Ambiguous Loss as a Framework for Interpreting Gender Transitions in Families

In this article, we use an ambiguous loss framework to guide a process for decentering cisnormativity (the assumption that biological sex and gender are aligned) within families, specifically for those experiencing the gender identity transitions of family members. Individual family members have varied experiences with regard to gender transition and may or may not experience ambiguous loss depending on their position within the family system. Trans* persons themselves may also experience ambiguous loss as a result of the dialectical tension of acceptance and rejection by family members. We apply resilience processes developed for work with persons facing ambiguous loss to support trans* persons and their families as they navigate gender transitions.

Ambiguous loss theory (Boss, 2016) provides a valuable framework for examining changes in gender expression over time and the ways in which individuals and families make meaning of gender as something that changes. Ubiquitous expectations of gender roles as something determined on the basis of one’s bodily appearance at birth (often called cisnormativity) can influence a family’s ability to interpret and respond to gender transitions in a positive way. Cisnormativity perpetuates a belief system that there are only two genders, that our bodies define our gender, and that our gender necessitates certain roles within families and society (Bauer et al., 2009; Erickson-Schroth, 2014). Because ambiguous loss (Boss, 1999, 2006) focuses on the experiences of persons in responding to stress in the family based on persons “leaving” in an ambiguous way, such as being psychologically missing but physically present, or vice versa, it provides a framework for exploring the nature of physical and or psychological change related to gender transitions. As a theoretical perspective that attends directly to the issues of resilience in the face of stress attributable to change, ambiguous loss can be used to examine not only family members’ responses to gender transitions but also the responses of trans* persons themselves to family rejection.1

The ambiguous loss framework identifies a process to support trans* individuals and families by (a) recognizing their feelings as loss,

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1The terms trans*, trans* persons, transfamilies, and gender variant are meant to be inclusive of the spectrum of individuals whose internalized sense of gender identity does not align with their assigned sex at birth and individuals who do not conform to the gender binary (see Bockting, 2014, for a comprehensive review of trans*-related terminology).
(b) enhancing resiliency through redefinition and meaning making, and (c) exploring how their own expectations may contribute to a belief that change is loss. In our collective work with trans* communities and families, we have found that the importance of a process-based perspective should not be underestimated, as the processes of gender transition and of family relationship redefinition can both be lengthy. Trans* persons and family members may need time, as well as a supported process to integrate one another into relationships that fully acknowledge the gender identity and expression of all parties. In this article, we first review research on the ambiguous loss experiences of family members and trans* persons, and then discuss normalizing ambivalence and resilience processes that may help reframe a sense of loss. Finally, we provide a feminist response to the notion of loss as a response to gender transition by arguing that cisnormative expectations set families up to view gender transition as deviant, and thus a loss. Throughout we utilize quotes from our own unpublished research. Exemplar quotes are primarily drawn from the first author’s interviews with 90 transgender-identified adolescents and young adults ages 15–28 in the United States, Ireland, and Canada, and the third author’s telephone interviews with 49 parents of trans* children ages 6–12.

**Ambiguous Loss Among Family Members Versus Trans* Persons**

In previous applications of ambiguous loss theory, family members experience one of two types of ambiguous loss. For example, Huebner, Mancini, Wilcox, Grass, and Grass (2007) applied an ambiguous loss framework to the deployment of military family member to address a Type 1 loss, wherein family members were physically absent but remained psychologically present. Conversely, Adams, McClendon, and Smyth (2008) addressed a Type 2 ambiguous loss among caregivers of persons with dementia because family members were physically present; however, they had dramatically changed cognitively and behaviorally. In this article, we take the position that trans* persons and their families can experience both types of ambiguous loss. Our discussion extends a developing research base that applies ambiguous loss to lesbian, gay, and bisexual families (Allen, 2007; Dziengel, 2012). Loss may be defined and experienced differently across family roles, with family members reporting the loss of an expected gender identity or change in family dynamics, roles, and expectations (Norwood, 2013a; Wahlig, 2014), whereas trans* persons may report the loss of family relationships as a result of rejection or ambiguous reactions from family members. From the perspective of trans* persons, family members may become physically absent (e.g., unwilling to interact) or psychologically absent (e.g., ignoring or denying the gender transition) or contradictory (e.g., abusive regarding the transition).

**Relational Rupture**

Boss (2009) conceptualized two types of ambiguous loss: leaving without good-bye and good-bye without leaving. She proposed that these types of losses were exceptionally painful because of their ambiguous nature, which can freeze emotional processes (Boss, 2006, 2009) and rupture the relationships among family members with the people who are either physically rejecting or psychologically rejecting. Both types of relational rupture stem from uncertainty about family membership and ambiguity that is due to the contradiction between physical and psychological absence or presence. We suggest that trans* persons’ experiences of ambiguous loss stem from the ambiguous nature of relationships that rupture in response to rejecting or inconsistent behavior toward a trans* persons gender.

A research base is emerging that describes familial responses to a family member’s gender transition by incorporating notions of grieving for lost expectations about the person (Wahlig, 2014) as a pathway for making meaning of the individual’s new identity (Norwood, 2012, 2013a, 2013b).

Norwood (2012) examined several dialectics in meaning making among family members of trans* persons. First, she examined the presence–absence dialectic to consider how people interpret transition and frame it as a loss or not. For some, especially when the role was uniquely defined by gender, such as being a husband, the transition was clearly perceived as a loss (e.g., “I lost my husband”). For others, family members’ perceptions of whether a person was the same or different through a transition related to the sense of loss or change. Yet even if family members intellectually
understood their trans* family member to be the same person from pre- to posttransition, the socially prescribed meanings tied to gender roles can still result in feelings of loss. An ambiguous loss framework can shift the gender of a role while retaining meaning, such as in redefining one as your child rather than your son or daughter (Norwood, 2013b). Parents of transgender children have discussed shifting expectations, with varying degrees of ease, from the anticipated gender to another gender (e.g., the son they were envisioning is now a daughter; Norwood, 2013b). For some parents, the child may never have embodied the social norms for his or her birth sex (e.g., their son may never have wanted to play with toys socially assigned to boys), which may make it less likely that the parents will experience a loss or sense of ambiguity. For example, according the fourth author’s interview with the mother of a 9-year-old transgender girl:

I read about all these parents [of transgender children] who are heartbroken and mourn the loss of, you know, their son. I don’t feel that way. I don’t. To me, she’s like, she’s still the same person. She’s still the same child. Nothing’s changed except for she’s happy. . . . I didn’t feel like I ever had, like, a normal son. . . . So, I never, like, mourned the loss of a son.

Individuals in Norwood’s (2012) study also struggled with ambivalence in understanding their family members while at the same time feeling unsupportive of their gender identities. Some family members wanted to reject or judge their transgender relatives on religious or moral grounds while at the same time understanding that the transgender person needed support, not rejection.

Wahlig (2014) has described parents’ experiences with ambiguous loss in response to their trans* youth’s transitioning. She consolidated research on families (including LGB persons) that describes parents’ grieving the loss of their heteronormative and cisnormative visions for their child’s future (Broad, 2011; Tanner & Lyness, 2004), their perceived loss of normalcy or security for their children, their personal social support due to societal rejection, and the loss of the family identity or the relationship they had with the person they knew (Norwood, 2013a, 2013b; Pearlman, 2006). Wahlig’s (2014) unique theoretical contribution is the concept of dual ambiguous loss, in which parents simultaneously experience both types of ambiguous loss (psychological presence and physical absence and psychological absence and physical presence; Boss, 1999, 2006). Wahlig (2014) explains that transgender children are still physically present—they still have a child, but that child’s psychological existence as a certain gender is significantly changed and may be perceived as no longer there. At the same time, their physical presence as a certain gender is also changed, while their personality and relationships to the family may remain the same. (p. 12)

We propose that trans* persons also experience dual ambiguous losses; however, the way they experience each type of loss differs. Although we argue that gender transitions do not necessarily represent a loss, and in many cases will be a significant gain, the elements of accepting ambiguity outlined by Boss (1991) can help frame gender transitions and articulate a pathway to meaning making. Boss’s (1991, 2006, 2007) work provides a framework that can be applied to the trans* person and the family in ways that promote comfort with the ambiguity they face and the ambivalence they may feel.

In our research studies and lives, we have experienced family members who display ambiguous responses to gender nonconformity. For example, some trans* youth interviewed by the first author have discussed running away from home, or being kicked out of the house, representing a physical absence. However, because their parents continued to pay for a cellphone, which they used to remain in contact, parents remained psychologically present to the trans* youth. Conversely, trans* youth described parents who allowed youth to remain in the family home, representing a physical presence; however, parents no longer emotionally engaged with their youth, representing a psychological absence. Oswald, Blume, and Marks (2005) discussed the need to leave room for complexity in queer family processes. Therefore, rather than viewing parental responses as absolutes (acceptance or rejection), allowing for complexity helps trans* persons learn to live with the ambiguous nature of parents’ physically and/or psychologically rejecting responses.

For trans* people experiencing relational rupture, it may be that almost all ambiguous losses
are “dual ambiguous losses” because of the ubiquitous dialectic of physical presence and absence among family members. For a trans* person, dual loss would manifest as the seemingly incongruent experience of having concurrent physical presence and absence, as well as concurrent psychological presence and absence. For example, a trans* family member may have physical presence at some events (e.g., living in the house) but not others (e.g., being excluded from rituals such as church or extended family reunions). In this way, a trans* person is both physically with and physically absent from the family at the same time. Psychologically, family members can (and often do) simultaneously accept and reject a trans* person, using statements such as, “You are my family member and I love you, but I will not accept or acknowledge your gender transition.” In this way, a family member may be psychologically present while also creating a barrier that limits intimacy. One of the saddest examples of this psychological dialectic we have seen is when family members maintain some relationship to trans* persons but exclude them from family process experiences like funerals. A trans* person is then excluded from sharing with the family in the psychological process of grief at the loss of a loved one, despite being expected to maintain other familial connections.

### Extended Family Systems

Trans* persons, like anyone else, may be embedded in complicated family systems. Significant relationships may include grandparents, uncles, aunts, siblings, children, cousins, neighbors, and potentially foster parents and others. Any of these members of the extended system may exert influence on the other members about how the trans* person is treated, and whether family membership will continue if a gender transition occurs. Parents and spouses are not the only family members with power to influence decisions to support or reject trans* family members. Thus, a relational rupture can occur at different levels depending on interactions in the extended family network.

Extended families as well as outside factors, such as culture, religion, and/or belief systems, can add significant stress and complicate the process of decision making in relation to the timing of transition and the inclusion of the trans* person in the holistic family unit, especially at family events. Such stressors can influence multiple dyads in the larger family system and may result in relational rupture in the spousal or other family relationships.

In our community work and in research, we have seen extended family members (e.g., aunts and uncles) play major roles both in creating support and facilitating rejection of trans* family members. In interviews with the first author, for example, young trans* people have described the important role that aunts, grandmothers, and other relatives provided in the form of a safety valve to the relationships between trans* youth and their parents. Young people reported talking with extended family members and/or going to stay with an extended member while the parents adjusted to the gender transition. In community settings, the third author experienced the ways in which extended family members exerted power through blaming the parents of trans* youth, organizing exclusive family meetings to discuss another member’s transition, and facilitating ultimatums made to family subsystems by the larger system. These kinds of triangulating behaviors on the part of extended family members can serve to strengthen or weaken the bond between a trans* person and the immediate family, which serves to highlight the ambiguity of the primary family relationships. This ambiguity may contribute to relational rupture and ongoing conflict. In some cases, the conflict may never be resolved, thus causing ambiguous loss within all areas of the family.

### Partnering and Parenting Transitions

Adult trans* persons may negotiate complex decisions about gender identity and gender transition within the context of relationship and family commitments regarding partnering and parenting. Although trans* persons may need to renegotiate family relationships with their own parents and extended family of origin, much of the research focuses on how trans* adults reexamine relationships with their own children (Downing, 2013; Hines, 2006) and spousal relationships (Hines, 2006; Lev, 2004). Hines (2006) has described the ways in which spouses may choose to leave a relationship when confronted with a spouse who wishes to transition gender. A dearth of current research exists regarding the effect of transition on the emotional well-being of the children of trans* people. The (sometimes-adult) child will have to form a new
understanding of the relationship between the parent (mother–father) and him- or herself.

Freedman, Tasker, and di Ceglie (2002) suggest that no evidence exists about negative psychological effects on children with respect to parents’ transitions; however, a negative effect may be associated with severed potentially ruptured relationship between the non-trans* parent and the perceived shame and embarrassment experienced by the trans* parent. Similar to marriage separation and the psychological effects on cisgender and heteronormative relationships, if children are caught in the middle of conflicts, having to internalize and balance emotions in respect to rejecting the non-trans* parent’s wishes can contribute to additional strain. Forbidding the children from seeing their trans* parent could lead to ambiguous loss, similar to any child losing access to a parental contact. Furthermore, the impact on trans* persons of not being allowed to see their children can be devastating:

And even though I love my kids and it is an awful thing to do to them, I don’t know that I can keep going. . . . I miss my kids, I haven’t seen them now for a year and a half and I might not see them this Christmas again . . . and I just can’t accept that and I would just not rather be here living than to feel like this. (Pillinger & Fagan, 2013, p. 72)

For trans* parents, partners acting as mediators to support parent–child relationships may facilitate positive relationship outcomes. For example, if spouses keep children away from their trans* parents, they are acting as a barrier to trans* parents’ ability to readjust parent–child relationships; however, if partners support their spouses’ transition, they may provide much-needed social support, which helps both the transparent and the child adjust to gender transition and changing parental roles (Downing, 2013). Although partners are uniquely situated to help trans* parents renegotiate parent–child relationships, non-trans* partners may struggle to readjust their own identity and relationships during transition.

Hines (2006) reported that for spouses who stay together, there might be a renegotiation of romantic and sexual relations. As trans* persons transition, both the non-trans* partner and the trans* partner may reexamine their sexual identity in the context of transitioning as a result of complex shifts in gendered meaning (Hines, 2006). For example, Israel (2005) has described the complexities inherent in redefining one’s sexual orientation in the context of gender transition, stating: “While defining an outward gender identity becomes a fairly predictable process after a person’s transition is established, actually recognizing impending change to sexual orientation is frequently much more surprising to trans* people and their loved ones” (p. 57). Not only are trans* persons renegotiating daily spousal relationship roles and behaviors; they may also renegotiate sexual orientation and the labels with which they identify.

Later-Life Transitions

Older trans* persons may navigate family relationships with more nuanced effects as a result of being part of cohorts based in specific sociohistorical contexts as well as developmental differences suggesting unique transitioning trajectories and interpersonal family relationships that differ from those of younger trans* persons. An older trans-cohort experience includes a global and long-standing legacy that perpetuated violence, abuse, and erasure of trans* persons. For example, Lev (2004) reported that, historically, some clinicians suggested or required that trans* persons leave their families of origin and relationships to pursue transitioning. Legislators and clinicians demanded that a divorce was evident before granting either medical or surgical intervention or legal gender recognition (Stryker, 2009). Identifying as trans* was largely viewed as undesirable, and trans* persons were considered mentally disordered, with the assumption that they would leave their family, home, and in some cases country of origin to begin a new life in their new gender, totally detached from their past or their loved ones. Though the historical trauma remains present within modern trans* communities, older trans* persons may have a more direct link to institutionalized transphobia, which perpetuated the notion that trans* persons needed to rupture their relationships in order to live authentically.

Embedded in a sociohistorical context, older trans* persons may not have transitioned until much later in life; they may or may not have disclosed their trans* identity to partners, parents, children, or extended family; and they may have more experiences related to both discrimination and internalized stigma, yielding a higher prevalence of lifetime stigmatization (Fredriksen-Goldsen et al., 2014). Older trans* persons may have transitioned later in life, after
achieving various life course milestones that may ease the transitioning process. For example, some trans* persons decide to transition after their children reach young adulthood to avoid disrupting family functioning, they may wait until after retirement to prevent having to transition on the job, or they may wait for the death of their own parents to prevent coping with parents’ possible negative reactions (Hines, 2006). Additionally, older trans* persons’ interpersonal relationships may be harder to readjust because of patterns of behaviors that may have been reinforced for decades.

**NORMALIZING AMBIVALENCE**

*Ambiguity* and *ambivalence* are not synonymous. Ambiguity is an external variable that expresses a lack of clarity. Furthermore, the adjective *ambiguous* describes “a type of loss that has no validation or clarification” (Boss, 2006, p. 144). *Ambivalence*, however, refers to mixed or conflicting emotions or feelings. Therefore, normalizing ambivalence is a therapeutic goal to normalize the feelings associated with uncertainty and a lack of validation or clarity.

Many trans* persons experience a profound fear of family rejection. In the first author’s interviews, about half of the youth reported a significant physical or psychological break with family, many more expressed current or prior fears of such a break, and about 10%–20% had decided not to disclose their gender transition plans, in part for fear of rejection. A common discourse regarding the disclosure of one’s gender-minority status is the prevalence of family ties falling apart (Green, 2000). Normalizing ambivalence helps people move beyond focusing singularly on trying to resolve broken relationships. By understanding the myth of closure, trans* persons can experience ambivalence as an understandable outcome, one that may last for years or even a lifetime. Being open and honest about ambivalent feelings toward family members who are ambiguous or rejecting in their response to a trans* person’s gender promotes resiliency through redefining self and revising attachments.

Disclosing gender transition plans in stages allows family members time to adjust to one piece of the transition before integrating other aspects of change (Lev, 2004; Lev & Alie, 2012; Rahilly, 2015; Zamboni, 2006). Rahilly (2015) described the process parents of trans* youth use, noting that parents sometimes disclosed to strangers their child’s gender identity, while on other occasions parents chose not to offer an explanation of gender to preserve time, relationships, or energy. Gender-variant persons may choose to lengthen the ambiguous period or to communicate ambiguity as a way to soften the impact of disclosure on family members. For example, when interviewed by the first author, one youth said:

I’m out to my parents as queer. But I’m not out to my parents as trans*. I don’t know if I ever will be. Them accepting me as queer was a very hard process for them but now they are very accepting and very supportive. (Ray, 22, White, F-M)

For some, a desire for closure may supersede concerns about the “loss” of transition, and they may just be uncomfortable with the period of not knowing. The nature of gender transition is such that the period of change and adjustment is necessarily long for most people. Specifically, any medical interventions will take months, and sometimes years, to complete. Thus, the process itself complicates the responses of family members. As families develop across the life span the meanings associated with the timing of these dimensions reflects both change and continuity (Bengtson & Allen, 1993). Boss (1999) described this process as grief that is complicated by the circumstances (unknown physical status or diminishing psychological status). For trans* persons and their families, recognizing the process as complicated and ongoing allows for responses of family members to grow and change over time.

Likewise, trans* persons often face an extended period of not knowing how family members will respond to their gender nonconformity or transition, or when or how damaged family relationships may be mended. The process of gender transitions and gender identity development can be ambiguous for families who long for relational resolution one way or the other. For trans* persons and their families, cultivating comfort with ambiguity could be especially protective, given that many elements of the future remain unknown. These elements include how a person will feel with aging and physical development, how a child will feel as puberty begins, what sorts of physical characteristics may or may not change in response to hormonal treatments, and how the individual’s
interactions with family members may or may not shift in response to social and physical transitions. When a child presents with gender dysphoria, current advice recommends a long period of “watchful waiting,” thus allowing the child plenty of time and freedom to express gender in a variety of ways during the prepubertal phases (Cohen-Kettenis & Pfafflin, 2003). This lengthy time period is often ambiguous. For example, a young adult interviewed by the first author described the decision to maintain a genderqueer (as opposed to transgender) identity because the young adult viewed a trans* identity as fragile, saying:

I would only succeed if I succeeded in deceiving people or keeping certain things from them and I sort of want a more secure identity and I can more define myself rather than feeling like I have to go into this other box so that people will accept me. (Margaret, White, 26, M-F/GQ)

It would seem however that a new wave of acceptance and understanding is enabling families to come to terms with trans* identities and gender transitions. Media role models like Laverne Cox, Janet Mock, and Caitlyn Jenner seem to be having a mainly positive influence on attitudinal change in societies, in the Western World. However, many of the trans* pioneers who transitioned decades ago are still living without direct contact with their families. Even though there has been a positive surge in acceptance, these families may have experienced a relational rupture at a time of little acceptance or downright disgust in relation to the transition. Time has been seen as a “healer” with respect to bereavement; however, Boss (2009) argues that in a suspended state of ambiguity over time, the grieving process may be blocked or frozen and a residual effect of ambiguous loss remains. Thus, families that continue to be rejecting may not see a reduction in ambiguity over time.

Paradoxically, families that have “disowned” their trans* loved one as a result of perceived shame and embarrassment to the family may now be reconsidering their previous position and in some cases experiencing guilt as new information becomes available and societal attitudes change. These splits or conflicts need to be addressed before genuine healing can occur. Mediation could be key to enabling both sides to renegotiate. Furthermore, restorative work may be beneficial by allowing both the trans* person and members of the family to explain the reasoning behind their past actions. This may be a very challenging process; however, restorative work has had much success, especially in places like Northern Ireland following decades of conflict (McEvoy & Mika, 2001). The potential outcomes could prove very successful for all family members, allowing relational rupture to begin to heal.

**Cultural Actions to Support Families**

Boss (2007) describes ambiguous losses in neutral terms caused by events outside the family. However, a family’s perception and experience of the loss has valence, and it is influenced by the cultural context. Culture and societal norms can play a vital role in facilitating resiliency in the family unit. In her community work in Ireland, the third author has recognized a seismic shift in attitudes. A country that was perceived as essentially Catholic with strict attitudes toward sexuality and gender identity has changed significantly in recent years. In 2015, the Equal Marriage Referendum passed by popular vote. Furthermore, in July 2015 Ireland introduced its Gender Recognition Legislation for trans* people, allowing them to change their legal gender marker in a self-declaration model of legislation. Three independent entities fought for this legislation: a leading medical doctor (Dr. Lydia Foy), legal experts at the Free Legal Advice Centres (FLACs), and the national nongovernmental organization Transgender Equality Network Ireland (TENI).

An important example of the role that community organizations can play in altering larger cultural (and subsequent medical and legal) contexts for trans* persons exists in the work of TENI. Apart from legislative changes, TENI has addressed the issue of transgender identity in a holistic fashion, focusing not solely on legislative changes but also on health care, education, policing, and positive media influence. It has also developed one of the strongest trans* family peer-support groups in the world. In 2011, TENI developed Trans Parents Connect Ireland (Trans-ParentCI). This group is supported by TENI but developed a model of support, education, capacity building, and advocating on behalf of trans* families. The group meets on a monthly basis and organizes annually a 2-day residential retreat program known as “getting your house sorted,” in which it facilitates families in developing coping skills to address the perceived challenges of
having a transgender person in the family unit. TransParenCl also includes young trans* people, their siblings, and children of trans* people. There has been significantly positive evaluation of these residential weekends (Mallon, 2015), allowing families to renegotiate roles and construct new meanings for the inclusion of their loved ones in the changing families. A recent study of young trans* people found that homelessness was not reported by any of the trans* youth in Ireland, in contrast to the reports on homeless trans* youth in the United States (McGuire & Catalpa, 2015).

Moreover, TENI is also working with government departments to develop new policies that address the needs of young trans* people in schools, allowing them to transition in their preferred gender. TENI also collaborates with Ireland’s national health-care service (Health Service Executive, or HSE) to develop guidelines for addressing the health needs of trans* people and their families in Ireland. Indeed, there has been a systemic change through community organization, incredibly in a country that many have described as an authoritarian Catholic country.

Culture also affects how trans* persons perceive family reactions to their transgender identity as ambiguous loss. Boss (1999, 2006, 2007) has posited that a central underpinning to ambiguous loss theory is that a psychological family exists. This assumption applied to trans* persons highlights family variability in which trans* people can be members of a structural family (family of origin) and a psychological family (family of origin and queer community kinship), which has bearing on how they perceive ambiguous loss. Not all families reject trans* individuals. When loss is experienced, however, created queer families take on great importance as trans* people leave their families of origin in search of kinship and social acceptance.

Meaning Making

Boss (2006) has described several meaning-making processes that promote resiliency, such as activism, gaining meaning through revising rituals to fit changing circumstances, and altering habits of thinking to help families move through a transition. In finding meaning, family members are able to socialize differently and reimagine self in new family contexts. Several studies have described parents of transgender and gender-nonconforming children as initially uninformed about transgender issues but as eventually becoming ardent activists for their children and families. For example, the mother of a transgender daughter in Kuvalanka, Weiner, and Mahan (2014) stated, “I had done all of the research, and I felt... armed to take on the world and to explain her and defend her” (p. 14).

Both Norwood (2012) and Boss (1999, 2006) describe the importance of meaning making during transitions. The observations of Boss (2006) about specific types of processes that help families make meaning are similar to the dialectics found in family members’ communications by Norwood. For instance, Norwood (2012) describes the tension of presence and absence relating to whether a person will remain a member of the family after a transition. For some families, when someone reveals a transgender identity, family boundaries generally considered nonoptional are reconsidered and that person becomes absent from the family, physically, psychologically, or both (Green, 2000). Many children and adolescents report exclusion from the family in myriad ways at the point of gender
transition. For example, youth interviewed by the first author reported everything from being kicked out of the house to being excluded from extended family functions or simply ignored while being allowed to continue living in the family home. One adolescent, Tina (M-F) described the rupture with her mother:

[My mom] dropped what she was doing, looked at me, told me to leave. She slapped me and she cried. Just an expression you can never get out of your head. I told her, “I’m a girl; I’m not your boy no more.” And . . . she just told me to leave.

Revising Attachments

Revising attachments is a social and relational revision, which happens in interaction among family members. As people develop and change, the way they relate with other people must evolve. Changing habits of thinking allows for family members to associate positive attributions with transitions and thus interact with more compassion and understanding. Boss (2006) has said that thinking dialectically (both–and) helps this process, because family members are able to hold the possibility of hope for things to be the same along with the possibility for change as transitions occur. Family members may revise the gendered ways in which they interact with one another, which requires some negotiation by trans* persons and family members alike. For example, in Kuvalanka et al. (2014), a mother of an 11-year-old transgirl described her 9-year-old son’s initial reaction to his sibling’s transition:

He was the one who initially said, “I don’t like that she’s doing this, I don’t like, you know, that she’s changing her name, and I don’t like that she says she’s a girl,” you know, and basically just saying, “I don’t like that I’m losing my brother.” (p. 15)

Similarly, another mother of a 13-year-old boy spoke about how her son also struggled with the idea of losing his brother:

For him, it was kind of tough thinking that he would have this sibling, that they would have this bond. And they don’t, because he’s very sports oriented and very active, and she’s very much more, you know, artistic and creative. (p. 15)

Redefining the Self

Another source of ambiguous loss for trans* persons and their families is the feeling of losing personal and family identities. Loss associated with the psychological absence of the idealized person one used to know (or expected to know) can cause a great deal of stress (Wahlig, 2014). Family members must navigate reconstructing a personal identity within a new gender schema while also reconstructing family identity within a new relational context. Resilience associated with reconstructing family identity can include creating new meaning in rituals, revising roles that constitute the family identity, and establishing a trans* inclusive family identity.

Norwood (2012) further explains the struggle people have in determining whether someone is, or will be, the same or a different person after a gender transition, especially during the early phases of exploration. She argues that people who come to understand that a person is still the same person, and still a member of the family, will retain stronger relationships. Boss’s (2006) suggestions of revising rituals to fit changing circumstances, and changing habits of thinking, may support struggling family members to make meaning of what can be an ambiguous process. Family rituals could be made less gendered while retaining importance for the family. For example, families sometimes create photos where people are dressed alike based on gender. A simple revision of this theme could allow for the “dressing alike” desire while letting go of the gender divide.

Both Norwood (2013b) and Wahlig (2014) address the notions of existing heteronormativity as creating an additional sense of loss when a family member is trans*. When viewed in flexible terms, or as Brill and Pepper (2013) describe, “disregarding gender stereotypes about items and behaviors,” it becomes easier to understand and accept the gender (nonconforming) behavior of other members of the family. Changing habits of thinking about gender expectations to both–and is one method of decentering heteronormativity that stands to reduce the sense of loss that families of trans* persons describe.

Dismantling Cisnormativity in Families

We have long known in family science that families vary with regard to the gendered expectations placed on different members. Gender expectations may influence a family’s sense of loss when family members transition their gender. A queering perspective, or resisting heteronormativity by challenging family,
sexuality, and gender binaries (Oswald et al. 2005), can help us reframe the meaning of gender roles across a broad range of gender expressions. Naming loss associated with transgender identity as “ambiguous loss” sets a framework for naming other ambiguous losses experienced when family members do or do not conform to gender role expectations even in the context of a cisgender identity. For instance, if the role of being a daughter is equated with childbearing and one has a daughter who decides not to have children, one pathway toward support is to recognize the feeling as an ambiguous loss of what a daughter was expected to be, then to move forward by remaking the meaning of daughter to be less gender stereotypical. By naming losses associated with deviations from cisnormative expectations, and consciously challenging those expectations, we can begin to integrate more inclusive approaches to gender, sexuality, and family. In this way, we can use notions of ambiguous loss as a process for decentering cisnormativity.

Holding a cisnormative view of gender suggests that a transsexual person’s gender would be viewed as a loss from the assigned sex; for example, a transwoman’s gender would be viewed as a loss from her assigned male sex but potentially not a loss as a gender-conforming female. A nonbinary person’s gender would be viewed as both a loss of the assigned sex and a loss of normative engagement with the confirmed gender. For example, a parent may describe the loss of a daughter when an assigned female transitions to third gender, but that parent also may describe the loss of having a child who does not then identify as a son. A trans* person who identifies further along the transsexual spectrum may be judged by how much he or she meets the norms of the confirmed gender, and a genderqueer or third-gender person would always be seen as deviant. A family with strong cisnormative expectations will likely view gender variance as a loss rather than a gain.

Challenging gender, sexuality, and family binaries with an active resistance to heteronormativity and cisnormativity can be labeled “queering” (as a verb) (Oswald et al., 2005). One strategy to “queer” gender is to dismantle functionalist notions of a mythical norm, with a consequent view of persons as deviating from that norm. For example, if a “normal” girl is defined as liking to wear dresses, then everyone who does not like dresses is not “normal.” If working models of what it means to be a girl are broadened to not focus on clothing, then liking to wear dresses or not would not define a girl as outside the “norm.” The resulting worldview that focuses on the range or variability of characteristics, and the complexity of interactions of those characteristics, as the foundation of human experiences may lead family members to see the strengths and benefits of trans* people for families and society.

For trans* persons, because of stigma and cisnormativity, the interplay between larger societal beliefs and internal family contexts affects the meanings family members associate with gender transition. For example, Boss (2006) argues that value systems that hinge on absolutes (i.e., good or bad, true or false) are not well equipped to accept ambiguous loss and ambiguity. Gender, as a central construct and organizing factor of society, is readily viewed in terms of absolutes, such as boy or girl (West & Zimmerman, 1987). Certain subcultures, such as religious or ethnic groups, may actively promote absolute expectations of gender expressions and roles. This specific cultural context has the power to significantly influence the ways that families will interpret trans* identities. As trans* political movements gain traction in the government, academia, health care, and the media, worldviews change and acceptance of trans* family members becomes more prevalent, even within subcultures that might seem to prohibit family acceptance of gender variance. Families will have an easier time of adjusting to trans* persons if their worldviews already include a flexible view of gender and gender expectations. Decentering cisnormativity provides a straightforward pathway to full inclusivity of trans* persons as family members regardless of their gender role.

Conclusion and Future Directions

An ambiguous loss framework in the context of transfamily systems helps us better understand the nature of relational rupture for transfamilies. By carefully examining the dialectic of psychological and physical concurrent presence and absence, we have explored the ways ambiguous loss helps to reframe gender transitions as shifting dialectics rather than as losses.

An ambiguous loss framework creates a context to explore supporting transfamilies throughout gender development, which helps to remove blame and shame tied to any specific family
member. This lens helps theorize how multiple family members may experience ambiguous loss when a family member is trans*. Family members may feel their trans* family member is essentially the same yet somehow different, and they may be unsure of how to navigate interpersonal relationships. Trans* persons may feel uncertainty about whether family members will continue to accept, love, and support them if they pursue transition. Conceptualizing ambiguous loss as an externally driven situation allows partners, trans* persons, and therapists to normalize ambivalence and ambiguity as an understandable response to unexpected family changes.

Ambiguous loss also provides an important framework for understanding the transitions that occur in families when cisnormativity is challenged. Trans* persons historically have faced erasure and invisibility within families, such that trans* persons were viewed as familyless or were encouraged to give up family to live authentically (Lev, 2004; Stryker, 2009). Thus, we argue that if cisnormativity were dismantled, changes in gender would not represent a challenge to existing structures that organize gender. However, given the ubiquitous nature of cisnormative assumptions, there is an important function to frameworks, such as ambiguous loss, that provide pathways to dismantle those assumptions.

Resilience through the lens of ambiguous loss theory identifies a supportive framework with which to view family adjustment, due to transition, as a process of shifting meanings associated with roles, behaviors, and family relationships (Boss, 2006). This work has theorized that finding meaning, reconstructing identity, and revising attachments are key factors in promoting resiliency in transfamilies. Transfamilies that are able to adjust previous meanings associated with gender may also be able to adapt to changing relationships and identities in the context of gender transition.

This theoretical application of an ambiguous loss lens to view transfamilies provides a glimpse into the many possible empirical applications of ambiguous loss theory to transfamilies. Future research is needed to address ambiguous loss from a variety of family members’ perspectives in transfamilies. For instance, this theoretical application has made the argument that experiences of ambiguous loss differ depending on individual family members’ perspective. While ambiguous loss theory has been applied to parents of trans* persons (Norwood, 2013; Wahlig, 2014), more research is needed on spouses, siblings, and extended family members’ experiences with ambiguous loss associated with a transitioning family member.

Furthermore, no published studies have addressed an ambiguous loss framework from the perspective of trans* persons. In this review, we have demonstrated the benefits of applying an ambiguous loss framework to trans* persons’ experiences with relational rupture and resilience, and we have suggested that ambiguous loss experiences will vary depending on where trans* persons are within their life course. For example, an analysis of ambiguous loss among trans* youth may reveal trans* youth agency to define parent–child relationship outcomes in the event of disclosure, while an analysis of ambiguous loss among parents who are trans* may reveal spouses’ influence over parent–child relationships between parents who are trans* and their children. Additionally, elder trans* persons continue to face invisibility in academia, and their ambiguous loss experiences may be altogether novel from those of other trans* persons because of sociohistorical contexts and navigating ambiguous losses associated with never disclosing their authentic gender identity to their family of origin, spouses, or children.

Finally, ambiguous loss provides a unique look into resilience associated with experiences of ambiguous loss due to relational rupture. We argue that tolerance for ambiguity represents transfamilies’ ability to adapt to ambiguous loss associated with trans* identity disclosure or discovery. Transfamilies’ ability to find meaning, restructure relationships, redefine self and family, and discover hope represent just a few avenues that may help families readjust to gender transition, recover from loss, and reconcile past feelings of ambivalence.

References


