

The “T” Is Missing From Gifted: Gifted Transgender Individuals: A Case Study of a Female to Male (FTM) Gifted Transgender Person

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Abstract

This case study explored the suicidal ideation of a gifted transgender male. The subject filled out a questionnaire and was interviewed. The data were analyzed using grounded theory methodology and revealed that this gifted transgender male coped with emotional problems conceptually rather than concretely and appeared to rely during adolescence on various aspects of his giftedness, such as abstract thinking and problem-solving skills, to combat depression and suicidal ideation. Positive and negative external and internal factors have been identified using grounded theory methodology, and an initial theory of suicidal ideation within the gifted transgender male population is proposed.

Introduction

Estimates vary widely about how many Americans and American K–12 students are transgender, making it difficult to know how many adolescents are both gifted and transgender. The “T” for *transgender* is missing from gifted. However, transgender individuals appear to be at greatly elevated risk for suicide. A staggering 41 percent of transgender people in the U.S. have attempted to commit suicide vs. 1.6% of the entire population (Grant et al., 2011).

Purpose of Study

Educators, therapists, and counselors must be mindful that gifted transgender children exist, and some are at risk for suicide. The fears and animosity that gifted transgender individuals confront should be discussed openly. The purpose of this case study is to describe issues that one gifted transgender individual encountered and how they may have implications for providing counseling and best practices for gifted transgender adolescents to confront suicidal ideation and avoid suicide. Caution must be exercised in making generalizations from case studies about other individuals who are gifted and transgender.

Transgender Gifted Adolescent Suicide and Suicidal Ideation Data Findings

Currently, there are no data on the number of people in the U.S. who are both gifted and transgender. The *Marland Report* (Marland, 1972) found 2% to 5% of the U.S. population to be gifted. The National Association of Gifted Children (NAGC) estimated that there are three million academically gifted children in grades K–12 in the U.S., 6% of the student population. Other estimates have suggested that there are 260,000 gifted GLBT students in the United States (Friedrichs, 1997); the percentages of each subgroup have not been examined. The U.S. Census does not ask for gender identity, so no data have been collected on the number of transgender Americans. One study estimated in 1996 that 2% to 5% of the population is transgender, but the number of individuals who undergo sex-reassignment surgery is less than that (Kesteren, 1996). Statistics from the Netherlands have indicated that 1 in 12,000 biological males and 1 in 34,000 biological females seek sex-reassignment surgery (Kesteren, 1996). The Williams Institute Review documented that approximately 0.3% of American adults identify as transgender (0.3%) (Gates, 2011). Accurate statistics remain elusive. The NAGC estimated that there are 3 million gifted children in the United States. Utilizing the Williams Institute Review’s estimate of 0.3% who are transgender, then there may be 9,000 gifted transgender children in America. However, if the NAGC estimates (3 million) and Kesteren’s (3% of the population) are used, then 90,000 may be gifted transgender. Based on a survey of more than 7,000 transgender individuals, the National Center for Transgender Equality (NCTE) and the National Gay and Lesbian Task Force (NGLTF) estimated that 41% of U.S. individuals who are transgender have attempted to commit suicide vs. 1.6% of all Americans (Grant et al., 2011).

Risk and Resiliency Framework

This case study integrated the Framework of Resiliency, a mode of research that refers to a body of international cross-cultural, lifespan developmental studies that followed children born into high-risk conditions. Resiliency research not only identifies the characteristics of resilient adolescents, but also has recorded the characteristics of different environments. Resiliency research authenticates prior research on human development, which recognizes the biological imperative for growth that exists in humans (Benard, 1991). The importance of the resiliency issue for transgender youth is underscored by the suicide statistics cited above, which indicate severe psychological stresses faced commonly by transgender individuals. The capacity to overcome risk factors, such as stress, trauma, and catastrophes, or simply to survive everyday problems depends on locating one's own resiliency. According to Benard (1991), we are all born with an innate resiliency. We all can develop characteristics possessed by resilient individuals. While there is no universal definition of resiliency, researchers have defined resiliency as the ability to cope with or overcome risk or adversity and to develop competence when encountering severe stress and hardship (Doll & Lyon, 1998; Garmezy, Masten, & Tellegen, 1984; Higgins, 1994; Rutter, 1985, 1987, 1990; Wolin & Wolin, 1993). Resiliency requires problem solving, critical and innovative thinking, sound intellectual functioning, self-awareness, and a sense of purpose. Having goals, aspirations, optimism, faith, and spirituality can lead to resiliency (Benard, 1991). Doll and Lyon (1998) stressed that children who possess the following characteristics become competent and resilient: good intellectual ability, high self-efficacy, self-confidence, self-esteem, high expectations for achievement, faith, and a higher rate of engagement in productive activities. Blum and Rinehart (1997) asserted that an individual who possesses a positive religious identity, attractive physical appearance, self-esteem, and a higher grade-point average has more protective factors. All of these are internal resiliency factors. External resiliency factors include parent and family connectedness, parental/adolescent activities, positive parental presence, and school and community connectedness (Blum & Rinehart, 1997, p. 16). Doll & Lyon (1991) also stated that children and youth who are resilient have a close, affectionate relationship with at least one parent or caregiver and access to receptive, approachable, high-quality schools.

Risk and resiliency are polar opposites. Risk represents the dark side of resiliency or "individual differences in people's response to stress and adversity" (Rutter, 1987, p. 316). Doll and Lynn (1991) reported that some internal risk factors included: lack of empathy for others, low self-esteem, lower measured intelligence, criminal activity, social incompetence, being male, and substance abuse. Risk factors for substance abuse included appearing older than peers and same-sex attraction. Same-sex attraction is correlated with more frequent alcohol and marijuana use in older teens (Blum & Reinhart, 1997, p. 26). According to Doll and Lynn (1991), external risk factors include poverty, low parent education, marital discord or family dysfunction, ineffective parenting, child maltreatment, parent mental illness or incapacity, large family size, ineffective schools or education system, and lack of positive mentors and connectedness with prosocial organizations. To become resilient, adolescents must obtain positive external and internal resiliency factors. Fostering resiliency requires changing belief systems and transforming families, schools, and communities to meet the needs of adolescents. Society needs to create conditions that let adolescents acquire social competence and problem-solving skills, as well as to gain a sense of self-understanding and hope.

Case Study of a Female-to-Male (FTM) Gifted Transgender Individual

In this case study of a gifted female-to-male (FTM) transgender individual, the subject was interviewed to identify positive and negative resiliency factors that assisted the subject from not completing the act of suicide during adolescence. New Mexico Highlands University's Institutional Review Board approved the study.

Methodology. Grounded Theory Methodology, used in this case study, and allows for a variety of data collection tools. Within grounded research, the researcher is the primary tool for investigation (Glaser, 1998), which was true in this case study. Other data collection tools were the initial questionnaire and an individual interview. The steps were as follows:

1. Select participant and meet to complete questionnaire and conduct interview
2. Code and analyze data from interview (using grounded theory)
3. Ensure that interview data were collected accurately
4. Report findings and conclusions
5. Propose a theory

Selection of Participant. The participant is a director for a transgender resource center. He informs individuals, organizations, and businesses about transgender issues. I became acquainted with him through my work at that resource center.

Questionnaire. The participant answered questions about his personal information, sexual orientation, intelligence, age of first sexual experience, suicide attempts or suicidal ideation, age of attempted suicide (if applicable), number of thoughts pertaining to suicidal ideation, reasons for considering suicide, and any external or internal influences that kept him from considering or completing the act of suicide.

Personal Information. The participant completed the questionnaire on December 16, 2013. He was 43 years old. He identifies as a Caucasian male and a transgender FTM. He did not identify as homosexual or heterosexual, but as Queer. He had his first sexual experience at the age of 15. His answers to the questionnaire showed that he met the criteria for this case study by being transgender and gifted (in his case, an IQ of 150).

Suicide Attempts/Suicide Ideation and Age. The subject said that he had never attempted suicide. However, he had thought about attempting suicide about 10 times during his lifetime, the first time being when he was 12 years old.

Reasons for Considering Suicide. The questionnaire asked for the subject to write some reasons for having thoughts of suicide. His response was, "Being transgender and not understanding it or knowing there were options or treatments . . . there was no one like me." This might be correlated to gifted gay youth who have difficulty finding partners compatible with both their sexual identity and their intellectual capacity. "If individuals are predisposed to isolation and lack of support, as many highly able adolescents are, sexuality issues may be life-threatening" (Tolan, 1997).

Reasons for External and Internal Resiliency Factors for Not Completing Suicide. The final step of the questionnaire was to write four external and internal resiliency factors that the subject believed kept him from not considering or completing the act of suicide. He was asked to rank the influences from (1) most important to (4) least important. The subject identified these factors:

External Resiliency Factors

1. Mother (*Social Affiliations and Social Interactions*)
 - a. Psychiatrist [**uncovered during interview**] (*Social Affiliation*)
2. Friends (*Social Affiliations and Social Interactions*)
3. Books (*Arts and Hobbies – Educational Opportunities*) School Setting

Internal Resiliency Factors

1. Goals for future (*Achievement*)
2. Intelligence (*Comprehensive Knowledge*)
3. Resiliency (*Stratagems and Coping Mechanisms*)

Interview with Participant. After each question was asked in the interview, the researcher paraphrased and re-read the subject's response to ensure accuracy.

Interview Responses from the Subject's Questionnaire. The analysis of the data yielded several resiliency factors identified in prior research on resiliency. The subjects' responses pertaining to sexuality, giftedness, and/or intelligence played a major role in deterring attempted suicide or suicidal ideation. Positive and negative external/internal resiliency factors were based on data coding. These risk and resiliency categories are presented below with the accompanying definitions. The factors were separated into internal and external categories.

The interview focused on his responses from the questionnaire. The participant revealed that his "transgenderism" began with the onset of puberty at about the age of 12; he had "early identified as a boy." As a female, when he was 15, he wanted to die because he did not understand that he was male. He felt isolated and alone in a world that he believed did not know who he was and did not want to know that he existed. Despite these feelings, he encountered several positive external/internal resiliency factors that deterred him from suicide and suicidal ideation, as explained in the next section.

Subject's Positive External Resiliency Factors. The following nine external resiliency categories were determined based on initial data coding: social affiliations and social interactions, social status, religion, athletics, arts and hobbies, educational opportunities, societal opinions and assumptions, pets, and life stressors. He experienced four out of nine positive external resiliency factors, which are presented in boldface to differentiate them from the entire list of external resiliency factors.

External Risk and Resiliency Factors

1. ***Social Affiliations and Social Interactions***: relationships with members in society (e.g., family, friends, enemies).
2. *Social Status*: the aspect of the participant's socio-economic status. This is the standing, honor or prestige attached to one's position in society.
3. *Religion*: the beliefs and opinions concerning one's existence, nature, and worship of a deity or deities, a driving involvement in the universe and human life.
4. *Athletics*: the engagement in or making reference to athletes.
5. ***Arts and Hobbies***: the creation of something perceived as beautiful or thought-provoking works (e.g., in painting, music, or writing). Hobbies are enjoyable activities in which one engages for pleasure and relaxation.
6. ***Educational Opportunities***: the various educational opportunities within and beyond the traditional school setting.
7. ***Societal Opinions and Assumptions***: Established societal attitudes, beliefs, and feelings that are based on conjecture.
8. *Pets*: the connection with animals for companionship, interest, or amusement.
9. *Life Stressors*: the experiences or events that produce severe strain in one's life (Author, Date).

Positive (Mother and Psychiatrist) External Resiliency Factors-Social Affiliations and Social Interactions

His mother and father got divorced. He stated that "this was the best thing to happen to him and his mom. His father questioned the subject's masculinity." "Although my mom was super supportive and loving to me, it was actually [she who] consulted the psychiatrist and was worried for me, worried about me being able to fit in." The psychiatrist's recommendation was "leave him alone." The psychiatrist validated the subject's uniqueness. This positive social affiliation/social interaction and societal opinion and assumptions influenced the subject not to complete the act of suicide. The subject's psychiatrist was ahead of her time in accepting him as transgender. For individuals who are transgender, alarmingly, not until the most recent edition of the mental health manual DSM V has the field of psychiatry, therapy, and counseling reassessed its views about transgender identity. An incident revealed that the subject's favorite holiday was Halloween. This holiday let him pick his favorite costume, which society viewed as masculine attire. His mother would let him pick the "guy he wanted to be for Halloween." This was when he would feel most comfortable about self. Therefore, another positive social affiliations and social interaction in his life was his mother. He and his mother moved to New York, and his mother became his closest confidante. He would not commit suicide because he feared his mother's thoughts of "finding my dead body."

Positive (Friends) External Resiliency Factor—Social Affiliations and Social Interactions. During this period of his life, one of his best male friends eventually realized that he was gay. The two became close friends and sometimes posed as being in a relationship (him as male and the subject as female) to make school situations (i.e., dances, formals) easier. Another best friend, this one female, became his treasured "girlfriend." This would become his "relationship in the closet." He had "caught on the thought that he was gay [lesbian] in a sexual relationship with a girl." During this transition, he had reached out to his father's sister, who was a "butch lesbian." His life began to change, as a lesbian. Now he had the opportunity to "hang [out] around 20-year-olds." They were all open with their sexual orientation as validating and vocal lesbians. He had discovered and unearthed a new family, and "I [he] wanted to live "because "they got [understood] me." He realized that "these are my people." He had stated that he "had the key to relationships that kept me tethered." These companions were part of his positive social affiliations and social interactions that would deter suicide or suicidal ideation.

Positive (Books) External Resiliency Factor-Arts and Hobbies. Another positive external resiliency factor would be the category Arts and Hobbies. He became an avid reader. His mother said that he had been a voracious reader who was "reading at the age of two, and he would not put any books down." He stated that books became his "salvation." One of his favorite books at an early age was *Charlie and the Chocolate Factory*, by Roald Dahl. From this book, he believed that he would mentally be transitioned into another world where he could become the man that he wanted to be. This would lead to other books, such as the *Phantom Tollbooth*, which provided a continuous escapism, which he called "big time."

He located a book entitled *Stone Butch Blues*, by Leslie Feinberg. This critically acclaimed novel's main character is battered by sexism and homophobia, which causes her to have difficult and repressed emotions, described as turning into stone. The main character, Jess Goldberg, realizes her differentness from other girls and questions whether she is a boy or a girl.

This book helped him to transition. He began to realize that he was like Jess Goldberg, an individual who struggled against adversaries. His epiphany would become the foundation for his true being. His body became his antagonist: "My brain was my friend, my body my enemy."

Positive (School) External Resiliency Factor—Educational Opportunities. It was uncovered during the interview (although not noted on the questionnaire) that another positive external resiliency factor was his educational institution, which falls under two categories: educational opportunities and societal opinions and assumptions. He attended St. Andrew's Episcopal, a private school. He described it as a "weirdo school" in which it was "cool to be smart." The Episcopal Church was known for its unconventionality and acceptance. Throughout history, the Episcopal Church has been progressive in its doctrine. It opposed slavery in the 19th century and argued that married couples should have access to contraception in the 20th century, as well as taking the position that women should be ordained as priests. More recently, it has ordained as priests individuals who are openly gay or lesbian and has blessed unions of loving, committed gay and lesbian couples. The Episcopal Church supported him in not considering suicide or suicidal ideation.

He loved this private school because he was popular and "did not have to dial down" his sexuality. I asked him about uniforms, and he said that the school had "mild" requests for what students should wear; he chose more masculine attire. He believes that the other students had "caught on and thought I was gay and in a sexual relationship with a girl." He felt that it would be more acceptable for him to be gay or lesbian among his friends than to explain that his body did not match who he was. He did not know how to explain being transgender.

Subject's Positive Internal Resiliency Factors. Coding for internal resiliency factors yielded six categories: comprehensive knowledge, self-awareness/self-understanding, stratagems/coping mechanism, achievement, numinous experiences, and physical/mental pain/suffering. Data analysis led to redefining these factors into six broad categories. He experienced three out of the six positive internal resiliency factors: his comprehensive knowledge, achievement, and stratagems and coping mechanisms, presented in boldface below.

Internal Risk and Resiliency Factors

1. **Comprehensive Knowledge: the amount of intelligence, skill, and cognitive abilities that each participant possessed.**
2. *Numinous Experiences*: the aspect of spirituality encountered by the participants.
3. *Physical Attributes and/or Body Image*: the physical characteristics of participants and how they view their appearance internally and externally.
4. *Physical and Mental Pain*: the use of the body and mind to handle distress and pain.
5. **Achievement: the act or process of finishing something successfully.**
6. **Stratagems and Coping Mechanisms: the ability to manage and handle difficulties (Author, YEAR).**

Positive (Goals for Future) Internal Resiliency Factors—Achievement, Stratagems, and Coping Mechanisms. The subject always believed that life "would get better." This helped him deal with suicide or suicidal ideation. He believed that college would be different because he could decide who he wanted to be "on his terms." His goals became his positive internal resiliency factor known as achievement.

Positive (Intelligence) Internal Resiliency Factors—Comprehensive Knowledge. The subject revealed that his transgenderism began with the onset of puberty, at the age of 12, when he had "identified as a boy." When he was 15, he wanted to die because he did not understand that he was male. He felt isolated and alone, in a world where he did not know who he was and desperate to figure things out. The word *transgender* was not coined until the late 1980s, when it was first seen on the talk show *Donahue*. This was one of the first times that he had realized that there were "people like me." His intelligence helped him to locate information about being transgender. His parents praised and validated his intelligence, which strengthened his thirst for knowledge. His intelligence would become his most important asset. His intelligence was nurtured in his school. His knowledge deterred him from suicide or suicidal ideation.

Positive (Resilient) Internal Resiliency Factors—Stratagems and Coping Mechanisms. Another coping mechanism that he used was resiliency.

He coped with stress and adversity despite the negative internal/external factors that plagued his life. He was able to experience adversity, which helped him to survive. He adapted well as he responded to stressful conditions. He realized that his resiliency stemmed from his intelligence.

Subject's Negative External/Internal Resiliency Factors. He had experienced two major negative at-risk factors: social affiliation and social interaction (external), plus physical attributes and/or body image (internal).

Negative (Father) External Resiliency Factors—Social Affiliations and Social Interactions. His father was an officer in the U.S. Air Force. He and his family lived in Spain in the 1970s. His father, an alcoholic, “made it hard for us to get along, and I did cut myself off from him . . . as a young adult.” His wearing jeans were an aspect of his masculinity that his father resisted. His mother intervened and took him to a psychiatrist. The psychiatrist’s recommendation was “leave him alone.” The psychiatrist validated his uniqueness, which counteracted his negativity. He said, “In the last several years . . . my dad and I have really started connecting and caring about each other.” However, this did not take place early on in his life; his father was a negative social affiliation and social interaction during his childhood and adolescence.

Negative (Views Regarding Transgender People) External Resiliency Factors—Societal Opinions and Assumptions. Bias-motivated violence against GLBT individuals was noted in a national survey conducted from 1985 to 1998, which revealed that transgender people accounted for 20% of all murders of GLBT people; 40% of this violence was initiated by the police (*Anti-lesbian*, 1999). Most Americans have until recently viewed transgenderism as taboo. These societal views would become a negative internal resiliency factor for him.

Negative (Puberty) Internal Resiliency Factors—Physical Attributes and Body Image. The most intense negative internal resiliency factor for him was physical attributes and body image. In 1983, at the onset of puberty, he had his first period. He turned to his cousin (a lesbian), who explained what was happening. Although he understood, he wanted to die. He was dealing with being male, so a period should not be happening. He believed that he was a male dealing with female body issues. He felt “antagonistic with his body.” He hated his body and believed that “my brain was my friend, my body my enemy.” He tried to locate similar individuals. Lesbians became his friends, his lifeline. He briefly felt more comfortable, but realized that all he knew would be shattered. There was “no glimmer of trans masculine identity.” He had to “change my body.” His final chapter as a lesbian involved becoming a bridesmaid. He would be in a dress, a costume draped in “teal taffeta.” Wearing this felt like a death sentence. His epiphany was that he was male.

Debriefing and Initial Analysis. Immediately after the interview, the researcher debriefed the subject, the first step in data analysis. A key to effective grounded theory is that the investigator should move fluidly between data collection and analysis, so analysis began with the interview to ensure that the study remain grounded in actual data and that the evolving theory or hypotheses also remain tightly built upon the data. During the debriefing, early categories for coding emerged. The session reduced researcher bias and increased the study’s trustworthiness because I was able to get immediate feedback from the subject about whether he agreed with how I identified themes from the framework of resiliency from his responses.

Risk and Protective Factors

Associated with Suicidal Ideation with Gifted Transgender Males

This study revealed a number of negative risk factors for adolescent gifted transgender persons that could lead to suicidal ideation or the act of suicide. These factors are social affiliation/social interaction, societal opinions/assumptions, and physical attributes/body image. However, a number of protective factors not common among adolescent non-gifted transgender individuals help adolescent gifted transgender individuals deter suicidal ideation. The protective factors that protect gifted transgender individuals from suicidal ideation included comprehensive knowledge, achievement, stratagems and coping mechanisms, educational opportunities, societal opinions and assumptions, educational opportunities, and arts and hobbies. When adolescent gifted transgender persons encounter problems that involve *external risk* or *internal risk*, they must draw upon various *internal* and *external resiliency* factors. The greater the *resiliency* the individual possesses, the more likely to counteract the *risk*, avoid suicide, and cope with emotional problems. An *external* or *internal risk* factor (e.g., risk source of social affiliation/social interaction) needs to be replaced with an external/internal protective resiliency factor (e.g., protective/resiliency source of social affiliation/social interaction). For example, if an adolescent encounters the external risk caused by peer ridicule, risk can be reduced if an external resiliency factor, such as support from a brother or an understanding grandfather, is available.

This proposed theory holds that the more similar in nature the risk/resiliency factors are, the more likely will it be that the protective/resiliency factor can (a) serve as an ideal intervention and (b) lead to the best-case scenario in deterring suicidal ideation.

His external negativity from his father and societal opinions/assumptions was counteracted by the constructive support from his positive external resiliency factors: his mother, psychiatrist, friends, books, and educational opportunities. His internal negative factors, physical attributes and body image, were counteracted by his intelligence (comprehensive knowledge), which included using stratagems and coping mechanisms. He avoided suicide through positive external/internal resiliency factors, but otherwise, he might have committed suicide. It can be hypothesized that adolescents who possess limited positive external/internal resiliency factors are more likely to experience suicidal ideation or commit suicide.

Risk and Protective Factors

Associated with Suicidal Ideation in Gifted Transgender Male Adolescents

This study revealed risk and protective factors associated with gifted transgender male adolescents who engage in suicidal ideation. These factors are described below.

Risk/negative factors for gifted transgender adolescent males. The gifted transgender male in this study revealed several risk factors that could lead to suicidal ideation. These factors are: feelings of isolation, existential depression, and perfectionism.

Risk factor 1: Feelings of isolation. Gifted adolescents have experienced intense feelings of isolation (Shahzad, 2010) and a sense of being different (Jackson, 1998). Researchers such as Hollingsworth (1942) and Terman (1916) suggested that gifted adolescents who become isolated are at greater risk of suicide. This present study's data support these findings. The gifted transgender participant in this study often reported having few if any peers.

Risk factor 2: Existential depression. Many myths have circulated about the emotional well-being of gifted individuals. The earliest was Terman's (1916) longitudinal study of giftedness: that giftedness protects children from emotional problems. However, according to Webb (1993), gifted youth are likely to experience existential depression. Existential depression is brought forth by a crisis concerning one's purpose in life. This type of depression results from a belief that life is meaningless. When a person does not feel passionately about life, love, or work, he or she has the potential to experience existential depression (Webb, 1993).

Dabrowski (1996) hypothesized that individuals with higher intellectual ability are more likely to encounter existential depression tied into "positive disintegration" (p. 149). Gifted individuals sometimes perceive that the world around them is not as it should be. According to Webb (1993), gifted youth experience frustration when they do not live up to their own principles and standards. Gifted adolescents see the random inconsistencies in society and in the behaviors of others (Webb, Meckstroth, & Tolan, 1994). This knowledge can lead gifted youth to react with frustration and anger. According to Webb et al. (1994), gifted adolescents then realize that their anger is not in their control and has no weight. This leads to depression. Based on the participant's data, this study found that episodes of existential depression deserve careful attention because they can be antecedents to suicidal ideation for gifted transgender males. Kerr and Cohn (2001) cautioned that highly gifted males might be particularly vulnerable to alienation and existential depression. Jackson and Peterson (2003) and Grobman (2006) also noted that gifted adolescents experience episodes of deep depression. **Risk factor 3: Perfectionism.** Perfectionism refers to having extremely high standards and willingness to accept high levels of responsibility (Galbraith & Delisle, 1987). Problems can occur when perfectionism frustrates success. Researchers have found that rigid perfectionism is a risk factor in adolescent suicide. Hewitt and Flett (1991a, 1991b) and Hewitt, Newton, Flett, and Callander (1997) argued that perfectionism may play a role in suicidal episodes because perfectionists view more events as stressful. The experiences of the gifted transgender participant in this study matched these theories regarding giftedness, perfectionism, and emotional risk. The subject reported the need to perform at high levels and to obtain perfect results, especially when his mind and body did not match. This gifted transgender male set unrealistic standards and evaluated his performance against them, so he often gave up. This led to depression and suicidal ideation.

Resiliency factors for gifted transgender male adolescents. The study indicated that two resiliency factors protected the participant from engaging in suicidal ideation: his unique cognitive abilities and participation in gifted programs.

Resiliency factor 1: Cognitive strengths. One of the internal resiliency factors that protected the gifted transgender male in this study from suicidal ideation and suicide was his strong cognitive ability. This was reflected in his response within the internal resiliency categories of comprehensive knowledge, self-awareness/self-understanding, and stratagems and coping mechanisms.

Reis and Renzulli (2004) reported that research on the emotional development of gifted students found that “gifted children’s . . . problem-solving abilities, advanced social skills, moral reasoning, out-of-school interests, and satisfaction in achievement may help them to be more resilient” (p. 122). Neihart, Reis, Robinson, and Moon, (2002), as well as Cross (2012) and Metha and McWhirter (1997), wrote that gifted adolescents appear to be as emotionally well-adjusted as other adolescents.

Resiliency factor 2: Participation in gifted education services beyond what can be provided in general education. This study identified several external resiliency factors that helped the subject avoid suicide and suicidal ideation. Two external resiliency factors of particular importance to the subject during adolescence were: educational opportunities and social settings. The subject frequently described the positive role of attendance gifted programs. The subject articulated the importance of a positive gifted learning environment. Participation in the positive school setting was a primary reason for his being able to avoid acting on suicidal ideation. Gifted programs provide a positive social setting and educational opportunities that boost the resiliency of gifted transgender adolescents. The programs for this subject provided a specialized curriculum and instructional methods suited for gifted students.

Proposed Resiliency Theory for Gifted transgender Males. The gifted transgender male in this study reported emotional problems that appeared intense and complex during his adolescence. Perhaps gifted transgender males deal with emotional issues as do adults of normal intelligence. Adolescent gifted transgender males may confront issues abstractly. The subject appeared to do so. He experienced stress from two main sources: the environment and himself. He reacted to the complexities of his emotional problems and recognized ambiguities and contradictions, so he felt “out of step” with his environment and stressed. He may have had the ability to solve problems with greater conceptual sophistication because of his intelligence. He drew upon the category comprehensive knowledge. His giftedness appeared to provide resiliency; however, despite his giftedness, he experienced problems that were more intractable. Gifted transgender male adolescents encounter suicidal ideation during adolescence due to facing more difficult situations than those in average adolescents’ experience. To avoid suicide, gifted transgender males may need additional external and internal protective factors.

Conclusion

Adolescents desire essential affiliations with others, a group, or an organization and positive internal resiliency factors. This case study suggests that gifted transgender adolescent males deal with emotional problems more abstractly than do nongifted transgender adolescents. Both gifted and non-gifted transgender males strive to locate successful ways to handle their emotional problems to avoid suicidal ideation. Support for these adolescents must come from parents, educators, counselors, and therapists, who must realize that these adolescents face different stresses and need different solutions and strengths to solve their emotional problems.

Recommendations

This section presents practical recommendations from this study.

- Educators could be introduced to the positive/protective external and internal factors and the negative/risk external and internal factors delineated in this study. This information would be valuable for (a) educators who work in gifted programs, (b) educational counselors, and (c) general educators. These professionals need to know how the theory might be used to understand how gifted transgender individuals solve their problems.
- Counselors and therapists could be introduced to the outcomes of this study with an emphasis on positive and negative factors that support or inhibit the development of suicidal ideation for adolescents, whether heterosexual, gay, lesbian, bisexual, or transgender (GLBT).
- GLBT-supportive organizations, such as Parents and Friends of Lesbians and Gays (P-FLAG), could be introduced to the role that positive external and internal factors and negative external and internal factors play in the lives of gifted transgender persons. These organizations need to understand how these individuals solve their problems.

- All gifted adolescents need to be provided facts regarding transgender issues. This should include: local, state, and national resources; information about positive transgender role models; and exposure to local transgender community members.

Summary

This study explored the suicidal ideation of a gifted transgender male. The participant was a gifted 43-year-old transgender FTM. This gifted transgender male coped with emotional problems abstractly rather than concretely. The subject had engaged in suicidal ideation; however, as this is a single case study, no generalizations can be made about suicidal ideation for the gifted transgender population. The subject, a gifted transgender male, appeared to rely on various aspects of his giftedness, such as his intelligence, abstract thinking, and problem-solving skills, to combat depression and suicidal ideation. Both positive external/internal factors and negative external/internal factors were identified. Using grounded theory methodology, a theory of suicidal ideation for gifted transgender males was proposed. Research on gifted transgender issues is needed. Fears, apprehensions, and animosity that gifted transgender children, adolescents, and adults confront should be discussed openly and supportively. It is imperative that further empirical research be conducted on these individuals.

Appendix: Key Terms

Some key terms are derived from *Injustice at Every Turn: A Report of the National Transgender Discrimination Survey* (Grant et al., 2011).

Butch as an adjective means markedly or aggressively masculine; as a noun, it means a lesbian who is noticeably masculine.

FTM is a person who transitions “from female to male,” meaning a person who was anatomically female at birth but who now identifies and lives as or hopes to live as a male. The term “transgender man” is used synonymously.

Gender Identity refers to an individual’s internal or perceived sex (male, female, MTF, FTM, transgender, etc.). As gender identity is internal, one’s gender identity is not necessarily perceived by or visible to others. In this article, this term is used to refer generally to the full range of identities that the respondents identified with, such as MTF, FTM, transgender, gender queer, etc.

Gender queer is a term used by individuals who identify as neither entirely male nor entirely female, but identify as a combination of both, or who present in a no gendered way.

Giftedness within this study is defined by the National Association for Gifted Children:

Gifted individuals are those who demonstrate outstanding levels of aptitude (defined as an exceptional ability to reason and learn) or competence (documented performance or achievement in top 10%) in one or more domains. Domains include any structured area of activity with its own symbol system (e.g., mathematics, music, language) and/or set of sensor motor skills (e.g., painting, dance, and sports). (National Association for Gifted Children, 2013)

Intersex is a term used for people who have differences of sex development, such as being born with external genitalia, chromosomes, or internal reproductive systems that are not traditionally associated with typical medical definitions of male or female.

MTF is a person who transitions “from male to female,” meaning a person who was designated as male at birth but who now identifies and lives as or hopes to live as a female. The term “transgender woman” is used as a synonym.

Queer is a term used to refer to lesbian, gay, bisexual, and/or transgender people or the GLBT community. Some who may seem to live according to heterosexual norms self-identify as queer as a way of resisting heterosexuality as their sexual identity; for them and for others, the term is useful to assert a strong sense of identity and community across sexual orientations and gender identities. For others, the term *queer* refers to the lesbian/gay/bisexual part of the community. Used as a reclaimed epithet for empowerment by many, some still consider it to be derogatory.

Sexual Orientation is a term to describe a person’s attraction to members of the same sex and/or a different sex. Usually, sexual orientation is defined as lesbian, gay, bisexual, or heterosexual, but it can also include queer, pansexual, and asexual, or other alternative sexualities.

Transgender, generally, is a term for those whose sexual identity or expression is different from that typically associated with their assigned sex at birth, including transsexuals, androgynous people, cross-dressers, gender queers, and other nonconforming people who identify as transgender.

Some, but not all, transgender individuals desire to transition from one sex to another; and some, but not all, desire medical changes to their bodies as part of this process. Cross-dressers and gender nonconforming people have not been included in the term *transgender*.

Transgender Man is a term for a transgender individual who, although assigned the female sex at birth, currently identifies or lives as a man. In this article, transgender man, female-to-male transgender person, and FTM are used interchangeably.

Transgender Woman is a term for a transgender individual who, assigned the male sex at birth, currently identifies as or lives a woman. In this article, transgender woman, male-to-female transgender person, and MTF are used interchangeably.

Transsexual is a term for people whose gender identity is different from the sex assigned to them at birth and who live as a sex different from their birth sex or desire to do so. Often, but not always, transsexual people alter or wish to alter their bodies through hormones or surgery to align themselves physically with their chosen gender identity.

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