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| **Outline and evaluate explanations of atypical Gender Development** | |
| **Biological explanations** | **Social explanations** |
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| **Evaluation** | |
| **P-Biologically reductionist**  E-The explanation which is the lowest level of reductionism attempts to reduce GID to simple biological factors; specific brain structures and genetics.  S-This is an issue as is probably too simplistic a view to allow us to fully understand the origins of GID. There is no account taken of how environmental, social or cultural factors may play a part.  SS-The fact that incidence of GID has increased in recent years and that there are higher incidences in places like Thailand would suggest a social/cultural element. Therefore, the interactionist approach is probably a more realistic approach to take in explaining the disorder. | **Support**  **Zucker et al (2008)** performed a longitudinal study on gender-dysphoric females between two and three years of age who had been referred to a clinic. Only 12% were still gender dysphoric at age 18. An equivalent study on males found that only 20% were still gender dysphoric as adults. This supports a social environmental basis to GID, as if genetic or neuroanatomical factors were the cause, we would not expect the effects to be transient, it also questions the at what ages individuals should be allowed to start gender reassignment therapy with such large % of individuals changing their minds. |
| **Socially sensitive.**  **-** If a biological cause is found this may be beneficial for individuals with GID becausewe can say GID is the result of genetics or biology it may mean people are more accepting as it is ‘not the fault’, individual and family would not feel blame = potential for treatment.  -a biological cause is found and someone is wrongly diagnosed based on biological diagnosis, we may wrongly assume that the individual **will** suffer from gender dysphoria in later life causing distress or even precautionary action e.g. hormone blockers before puberty.  Either way the outcomes of research has social consequences for individuals represented by the research. | Increasingly, evidence suggests that the influences of hormones and genetics is the main cause of GID, but there is little evidence to suggest a totally biological explanation. Therefore, social psychological explanations of GID may be useful in understanding the factors that contribute towards the development of GID, but are unlikely to be sufficient as a stand alone explanation |
| **Challenge.**  **Zucker et al (2008)** performed a longitudinal study on gender-dysphoric females between two and three years of age who had been referred to a clinic. Only 12% were still gender dysphoric at age 18. An equivalent study on males found that only 20% were still gender dysphoric as adults. This supports a social environmental basis to GID, as if genetic or neuroanatomical factors were the cause, we would not expect the effects to be transient, it also questions the at what ages individuals should be allowed to start gender reassignment therapy with such large % of individuals changing their minds. | **Validity**  The psychoanalytic explanation does not offer an adequate explanation of GID in females.  In addition, Rekers research suggests that gender disturbance in boys is more likely to be associated with the absence of the father, rather than fear of separation from the mother. Furthermore, the assumption that GID is caused by separation anxiety is very hard to test. The fantasies that trigger the condition are thought to exist at an unconscious level and are therefore inaccessible to the conscious mind.  NOW LINK BACK TO EXPLANATION  All of this means that the evidence is limited and the theory is little more than speculation and so a huge limitation of the explanation |