main thing you see about that person, right? And names give our brains an idea about gender too. Yeah, but gender isn't how we dress. Gender is how we feel. It's what we know. So cisgender people can dress in a way that does not match their gender. These are all folks that we know to be not trans. That's what cisgender means. I'll show you in one second. Cisgender people are what's on the screen right now, but each one of them is dressed in a way that's much more stereotypically the other gender. Glenn Close We've known her for a long time as a performer, but if I didn't know who Glenn Close was and I saw that picture, I'd be like, what is happening in this picture? What's going on with this person? Are they trans? What's what's up? You know, but it's not that. It's just a photo shoot. It's just creative. The kid on the right was one of the famous frozen boys on the internet when he was little, and his family would say to him, are you a girl? Do you feel like a girl? And he'd say, no, I don't feel like a girl. I'm a boy. But he loved Princess Elsa and he liked to wear his Princess Elsa dress, you know? So he was just saying, I enjoy this activity, I enjoy this piece of clothing. But it's not reflecting that I'm a girl on the inside, right? So cisgender, then again, just simply means not transgender. It means that your sex and your gender line up one hundred percent. So whatever was said about you on the day you were born, you never had a problem with it, right? So for me, when I was born, they were like, it's a girl. Yeah. And then as soon as I got old enough, I was like, no way. Absolutely not. You know, it was one of the first things that I reacted to was my gender. But if you were just like, yeah, I'm a girl. Like that's fine. Then that's called cisgender, right? That's all that means. Okay. So binary trans people can also look any way that we want. And like I said, sometimes it's not even about what we want. It's just about things like sex markers, right? This is why I think people think every trans woman is tall, because some are right. And the tall trans women are the ones that people notice. So then they just think, well, all trans women must be really big and tall. But that's not true. They run the gamut, right? Just like all genders do. There are really small men and really tall men. There are really small women and really tall women. You know, when I remember that every couple of years is when I watch the Olympics, and I cannot believe the range of women's bodies. When I watch the Olympics, I'm just always like, wow, we how can we even all be the same species? If you look at like Simone Biles, you know, and then you look at somebody like the powerlifting women and you're like, wow, my gosh, like she's huge. You know, and Simone is so small. And that's why she can flip her body over like four times is because she's so compact, you know? But they look incredibly different and they're all what we would call cisgender. So trans people also run the gamut. So some of us

choose to look different and some don't choose it, but do look different. Now, transgender, what we mean by that word right now is just that your sex and your gender don't match. That's it. Like, yeah, that trans is an umbrella term. So trans is not a medical word. There's no medical component to the definition. To be trans does not mean that you want to take hormones or have surgery. Some of us do and some don't. So being trans, all that means is that whatever was said about you on the day you were born, you don't feel that way. You feel differently from whatever you were classified as at birth. Okay. So non-binary. Here we go. Let's talk about them. Okay? Because that to me is the heart of the pronoun discussion, truly. So non-binary people can also look however they want, you know, and when we hear that there are people who don't feel like a man and who don't feel like a woman, my brain immediately went to the idea that these folks would look androgynous, or that they would want to distinguish themselves visually from the stereotype of man or woman. But that's not true. You can feel non-binary inside, but love wearing makeup and jewelry, or like to just wear pants and a shirt and a belt, you know, like it doesn't it doesn't dictate the way you present yourself. So everybody on the screen right now is non-binary because they have told us that. But some of these people look pretty stereotypical to me. Some of these folks look different, right? Some of these people I would notice out at a restaurant or a mall or something, and I'd be like, wow, what an interesting look, right? But other folks, I would just walk by on this screen and I wouldn't even notice them. Step, right? And that's the thing about non-binary people is they can look exactly like me and they can look exactly like you. That is why I put my pronouns in my caption is because I could be non-binary. I'm not non-binary. I'm a man, but I could be non-binary. And there's no way for you to know that about me until we talk about it. That's why pronouns have to be displayed all the time, because we are still getting our brains used to the idea that non-binary people even exist, and non-binary people actually turn up in a lot of the rooms that you're in, but your brain's not parsing for them, because we still haven't fully integrated the idea of them in our minds. Right? So when I walk into a new room, I have to consciously think about like, I wonder who in here could be non-binary? Because otherwise I'll just forget that they might be there. And then it's hard for them to have the right access when we're not even expecting them to be in the room. It's very hard for them to gain the necessary access. So when I walk into a new room now, I'm like, oh yeah, there's probably non-binary people in here, don't forget. And then that makes me say my pronouns and put my pronouns into my caption and stuff like that. So non-binary then is what I just said. It simply means that that deep internal feeling you have is not man and is also not woman. And most of us were brought up being told that's all there is, right? That's called the gender binary. And I was brought up under the gender binary in the US too. I was told that there are only boys and girls and that that's determined by your genitals, right? And none of that turned out to be true. And non-binary people have existed throughout all of human history. The history, the historical record is so, so clear on this. There are labels for trans and non-binary people in hundreds and hundreds of human languages. So this is not a new idea, right? It's just new. If you grew up in the US, which I did. But non-binary folks are not new. They just feel new because they're new to us. But it's not new. Now look how many different ways there are to not be a woman and not be a man, right? A gender means no gender. Like I cannot even imagine. Gender has been like almost the defining characteristic of my life since I was a child. And now I run a transgender nonprofit that I started like, this is gender, gender, gender, you know, like,

sometimes I would like to talk about something else. Too bad. Right. So a gender, when I hear people say I'm agender, I'm like, that mystifies me. I do not understand what you mean. But that's the thing, right? When you don't have a minority trade, it's hard to understand. Probably if you're hearing me tell my story, you can't understand that either. To be born and said to be a girl, but to feel like a boy, what would that be like? You know, how can you understand it if you haven't lived through it? So I know that there are people who have no gender. It's just hard for my brain to wrap around it, you know? Because to me, gender is such a core component of everything that I do. But some people are like, no, I just really think of myself as a human being. I don't like all this stuff. I don't want to be engaged that way. You know, I don't want to be treated like a woman or like a man. I just want you to treat me like a human being. You know, Pam, gender means all the genders in one person. So all genders encompassed in one person and gender fluid means gender. That is shifting and changing over time, which again, my brain just goes, oh, when it hears that. Like what? But I don't I don't need to walk in their shoes, right? I need to just walk in my own shoes and just acknowledge that when people tell us this, this is their genuine, sincere experience, right? Things that are not like me can fully exist. And that's true all over the world. So this is just another example of something that I don't get from the inside, but I get it intellectually and I've had enough people around me tell me this is how they felt about their gender, that I'm just like, okay, great. And I'm happy to have it explained to me. And I'm happy to understand it enough to just make access for folks, right? That's the, that's the issue. Uh, this is my favorite image of non-binary people that I have because to me, if you can get close enough and again, I'm going to send you these, right? So you can really inspect this, um, at your leisure. But to me, these are some really telling pictures because everybody in this poster is non-binary. So when you look at these people, can't you find somebody who looks like you? I can, you know. And when my beard came in y'all way back in like two thousand and seven, I thought that was it. I was like, yep, now I'm a he for sure. Everybody in this world can tell I'm a he because of my beard, you know? And then I met a non-binary person with a beard. There's one in the lower left hand corner of this picture, and to me, that person looks like a he. My brain wants to call them. He. But they are non-binary because they said they are non-binary and that's it. So if someone who's non-binary can look like my twin brother, then I could be non-binary, right? And that's the important piece. The big corner we all have to turn is that internal, like realization that I could be a non-binary person because after we fully accept that, then we really start using the pronouns without reservation. Exactly right. CIS people are straight and gay. That's who's mainly straight and gay. Most people are cis. Ninety six percent of humans are cis. So when we think of gay and straight people, we're thinking of cis people most of the time, right? I think with us, we have to teach. That's different from trans because people think of LGBT and they think it's all one thing, like you must be LGB and T all at the same time, right? When of course, that's not true. Trans people can be straight. So they may not be L, G or B, right? LGB is all describing what kind of people you want to date. And trans is just describing what kind of person you are. So that's a great question. Oh, I love that question. Yes, cis people are LGB and Q and everything else and trans people are LGB and Q. It's just like left handed people and right handed people. Right, left handed people can have every characteristic and so can right handed people. It's just that right handed people are the big majority and lefties are the small minority trait. But other than being left handed, what else traits do they have? I don't know. Right. They could

have any trait. So is this political correctness? No, this is what we're getting finally. Right. And I'm going to show you the the headline to a study in a second that really gets to the heart of it. But people think pronouns are about trying to be like signaling your virtue. Like, look at me, I know something about this. So I say pronouns because I know about trans people. Pronouns turn out to be one of the biggest proxies we have for being seen, for being believed, and for being accepted. When we use someone's pronouns, we're saying, I see you the way you see yourself. Whatever it is you tell me about yourself, I believe it and accept it. Can you think of a time when someone didn't see you? And think about how that felt. You know, when someone just kind of insistently kept calling you something that really wasn't how you think about yourself? A lot of us. This was when we were little. You know, I think about parents do this a lot without meaning to. Parents make kids feel lazy and stuff when really, that's not what's going on, you know? But I think even as an adult, and not even with my gender being trans, I've had this experience for sure. But there's other times when I have felt so misunderstood even at my work. Honestly, y'all, when people get upset with a nonprofit like ours, they'll say things like, you don't even care about trans women. And I'm like, I spend my whole life caring about trans women. What are you talking about? And when people say that to me, the first time somebody said that to me, it hurt my feelings. Now I know it's really just about them having hurt feelings, you know? But when we're not seeing, when we're not understood, we're not perceived the way we perceive ourselves, it's such a big divide between us and the other person. So this is the thing about all this language, right? When people say to me, this is PC. This is always what I try to show them. When we use gender neutral language, not just LGBT people, but a lot of women actually say they feel more valued in a workplace. So when we think about the way we talk and the words that we use, it's not for virtue, it's for real belonging. And when we survey people about that impact, it's there. People say, yes, I feel like I belong more because of the way our staff try to talk. I think that's the problem is we got to a place in history, cultural history, where people felt very, um, policed around all of this. Right. Instead of that, really where this should come from is the desire to include. That's really what it's about, you know? That's why we have to teach this stuff with kindness and patience when we can. Because when people feel that they're being attacked for using the wrong language, it doesn't help them to use the right language, you know? And using the right language is for everybody to feel more, more like a group together, more like a team. And this is the one we talk about in our trainings all the time, every day, y'all. There was a fifty six percent reduction in suicidal behavior for trans adolescents who had their right pronouns used. Not in every part of their lives, even. They divided these kids lives up into four main areas. And that was like work, school, home, and spending time with their peers. And this study showed that if if just one of those places started to use the right pronouns. So one out of the four, if just one started to use the right pronouns, fifty six percent reduction in suicidal behavior, not ideation, behavior, behavior. Right. So for us, this is the motivation behind all of this. It's not just to try to make everybody say their pronouns. It's like we see what happens when the pronouns are used and when they're not used. And the consequences are really devastating. You know, when you think about how you could keep a young person alive just by being the one person who uses their pronouns, it becomes a little more urgent to me. And gendered language, I think also just has so much connotation. This is this is the slide to me where I'm like, oh yeah, look how sexist our culture is, you know? And that's why I think when we talk about gender neutral language, that's what we're talking about

in a sexist culture. Generalized language is masculinized language. So no wonder women feel like more of a part of the team when we use gender neutral language, right? And look at the words we choose to use for women a lot of times versus the ones we use for men. Even the unflattering words in these columns feel different to me. And it's so cultural, like none of these things are great. You know, I don't really want to be called a jerk, but I'd rather be called a jerk than shrill because of my upbringing, you know? That just sounds like, you know, anytime we feminize an insult, it lands a lot harder. So, I don't know, just thinking about neutralizing. Right. Okay, so talking about suicidal behavior, I can't leave a room without showing these stats. I'm sorry. I know they're a real downer, but the y r r s is conducted every other year in New Mexico with public high school students throughout the state. Not every school participates, but every district does. And it is gold and surveillance data. Y'all, that survey blows my mind. The stuff these kids tell us on that survey, I just I don't understand it. It's because it's anonymous, I guess. But they really feel that they can disclose all of this really intense stuff on a survey that's all about risk factors and risk behaviors. So it's like, what kind of stuff are you engaging in? What kind of stuff are you encountering at school and at home? And they basically just tell us. So we begged the Y R's to put a trans question on the survey, and they agreed to do it back in twenty seventeen. And every year that we've asked this question, it's been right around six percent of the kids who actually could easily fall into this group. So this is actually why I say four. This is why my most educated guess for trans prevalence is four percent, because I don't believe that there's more young trans people than old trans people. I think young trans people feel more empowered to, to come out on an anonymous survey. And people my age often won't admit that they're trans, even if you tell them it's anonymous. That's how scared people are, right? So I don't know if four percent is is mark my words on that. I'm really I really believe that. But more than prevalence, let's look at the behavior, right? Trans kiddos and non-binary kiddos told us that they attempted suicide within a twelve month period, more than three times as much as their almost three times as much as their peers. A little less than three times, right? That's super intense. Non-suicidal self-injury. That means like cutting and burning and stuff like that. Half. Half of the trans and non-binary kids said that they had done that, and these questions are always within the last twelve months, not lifetime statistics. Right? So to me, this is just really telling about what what these kids are going through. And when we know that just adjusting language can make a big difference, that's why we do a whole workshop about pronouns, right, is because that can actually reduce these statistics. That's how we know this is not about being trans. There's nothing about being born trans that makes you more suicidal or more anxious or more depressed. Right. When we see that using the right pronouns brings down the suicidal behavior more than half than we can see that it wasn't the transness in the first place. It was the way they were being treated for being trans. Right? As soon as we adjust that, people are able to adjust. Okay, so these are cisgender folks, and the way we talk about them always hinges on their gender. This person is a woman. She's told us she's a woman, so we know to just call her a woman. That's it right? Her designated sex at birth was female, and that makes her a cisgender woman. Her pronouns are most likely she. Although cisgender folks are welcome to use any pronouns they want to use. And I have met some cis folks recently who are using they or she slash they as an ally, right? If it's not going to hurt your feelings for someone not to use your right pronouns, then giving people a chance to practice what they say is a great thing, actually. You know, the more we can expose people to they

pronouns, the better. So this woman might use she and they. We don't know her. She's pretend she's fake, but most likely a lot of the time someone like this will use she pronouns. And that's what we've gotten into the habit of assuming over here. This guy's a man, and he's told us that. So he's a man. And that's how we always speak about him, whether he's in the room or out of the room. We call him a man. He was designated male at birth. That makes him a cisgender man. And most likely his pronouns are he. Okay? These are binary trans people like me. This guy's a man just like me. He's told us he's a man, or he's filled out an intake form saying that he's a man. And so now we know what the instructions are. We just refer to him as a man. That's it. Right? The gender is what dictates the language. Now, he was designated female at birth, just like I was. That doesn't change anything. He's still a man all the time, twenty four hours a day. But now we could also refer to him as a transgender man. If there is a clear and compelling reason to do that. We don't just say that someone's trans for no reason, because that's really just kind of outing somebody. But like, I'm a good example, if you went home later and said a transgender man came and did a training about pronouns for us today, that makes sense, right? That's my expertise is because I'm trans, I run a trans center. So when people refer to me as trans, I think that's almost always relevant, right? But a lot of times we would just refer to someone as a man because saying the person's trans doesn't really matter in that situation. I'm just trying to teach you the vocabulary, right. And folks like me often do use he pronouns. A trans woman over here is a woman at all times. She was designated male at birth, making her a trans woman but not a man. And she probably uses she pronouns. Now, this is the reason we have this slide. And you might be looking at this being like, duh, like, why are you saying all of this? Right? But for me, over the years, when I have told people I was designated female at birth, that's often when there's a short circuit in their brain. And that is when sometimes people say, wait, wait, wait, wait, whoa, you're a transgender female. And I'm like, no, right? I was designated female at birth, but you don't refer to me as female or a woman. I'm not ashamed of my designated sex, but it happened fifty five years ago. You know, the most important thing in the room between you and me is that I'm a man. So that's what's really determines our interaction is my gender. So we always talk about somebody on the basis of their gender. If we treat men and women differently, then we treat that person based on their gender, right? So it's gender that drives our social interactions, not, not designated sex and not even look right. It's not even the look of the person. It's the gender they tell us they are. Now with non-binary people, we just refer to that person as a person, right? We wouldn't say a non-binary man or a non-binary woman unless they said it. The whole thing about being non-binary is that they're not really a man or a woman. So this person happened to be designated male at birth, but it doesn't really matter. There's still a non-binary person and this person over here was designated female at birth, but it doesn't really matter. They're a non-binary person. Now. A non-binary person can use any pronouns, the most common pronouns used by non-binary people are they them theirs as a singular pronoun, but it's not required. You know, non-binary folks may have a high level of comfort with he or she, or they might even use neo pronouns, which are pronouns that most of us in here haven't heard too much before. The singular they is already colloquial. It already works because we know how to do it. We'll say things like, oh no, somebody forgot their coffee mug in here. Oh, I hope they come back for it, you know. And we already do that just conversationally with one another. So that's why they is catching on. I'm going to show you some neo pronouns. And it may be the first time

you've seen some of them, but a non-binary person can use any pronoun they want. It just happens that a lot of times they use they, but we can't be expecting it and we can't be requiring it. So I love this about English, right? Most of our pronouns are gender neutral, right? When we look at this chart up here, which of these pronouns has a gender attached to it? Really to me, just he and she. Right. That's it. None of these other ones. If I say I, what gender am I? Oh, you know, you, us, they all could. I mean, it doesn't tell you anything. There's no connotation of gender with those words. So to me, it helps me to remember that because people are so upset about pronouns these days, like pronouns themselves are this big inconvenience, but pronouns already, already aren't gendered. We're already using them day in and day out, with no trouble to talk about each other without any confusion. We're not always being like, who are you talking about? We know who's being talked about even in writing most of the time, because pronouns are designed that way. They're designed to to parse, right? There's no gender on most of our pronouns. So if we're going to change he and she into they, this is the number one piece of, um, resistance I get. People want to tell me it's ungrammatical, but they really want to say grammatically incorrect, which, by the way, is wrong. It's not grammatically incorrect. It's ungrammatical. So we're going to be the grammar police. Let's be it. Okay. But singular they is not even ungrammatical. It's just out of style and rapidly coming back into style. So if you go back before the Victorian era, there are a bunch of famous authors who have they singular they in their writing because it was just fully in style to do actually, it evolved out of like Thee and now. Right. That's how old it is. It came out of the thee and thou era of English. Um, so they has been used in this way for quite a long time. But after the Victorian era, it fell out of style. And so a lot of us were redlined over it. You know, I think about like, I probably tried to do that in a paper when I was young and the teacher said, no, you can't say they unless you're talking about more than one person. And so then I walked around all my life thinking it was ungrammatical, um, because I'd been corrected on it based on style, you know, but it's, it's actually totally allowable. And mainly who cares if it's grammatical or not because the language is always evolving, y'all. I mean, staycation is not a word like what is what is that? You know, staycation, we just came up with it two hundred years ago. We didn't have the word refrigerator because there weren't any refrigerators. Right. So like we have to keep adapting our language. My mom is alive, but she is basically spinning in her grave that the word irregardless is in the dictionary. Now, like to her that is abhorrent. Like that is not okay. But it was used so much and so often that it just became common usage. Now if you Google irregardless, it's Merriam-Webster, it's in the dictionary. It's totally fine. I see it in absolutely reputable print sources now, but my mom literally thought that was the difference between a smart person and a dumb person when I was little, is using the word irregardless of all things, right? So we don't need to get that attached to grammar, y'all. It's really okay. It's really okay. Plus, this can actually reduce somebody's suicidal behavior. So I love grammar. My degree is elementary, and if you don't know that about me, I would have been a kindergarten teacher if I hadn't had to be an advocate. Um, I love grammar so much, but I love people more. More than grammar, you know? So I don't know. We just have to adapt. But this isn't even ungrammatical. Now this is what finally helped my brain click in when I realized that they and you are exactly the same now because you already means one person or a bunch of people, and I know it every time I read it. If I read it even in a book, I know if they're talking about one or many. So even without para verbal context, I can tell what they're talking about, you know, and they works the same

way most of the time. If you relax and just let it go, you'll know who they is in the sentence. You'll know. And if you don't, you just ask, right? If I said, are you going to lunch later? Then somebody in here might be like me. Are you talking to me? And I'd be like, oh, everybody. Is everybody going to go to lunch later? You know, like, if you don't know whether I'm meeting one person or a bunch of people, you just ask and then I'll clarify and we move on with the conversation, right? So same thing with, hey, we don't need to be nervous about it. If we don't know who they is, we just say, oh, wait, who, who are you talking about? And then the person will say, oh, Alex, you know, Alex uses they pronouns and we'll be like, oh, great, okay, I got you now, right? It's not a big deal. And truly, most of the time, you don't even need a, you don't even need a clarification. It's just that easy. So if we can do you, we can do they and we're already doing it. Oh, check this out, y'all. Okay. Get ready. It's gonna you're gonna miss it because it goes by so fast. Get ready for this, okay.

Pronouns

Speaker This is a national ad, and it didn't even occur to them that the grammar would be wrong or that it was a problem. You know, it was just like the way to make this make the most money. That's the only difference dramatically between singular and plural. They, by the way, is themself. So we say they are, even if we mean one person, just the way we say you are. If we mean one person now in idiomatic English, we can do anything we want. People say you is all the time, but in grammatical English it's still. You are always. Whether it's one or many people and they is the same. So if somebody says they're going to go eat lunch by themselves, they mean one person. And if they say they are going to go eat lunch by themselves, they mean a small group that are going off by themselves. I don't know why this is like this, but I can never get that video to work without coming out of the full screen. Okay, so check out these neo pronouns, y'all. This is so interesting. Right. These are called neo pronouns, meaning they're new or newer words more newly created. But Z has been around since like the sixties. And I'm wondering if you've ever seen it before today, right? Because it's been around for decades and decades. Some of our trans heroes doggedly use these pronouns like Les Feinberg. Um, but most people have never heard it or used it in their lives. So that is why they is working. Maybe this gives it always gives me a little gratitude for that. I'm like, I'm so happy there's days so I don't have to learn Z that, you know, like this. It's really hard. It's really hard when friends of mine use Z or per or any of these, even my brain finds it very difficult because it feels so out of the ordinary, you know, where they feels like something I already say. It feels very comfortable to me when I use it, and the more I practice it, the more it just becomes fluent for me. But see, I never get fluent with y'all because you just so rarely get the chance to do it. But when somebody uses these types of pronouns, they're usually really happy to explain it to you and tell you how it's pronounced. Don't be scared to ask. It's always okay. Like, hey, I've never seen those pronouns before. I just want to make sure I'm saying it right. You know, tell me how to say it. And then we just do our best. This is one of those times where we get really good chances to apologize and integrate and move on, you know, and somebody will say, I use Z. Remember you're like, oh, that's right. I'm sorry. I'll get it Z right now. One of the cool things about these that I was taught is that these neo pronoun sets often have the sound of the dominant sets. So even if they have interesting letters in them, they often sound like she, her, hers, he, him, his or they them theirs. So they have a homonym quality, homophone quality to them. Not always, but you can kind of go with that if you're not sure. Purr purr purrs Caesar. Zeus right. Z z m z. That one's hard. X is usually z when you say it right. And I will say, if you work with adolescents, you might run into these more because adolescents are a little freer like trans adults. Also try on different names before they settle on a final name. Because if you've never had the chance to try these things out in your life, you sometimes need to hear it before you can settle on it, you know? But I find adolescents are freer. They're like a little bit less self-conscious about giving these things a try. You know, they're more willing to be like, I want to hear, I want you to call me Z. and then two weeks later be like, no, I think I want you to use they and they don't feel weird. They don't, they don't, they often don't want to apologize and be embarrassed. They're just like trying it out legitimately. Right? So if you work with young people, you may see these a little more than some of us who work more with adults. Now, this is really important for us in our work because not outing people is a really big deal in terms of

danger and safety. So it's just really important to remember, like, you may be the one safe person at a school who's using a kid's pronouns, but if they, if you don't know whether the parents are cool with it or not, don't call them that in front of their parents because it may be the only way to protect the safety at school is not to use it in front of the parents, right? So if you know that a kid uses a different name or pronouns, it's really important to ask that young person, where is it safe for me to call you this? because the last thing we would ever want to do is like, make it so they didn't have their housing by telling the parent that the child is trans or non-binary when they didn't know that yet. Some kiddos don't tell their parents these things out of fear, and the parent actually would do a great job of handling it, you know? But some of these kiddos are fearful of their parents for really good reason. And if the parent did find out this piece of information about them, it really could be very threatening. So we just have to try to, you know. Be sure, be aware of the situation. Now, who else uses names that aren't their legal first names? We always get treated like this is a trans issue. But what other examples can you think of of human beings that are every day called something other than that legal first name? You can drop it in the chat. Say it again. J.D. Vance, J.D. Vance, right? That's not his name, J.D. that's his initials. That's exactly right. I love that. That's a perfect example. My family are all a middle named, including me. Like, my name at birth was Leslie Adrian lawyer. And my name today is Leslie Adrian lawyer. And I've been called Adrian from the minute I was born. So I don't know why my brother is the same way. My dad is the same way. His dad is the same way. And I did it to my kid. And no one can tell me why we do it. I finally went to my dad in his seventies. I was like, why are we all middle names? He was like, I don't know. I was like, are you kidding me? Like, nobody has a there's no purpose to this. I don't really get it. You know, its causes problems our whole lives because you don't go by your legal first name. Right. It's a really interesting thing, I think, about people who go by junior or Jr who are named after somebody or somebody who is the third name. I've heard those people called Trey or Tripp write for the third. And then like, that's what goes on there, like documents is Tripp. But that's not really the person's legal first name, right? There are people who just use nicknames like Buck, you know? And that's like also what anybody would write a check to buck. But that's not really Buck's name on the birth certificate. Right. So I don't know, there's a lot of examples here. I think a lot about married names. Still, a lot of women will still take on a man's name if she marries a man, and then that becomes her legal name. But that's not the name she was born with. And that can sometimes cause issues with the maiden name or the family name and the married name. So I think for us, it's always just important to remember that what we're talking about isn't unique. You know, people are like, oh, trans people and all these names and everything. And it's like, yeah, but that's not just a trans thing. There's a lot of different folks who who use different names, and we accommodate it all the time. We don't think anything of it, you know, so these are some of the best ways we've come up with for sharing pronouns. These are really simple. A lot of them are nonverbal. Even sticking it in your caption is no big deal. Putting it in your email signature is no big deal. You can see how my email signature has not just my name, my contact info, but it also has my, um, it has a little link to a web page that's like, why do I have my pronouns in my signature? Right? Because that way, if you want to add your pronouns into your email signature and you're worried people are going to want to, you know, hit you back up and be like, why did you, why did you put that in there? Like you can put that link there. And if they're questions about it, they can just click the link to see why you did

that. You know, what is the explanation for that? So it's a really easy, low stakes way to add it to your email isn't even something you have to verbalize to people, and you can put in an explanatory link there to give them the context if they're curious. So those are really good ways. Put it on your business card is a good thing. You know, it's just normalizing it. We're just trying to normalize this culturally, right? That we don't know each other's pronouns. And the only way to know is to proactively share them in some way like this. Okay, so let's not do that. Let's do I have a zoom one? Hold on. Here we go. So you should have access when you hover over your little picture in Zoom, there's a blue square with three white dots that comes up in the upper right hand corner. And if you click on that blue square with the three white dots, it should say rename. And when you click on rename, you can just stick your pronouns at the end. The way you can see that about half of us have been here. If you are able to do this. If this is not too technologically aggravating, go ahead and rename yourself just to practice in here. With your pronouns. Yeah. Perfect, I love that. Just kind of let there be a little awkward zoom pause while you try to do this, and then I'll go forward even if you don't do it. No biggie. Challenge by choice. Okay, great. Okay, perfect. Y'all good? Still working on it. That's totally cool too. Okay, so now if you feel like it and you can open up the chat and just type a sentence about somebody using they pronouns, that is not, um, Not a like, not mean, not something mean about somebody, just something neutral or positive about anybody, you know, or even a pet. Um, but you they pronouns instead of he or she. So like. Like, uh. Perfect. Exactly. I know that's true to a great entertainer, possibly professional in the future. Oh, I'm glad they recovering. Oh, we don't deserve dogs, y'all. Why do we get them to live with us? I love it. Perfect examples. If you feel comfortable going in and put one in there for us. And if not, that's okay too. But see how easy it is? We know what we're talking about. They have brain surgery. I knew immediately that you meant one person. I knew that without thinking it was a bunch of people who had brain surgeries. Right? Beautiful. Perfect. So this is something that I actually do. I'm very sincere when I talk about this. I have really taken it on myself when I'm talking about somebody I don't know to use, they if I know somebody and I know their pronouns, then I try really hard to use the ones I know you know. So again, with Heather, even if she didn't have them in there, I know Heather and I would just say she, because I would respect our relationship and knowing that about her already. But if I didn't know somebody in here and I had to talk about you, I would say they even though my brain wants to think that everybody in here is a woman, I know, that may not be true. So I say they to keep my brain in that lane of like, I don't know what gender this person is, but also it gives me another good opportunity to practice using singular. They and get more and more used to it. My twenty one year old child turns out to be non-binary and uses they most of the time. And that's when I finally got really good at it. As soon as it became really personal and important to me and it was part of my everyday life, then I. Now I can use they without any hesitation. Right. So the more we give ourselves the chance to practice, the better we're going to get at it. Okay. So here's where gender gendered language shows up in our everyday language beyond pronouns. This workshop is called pronouns and Gender neutral language, right? Because it's not just pronouns, we're all of this comes into play. And I've said this before, I know this is like, whatever, some people find this maybe controversial, but I believe that the culture of the United States, the culture I grew up in really struggles with racism and sexism. And because of that, that's why this language stuff is really important, right? Because again, in a sexist culture,

a lot of our norms are built out of that structure, you know? So when we think about the language we use, we're often trying to combat that kind of embedded sexism that we see in the culture. You know, the language is one of the tools we have that can either perpetuate that stuff or potentially work against it. So that to me is really important. And these are some of the places that we can see, um, gender coming out all the time. Honorifics are really obvious. That's a place people think about a lot of times when they think about gendered language. Right, ma'am. And sir is one of the things I get asked about every single day. What am I supposed to say instead of ma'am and sir? You know, it's really hard. But even ladies and gentlemen, Mr. and Miss, when we're addressing formal correspondence, what do we use instead of those things, right? This is a tough one. This shows up all the time. I'm from the South, y'all. I grew up in Mississippi, and so I really got taught to use Ma'am and sir like hardcore for any age of a person, for any kind of a person, I was supposed to call them ma'am or sir. And so it was a hard habit for me to break as an adult. But when I saw the way it landed on some people, it was like, okay, that's my motivation. You know, Ma'am and sir were taught to me to be tools of respect. And when they're not actually working like that, when it's not making the person feel respected, then it helped me to be like, well, wait a minute, what am I? What am I actually trying to do here? You know, what is the goal of what I'm doing? If it's showing respect, there's other ways to do that. And ma'am and sir, unfortunately, are one of those words that are so deeply embedded in the binary. Even the smartest trans people I've ever known can't come up with an alternative. I just don't know if we're ever going to have a version of Ma'am or sir that's gender neutral. The closest thing I've seen is in the Star Trek universe. In the future, we call everybody sir. Sir is a term of respect used for any gender. And that's interesting. We could go that way, you know. But other than that, I just don't think there's their word that's kind of these words almost mean woman and man, you know? So it's like, I don't know, we can't come up with it. But mix has been invented now to be the gender neutral version of Mister or Miss m x period pronounced mix. Now, here's something I need to tell y'all before you run out of here with these new words. Some non-binary people love mix. They've been waiting their whole lives for mix and other people hate it. So even non-binary people are sometimes like, no, I find that really awkward. I don't want you to address things to me with mix, right? So just ask. You can just be like, I learned this new thing. Do you like that or not like that for yourself? You know, and then they'll be like, oh, I love it. I think it's great. Or no, I feel so weird to me. I don't know, I just don't like it. Right. So with any of these neutral words that we're sort of coming up with more these days, there's some audience for it. And then other people who feel kind of turned off by it. The constructed nature of it, I think, you know, it's hard to remember that every word was invented at some point because some of them have become so second nature to us. Right? So this is to me, kind of what I fell back to. I was like, oh yeah, ma'am and sir can actually burn somebody to the ground and makes them feel so bad. But there are ways that we can look at somebody's, um, smile. It's so great to see you today. I'm so happy you came by. Come back soon, you know. Can't wait to see you again. I think people actually warm to you, seeming happy to see them more than just to the words we use in a vacuum. And being from the South, y'all, I've heard I've been called sir in a very passive aggressive way, you know? So I don't think that we always mean those words respectfully. We've just taught them to use them for covering up, you know, like, oh, here's your change, sir. Right. That person wasn't trying to respect me. They were just trying not to get in trouble for

being that way. You know, if you put sir on the end of it, it's okay kind of thing. So I don't know, like, if we if we if we think about our intention with our communication, there's other ways to get those kinds of things across than just those terms. Right. Ah, family language. This is a big one, right? I mean, these words almost always have a gender. Grandma. Grandpa. Mom. Dad. brother, sister. Almost every one of these words is meant to tell us the gender of the person you're talking about. So it's awkward sometimes to neutralize it, you know? But I had some friends who passed away now, but were really old leaders of PFLAG here in town, and they were straight folks in their eighties or 90s when I knew them. And they always said spouse about each other because they were really they were like, let's use a gender neutral word for this. So that gay people, you know, like, let's not make it when someone says partner that we think they're gay, right? And I feel like even in the last twenty years now, straight people say partner all the time. This is my life partner, my romantic partner. You know, it doesn't always to me. My brain doesn't infer that someone's gay now when they say partner, because we've picked that language up better. So when we use gender neutral language, it helps a lot of different kinds of people. We don't always need to know the gender of the person being talked about. My kid, my child, my kiddo. These days, I often say my twenty one year old, you know, because it's like, not my little kid when I say kid, you know? But I'll say my twenty one year old kid, my twenty one year old college student, you know, like stuff like that. But I never have ever called my child my son. And it turned out I was right not to say that they don't feel that way. Right. So to me, when we when we neutralize the language, we just leave a lot more room for possibility to. That was something we often told our kiddo when they were little too. Was like, someday you might have a boyfriend or a girlfriend or whatever. Instead of just being like, you'll have a girlfriend. You know, when we, when we gender these things, we're saying we have an expectation almost about it. You know, have you all heard Nibling? Oh my gosh, how cute is that? The child of my sibling is my nibling. It takes the place of niece or nephew if you want to use that. And some of the niblings love nibling and some don't. Right. This is what I'm saying. You can't count on everybody loving it. But it's a. It's a great conversation starter to. We haven't come up with aunt and uncle yet. The one that people have tried to float is Pebbling. And that's not really rolling off the tongue like nibbling. Right. The sibling of my parent is my pebbling. I don't know, it's not working. I don't know, somebody will come up with it though. Aunt or uncle, we've gotta come up with, look how I don't even have that on my slide because there's not a good one. Occupations. I think more and more that we're getting better at this. But I still hear people say fireman, and there are so many women and non-binary firefighters and firefighters, not even an awkward formulation. It's really the great word for it. Firefighter. It's a gender neutral job word, right? I keep wondering if we're going to end up having award shows and things that eliminate gender, too. There are more non-binary actors these days, and when we have best actress and best actor, it gets weirder and weirder every year. And I know they don't want to have only one award for all those people. Like, how do we have more than one category for folks, I don't know. But I wouldn't be surprised if we stopped doing it based on gender and start doing something else instead, like based on age or based on type of movie, you know? Best actor in a comedy. Best actor in a drama. Like, I don't know, we're going to, we're going to see. But these categories, it's hard to keep them going in a culture where we're recognizing more and more about gender. So this is another one that people bring to me a lot. They're like, I say, hey guys, all the time. And people are telling me that it's not gender neutral.

And I shouldn't say, hey, guys. And it's hard because it's my habit, you know? and I know that when people say, hey guys, they don't mean it to mean men. Y'all. The one I did like that was actually man, like in the seventies, like, hey man, you know, I would say, hey man, to everybody I knew, including my mom, my mom would call me. I'd be like, hey, man, you know, to my mother, like I did not. Dude. These days, I think even kids will do it. Kids will call your parents, brah, you know? Okay, brah. I know, I'm like, hey, I'm not your brah. I'm your dad. You don't call me that, but be. These are gendered words, right, dude and bro and guys are gendered words. And I think one of the ways that we can see it is if we switch it, like if you really just started to be like, girl, you know, to people who are men, and then they'd be like, don't call me girl and be like, no, I don't mean it like that. I just mean it like, dude, you know, like people would freak out. They would be like, no, no, you don't call me girl. You know, if we walked up to a mixed group of people and we're like, hey ladies, what's happening over here? You know, like they would be like, oh, we're not ladies, you know? So if we use a more feminine term to mean everybody, it kind of highlights why it's not always a great idea to use a more masculine term to mean everybody. We're more used to it because we're a sexist culture. But there are a lot of folks that lands badly on. And that, to me, is the bottom line to all of this, right? It's not about political correctness. It's about the impact that I'm having on the people around me and how I want them to feel around me, and they don't feel included and seen. If I use language that they don't want to be called, you know, especially if I just say like, I just like doing it. What's the big deal? That's my habit. It's like my convenience is more important than respecting you as a person. You know, it's sort of like what we're saying, no, we never mean it that way. Right? We're just saying like, ah, it's hard and I'm going to mess up. And I hate it, you know, but but that's the way it lands on people is like, what's more important, like me, are you getting to say that word? You know? So I think about all these words that have gender in them that we just don't even think about. I took my kiddo to college in twenty twenty three, and I just kept on saying freshman the whole trip. I was like freshman, freshman, freshman, freshman. And I didn't even think I was saying a gendered word. And then finally somebody pointed it out to me and I was like, oh my gosh, y'all like, don't you know? It comes from the time when colleges and universities were restricted to men. So the first year students were the first group of men coming onto campus that year, like so the fresh men, you know, and first year works great. Like it's fine the first years, you know, I don't know, Congressman to I do that. I didn't even hear myself doing it. I would be like our congressman, Melanie Stansbury. You know, like, I didn't even I was like, just like, that's the name of the job, Congressman, you know? But it really it's like our rep, our congressional rep, you know, like there's so many other representative senator, there's words that really don't have a gender that we can use for that, you know? Yeah. So these are just some tactics when we're talking about a person that we don't know that we can use. So like, I don't mean one, like one goes to the store. I mean, like this more, right? Instead of saying some man asked me for directions, I can just say someone like, there's a lot of times that we do this when we really don't need to be saying like, we're assuming the gender of the person we're talking about when we could just not assume it. Why does it matter if it's women going to the yoga class or just people, or I mean, are they non-binary? I don't know, you know, I don't really know that. So I'm looking at them. I'm stereotyping them. Maybe even based on the fact that they're going to yoga. I'm thinking it's a group of women, right? So just saying, these people are about to go to a yoga class. They

need to get out of here, you know, or whatever it is we're trying to say. The cashier gave me the change, you know, like it wasn't just some random person at the car wash. I can describe their job role instead of their gender, you know? That teacher told me to come over here and check in with you, right? Instead of that woman told me to come over here. And the last sentence is interesting because I think the other cool thing we can do here, sometimes we can use singular. They like that's how they pivoted on that one at the bottom. But we could also just have pluralized that, you know, if we're like students who who lose too much sleep can struggle with exams. That's true. Also, any student who loses too much sleep could struggle with their exams. So if we say students who, you know, then we can use they without anybody even having any confusion. So you can come off me if you want to. I don't know where I got this y'all from the internet in nineteen seventy one, apparently. But how would you change this sentence so that it's not so awful? It's a lot to type if you want to talk. What do y'all think? I'll do it. Yeah, do it for someone who possesses the necessary qualifications. Nursing offers a life of unusual interest and usefulness. They will have limitless, limitless opportunities to improve themselves and to help others. Beautiful. Beautiful. Yeah. To me, we can go singular. They. Or we can go plural. Anything to people. To anyone who possesses the necessary qualifications. Right? Because that's really what they're saying. They're not saying to one singular woman, they're saying anyone who might be a good nurse could love being a nurse. You know, nursing is a cool job and it gives you these opportunities and those. So it's really not it's this isn't even this is definitely not a gender thought, right? It's just a gender construction. Okay, what about this? This one's really interesting to me, and a lot of people find it thought provoking. What do you think about this? I might be too old because I don't think the young people use this, but I would just say, are you dating anyone? Yeah. Me too. Me too. And I know this is, you know, like, this is can be slightly controversial to folks, but I know more and more people who are open about being polyamorous, you know, who maybe just don't date one person. So I'm always thinking about that when I ask these kind of questions too, like, how do I make space for someone to answer me in the most honest way, you know, and like, are you dating? You're not like, are you dating one single person and nobody else? You know, like, are you dating right now is like, hey, are you dating right now? Like, I don't even I'm not expecting it to be serious. It could be casual, it could be serious, it could be single, it could be multiple. I don't really know, you know, and those are good. That's a good way to put it. You know, sometimes in my trainings, I do this icebreaker where I'm like, do people date or have a partner? And I'll be like, do you have a partner or do you have multiple partners? Like, don't cross your own boundaries, but tell us anything you want to tell about this topic, you know, and then I'll have people get in the chat and be like, I'm proudly poly. And I'm like, thank you so much for sharing that. That's so cool. And then people who work with them are like, oh my God, I didn't know that, you know? And all of a sudden people are like, oh, that's normal. That's like a thing people are. So I love that, like saying, I'm not expecting you to be straight. I'm not expecting you to be monogamous. I'm not expecting you to, to even be dating. Maybe you don't want to date, maybe you don't like dating, you know, and if you say, are you dating right now, then someone could be like, no, I really, I'm not into that. I love being with my friends. Dating's not it to me. And then you'd be able to be like, oh, cool. It's awesome. I'm glad you got that figured out. You know, like we're not approving or disapproving of any answer. You know, your question was the most open ended way to ask this. I think these days, people tell me they're

scared to ask young people about this at all. Like they just find a lot of young people that find this kind of an inappropriate conversation starter. And that's interesting, you know? But I think if you ask Non-judgmentally, it doesn't have to be inappropriate as long as someone can just say, no, I don't, I'm not into dating at all, or I do date, I date these kinds of people or whatever. It's okay, you know, but it's an interesting thing to see how they're relating to the whole idea right now. Poor Covid babies. Can you imagine trying to date when you can't even breathe the same air with people? That seems really dangerous. I don't know. Okay, so I think this goes back to the nursing one to me, right? This is what we were already talking about, but we could just say we could take the sins, change nothing but him. I will contact each student and tell them when to come. Individual they write or really this teacher is going to contact all of the students. So I will contact all of my students and tell them when to come for their conferences. You know, sometimes just pluralizing is the simplest way because then you're using they as a plural, and there is no gender in the plural of all my students, because they're going to be a mixed gender group, right? So sometimes the very simplest way in written communication to fix it is to make it about all of the group instead of naming one of the group when really you're still talking about the whole group, right? Okay, we're not going to do this because we're in Zoom, but I have sent you the worksheet And I will send it over again in the email today too. So y'all take a look at that worksheet if you get a chance because it's really interesting. It's, um, it gets really complex with the they practice. So this person is from the Unitarian church, a young friend of mine who created this, who then let us use it for any of these trainings. And there are examples in there where you're meant to write a paragraph about more than one person who uses they pronouns. So it's really high level practice like you're going to get in real life, you know, where you have two students who both use they pronouns and you're talking about both of them, but individually, you know, so it's just good to let your brain think, how would I solve that? Like I would say they about one of them and Joe about the other, or how am I going to distinguish between these two people in the sentence, you know, because when we're using singular, they it's getting easier and easier for our brains to understand it. But if we're using singular, they for two different people at the same time, that really will get confusing to your listener, potentially. So how do we do it? How do we do it right? But also, how would we do it if we were talking about two people who use heat, you know? So remembering that it's, you know, we've have examples for this in our lives already with pronouns. So how would you, if you were talking about two different women who both use she, how would you construct a sentence so your listener knew which one was which in that sentence? You know? If you've ever seen me train before, you know I'm basically a fan boy of this guy. I cannot get enough. I'm obsessed with it. I really think that. And he really thinks that almost all of our addiction in our culture and a lot of these proliferating illnesses we have are coming from our brains, and they're coming from the child trauma we experience as kids. And that's not to him. Violent incidents that happen. Child trauma to gabber and his cohort is not having a person you can talk to safely when you're little. So that's most of us actually in a culture like ours. Because think about it, y'all. I really loved my child more than anything, and I was very, very interested in them at all times. And so much of the time I was so busy, I couldn't stop and hear what they wanted to tell me. You know, they'd come out in the morning and be like, I had this dream and I'd be like, oh my gosh, I really want to hear about it. But I got to make your breakfast and we got to go to school and we got to get in the car and we got to get

your coat. By the time we got in the car, I forgot to ask him again about it. And then they never told me and they didn't feel that someone was listening, you know, and that caused them some of this trauma that we're talking about, even though I wanted to hear them. Right. So it's not the parents fault. It's our culture that sets this up. But because of the culture, most of us have childhood trauma, which means many of us have psoriasis and IBS and all these things that they're linking to this now. So check this book out. I can't recommend it highly enough. The Myth of normal for me, it helped me to understand myself a lot better for sure. And a culture is messed up as ours. Right? All of this is slow and it takes time. I think people sometimes despair about all this because they feel like I'm never going to get it, you know, come on in. I'm trying and I'm not getting it. It is really okay. Don't forget to to just say sorry. You know, it's no big deal. I hate when I have hurt somebody or caused harm so much that I sometimes just want to get into defensive mode. You know, I just want to defend myself that I'm a good person and I care about you. And I didn't mean to hurt you. Really. The best way to do that is to just say sorry. Oops, I did not mean to do that. I'm going to keep trying. Right? We just keep saying this gender training, uh, face. Remember what your name sent us the email for. Um. Let's see if I have it. Copy. Let me let me email it to you. How long is that? Two hours. It's interesting. It's educating, let's put it that way. Yeah. The video and the PDF. Oh no. They're going to send me the PowerPoints and the and the PDF. Oh they're not going to send the recording. Maybe I'll catch you later. Okay. Thank you. Red hair like allergies. Food allergies. Right. It affects fewer people, but it's something we all need to be aware of and accommodate because it makes such a big difference for that kid to be able to participate and be safe with us. We don't have the peanut butter because it's not safe for Jimmy. We use these words because that's what helps people feel safe, you know? We don't have to get all the way down into it. When I told my kid that, they were like, okay. I was like, so I'm a boy. But they thought I was a girl. And they were like, okay, sounds good. Now, like they were ready to go. And then as they got older, they learned more theory and more analysis about, about trans stuff, you know? Now they could freaking teach a graduate class on it. But you know, when they were two, they didn't need all that. They weren't the professor, you know. I have a question. Great. Um, so in APS, um, we have students that, uh, name changes and that sort of thing. And as a nurse, I have access to like, like immunization records and, um, you know, different records that may be under one name versus their, their name, their choosing now. Right. You're the name change. Is there a list like I come across things. Immunization is the big one. I've run into that recently. Um, and I can help parents change that in the state system. Um, but is there a list of like other things that may come up? You know, the parent, this one family had no idea that one that this record existed and two, that it could be changed. So we got that process. But is there like, I guess like a list of like, like birth certificate, immunization records, driver's license, you know, things that parents may not or families may not think of that we could kind of guide them. Do you have that sort of list at your center? We do. And where it lives is with our, um, name change info. Right. So we have these name change guides for people to go in there and fill out these papers and go to the court and change their name. And we have like a guide that we wrote for them. And then it's like, and here's the paper to change your Social Security. And here's the paper to change your birth certificate. Right? But we haven't thought about some of the things you're talking about. So I'd love to hear anything like that that you've seen. Okay. Because I like, I, we don't have immunization record in there. Another thing we think of with

students is transcripts. Yes. Especially kids changing their name in high school is like, make sure you do change your name legally so that your college applications are in the right name. Your transcripts and diploma come out in the right name. You don't actually have to change them because they're just issued in the right name. Right. Like that is ideal, right? When people change the name so that the first driver's license is with the right name and gender, like that sets up a paper trail. Yeah. College testing. I just had a parent telling me this the other day, and they were like the testing board. And I was like, right, exactly. Right. So if y'all have any of these things that you can send to me, that'd be great because then we can just add it to our guide and just say, by the way, if your name change, if you're a young person changing your name, don't forget about that, right? Because it might just like my immunization record. Who's ever looking at my childhood immunization? Like that's not even going to happen, you know, like, no, my transcript is gone. No one will ever care about my transcript ever again. But if you're a certain age, those things are actually very important and they'll get asked for more than one time. And then you're like, oh, this embarrassing thing again, I forgot to change that. Right? So yeah, that's y'all are I'm copying these down, y'all. This is perfect. College board health records s a t that's wonderful. Okay. Getting that down. Perfect. Okay, great. Thanks, y'all. We'll make sure we'll go back and check our guide. Fabulous. Y'all are so good. All right, well, y'all have my stuff, so don't hesitate to reach out. Just text me, call me or email me anytime for any reason. I'm so grateful to y'all are taking out the time this morning to do this. Really, really appreciate it. And I will talk to y'all very soon. Thanks so much. Appreciate it. Thanks, y'all. Thank you.

Exhibit I

Audio Recording of "Pronouns & Gender Neutral Language" Training (Part 1)

Exhibit J

Audio Recording of "Pronouns & Gender Neutral Language" Training (Part 2)

Exhibit K

APS's Employee Handbook

APS Employee Handbook

APS Non-Discrimination Statement

The Albuquerque Public School system does not discriminate nor condone discrimination by students, employees, or third parties on the basis of ethnic identity, religion, race, color, national origin, sex, gender identity, sexual orientation, HIV status, mental or physical disability, marital status, or pregnancy in any program or activity of, or sponsored by, the school district and provides equal access to the Boy Scouts and other designated youth groups.

Complaints

To file a complaint, go to the Office of Equal Opportunity Services Complaint Process.

Contacts

The following departments have been designated to handle inquiries regarding the nondiscrimination policies:

Section 504 and Equal Opportunity Services/Title IX contacts, listed by department

Department	Services	Contact	Physical Address
Equal Opportunity Services and Title IX	Discrimination and harassment based on Civil Rights issues	(505) 855-9831 eosoffice@aps.edu	Suite 510 West 6400 Uptown Blvd. NE Albuquerque 87110
ADA/Section 504	Employee Specific Accommodations	SOCORRO RODRIGUEZ ADA Coordinator (505) 855-9852 rodriguez_so@aps.edu	Suite 400 West 6400 Uptown Blvd. NE Albuquerque 87110
Mailing Address: P.O. Box 25704, Albuquerque, NM 87125-0704			

Introduction

This Employee Handbook provides a summary of employee benefits and guidelines with respect to your employment. It does not cover all aspects of your employment with APS. You are responsible for reading and understanding this Employee Handbook. If you have any questions, please discuss them with your supervisor.

Schools or departments may establish additional guidelines and procedures appropriate to their school or department. Please learn those guidelines and observe them at all times. They are established for your benefit and that of the school or department and our students.

This Employee Handbook replaces any earlier APS Employee Handbook. In addition, this Handbook may be revised from time to time, as needed, without prior notice as business,

employment, legislative and/or economic conditions dictate. Any such revisions apply to existing as well as future employees. Revisions will be made as they are approved.

Only the Superintendent of APS or his/her designee may alter or modify any of the provisions of this Employee Handbook. Statements or promises by an administrator, principal, supervisor, manager or department head may not be interpreted as a change in policy and do not constitute an agreement with an employee.

In the event of a conflict between school or department policies and this Handbook, this Handbook and APS Board of Education Policies and Procedural Directives will govern. When APS Board Policies and Procedural Directives are changed, they supersede the information in the APS Employee Handbook.

This Handbook is not a contract or any part of a contract of employment, express or implied. This is a general publication prepared for all APS employees, many of whom are represented by various unions. If a conflict arises between an item in this Employee Handbook and an item in a negotiated agreement, the terms in the Negotiated Agreement will govern without nullifying any other items in this Handbook. If a conflict arises between an item in this Employee Handbook and an item in APS Board of Education Policies and Procedural Directives, the terms in the APS Board of Education Policies and Procedural Directives will govern without nullifying any other items in this Handbook. Nothing in the Company's policy is designed to interfere with, restrain, or prevent employee communications regarding wages, hours, or other terms and conditions of employment; employees have the right to engage in or refrain from such activities.

Workplace Standards

Open Communication

APS encourages you to discuss any issue you may have with a co-worker directly with that person. If a resolution is not reached, please arrange a meeting with your supervisor to discuss any concern, problem or issue that arises during the course of your employment. Retaliation against any employee for the appropriate use of communication channels is unacceptable. Please remember it is counterproductive for employees to create or repeat rumors or gossip.

Customer and Community Relations

The success of APS depends upon the quality of the relationships between APS, our employees, customers and community. Our customers' impressions of APS and their interest and willingness to send their children to our schools are greatly influenced by the people who serve them. You are an ambassador of APS. The more goodwill you promote, the more our customers will respect and appreciate you, APS and the programs we offer to students.

Equal Opportunity

APS is an equal opportunity employer. The District prohibits discrimination on the basis of race, sex, religion, national origin, color, ancestry, physical or mental handicap, pregnancy (sex), serious medical condition, age (40+), sexual orientation, gender identity, spousal affiliation, veteran status, harassment on these, retaliation for reporting and/or any other protected status as defined by law, in all facets of employment, compensation, promotion, transfer, demotion, layoff, termination/discharge or selection for District-sponsored training programs. Discriminatory behavior violates state and federal laws and regulations.

Harassment and Discrimination

APS intends to provide a work environment that is pleasant, professional, and free from intimidation, hostility or inappropriate behavior which might interfere with work performance. Harassment or discrimination of any sort will not be tolerated.

Workplace harassment can take many forms. It may be, but is not limited to, words, signs, offensive jokes, cartoons, pictures, posters, e-mail jokes or statements, pranks, intimidation, physical assaults, physical contact, or violence. Harassment may or may not be sexual in nature and may not be directed to the individual but take place within their range of hearing. Other prohibited conduct includes retaliatory action against an employee for discussing or making a harassment complaint.

Sexual harassment may include unwelcome sexual advances, requests for sexual favors, or other verbal or physical contact of a sexual nature when such conduct creates an offensive, hostile or intimidating working environment and/or it prevents employees from effectively performing the duties of their position. It also encompasses such conduct when it is made a term or condition of employment or compensation, either implicitly or explicitly and when an employment decision is based on an individual's acceptance or rejection of such conduct.

Responsibility: All APS employees, particularly supervisors, have a responsibility for keeping our work environment free of harassment and discrimination. Any employee, who becomes aware of an incident of harassment or discrimination, whether by witnessing the incident or being told of it, must report it to their immediate supervisor or to Equal Opportunity Services (EOS) at APS. When the District becomes aware of the existence of harassment or discrimination, it is obligated by law to take prompt and appropriate action, whether or not the victim wants the District to do so. View the Procedural Directive>>

Reporting Harassment or Discrimination

If there is no threat of violence, APS encourages you to communicate directly with the alleged harasser and make it clear that the harasser's behavior is unacceptable, offensive or inappropriate, although you are not required to do so. In addition, if you believe you have been subject to harassment or discrimination, you are required to immediately notify your supervisor and/or Equal Opportunity Services (EOS) at APS.

All complaints will be investigated promptly and as discreetly and confidentially as is reasonably possible. If harassment or discrimination by an employee is established, APS will take appropriate disciplinary action against the offender. Disciplinary action can range from verbal warnings to termination/discharge, depending on the circumstances. Retaliation of any sort will not be permitted. No adverse employment action will be taken for any employee making a good faith report of alleged harassment. APS accepts no liability for harassment or discrimination of one employee by another employee.

The individual who makes unwelcome advances, threatens or in any way harasses or discriminates against another employee is personally liable for their actions and the consequences. APS may or may not provide legal, financial or any other assistance to an individual accused of harassment or discrimination if a legal complaint is filed.

APS prohibits any employee from retaliating in any way against anyone who has raised any concern about harassment or discrimination against another individual.

Fraternization

Consensual personal relationships of a romantic or sexual nature between co-workers who are not in a direct supervisory relationship are not of concern to the District unless conduct associated with that relationship:

- constitutes sexual harassment or discrimination,
- affects an employee's job evaluation or treatment,
- interferes with productivity or harmonious work relationships within the workplace.

Consensual dating relationships between a Manager and an employee the Manager directly supervises are inappropriate in the workplace and are inconsistent with the District's management philosophy as well as the Manager's role and responsibilities.

Reasonable Accommodation of Individuals with Disabilities

The District makes reasonable accommodations to qualified employees with disabilities for the performance of essential job functions without undue hardship to the District. Accommodations are reviewed case by case in accordance with the Americans with Disabilities Act (ADA) and any state or local laws that prohibit disability discrimination. Contact the Equal Opportunity Services at APS for questions or assistance. View the Accommodation Process>>

Participation in Political Activities

District personnel may hold public offices, except for the Board of Education, regardless of the relationship between the public office and the interests of Albuquerque Public Schools. View the Board Policy>>

subject to disciplinary action up to and including termination/discharge. View the Procedural Directive>>

Solicitations and Distributions

Solicitation for any cause during working time and in working areas is not permitted. You are not permitted to distribute non-District literature in work areas at any time during working time. Working time is defined as the time assigned for the performance of your job and does not apply to break periods and meal times. Employees are not permitted to sell raffle chances, merchandise, or otherwise solicit or distribute literature without management approval.

Persons not employed by APS are prohibited from soliciting or distributing literature on District property.

Tutoring or Advising for Pay

With the exclusion of school personnel receiving stipends for extra- or co-curricular activities, school personnel are not permitted to receive pay for tutoring or advising any students assigned to them for classroom teaching or other school functions.

Animals in School/Service Animals

Animals may be brought to classrooms only if they serve a direct instructional purpose and if the animal can be cared for in a humane manner. View the Procedural Directive>>

APS employees and students seeking to use service animals should, in conjunction with the APS Office of Equity or Special Education Department, develop a Section 504 Plan or Individual Education Plan, as appropriate, to identify needed reasonable accommodations and other issues relating to use of a service animal. View the Procedural Directive>>

Standards of Conduct

Whenever people gather together to achieve goals, some rules of conduct are needed to help everyone work together efficiently, effectively, and congenially. By accepting employment with us, you have a responsibility to APS and to your fellow employees to adhere to certain rules of behavior and conduct. The purpose of these rules is not to restrict your rights, but rather to be certain that you understand what conduct is expected and necessary.

Employee Standards of Conduct

APS employees serve as positive role models for students and set good examples in conduct, manners, dress and grooming. APS expects each employee to maintain the highest standards of conduct and act in a mature and responsible manner at all times. Employees must not engage in

activities which violate federal, state or local laws or which, in any way, diminish the integrity, efficiency or discipline of the District.

Staff Conduct with Students

Staff members will maintain appropriate professional behavior while working with students and refrain from harassment, malicious or prejudicial treatment, and/or violations of student rights. View the Procedural Directive>>

Conflict of Interest

Employees are prohibited from using confidential information acquired by virtue of their associations with the District for their individual or another's private gain. Employees are prohibited from requesting, receiving or accepting a gift or loan for themselves or another that tends to influence them or appear to influence them in the discharge of their duties as employees.

Unacceptable Activities

APS expects each employee to act in a mature and responsible way at all times. If you have any questions concerning any work or safety rule, or any of the unacceptable activities listed below, please see your supervisor. Note that the following list of unacceptable activities does not include all types of conduct that can result in disciplinary action, up to and including termination/discharge. Nothing in this list alters the at-will nature of employment for some employees of the District.

1. Violation of any APS policy or Procedural Directive.
2. Violation of security or safety rules or failure to observe safety rules or APS safety practices; failure to wear required safety equipment; tampering with APS equipment or safety equipment.
3. Negligence or any careless action which may endanger the health, safety or well-being of the individual or another person.
4. Being intoxicated or under the influence of a controlled substance, including alcohol, while at work; use, possession or sale of a controlled substance in any quantity while on District premises, except medications prescribed by a physician which do not impair work performance, except cannabis, which cannot be used or possessed even with a prescription.
5. Possession of dangerous or illegal firearms, weapons or explosives on District property or while on duty.
6. Engaging in criminal conduct or acts of violence at any time or making threats of violence toward anyone on District premises or when representing APS; fighting, or provoking a fight on District property, or negligent damage to property.
7. Insubordination or refusing to obey instructions properly issued by your supervisor pertaining to your work; refusal to help out on a special assignment or refusing to cooperate in investigations.
8. Threatening, intimidating or coercing fellow employees on or off the premises at any time, for any purpose.

9. Engaging in an act of sabotage; negligently causing the destruction or damage of District property, or the property of fellow employees, customers, suppliers, or visitors..
10. Theft or unauthorized possession of District property or the property of fellow employees; unauthorized possession or removal of any District property, including documents, from the premises without prior permission from management; unauthorized use of District equipment or property for personal reasons; using District equipment for profit.
11. Dishonesty; falsification or misrepresentation on your application for employment or other work records; untruthfulness about sick or personal leave; falsifying reason for a leave of absence or other data requested by APS; unauthorized alteration of District records or other documents.
12. Spreading malicious gossip and/or rumors; engaging in behavior which creates discord and lack of harmony; interfering with another employee on the job; restricting work output or encouraging others to do the same.
13. Immoral conduct or indecency on District property.
14. Conducting a lottery or gambling on District premises.
15. Unsatisfactory or careless work, failure to meet work productivity or work quality standards.
16. Any act of harassment or retaliation based on disability, race, ethnicity, color, sex, sexual orientation, national origin or ancestry, religion, age, veteran status, HIV status and/or any other protected status as defined by law.
17. Leaving work before the end of a workday or not being ready to work at the start of a workday without approval of your supervisor; stopping work before time specified for such purposes.
18. Sleeping or loitering during working hours.
19. Excessive use of telephones or electronic devices for non-business related activities including but not limited to personal calls, text messaging, social networking, etc. .
20. Smoking on District property or in District vehicles.
21. Creating or contributing to unsanitary conditions.
22. Failure to report an absence or late arrival; unauthorized or excessive absences or lateness.
23. Obscene or abusive language toward any supervisor, employee, parent, or student; indifference or rudeness; any disorderly/antagonistic conduct on District premises.
24. Speeding or careless driving of District vehicles.
25. Failure to immediately report damage to, or an accident involving, District equipment.
26. Unauthorized soliciting during working hours and/or in working areas; selling merchandise or collecting funds of any kind for charities or others without authorization during business hours, or at a time or place that interferes with the work of another employee on District premises.
27. Failure to use required timesheets, alteration of your own timesheet or records or attendance documents, punching or altering another employee's timesheet or records, or causing someone to alter your timesheet or records.
28. Sharing or disseminating personal, sensitive, or confidential information about an employee, student, or parent. No employee will disclose confidential information unless legal requirements demand such information be revealed or disclosure is necessary to prevent serious and foreseeable harm.
29. Negligence or any careless action which allows others access to personal or confidential information about employees or students. Willfully providing someone access to personal or confidential information about employees or students.

30. Any other act or omission which impairs or restricts the ability of the District to provide a safe and healthy environment for employees and students.

Progressive Discipline Process

Managers may use a number of methods to motivate, correct, and/or discipline employees, including but not limited to warnings, reprimands, suspension with or without pay, and termination/discharge, as determined to be appropriate in each individual circumstance.

Progressive discipline may be used to correct employee behavioral or performance problems. However, there may be situations where the severity or seriousness of the offense justifies the omission of one or more of the steps in this process. Likewise, there may be situations where a disciplinary step is repeated.

Employees always have the opportunity to respond to disciplinary action in writing to the supervisor or department which notifies the employee of the action.

Administrative Leave Pending Possible Disciplinary Action

If you are suspected of violating the District's policies, procedures, or work rules you may be placed on administrative leave with or without pay, pending an investigation of the situation.

The New Mexico School Personnel Act, particularly NMSA 22-10A-24 and NMSA 22-10A-25, also provides an opportunity for an employee to state his or her response to being terminated, in the event disciplinary action results in termination.

Employment Matters

Employee Background Check

APS will conduct background checks of all prospective employees (i.e. applicants offered employment) with the district, district contractors and the contractor's employees and volunteers. View the Board Policy >>

Immigration Law Compliance

All offers of employment are contingent upon verification of your right to work in the United States. You will be asked to provide original documents verifying your right to work and, as required by federal law, to sign Federal Form I-9, Employment Eligibility Verification Form. If you cannot verify your right to work in the United States at any time, APS may terminate your employment.

Conflict of Interest/Supervision of Relatives

Form of Notice

Include the following information in your Resignation or Retirement letter:

- Name
- Employee #
- APS Work Location
- Home Address
- Personal Phone #
- Personal Email Address
- Last day of Work
- Clear statement of your intention to resign or retire your position

Involuntary Terminations

Below are two types of involuntary terminations:

- APS may terminate/discharge you from your employment for poor performance, misconduct, excessive absences, tardiness, discrimination or other violations of APS policies. If your employment is at will, you or APS may terminate the employment relationship at any time and for any or no reason.
- APS may elect not to renew the expiring contracts of some employees. This is considered **Non-Renewal.**

Transfers

If you are remaining employed by APS but are transferring to a different position or location, the appropriate documentation must be submitted to HR by your new supervisor.

Return of District Property

ALL district, department, school, and/or outside agency (i.e. PTO) purchased equipment and supplies MUST remain at the original work site. This includes but is not limited to:

- Computers/Laptops
- Hardware
- Software
- iPads
- Furniture
- Shredders
- Office and cleaning supplies
- Sound systems

Exhibit L

APS's School Social Worker Position Description

School Social Worker

Albuquerque Public Schools Position Description **Updated May 15, 2012**

Job Code: 00016
Exemption Status: Exempt
Immediate Supervisor Title: Specialist: Related Services Instructional Manager/Medicaid

Salary Schedule: A
Location: Site Based
Work Year: 184

SUMMARY: To assist students, families, and schools in the reduction of social, emotional and environmental barriers to learning.

ESSENTIAL FUNCTIONS: Incumbent must achieve the following outcomes with or without reasonable accommodation:

- Follows methods of school social work practice appropriate to identified concerns, including direct services, collaboration/consultation, and program development.
- Provides direct services including School Social Work assessments, crisis intervention, group, individual and family counseling/interventions and information/ referral to mobilize resources and services.
- Serves as home-school-community liaison.
- Develops and maintains relationships in partnership with other school personnel, community agencies, students and their families.
- Participates in multi-disciplinary team meetings relating to the educational planning and progress of students in Special Education.
- Ensures parent participation in the student's educational placement through home visits and other outreach activities.
- Establishes and maintains communication with parents regarding student academic, social/emotional and behavioral progress.
- Consults and shares information with teachers, administrators and other school personnel.
- Assists in developing positive behavioral supports and interventions strategies for students.
- Participates in the development and delivery of in-service programs for school, District staff, and the community.
- Provides case management services to support and optimize student success in the educational setting.
- Assesses the quality and effectiveness of school social work services and provides documentation, as necessary.
- Accesses clinical social work consultation and support from an LISW level 3 school social worker.
- Complies with the Code of Ethics and Standards for School Social Work Services from the National Association of Social Workers.

DUTIES: In addition to the essential functions of this job, the incumbent must perform the following duties:

- Complies with state-approved Code of Ethics of the Education Profession and upholds and enforces rules, administrative directives and regulations, school board policies, and local, state and federal regulations.
- Articulates and facilitates the implementation of the mission and values of the Albuquerque Public Schools.
- Safeguards confidentiality of privileged information.
- Prepares and maintains accurate and complete documentation as required by law, state directives, District policy and administrative regulations.
- Shares the responsibility for the supervision and care of District inventory, proper and safe use of facilities, equipment and supplies, and reports safety hazards promptly.
- Maintains professional relationships and works cooperatively with employees, the community and other professionals.
- Maintains professional competence through individual and staff training, in-service educational activities and self-selected professional growth activities.
- Attends and/or conducts staff meetings and participates on committees within area of responsibility.
- Performs other tasks related to area of responsibilities as requested or assigned by an immediate supervisor.

MINIMUM REQUIRED EDUCATION, LICENSES, CERTIFICATIONS, EXPERIENCE AND SKILLS:

- Master's degree in Social Work from a program accredited by the Council on Social Work Education (CSWE).
- Valid New Mexico State Board of Education license in Social Work 601.
- Valid and active New Mexico Board of Social Work Examiners license.

MINIMUM REQUIRED APS PRE-EMPLOYMENT AND OTHER EMPLOYMENT CONDITIONS:

- Satisfactory completion of physical examination.
- Satisfactory completion of criminal background verification.

DESIRED KNOWLEDGE, SKILLS, ABILITIES AND EXPERIENCE:

- Effective communication skills, both verbal and written.
- Flexibility, organization, decision-making and problem solving skills.
- Interpersonal skills with diverse populations and ability to practice in a culturally competent manner in-person and on the telephone.
- Ability to meet deadlines, work on multiple projects and coordinate the work of others.
- Knowledge of District policies on immunization, medication, first aid, emergencies and child abuse/neglect.
- Knowledge of school community, needs of student populations, and Special Education laws and regulations.
- Knowledge and application of a strengths based systems approach.

WORKING ENVIRONMENT: The work environment characteristics described here are representative of those an incumbent encounters while performing the essential functions of this job:

- The incumbent will work with APS staff members in a team environment which may include the administrative staff, State department personnel, APS legal counsel, parents, students, advocates and others outside the District.
- Frequent interactions with people in person and on the phone will be necessary.

- Travel from location to location may be necessary.
- Functions are primarily performed indoors in a normal school or office environment and in students' homes.

PHYSICAL DEMANDS: The physical demands described here are representative of those that must be met by the incumbent to successfully perform the essential functions of this job with or without reasonable accommodation:

- The employee must perform therapeutic restraints of students in some specialized programs.
- The employee must occasionally lift and move up to 25 pounds in supplies which requires bending, stooping and lifting.
- The employee must use hands and arms to manipulate objects.
- The employee must use keyboards, tools and other controls.
- The employee must sit and stand for long periods of time.
- The employee must have normal vision and hearing with or without aid.
- The employee must be able to move about assigned location unaided during the day.

This position description indicates the general nature and level of work to be performed. It is not intended to be a comprehensive listing of all functions, duties, skills, knowledge and abilities. This position description is designed to illustrate the *minimum* requirements and expectations of the job.

Position descriptions should be reviewed on a regular basis by incumbent and incumbent's immediate supervisor and revised when necessary. Position descriptions must be reviewed for accuracy prior to advertising vacated or new positions and used as a guidance in writing position advertisements.

Requested revisions and final approval of all position descriptions are made by the Human Resources Compensation Unit. The "official version" of position descriptions for all jobs in the Albuquerque Public Schools are housed in the Compensation Unit of the Human Resources Department and are updated periodically. Copies are available on request.

By signatures below, the incumbent and the incumbent's immediate supervisor have reviewed this position description. SUPERVISORS ARE RESPONSIBLE FOR RETAINING SIGNED COPY which may be used to accompany performance evaluations and other related employee documentation.

Incumbent	**Date**
Immediate Supervisor's Name and Title	**Date**
Location Name	**Location Number**

PERFORMANCE COUNTS

Exhibit M

April 29, 2026 E-mail and Letter from Jeannette Martinez to APS

ALBUQUERQUE PUBLIC SCHOOLS

Jeanette Martinez <jeanette.martinez@aps.edu>

Employee request for Religious accomadation

3 messages

Jeanette Martinez <jeanette.martinez@aps.edu> Thu, Apr 30, 2026 at 8:23 AM
To: Shantail Miller <shantail.miller@aps.edu>, Teise Reiser Ferrell <teise.reiser@aps.edu>, Todd Torgerson <todd.torgerson@aps.edu>

Mr. Torgerson, Ms. Reiser Ferrell, Ms. Miller

I am requesting a religious accommodation for any job function that would require me to use a student's or staff's preferred name, pronouns, or other gendered language that is inconsistent with the student's or staff's biological sex.

Please see attached letter.

Jeanette Martinez, LCSW
Licensed Clinical Social Worker, LCSW
Integrated Support Team (IST)
APS/PD District
Phone Cell: 505-810-5649, Office 505-830-6229
Jeanette.martinez@aps.edu

Religious Accommodation Request (1).docx
18K

Employee Name: Jeanette Martinez

Employee Email: Jeanette.martinez@aps.edu

Employee ID Number: 209429

Position: Social Worker – IST Team

To: Shantail Miller - Supervisor, Teise Reiser-Assistant Superintendent for Special Education, Todd Torgerson -Chief of Human Resources and Legal

Date: 4/29/2026

I am requesting a religious accommodation for any job function that would require me to use a student's or staff's preferred name, pronouns, or other gendered language that is inconsistent with the student's or staff's biological sex.

I am also requesting an accommodation for any job function that would require me to conceal, hide, or withhold from parents, or guardians, material information concerning the name, pronouns, or gender identity being used for their child at school when disclosure of this information is relevant to my professional duties.

These requests include, but are not limited to, threat-assessment meetings, student interviews, staff communications, internal documentation, emails, reports, and communications with parents or guardians.

Because of my religious and moral beliefs, I cannot speak in a way that tells students or staff or anyone else that they are a gender different from their biological sex. Doing so would require me to communicate something I believe is not true and would violate my conscience and faith.

Also, because of my religious and moral beliefs, I cannot participate in concealing, hiding, or withholding from parent's information about the name, pronouns, or gender identity being used for their child at school that is inconsistent with the student's biological sex.

I remain fully committed to treating every student and staff member with dignity, professionalism, compassion, and respect. My objection is not to serving any student. My objection is to being required to use words or participate in communications that violate my conscience and religious beliefs.

I request permission to use a student's or staff's legal name instead of a preferred name that is inconsistent with student's or staff's biological sex if using their preferred names would violate my beliefs.

I also request permission to use the pronouns associated with student's or staff's biological sex instead of their preferred pronouns if using their preferred pronouns would violate my beliefs.

I also request that I not be required to conceal, hide, or withhold information from parents or guardians concerning the name, pronouns, or gender identity being used for their child at school when disclosure of this information is relevant to my professional duties.
I am requesting this accommodation so I can continue serving students and working with APS staff without violating my sincerely held religious beliefs. I am not asking to avoid working with any student, and I will continue to treat all students with care, dignity, and respect.

This request is urgent. I am currently being required, in the course of my duties, to use names, pronouns, and other language that conflict with my religious beliefs. I respectfully request prompt consideration of this accommodation request so I can continue performing my role without being required to violate my beliefs.

I am willing to discuss other reasonable accommodations that would allow me to perform my duties without being required to speak messages I do not believe or to withhold information in violation of my conscience.

Respectfully,

Jeanette A. Martinez, LCSW
Social Worker, Integrated Support Team – APS Police

Exhibit N

May 15, 2026 E-mail and Letter from APS to Jeanette Martinez

ALBUQUERQUE PUBLIC SCHOOLS

Jeanette Martinez <jeanette.martinez@aps.edu>

Accommodations memo - religion/sincerely held beliefs

1 message

Heather Cowan <heather.cowan@aps.edu> Fri, May 15, 2026 at 10:57 AM
To: Jeanette Martinez <jeanette.martinez@aps.edu>, Shantail Miller <shantail.miller@aps.edu>, Todd Torgerson <todd.torgerson@aps.edu>, Teise Reiser Ferrell <teise.reiser@aps.edu>

Ms. Martinez,

Please see the attached memo regarding your request for a religious accommodation. Please let me know if you have any questions or concerns.

Thank you,

Heather Cowan she/her
Director
Equal Opportunity Services and Title IX

505-855-9831
heather.cowan@aps.edu
https://www.aps.edu/equal-opportunity-services/report-a-concern

ALBUQUERQUE PUBLIC SCHOOLS

Book time with me: https://calendar.app.google/oqMME7rDUAd2mncN6

Accommodations memo.J. Martinez.pdf
115K

ALBUQUERQUE PUBLIC SCHOOLS
APS STRONG

Dr. Gabriella Durán Blakey
Superintendent

To: Jeanette Martinez, Social Worker, IST Team
From: Heather Cowan, Director, Equal Opportunity Services
Date: May 15, 2026
Re: Accommodations; sincerely held beliefs

On May 8, 2026, the Albuquerque Public Schools Office of Equal Opportunity Services (EOS) met with Jeanette Martinez, Social Worker, IST Team after receiving a request for an accommodation for religious beliefs. Ms. Martinez expressed that due to her religious and moral beliefs that she "cannot speak in a way that tells…anyone…that they are a gender different from their biological sex." Ms. Martinez made several requests in a memo dated April 29, 2026 due to this belief and each request will be addressed below along with how each will be accommodated.

This memo memorializes the following requests (numbers) and their subsequent accommodations (letters) for Ms. Martinez' sincerely held belief:

1. I am requesting a religious accommodation for any job function that would require me to use a student's or staff's preferred name, pronouns, or other gendered language that is inconsistent with the student's or staff's biological sex.
    a. Ms. Martinez will not use preferred pronouns for any person when those pronouns are different from their sex designated at birth.
    b. Ms. Martinez will instead refer to these individuals by their last name, preferred name, or their title - this student, the teacher, this EA, etc. Ms. Martinez will not use any moniker (first name, title, legal name, etc) when that individual has requested it not be used.
    c. Ms. Martinez may also refer to anyone by their last name (without gendered honorifics).
    d. Ms. Martinez may use their last name, their title, an agreed upon nickname, initials, or other moniker such as "colleague", "scholar", "friend", "student", etc.
2. I am also requesting an accommodation for any job function that would require me to conceal, hide, or withhold from parents, or guardians, material information concerning the name, pronouns, or gender identity being used for their child at school when disclosure of this information is relevant to my professional duties.
    a. As discussed in the meeting, it is expected that employees of APS will not lie to parents. As a social worker, you have confidentiality responsibilities regarding what students disclose to you and when you have a reasonable duty to inform of potential harm or risk. It is expected that you will continue to provide such a duty as befits your role and that you will maintain confidentiality of student disclosures in accordance with policy and expectations of your licensure.

3. I request permission to use a student's or staff's legal name instead of a preferred name that is inconsistent with a student's or staff's biological sex if using their preferred names would violate my beliefs.
    a. As stated above, if an individual has requested that a particular name not be used for them, you are not to use that name in referring to them or about them. You may use their last name, their title, an agreed upon nickname, initials, or other moniker such as "colleague", "scholar", "friend", "student", etc.
4. I also request permission to use the pronouns associated with student's or staff's biological sex instead of their preferred pronouns if using their preferred pronouns would violate my beliefs.
    a. As stated above, you are not required to use preferred pronouns of any student or employee. Instead, you may use their last name, an agreed upon nickname, initials, or title.

If there is a complaint regarding Ms. Martinez' use of names or titles rather than pronouns, these individuals may be referred to her supervisor or EOS for discussion that will limit Ms. Martinez' privacy to the extent possible while still assuring these individuals that APS policy and procedures are being followed.

In accordance with APS policy and procedural directives for Nondiscrimination; APS is providing Ms. Martinez with this reasonable accommodation for her sincerely held/religious beliefs. Additionally, in accordance with the APS Employee Handbook, any employee who fails to provide students or staff with their school or district approved, reasonable accommodations, is subject to disciplinary action aligned with the the Employee Handbook and any associated collective bargaining agreement. Additionally, in accordance with the APS Student Handbook, students are reminded that harassment on the basis of a protected category, such as religion, is prohibited and engaging in harassing conduct is subject to disciplinary action aligned with the APS Student Handbook and any school specific codes of conduct. Further, APS reminds Ms. Martinez that students and staff are also protected under state law from discrimination on the basis of gender identity and that it is expected that the work and learning environment will be mutually respectful for Ms. Martinez, her colleagues, and the students and families APS serves.

cc: Todd Torgerson, Chief of Human Resources and Legal Support
Shantail Miller, Supervisor
Teise Reiser Ferrell, Assistant Superintendent for Special Education

Exhibit O

May 28, 2026 E-mail and Letter from Jeannette Martinez to APS

ALBUQUERQUE PUBLIC SCHOOLS

Jeanette Martinez <jeanette.martinez@aps.edu>

Clarifications regarding accomodations

2 messages

Jeanette Martinez <jeanette.martinez@aps.edu> Thu, May 28, 2026 at 3:57 AM
To: Teise Reiser Ferrell <teise.reiser@aps.edu>, Todd Torgerson <todd.torgerson@aps.edu>, Shantail Miller <shantail.miller@aps.edu>, Lisa Oliphant <oliphant@aps.edu>, Steven Gallegos <gallegos_ste@aps.edu>, Jennifer Oconnell <jennifer.oconnell@aps.edu>, Steven Marez <steven.marez@aps.edu>, Heather Cowan <heather.cowan@aps.edu>

Hello,
Please provide clarification regarding the accommodations per your memo dated 5/15/2026. Please refer to the attached document.

Thank you,

--

Jeanette Martinez, LCSW
Licensed Clinical Social Worker, LCSW
Integrated Support Team (IST)
APS/PD District
Phone Cell: 505-810-5649, Office 505-830-6229
Jeanette.martinez@aps.edu

Religious Accommodation Request 2.docx
18K

Employee Name: Jeanette Martinez
Employee Email: Jeanette.martinez@aps.edu
Employee ID Number: 209429
Position: Social Worker – Integrated Support Team - APS Police
To: Heather Cowan, Jennifer Oconnell, Todd Torgerson, Shantail Miller, Teise Reiser-Ferrell, Lisa Oliphant, Steven Gallegos, Steven Mares,
Date: 5/28/2026

Dear Ms. Cowan,

Thank you for your May 15th memorandum. After reviewing the memorandum carefully, I would appreciate clarification regarding several aspects of the proposed accommodations so that I can better understand APS's expectations and assess how the accommodations would operate in practice given the nature of my professional responsibilities.

First, I would appreciate clarification regarding the scope of the restrictions relating to names, pronouns, and other monikers. The memorandum states that I may not use "any moniker (first name, title, legal name, etc.) when that individual has requested it not be used" and that I may instead use "preferred name," "last name," "agreed upon nickname," "initials," "title," or another approved moniker. I would appreciate clarification regarding whether APS interprets these expectations to apply only during direct interactions with the student or staff member at issue, or whether they also extend to communications outside that individual's presence, including internal documentation, case notes, emails, safety discussions, threat-assessment materials, meetings with other staff members, meetings with parents, or similar communications.

Because my position frequently involves communications with administrators, multidisciplinary teams, law enforcement personnel, parents, and other staff in fast-moving school safety and student-support contexts, additional clarification regarding these expectations would be helpful in allowing me to better assess the practical feasibility of the proposed accommodations and avoid misunderstandings concerning compliance expectations.

Relatedly, I would appreciate clarification regarding whether isolated or inadvertent use of biologically accurate pronouns, legal names, or sex-based terminology in the course of ordinary workplace communications could subject an employee to investigation or discipline. Given the frequency and pace of communications involved in my role, additional guidance on this issue would help me better understand APS's expectations and how the accommodations would operate in day-to-day practice.

Second, I would appreciate clarification regarding APS's expectations concerning communications with parents or guardians relating to a student's asserted gender identity, preferred name, pronoun usage, or social transition at school. As I understand the memorandum and Policy PJ30, APS generally expects staff to use a student's legal name and birth-sex pronouns when communicating

with parents unless the student has authorized otherwise. I would appreciate clarification regarding whether APS interprets its policies to prohibit employees from disclosing to parents information concerning a student's asserted gender identity or social transition absent the student's consent. If that is the case, it would also be helpful for APS to identify the specific APS policies, professional licensing obligations, New Mexico laws, or ethical guidance it believes creates that prohibition.

Because my role includes student support, school safety, and threat-assessment responsibilities, additional clarification on these issues would be helpful in allowing me to better understand how APS expects these situations to be handled in practice and how the proposed accommodations interact with my professional responsibilities and religious beliefs.

Third, I would appreciate clarification regarding whether APS's policies and proposed accommodations permit me, in appropriate professional circumstances, to engage in respectful and clinically appropriate discussions with students concerning issues of identity, emotional wellbeing, trauma, developmental concerns, social influences, and other factors that may relate to a student's expressed feelings regarding gender identity. I would also appreciate clarification regarding whether APS interprets its policies as requiring automatic affirmation of a student's asserted gender identity in every circumstance, or whether professional discretion remains available in appropriate counseling or student-support contexts.

Answers to these questions are necessary to ensure that I fully understand the scope and operation of the proposed accommodations. I remain committed to treating all students, parents, and staff with dignity, professionalism, compassion, and respect, and I appreciate APS's continued willingness to work collaboratively toward a workable resolution.

Thank you again for your time and attention to this matter.

Respectfully,
Jeanette A. Martinez, LCSW
Social Worker, Integrated Support Team – APS Police

Exhibit P

August 3, 2026 E-mail from APS to Jeanette Martinez

From: **Jennifer O'Connell** <jennifer.oconnell@aps.edu>
Date: Mon, Aug 3, 2026 at 2:33 PM
Subject: Re: Clarifications regarding accomodations
To: Jeanette Martinez <jeanette.martinez@aps.edu>
Cc: Teise Reiser Ferrell <teise.reiser@aps.edu>, Todd Torgerson <todd.torgerson@aps.edu>, Shantail Miller <shantail.miller@aps.edu>, Lisa Oliphant <oliphant@aps.edu>, Steven Gallegos <gallegos_ste@aps.edu>, Steven Marez <steven.marez@aps.edu>, Jessica Rivera <rivera_j@aps.edu>

Hello Ms. Martinez,

Thank you for your patience as I reviewed your concerns.

With respect to your first inquiry, your accommodation does not require you to use pronouns which do not align with an individual's biological sex at birth – this means you are not required to use preferred pronouns when those pronouns violate your sincerely held belief. Instead of using a an individual's preferred pronouns, you are allowed to use an alternative form of address Several examples of permissible alternative forms of address were included in your accommodation, including using or referring to an individual by their last name, initials, title (e.g., the student, the EA, the teacher), and/or an agreed-upon nickname. Your accommodation is also clear that you are not to use names or pronouns for an individual which that individual has requested not be used for them. The accommodation – and its express limitations – apply when you are speaking to or referring to the individual, regardless of whether that individual is present.

With respect to your additional inquiry, inadvertent slips or mistakes regarding names and pronouns are not grounds for disciplinary action. However, any individual in the APS community can initiate a complaint and/or raise allegations to the EOS office on subjects that fall within EOS's jurisdiction – including complaints for discrimination, harassment, and/or retaliation based on gender identity. As such, we cannot guarantee that slips or mistakes concerning names and pronouns will be not lead to complaints and/or resulting investigations pursuant to EOS's established process.

With respect to your second inquiry, which concerns disclosures to parents, I refer you to your licensure, your supervisor, and APS' social work department for standards regarding confidentiality for students on your caseload. Your religious accommodation simply states that you are not required to use pronouns with which you are not comfortable due to your beliefs and directs you to use an appropriate alternative name/title/moniker so as not to violate that person's rights.

With respect to your third inquiry, your accommodation does not alter your job responsibilities or the scope of your job.

Jennifer O'Connell (she/her)
Interim Director
Equal Opportunity Services & Title IX
EEO Certified Investigator
505-855-9831 (o) | 505-526-3630 (c)

aps.edu/eos
Report a Concern — Albuquerque Public Schools
Book time with me

ALBUQUERQUE
PUBLIC SCHOOLS

Exhibit Q

August 11, 2026 E-mail and Letter from Jeanette Martinez to APS

From: **Jeanette Martinez** <jeanette.martinez@aps.edu>
Date: Tue, Aug 11, 2026 at 8:21 AM
Subject: Confirmation
To: Jennifer Oconnell <jennifer.oconnell@aps.edu>
Cc: Todd Torgerson <todd.torgerson@aps.edu>, Jessica Rivera <rivera_j@aps.edu>, Steven Marez <steven.marez@aps.edu>, Steven Gallegos <gallegos_ste@aps.edu>, Shantail Miller <shantail.miller@aps.edu>, Teise Reiser Ferrell <teise.reiser@aps.edu>

To make sure I correctly understand APS's expectations going forward, I want to confirm the following points. Please see attached document.

Best Regards,

--

Jeanette Martinez, LCSW
Licensed Clinical Social Worker, LCSW
Integrated Support Team (IST)
APS/PD District
Phone Cell: 505-810-5649, Office 505-830-6229
Jeanette.martinez@aps.edu

Employee Name: Jeanette Martinez Date: 8/11/2026
Employee Email: Jeanette.martinez@aps.edu
Employee ID Number: 209429
Position: Social Worker – IST Team

To: Jennifer O'Connell, Shantail Miller, Jessica Rivera, Todd Torgerson, Steven Gallegos, Steven Mares, Teise Reiser

Dear Ms. O'Connell,

Thank you for your response and for clarifying APS's position regarding my religious accommodation.

To make sure I correctly understand APS's expectations going forward, I want to confirm the following points based on your recent response and the May 15, 2026 accommodation memorandum. As I understand APS's position:

- I am not required to use preferred pronouns for a student or staff member when those pronouns conflict with my sincerely held religious beliefs because they do not align with that individual's biological sex at birth.
- In place of preferred pronouns, I may use alternative forms of address or reference, including last names, initials, titles, role-based terms such as "the student," "the teacher," or "the EA," or an agreed-upon nickname.
- I may not use a name, pronoun, title, legal name, first name, or other moniker for an individual if that individual has requested that it not be used.
- This limitation applies whenever I am speaking to or referring to the individual, regardless of whether the individual is present.
- Inadvertent slips or mistakes concerning names or pronouns are not, by themselves, grounds for discipline.
- Even so, any individual may still file a complaint with EOS concerning such slips or mistakes, and APS cannot guarantee that such a complaint would not result in an EOS review or investigation.
- APS is not granting me permission, as part of this religious accommodation, to use biologically accurate pronouns, legal names, sex-based terminology, or other requested-not-to-be-used language when referring to an individual outside that individual's presence, including in internal documentation, threat-assessment materials, staff communications, or parent communications.
- APS is not granting me a religious accommodation exempting me from being required to not disclose information to parents relating to their student's asserted gender identity, preferred name usage, pronoun usage, or social transition at school if the student does not authorize such disclosure.
- The accommodations APS has granted me do not alter my job responsibilities or the scope of my job.

Please let me know immediately if any of the above is inaccurate or incomplete. The new school year is upon us and I would ask that you respond no later than August 14, 2026.

I also want to clarify that I am sending this email to confirm my understanding of APS's current position and to avoid misunderstandings going forward. I am not intending by this email to indicate that APS's current accommodation fully resolves the conflict between my religious beliefs and my job responsibilities. I remain willing to continue the interactive process and to consider any additional accommodations APS is willing to offer to resolve the entirety of my religious accommodation request.

Thank you again for your time and attention to this matter.

Respectfully,

Jeanette A. Martinez, LCSW
Social Worker, Integrated Support Team – APS Police

Exhibit R

August 17, 2026 E-mail from APS to Jeanette Martinez

---------- Forwarded message ---------
From: **Jennifer O'Connell** <jennifer.oconnell@aps.edu>
Date: Mon, Aug 17, 2026 at 3:14 PM
Subject: Re: Confirmation
To: Jeanette Martinez <jeanette.martinez@aps.edu>, Jessica Rivera <rivera_j@aps.edu>, Torgerson, Todd A <todd.torgerson@aps.edu>
Cc: Lisa Oliphant <oliphant@aps.edu>, Shantail Miller <shantail.miller@aps.edu>, Steven Gallegos <gallegos_ste@aps.edu>, Steven Marez <steven.marez@aps.edu>, Teise Reiser Ferrell <teise.reiser@aps.edu>

Hello Ms. Martinez,

Again, thank you for reaching out for additional clarification on your accommodation for a sincerely held belief.

Your accommodation is clearly set forth in the May 15, 2026 accommodation memorandum. In response to your prior inquiries, we provided additional guidance on August 3, 2026. From our perspective, it does not seem necessary or helpful to continue to rearticulate the same parameters that have already been communicated on multiple occasions. To the extent there is particular language in our prior communications you want clarification on, please highlight that specifically so we can address it. Additionally, should you need specific guidance on how your accommodation applies to particular situations, please continue to reach out to your supervisor and/or my office.

With respect to the bullet points you included in your August 11 communication, I read bullet points 1-6 as being consistent with your accommodation and/or general APS policies and procedures. Bullet points 7-8 are unclear as stated – nevertheless, clear guidance on the names and pronouns you are permitted to use are clearly stated in the accommodation and you have also summarized them within bullets 1-4 of your August 11 communication. Finally, with respect to bullet 9, accommodations are intended to facilitate performance of essential job functions and responsibilities. Your accommodation does not alter the scope or type of responsibilities you have to perform, but instead provides a means for you to perform your responsibilities without having to use preferred names or pronouns which are contrary to your sincerely held beliefs.

Jennifer O'Connell (she/her)
Interim Director
Equal Opportunity Services & Title IX
EEO Certified Investigator
505-855-9831 (o) | 505-526-3630 (c)

aps.edu/eos
Report a Concern – Albuquerque Public Schools
Book time with me

ALBUQUERQUE PUBLIC SCHOOLS

Please consider the environment before printing this email