# Article information:

Epidemiology of gender dysphoria and transgender identity - PubMed
<https://pubmed.ncbi.nlm.nih.gov/28838353/>

# Article summary:

1. The prevalence of gender dysphoria has increased in the past couple of decades, as reflected in the increase in referral rates to specialized gender identity clinics.

2. In childhood, more birth-assigned males experience gender dysphoria, but in adolescence, there has been a recent shift towards more birth-assigned females experiencing gender dysphoria.

3. The prevalence of self-reported transgender identity is higher than prevalence rates based on clinic-referred samples, but the stability of this identity among non-clinic-based populations is unknown and requires further study.

# Article rating:

Appears moderately imbalanced: The article provides some useful information, but is missing several important points or pieces of evidence that would be required to present the discussed topics in a balanced and reliable way. You are encouraged to seek a more balanced perspective on the presented issues by exploring the provided research topics and looking at different information sources.

# Article analysis:

The article titled "Epidemiology of gender dysphoria and transgender identity" provides an update on the epidemiology of gender dysphoria and transgender identity in children, adolescents, and adults. While it presents some valuable information, there are several potential biases and limitations to consider.

One potential bias is the reliance on the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) for defining gender dysphoria. The DSM-5 has been criticized for pathologizing transgender identities and perpetuating stigma. By using this diagnostic manual as a basis for understanding the prevalence of gender dysphoria, the article may inadvertently contribute to this stigmatization.

Additionally, the article mentions an increase in referral rates to specialized gender identity clinics as evidence of an increase in the prevalence of gender dysphoria. However, this could be influenced by various factors such as increased awareness and acceptance of transgender individuals, leading to more people seeking support and medical interventions. It is important to consider these social factors when interpreting referral rates.

The article also highlights a recent inversion in the sex ratio among adolescents with gender dysphoria from favoring birth-assigned males to favoring birth-assigned females. While this is an interesting finding, it does not explore potential reasons for this shift or consider other factors that may influence these patterns.

Furthermore, the article mentions self-reported transgender identity prevalence rates ranging from 0.5% to 1.3% in children, adolescents, and adults. However, it fails to provide a comprehensive analysis of how these rates were obtained or whether they accurately reflect the true prevalence of transgender identities in the population. Without further information on the methodology used in these studies, it is difficult to assess their validity.

The article also acknowledges that the stability of a self-reported transgender identity or a departure from the male-female binary remains unknown among non-clinic-based populations but does not delve into potential implications or considerations regarding this lack of knowledge. This omission limits the article's completeness and leaves important questions unanswered.

Overall, while the article provides some valuable insights into the epidemiology of gender dysphoria and transgender identity, it is important to critically analyze its content and consider potential biases and limitations. It would benefit from a more comprehensive exploration of social factors, alternative explanations for observed patterns, and a more nuanced discussion of the limitations of current research in this field.

# Topics for further research:

* Factors influencing referral rates to gender identity clinics in transgender individuals
* Social acceptance and its impact on the prevalence of gender dysphoria
* Potential reasons for the shift in sex ratio among adolescents with gender dysphoria
* Methodology used to obtain self-reported transgender identity prevalence rates
* Stability of self-reported transgender identity and departure from the male-female binary in non-clinic-based populations
* Critiques and limitations of the DSM-5 in defining gender dysphoria and transgender identities

# Report location:

<https://www.fullpicture.app/item/383b8b4eac4ee4a0ac7e03725ee82031>